



# 2022 STOCKTAKE

of the Infant, Child, Adolescent and Youth  
Mental Health / Alcohol and Other Drug Services in  
Aotearoa New Zealand

**Asian National Overview**



**WHĀRAURAU**

Empower the Workforce | Manaaki Mokopuna

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## Foreword

Tēnā koutou katoa

This is the 10th biennial *Stocktake of the Infant, Child, Adolescent and Youth Mental Health/Alcohol and Other Drugs Workforce*. Here we provide data from the 2022 and 2023 years on the workforce and the access rates of our young people to mental health and addiction services.

The people working on the frontline in these services continue to respond to high demand and a growing complexity of mental health and wellbeing needs. We recognise and appreciate their efforts to improve the mental health and wellbeing of our communities and change the lives of generations to come.

To support and develop our workforce, we need accurate information on their capacity and capability and service configuration relative to demand. Access to good data informs planning and resource allocation, to help ensure that services can adequately meet the needs of the population, both now and in the future. This stocktake contributes to the broader national picture of our health workforce being captured.

Over the past two years, the health system reforms have reinforced and made visible our obligations under Te Tiriti O Waitangi. It is envisaged that, through the partnership and combined intelligence of Te Whatu Ora and Te Aka Whaiora, the underlying drivers of the challenges faced by our health workforce can be more effectively tackled. The drivers identified in the *Health Workforce Plan 2023/24* include systemic underinvestment and a failure to grow, recruit and retain people amid global competition and workforce shortages. These challenges are reflected in the current ICAYMH workforce stocktake data.

For our 0–19-year-olds, population projections indicate an overall decrease. However, this age group is expected to become more ethnically diverse, with significant growth projected for Māori, Pacific and, particularly, Asian populations. The need for cultural competency development and training has been consistently reported by services. In this stocktake, we asked about specific cultural competency development needs. Whāraurau, a tangata tiriti organisation, is committed to its obligations under Te Tiriti O Waitangi. With our community partners and the people who share their taonga of lived experience, we will continue to strengthen our workforce development in response to these needs.

*Kia Manawanui Aotearoa: The long-term pathway to mental wellbeing* (Ministry of Health, 2021a) recognises the need to broaden our understanding of who we think makes up the mental health and addiction workforce. It also recognises the need to grow and support our existing workforce with new skills and competencies to help transform how mental health and wellbeing support is accessed. We continue to consider ways we can equip and connect a broader workforce to meet the needs of our young people and whānau. Those in our specialist services, community services and our schools all have a role when addressing the mental health and wellbeing needs of our young people and whānau.

Working out ways we can best support these people is our kaupapa.

**Abigail Milnes**

Director

Whāraurau

# Introduction

## Strategic and Future Directions and Focus

*Kōi Tū: The Centre for Informed Futures* (e.g., Poulton et al., 2020) advocates for a need to move to a more community-based model of mental-health service delivery. This would begin with the integration of support services into general practice and the development of other community settings, all within the health and disability sector reforms that started in March 2021. Primary and community care in the future system is to be reorganised to serve communities through locality networks focused on population health needs, and hospital and specialist services will be planned and managed by Te Whatu Ora | Health NZ. *Te Pai Tata: the NZ Health Plan* (Te Whatu Ora, 2022), jointly developed by Te Whatu Ora | Health NZ and Te Aka Whai Ora | Māori Health Authority, serves as a foundation of the new system and a key enabler of the intended outcomes of the reform. *Oranga Hinengaro* actions include (pp. 43-44):

- Implementing a nationally consistent approach to the integration of specialist community mental health and addiction teams with NGOs, primary and community care.
- Designing and expanding Te Ao Māori mental health service solutions, including primary mental health and wellbeing, access, and choice services.
- Developing solutions with communities, including with NZ Police, to support people who are in mental distress or experiencing an acute mental health and addiction episode to access timely care and support.
- Working with Ministries of Housing & Urban Development and Social Development in developing solutions with Kainga Ora housing providers, to improve access to quality, safe and affordable housing with support services.

Budget 2022 and Government priorities, relevant to those aged 0-19 years, include (p. 44):

- Continue alcohol and other drug treatment courts in Auckland, Waitakere, and Waikato.
- Continue rollout of integrated mental health and addiction services in primary care and for young people.
- Expand availability and trial new models of specialist mental health and addiction services, to support child and adolescent mental health and addiction, eating disorders, and Taurite specialist Māori.
- Continue and expand *Mana Ake*, a school-based mental health and wellbeing initiative, for primary and intermediate aged children.
- Ensure the continuity of *Piki*, an integrated mental health support initiative for rangatahi.

## Workforce Development

Workforce development in the ICAYMH/AOD sector has been guided by the strategies outlined for the broader mental health and addiction sector (Mental Health Commission, 2012; Ministry of Health, 2005, 2012b, 2017, 2018; New Zealand Government, 2012; Te Rau Matatini, 2007; Wille, 2006). To enhance strategies for addressing the mental health and wellbeing needs of infants, children, adolescents, youth and their families/whānau, it is crucial to have effective services, focusing on early intervention, provided by a highly skilled and well-supported mental health and addiction workforce and with greater integration between primary and specialist services.

The *NZ Health Plan*, *Te Pae Tata* (Te Whatu Ora, 2022) outlines the most recent action plans for the overall health workforce:

- Implement programmes to grow the numbers and diversity of the health workforce, including Māori, Pacific and Tāngata whaikaha, disabled people.
- Implement a workforce pipeline that works with education providers and professional bodies to ensure education and training programmes are in place to grow a quality and diverse healthcare workforce.
- Work in partnership with authorities to standardise professional and regulatory requirements across Te Whatu Ora, Te Aka Whai Ora, and ACC to enable registered and unregistered staff to have training and experience pathways to advanced roles and improved interdisciplinary working across urban and rural health services.
- Support the Government's planning for future investments in pay equity and pay parity to ensure a fair health workforce environment.
- Support educational interventions to increase Māori and Pacific access to health professional training, building the workforce pipeline to grow Te Ao Māori and Pacific services.
- Implement and monitor a programme providing nationally consistent cultural safety training to Te Whatu Ora and Te Aka Whai Ora workforces.
- Informed by *Te Mauri o Rongo, the Health Charter*, implement and monitor actions to improve the workplace experience of the healthcare workforce.

## The Stocktake

Effective workforce development requires accurate information on the capacity and capability of the workforce and service configuration relative to demand. This requires centralised, regular (biennial), standardised data collection of workforce composition and service user data for regional planning, as recommended in *Whakamārama te Huarahi* (Wille, 2006). Accumulated data to date (from 2004) provide a unique opportunity to identify trends over time in both workforce and demand for services, and to explore the interactions between funding, staffing, and service user access.

This is our 10th stocktake of the workforce that provides infant, child, adolescent and youth mental health/alcohol and other drugs (ICAYMH/AOD) services, and it provides a snapshot of population trends, service demand (service user data), investment in service provision (funding data), and the capacity and capabilities of the workforce (through workforce survey and the *Real Skills Plus ICAYMH/AOD online assessment tool*) in relation to service demand. The *Stocktake* aims to support Manatū Hauora |Ministry of Health, Te Whatu Ora and Te Aka Whai Ora, national, regional, and local planners, funders, and service leaders in assessing current capacity and planning for service and workforce development.

The 2022/23 *Stocktake* report includes the following data:

**Population:** Population data play a crucial role in assessing the current and anticipated future demand for services. By analysing population data, it becomes possible to understand the size and composition of the population, allowing for a better estimation of the demand for services.

- Population data are based on 2018 census and projections (prioritised ethnicity) sourced from Statistics New Zealand. Prioritised ethnicity data are used as they are easier to work with, as each individual appears only once (note, therefore, that the sum of the ethnic group populations will not add up to the total NZ population; Statistics New Zealand, 2006).

**Funding:** Indicates the level of investment for service provision and workforce development activities.

- Data were extracted from the Manatū Hauora's Price Volume Schedules (PVS, contract period 2021-2022, financial year) and are based on contracts coded to infant, child, adolescent, and youth purchase unit codes (including alcohol & drug and forensic); and may not capture those services that provide ICAYMH services if coded differently.

**Workforce:** Data collection for each *Stocktake* is informed by consultations with teams at Manatū Hauora and Whāraurau (including Youth Consumer, Māori, and Pacific advisors) and external Māori, Pacific, and Asian advisory input. Data were collected using a workforce survey communicated via email and phone, and includes:

- 20 Te Whatu Ora and Manatū Hauora funded Te Whatu Ora (Inpatient & Community) ICAYMH/AOD services (including National Youth Forensic Inpatient Service)
- 108/122 (89%) Te Whatu Ora and Manatū Hauora funded, NGO (112) and PHO (10) service providers contracted to provide ICAYMH/AOD services from July 2021 to June 2022, extracted from the MOH 2021/2022 PVS. Data provided in 2020 were used as an estimate of the workforce for those who did not participate.
- Data are collected and presented by actual and vacant full-time equivalents (FTEs) and headcount by ethnicity and occupation as at 30 June 2022 and collected from July 2022 to May 2023. Data in this *Stocktake* are reported at the national level. Regional data are presented in the *Appendices* and more detailed data can be provided upon request.
- Data are reported by “clinical” and “non-clinical” categories. **Clinical** includes alcohol and drug workers, counsellors, nurses (mental health, registered, nurse practitioners), occupational therapists, psychiatrists, psychotherapists, clinical or registered psychologists, and social workers. **Non-clinical** includes the workforce that provides direct support/care for service users and includes cultural workers (kaumātua, kuia or other cultural appointments), mental health support workers, mental health consumers, peer support workers and youth workers. *Note:* Te Whatu Ora services recruit staff from various disciplines based on relevant skills and competencies, rather than strictly following the above categories for workforce data collection and reporting.
- Vacancy Rates: Rates are calculated by dividing the Vacant FTE by the sum of Actual and Vacant FTEs. Staff Turnover rates are calculated by dividing the total number of staff who left during 2021 and 2022 by the average number of staff within that timeframe, multiplied by 100.

- *Real Skills Plus (RSP) ICAYMH/AOD competency data are extracted from the RSP ICAYMH/AOD online assessment tool (accessed via the Whāraurau website) which identifies practitioner competencies for working in the ICAYMH/AOD sector and highlight areas for development. RSP data is collected at individual, team, service, and organisational levels, regionally and nationally. RSP has three levels: **Primary Level** (for workers in the primary sector working with infants, children & young people), **Core Level** (practitioners focusing on mental health/AOD concerns) and **Specific Level** (senior/specialist practitioners working at advanced levels of practice). National organisational level data (as at March 2023) are used in this report to present the current levels of knowledge and skills that were self-reported by teams representing 15 Te Whatu Ora services (Core level competencies) and 32 NGO/PHO (Primary and Core level competencies) workforces.*

#### Limitations:

- Data quality relies on the information provided by service providers. While respondents are supported to accurately complete the workforce survey (previous team/service data are included in the workforce survey to help guide completion), variations over time may still occur due to how different management respondents count their staff and each respondent's understanding of how to complete the workforce survey. Analyses are adjusted as more accurate data are received. Changes in contracts may also contribute to observed variances.
- Ethnicity data are reported at management level and prioritisation of ethnicity in cases of mixed ethnicity is determined at this level. Hence, caution should be exercised when interpreting ethnicity data.
- While these limitations apply to both Te Whatu Ora and NGO/PHO services, there are other factors that affect the quality of data from the NGO/PHO sector. Therefore, caution should be exercised when interpreting the information from this sector. These services:
  - receive funding from various sources (MSD, Accident Compensation Corporation, Youth Justice). Due to a diverse range of services provision, it can be challenging to determine the specific portion of funding allocated to the Manatū Hauora/Te Whatu Ora funded ICAYMH/AOD contract.
  - often offer integrated support that covers all age groups and within the entire family. Determining the precise portion of full-time equivalent (FTE) that falls under the Te Whatu Ora-funded infant, child, adolescent, and youth contract is challenging for providers, often requiring estimation.
  - have contracts that are held by a single lead provider with contracts devolved to a number of other providers. This level of detail may not be captured in the PVS; therefore, services may be missed.
  - receive a variable number of contracts from year to year; therefore, difficult to ascertain workforce trends over time.
  - face challenges in recruiting and retaining qualified staff in rural areas. Unfilled positions funding may need to be returned to the funders; therefore, services may be reluctant to provide this information.
- RSP competency data limitations:
  - i. The RSP online tool was updated in March 2022, therefore this report includes data from March 2022 to March 2023.
  - ii. The RSP tool is based on self-report.
  - iii. Some of the competencies may not be relevant to the worker's scope of practice (e.g., leadership), and this might nevertheless be marked as needing development, which could skew the results

**Service User Data:** Helps to identify utilisation patterns and gaps in service delivery and can be used to guide resource allocation and interventions for timely and appropriate mental health services and support.

- Service user data on those aged 0-19 years old are extracted from the Programme for the Integration of Mental Health Data (PRIMHD). PRIMHD contains information on service users (demographics, referral, activity type, outcomes) accessing *secondary* mental health/AOD services (inpatient, outpatient, and community) provided by 20 Te Whatu Ora providers and NGO providers (157 NGOs in the 2019 data set and 148 NGOs in the 2021 dataset).
- Data are based on service of domicile (residence) for full calendar years (i.e., the area where the service user lived).
- Access rates: A New Zealand study indicated that 20% of the population has a diagnosable mental illness (including alcohol and drug use disorders) at any one time (Oakley Browne et al., 1989). Around 3% of people have serious,



ongoing, and disabling mental illness requiring treatment from specialist mental health and alcohol and drug services. The equivalent figure for children and young people is estimated to be 5% (McGeorge, 1995). Based on the McGeorge report, the Ministry of Health set an access benchmark to mental health services (including drug and alcohol services) for children and young people (0-19 years) at 5% in 1996. This is in line with the 1996 report of the Mental Health Strategy Advisory Group, which suggested that a realistic target for access to specialist child and youth mental health services of 3% by the year 2000/01 be set, moving to 5% in subsequent years. The 5% target, by the year 2005, was incorporated in *Moving Forward* (Ministry of Health, 1997). Target rates were also set to account for expected variations in the prevalence rates of mental illness among different age groups: 1% for children aged 0-9 years; 3.9% for ages 10-14 years; and 5.5% for ages 15-19 years. *Te Rau Hinengaro* (Oakley Browne et al., 2006) proposed a revised rate of 4.7% of the population requiring specialist mental health/AOD services (in any 12-month period) and identified other vulnerable population groups with significantly higher prevalence rates, including adolescents and Māori. Health Workforce NZ suggested a wider scope for mental health and addiction services to reach 7%-9% of the population to not only meet the highest needs but also, therefore, make the largest impact on wellbeing (Health Workforce, 2011). Access rates are calculated by dividing the number of service users by their corresponding population. Due to the absence of updated prevalence data and revised access rates beyond 2005, the 5% target rate is used in this report as a conservative comparison rate for the overall population of those aged 0-19 years. Comparisons between access rates and target access rates by specific age groups could not be made, due to the lack of updated age-group access rate data.

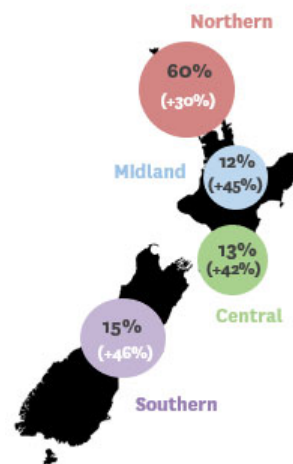
#### **Limitations:**

- Services send their previous month's service user data electronically to the PRIMHD system, which is based on the variable quality of information received.
- Service user and workforce data may not align due to differences in reporting periods. Data presented are based on the most complete information available at the time of reporting.
- PRIMHD does not contain data from PHOs nor from GPs contracted to offer youth primary mental health/addiction services. Therefore, the complete scope of service utilisation by the population aged 0-19 years is not captured and is unknown.
- Increased service user numbers may not indicate true improvement, but rather the result of more services reporting data over time. Conversely, decreased service user numbers could be attributed to fewer contracted NGOs providing services for that year.
- Access rates are calculated using projections based on the 2018 census. Rates based on projections tend to be less accurate.

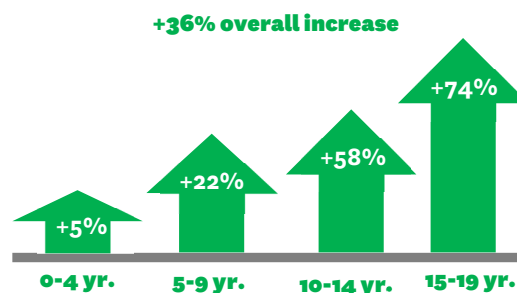
## Asian National Overview

### Asian Infant, Child, Adolescent and Youth Population

- “Asian” ethnicity includes a large number of ethnic groups, diverse in culture, language, education, resident, and migration experiences. NZ’s “Asian” population (people from East, Southeast & South Asia) is made up of more than 40 different groups.<sup>1</sup> The three largest in NZ total 707,598 and comprise **33% Chinese** (231,916), **31% Indian** (221,916), and **11% Filipino** (72,612) (Census 2018, Statistics NZ).
- The majority (**77%**) of the NZ Asian population were **overseas-born**; **23%** were **NZ-born** (Census 2018).
- Just over a quarter (**26%**) of all Asians in NZ were 0-19 years old, making up **17%** of the population of those aged 0-19 years.
- 60%** live in the Northern region, with almost all (**98%**) split between Waitemata (36%), Counties Manukau (34%) and Auckland (21%) (Appendix A, Table 1).
- Migrant populations, students and refugees from Asian countries and their children also need to be considered as additions to NZ’s Asian resident population. The COVID-19 pandemic, and resulting travel bans and border closures, affected global migration numbers from 2020 to 2021, seen in the marked decline in international migrants (-73%, from 184,884 to 49,185) and international fee-paying students (-57%, primary and secondary school age, from 14,840 to 6,385), largely from Asian regions. Current migration data show migration levels have nearly returned to pre-COVID levels ( $n = 161,914$  as at March 2023) and those migrating to the country were primarily from India, China, and the Philippines, residing in the Auckland region. Construction, hospitality, transport, and agriculture sectors were seeing the largest numbers of incoming workers (Statistics NZ, 2023; Ministry of Education, 2022).
- 1,264** refugees arrived in NZ in 2022, **46%** (582) were from Asian countries. Of those from Asian countries, 13% (167) were from Myanmar, and 10% (124) from Pakistan (MBIE, 2023).
- There is **+36%** growth expected for the Asian population in the 10-year projections (2022-2032), meaning it continues to be the fastest growing population. Largest growth is projected in the Southern region by **+46%**, followed by Midland (**+45%**), Central (**+42%**) and Northern (**+30%**).
- The growing socioeconomic inequalities, compounded by COVID-19 are likely to be extensive and enduring, with the mental health needs of Asian children and young people remaining high and becoming even more complex (Peiris-John et al., 2021). These factors strongly signal an urgent need for early intervention, prioritising suicide prevention, in order to improve the long-term mental health outcomes for Asian children and young people. Additionally, services should anticipate continued demand for services and plan services and workforce development activities accordingly.



#### 10-year Asian Population Projections (2022-2032)



Source: Statistics NZ, 2022-2032 population projections base Census 2018

<sup>1</sup> People from the Middle East and Central Asia are excluded.

## Asian Service User Access to ICAYMH/AOD Services

Asian service user access data, extracted from PRIMHD and based on the *Service Users by Service of Domicile* (residence) for the full calendar year, provide information on the actual demand for services. Service user data from 157 NGOs were included in the 2019 period and 148 for the 2021 period. PHO service user data are not captured in PRIMHD; therefore, all service user data presented pertains to Te Whatu Ora and NGO services only. Detailed service user data for the 2019 and 2021 periods are presented in Appendix B, Tables 1-8.

### 2019 to 2021:

- There was an overall increase (+13%) in Asian service user numbers: +22% increase for females, +4% increase for males.
- By age group, overall increases were seen only in those aged 15-19 years (+23%) and 10-14 years (+9%).
- Increases were seen in both Te Whatu Ora services (+14%) and NGOs (+10%).
- Increases were seen in all four regions, with the largest in the Midland region by +35% (Appendix B, Table 14).

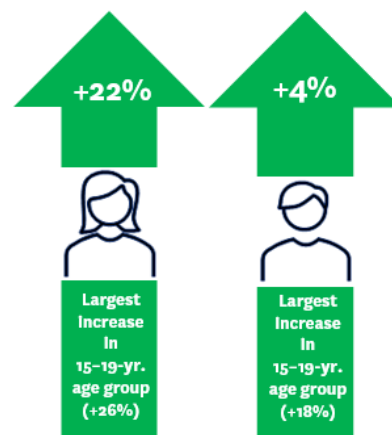
### 2021:

- Asians made up 5% of all service users (3,017) and the largest proportions were females (57%).
- By age group, the largest proportion were aged 15-19 years (57%).
- 82% accessed Te Whatu Ora services; 18% NGOs.
- 64% accessed services in the Northern region, of which 88% were in the greater Auckland area.

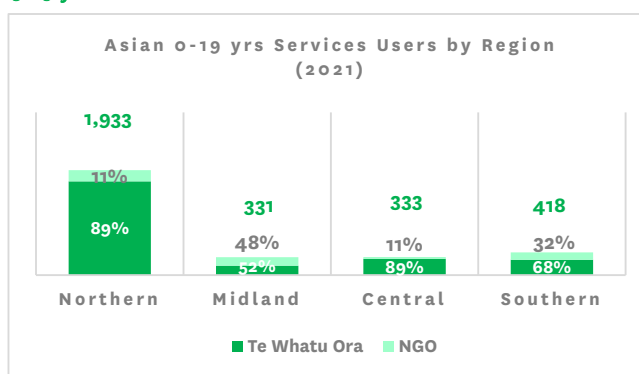
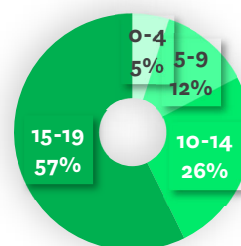
Due to the lack of epidemiological data for the Asian 0-19 years population, no specific target access rates have been set for this population; therefore, the access rate has been compared to the overall rate of 5%. Target rates by age group beyond 2005 for all ethnicities were not developed; therefore, rates by age group are not benchmarked against target rates.

### 2019 to 2021:

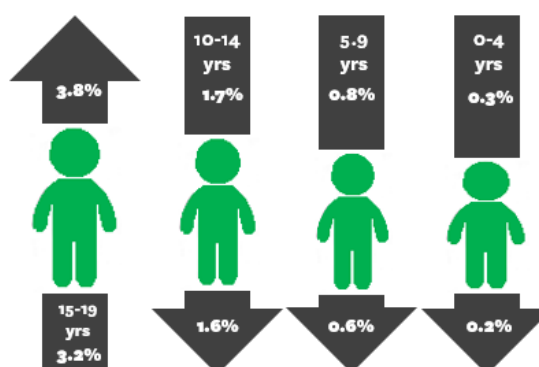
- A slight improvement was seen in the overall Asian access rate from 1.35% to 1.4%.
- Access rates by age group showed an improvement only in those aged 15-19 years (from 3.15% to 3.84%).
- However, by region, slight improvements in access rates were seen across all four regions.



Asian Service Users by Age Group (2021)

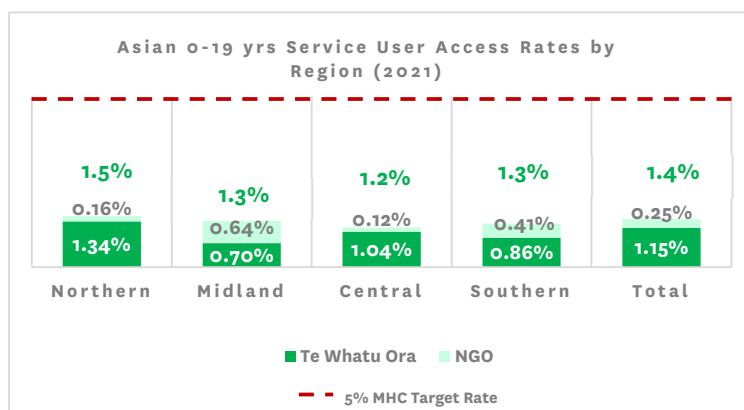
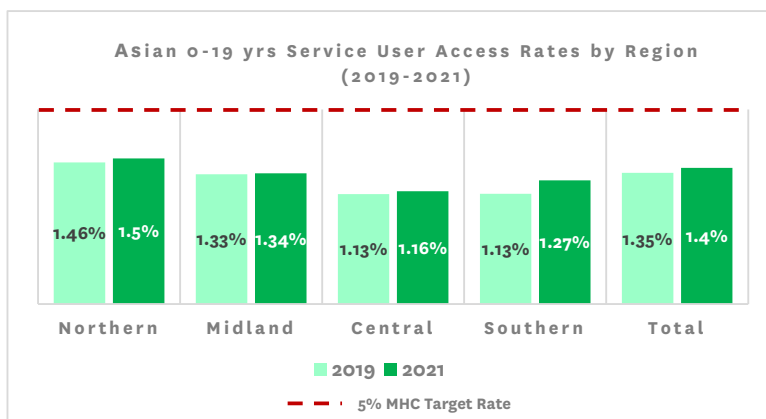


Asian Service User Access Rates by Age Group (2019-2021)



## 2021:

- Asian service users had the lowest access rate (**1.4%**) out of the four ethnic groups (Other Ethnicity 5.7%, Māori 5.1%, Pacific 2.4%).
- Northern region** continued to have the highest Asian access rate at **1.5%**, and **Central** the lowest at **1.2%**.
- There continues to be very little improvement in Asian access rates, and they continue to remain significantly below the target rate across all regions.



## Asian ICAYMH/AOD Workforce

The following information is based on the Whāraurau workforce survey and reports headcount by ethnicity and occupation, as submitted by all 20 Te Whatu Ora (Inpatient & Community) ICAYMH/AOD services, including the National Secure Youth Forensic Service, and 103/122 Te Whatu Ora-funded NGO and PHO services (112 NGOs and 10 PHOs) for the 2021/22 period. Due to a lower participation rate of NGO/PHO services, the 2020 workforce data have been used to estimate the Asian workforce for services that were unable to participate; therefore, the Asian workforce information should be interpreted with caution. Detailed ICAYMH/AOD workforce data are presented in Appendix D, Tables 1-19.

## 2020/21 to 2022/23:

- +53%** increase in the Asian workforce, from **114 to 174** (Table 4.1). Increases were seen in both **Te Whatu Ora (+40%)** and **NGO/PHO services (+85%)** (Table 4.1).
- Increases in three out of the four regions (Northern, Central and Southern) and a decrease in Midland (-1 practitioner) (Table 4.1).

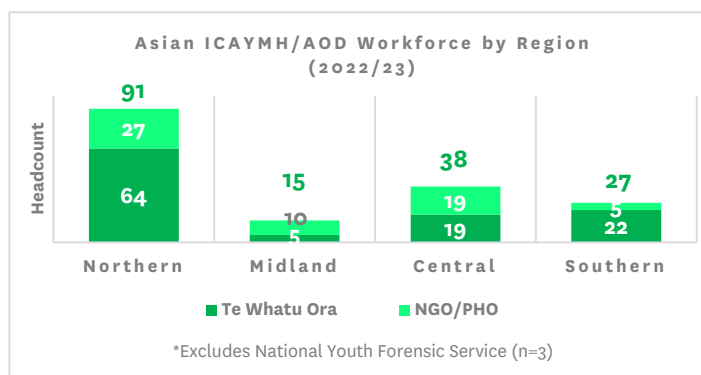
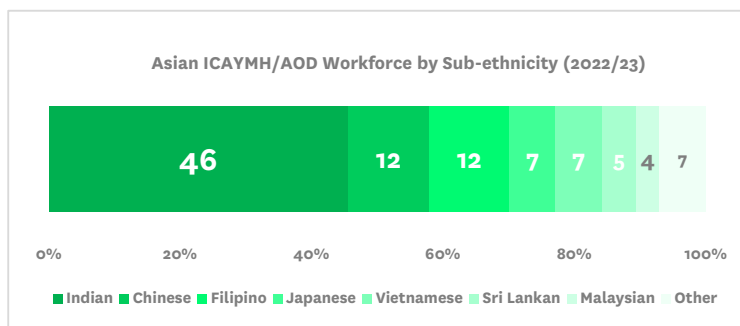
Table 4.1. Asian ICAYMH/AOD Workforce by Region (Headcount, 2012-2022/23)

Asian ICAYMH/AOD Workforce by Region (Headcount)	TE WHATU ORA*						NGO/PHO						TOTAL					
	12	14	16	18	20	22	12	14	16	18	20	22	12	14	16	18	20	22
Northern*	18	32	44	53	51	64	7	12	18	17	15	27	25	44	62	70	66	91
Midland	5	9	10	5	9	5	-	7	6	9	7	10	5	16	16	14	16	15
Central*	9	6	10	11	13	19	2	3	1	6	8	19	11	9	11	17	22	38
Southern*	2	6	10	13	8	22	1	-	4	3	3	5	3	6	14	16	11	27
National Youth Forensic: Nga Taiohi	-	-	-	-	-	3	-	-	-	-	-	-	-	-	-	-	-	3
Total	34	53	74	82	81	113	10	22	29	35	33	61	44	75	103	117	114	174

\*Includes Inpatient Services.

#### 2022/23:

- Asians made up **8%** of the total ICAYMH/AOD workforce.
- The largest Asian sub-ethnic group was **Indians (46%)** (includes Fijian Indian & South African Indian), followed by **Chinese (12%)** and **Filipino (12%)**, Japanese and Vietnamese (**7%**), Sri Lankan (**5%**), and Malaysian (**4%**). The remainder were Singaporean, Indonesian, and Korean.
- 85%** of the Asian workforce were based in the North Island: **65%** in the Northern region, **18%** in Central, and **9%** in Midland. There were **15%** in the Southern region (Table 4.1).
- 65%** were employed in **Te Whatu Ora** services; **35%** in **NGO/PHO** services (Table 4.1).



- **75%** were in **clinical** roles, largely **Nurses (21%)**, **Psychologists (11%)**, **Social Workers (9%)** and **Occupational Therapists (9%)** (Table 4.2).
- **20%** were in **non-clinical** roles (excluding admin and management roles), largely **Mental Health Support Workers (11%)** and **Youth Workers (5%)** (Table 4.2).
- The remainder in Administration and Management roles.

**Asian ICAYMH/AOD Workforce: Top 4 Occupation  
(2022/23)**

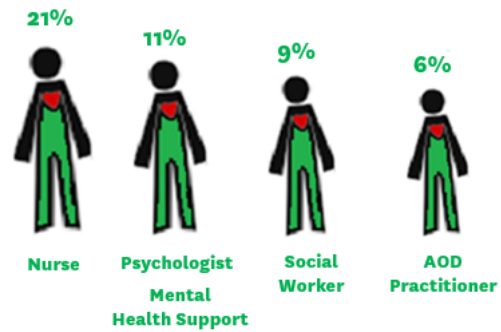


Table 4.1. Asian ICAYMH/AOD Workforce by Occupation (2022/23)

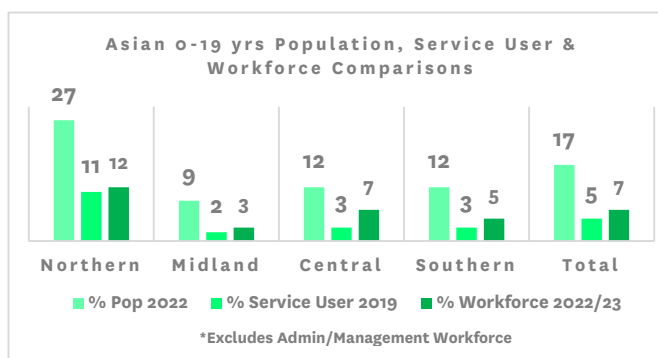
Asian ICAYMH/AOD Workforce by Occupation (Headcount, 2022/23)	Te Whatu Ora Provider Services				NGO/PHO	Total
	Inpatient	Community	National Youth Forensic	Total		
Alcohol & Other Drug Practitioner	-	-	-	-	10	10
CEP Clinician	-	-	-	-	-	-
Clinical Intern	-	2	-	2	3	5
Counsellor	-	-	-	-	5	5
Family Therapist	-	-	-	-	-	-
MH Assistant	-	-	-	-	-	-
Nurse (RN, MH)	14	19	3	36	1	37
Occupational Therapist	1	13	-	14	1	15
Psychiatrist	2	8	-	10	-	10
Psychotherapist	-	3	-	3	-	3
Psychologist	3	14	-	17	2	19
Registrar/Senior Medical Officer	-	8	-	8	-	8
Social Worker	-	13	-	13	2	15
Other Clinical <sup>1</sup>	-	1	-	1	2	3
<b>Clinical Sub-Total</b>	<b>20</b>	<b>81</b>	<b>3</b>	<b>104</b>	<b>26</b>	<b>130</b>
Cultural	-	-	-	-	-	-
Consumer Advisor	-	1	-	1	-	1
Educator	-	-	-	-	-	-
Mental Health/Community Support	-	-	-	-	19	19
Peer Support	-	-	-	-	1	1
Whānau Ora	-	-	-	-	-	-
Youth Worker	-	-	-	-	9	9
Other Non-Clinical <sup>2</sup>	-	-	-	-	4	4
<b>Non-Clinical Sub-Total</b>	<b>-</b>	<b>1</b>	<b>-</b>	<b>1</b>	<b>33</b>	<b>34</b>
Administration	1	7	-	8	-	8
Management	-	-	-	-	2	2
<b>Total</b>	<b>21</b>	<b>89</b>	<b>3</b>	<b>113</b>	<b>61</b>	<b>174</b>

1. Other Clinical: GP, CYMHS Clinical Worker; Neurodevelopmental Paediatrician.

2. Other Non-Clinical: Facilitator; Health Coach; Needs Assessor.

## Asian Population, Service Users and Workforce Comparisons

Currently, it appears that the Asian workforce is representative of Asian service users, due to low proportions continuing to access mental health services. However, 10-year projections indicating a 36% population growth, coupled with an increasing trend in mental health concerns, could potentially lead to an increase in demand for services and would therefore need to be factored into future service and workforce development activities.



### Summary

The Asian population in Aotearoa New Zealand is currently our third largest ethnic group (Census 2018) and is projected to be the second largest for those aged 0-19 years by 2032, with a 36% projected growth in population. Asian migrants born overseas face a higher risk of mental health issues due to immigration. The *Youth19* survey (Peiris-John et al., 2021) highlighted growing mental health concerns (depressive symptoms and suicidal ideation) among school-aged East and South Asians, especially amongst females. The COVID-19 pandemic, with resulting border closures, would have forced some Asian people working or studying here to either leave to take “refuge” overseas or to remain here, thereby separated from their families. For those who chose to leave, such as fee-paying international students, they may have experienced difficulties resettling in New Zealand upon their return from their home countries here. Globally, New Zealand’s strict pandemic response made it a relatively safe country with few deaths compared to other parts of the world, particularly when compared to India (Mathieu et al., 2020). Some of these students would have witnessed more deaths as a result of COVID-19 while overseas, and vulnerability to depression, stress, anxiety, avoidance behaviour, and post-traumatic stress disorder have been reported for those who are separated from loved ones (Liu, 2020; Thakur et al., 2020). The population growth and increasing mental health concerns exacerbated by the impact of the pandemic and lockdowns are likely to be extensive and enduring (Nicholson & Flett, 2020) and suggest a rising demand for mental health services, particularly in areas with large Asian populations like the Northern, Central, and Southern regions.

Access to specialist mental health services for Asian 0-19-year-olds remains the lowest among the four ethnic groups, with a 1.4% access rate, compared to recommended target rates of 5% (MHC, 1998). The reasons for such low access rates for the Asian population are complex and may in part be attributed to the stigma associated with mental health disorders in Asian cultures. It is not uncommon that some mental health issues are interpreted in behavioural terms due to lack of understanding and cultural taboos. Other aspects that could act as barriers to accessing mental health services include grappling with an additional language, lack of awareness of existing services, lack of culturally sensitive services, lack of understanding of rights and the New Zealand health system, and cultural differences in the assessment and treatment of mental health disorders (Ho et al., 2003). Furthermore, shortages in cultural and language-appropriate services for the Asian population mean that there is very little choice, particularly in high-population areas like the Northern and Central regions (which are yet to have dedicated child and youth mental health/AOD services), which could also explain such low access to services. With the rapid growth of the Asian population and their mental health needs, especially post COVID-related mental health issues, low access rates raise concerns, and we must call for urgent improvement in providing equitable and early access to services for the Asian population aged 0-19 years.

There has been a significant growth in the Asian workforce (+53%) since 2020, which makes it appear to be sufficient to meet Asian service user demand; however, this is due to low service user numbers accessing mental health services. Also, although the *Stocktake* gathers data on the sub-ethnicity of the workforce, sub-ethnicities of Asian service users are unknown. Therefore, we cannot assess the relative proportions of sub-ethnicities within the workforce, as compared with service-user sub-ethnicities, and how well-matched they may be.

Te Whatu Ora services reported a significant increase in the number of vacant FTEs in vital clinical positions (psychiatrists, psychologists, nurses, and social workers), which remain difficult to fill (vacant for more than 3 months) and a significant increase in the turnover rate in similar roles (from a rate of 14% to 27%), on par with NGO/PHO services. Staff are leaving for similar roles that pay more in private practice and in other organisations. While turnover data by ethnicity are not



collected, the largest proportion of the Asian specialist workforce is also made up of the very same roles, indicating the need to engage in recruitment and retention activities and to support and strengthen the existing Asian workforce.

Māori, Pacific and Other Ethnic minority groups make up a greater proportion of service users with high and complex mental health needs than do Asian service users and would therefore be largely seen by specialist mental health practitioners. The majority (74%) of the Asian workforce is in these specialist (clinical) roles and would consequently be involved in a therapeutic relationship with Māori and Pacific service users. Therefore, it is imperative that the Asian workforce is resourced with the necessary cultural knowledge and skills to work effectively with these populations. Training and development for the Asian workforce would need to involve understanding cultural values, beliefs, and practices to provide culturally sensitive and appropriate care.

## Recommendations

The following recommendations are based on current findings and consultations with Whāraurau Asian Advisors. These recommendations advocate a family dynamics approach that incorporates understanding the significance of the family system and intergenerational relationships (including collectivism, importance of respect, obedience, and care for one's parents and elderly family members) in Asian cultures. This means actively involving families and community leaders in policy development, funding, planning, delivery, and evaluation of services for Asian children and youth, to ensure activities are aligned with their unique cultural contexts and needs.

**Acknowledge and formalise policy and strategy to improve Asian mental health and wellbeing:** *NZ Health Research Strategy* (2017-2027) acknowledges the failure to address the Asian population in strategy and the lack of funding allocated for Asian health, despite the rapid growth in the population and increasing mental health needs, especially pertinent to the increasing rates of suicide among Asian people (Ministry of Business, Innovation & Employment and Ministry of Health, 2017). Therefore, the first and foremost recommendation is to formalise and integrate the goal of improving Asian health and mental wellbeing into government policies and strategies, with allocation of adequate funding.

**Engage in mental health promotion to increase mental health literacy, reduce stigma and barriers to accessing services:** An important recommendation is to act in reducing the stigma associated with mental health needs among the Asian population. This can be achieved through increased mental health promotion, awareness and education programmes, development of ethnic and language-specific resources and activities targeting Asian families and youth, both in community-based settings like schools and online platforms/Apps/interactive online games. “Culturally appropriate” suicide prevention programmes via Asian social media could be conducted by experienced Asian clinicians. These initiatives should aim to improve attitudes and knowledge about mental health, decrease stigma, improve early identification, and provide information on accessing services promptly when needed. Collaboration with Asian youth and community leaders in developing and endorsing these resources is crucial for their success and effectiveness.

### Develop and provide early intervention programmes, services, and workforce

- **Targeted early intervention programmes and parenting programmes:** Target reduction of emotional symptoms, conduct problems and, especially, peer problems in Asian children (3-14 years), as identified by the SDQ scores from the NZ Health Survey data (Ministry of Health, 2020). These could include infant health/mental health (prenatal and antenatal workshops, emotion regulation training, and normalising the realities of postnatal depression and childhood development disorders). Interventions should target the challenges and stressors related to acculturation, identity formation, and bicultural experiences and promotion of healthy identity development and resilience in navigating cultural transitions.
- **Develop digital tools and resources:** The COVID-19 pandemic has accelerated the development of web-based applications, offering an opportunity to create evidence-based mental health apps, online self-help guides, and e-therapy tools (Gibson et al., 2013; Statistics NZ, 2004b; Peiris-John et al., 2014). Asian youth in NZ have high internet access and utilisation rates, making it an ideal platform to provide digital tools and resources to this population (Gibson et al., 2013; Statistics NZ, 2004b; Peiris-John et al., 2014). The reliance on and use of technology was fast-tracked during the pandemic, with the development of many everyday activities onto web-based applications and this will continue to be built on. This reliance on a digital environment to access information and tools creates opportunities for the development of local and international evidence-based, validated mental health apps, online self-help guides and e-therapy tools, and can provide access to services. Asian youth who participated in the *Youth19* survey did indicate that health and wellbeing websites can be helpful and play an important role alongside in-person

support (Dewhirst et al., 2022). Young people also reported experiences with expensive and ineffective apps, confusing information on social media platforms like *TikTok* and *Instagram* and, where telehealth services are available, encountering difficulties with lengthy waitlists and privacy concerns while accessing services from home, where other family members are present (Whāraurau, 2023). Online websites and resources should be youth specific, clear, their privacy ensured, with information that is practical, and should offer options for human contact and support when needed (Dewhirst et al., 2022). When co-designed by young people, and by improving the quality of information and services/support offered, there remain positive aspects of the use of online platforms for providing important benefits, such as easier and earlier access to social support, information, and therapy that young people may have difficulties accessing in “real” life.

- School-based health education and services:** Schools can play a crucial role and provide an early opportunity to reach and support many young people’s wellbeing, especially those who are at risk of experiencing poor outcomes. Schools also provide an ideal setting for mental health promotion and education activities. Additionally, data from secondary school-based health services have shown positive associations between aspects of school health services and mental health outcomes of students, with less overall depression and suicide risk among students who attended schools with any level of health services (Denny et al., 2014). There is also mounting evidence on the effectiveness of delivering both universal and targeted school-based learning and mental health interventions that improve outcomes for the short and long term (Clarke et al., 2021). Training and ongoing support to school guidance counsellors needs to be provided, to aid early identification of at-risk Asian young people and provide support for them in the school community. Establishing and improving liaison services between school guidance counsellors and the primary health workforce, particularly Health Improvement Practitioners (HIPs) associated with some GPs or PHO practices, could help to improve the mental wellbeing of school-aged children. School-based programmes such as *Mana Ake: Stronger for Tomorrow*, aimed at addressing mild to moderate mental health needs for those aged 0-8 years, have had success for children who have been affected by the earthquakes in Christchurch (Malatest, 2021), and have been expanded and rolled out to more areas. Wider expansion and development of such school-based programmes is needed.
- Equitable access to services:** Equitable access to services remains a key issue as very limited choice of services are available for vulnerable young people, particularly Asian young people (Fenaughty et al., 2021a, 2021b; Fleming et al., 2020, 2022). Developing and providing culturally appropriate, youth-informed, community-based services (e.g., One Stop Shops; Youth Hubs), in partnerships and collaborations with Asian community organisations, cultural centres and religious institutions, is required to provide greater choice. Additionally, engaging with community leaders and utilising community networks to improve early access and acceptance of services is also crucial for improving health and mental health equity for Asian children and young people. Young people who participated in the 2022 DMC events would like health services with no wait times, equipped for walk-ins, based on self-referrals, or regular referrals, and physically located in an area with access to multiple types of public transport (Whāraurau, 2023). Youth Consumer Advisors at Whāraurau are currently developing a **Youth Friendly Audit Tool** to help guide services to enhance the youth-friendliness of their spaces, based on various aspects such as environment, inclusivity, accessibility, safety, and resources.
- Strengthen and support the primary mental health services and workforce (capacity, knowledge, and skill development):** GPs are the largest source of referrals to ICAYMH/AOD services, and predominantly nurses and social workers in school-based services comprise a critical primary mental health workforce. Additionally, educating and developing the cultural competencies of GPs and other primary level workforces on the cultural issues relating to the mental health needs of Asian infants, children and adolescents is essential. Recruiting an Asian primary mental health workforce (such as Health Improvement Practitioners), that matches the diversity of the Asian population, is important. There needs to be continued investment in the development and provision of primary health services, development of new roles, and supporting and strengthening the knowledge and skill development of the respective workforces for early detection and intervention and thereby potentially preventing the need for specialist mental health services. This also could alleviate the high demand on specialist services.

### Improve access to services by enhancing service user pathways from primary to secondary services

- Target and engage with parents as they are involved and influential in persuading their children to use services.
- Raising awareness of available services could improve access for Asian infants, children, and young people (Ameratunga et al., 2008). Primary care liaison services have worked well for adults in the early identification of mental health issues and promoting wellbeing to families via their GPs, and they could work well with ICAYMH/AOD services for the population aged 0-19 years.
- Engage in service quality improvement processes, informed by Asian youth and their families.
- Enhancing service user pathways to services requires a collaborative approach between schools, primary and specialist services, within an enabling infrastructure.

### Increase, strengthen and support the specialist ICAYMH/AOD services and workforce

**Service and workforce development planning:** A growing Asian population and increasing mental health concerns, as indicated by the latest *Youth19* survey (Peiris-John et al., 2021), has potentially led to an increased need/demand for specialist mental health services, which may continue. As a result, service planning to cater for future demand is critical. Service planning and development should occur in collaboration with service users, schools, PHOs, NGOs and Te Whatu Ora services.

**Develop and provide culturally appropriate specialist services:** In consultation and collaboration with Asian community leaders and groups, develop specific, culturally appropriate specialist services for local Asian children, young people, and their families. Family support services are relatively underdeveloped in adolescent mental health services and could be a vital source of support for Asian families. Such services could provide culturally appropriate workers to sit alongside specialist services and promote better understanding of the health system and specific disorders. Where culturally appropriate services and workers are not available, the provision of interpreter services to meet language needs, at least at the assessment level, is essential.

#### **Increase workforce capacity:**

- **Workforce planning:** Services need to actively monitor local service provision (within a model of service delivery that meets the needs of Asian families); monitor potential and actual service demand within current workforce capacities and capabilities (knowledge and skills); and ensure funding is allocated accordingly. Services need to ensure that active recruitment and retention strategies for the Asian workforce are embedded in a service's strategic plans.
- **Recruitment:** Given the significant number of vacant positions and higher turnover rates reported for the 2022 period, particularly by Te Whatu Ora services, an urgent investment into active, targeted recruitment strategies, particularly for specialist roles, is required. This should involve offering competitive salaries, creating supportive work environments, and providing opportunities for professional growth and advancement. Recruitment of specialist staff can be further aided by utilising the *Real Skills Plus ICAYMH/AOD* competency framework to identify required knowledge and skills, based on local service user needs. However, the lack of trained/qualified/experienced staff is consistently reported as the greatest workforce challenge facing both Te Whatu Ora and NGO services and continues to impede vital recruitment efforts. Given that a high proportion of NZ's Asian population is attracted to and are employed in the health sector (Badkar & Tuya, 2010), the promotion of careers in infant, child, adolescent, and youth mental health could be a good strategy to grow the workforce. Services need to work closely with their local or national training institutions to attract graduates into the mental health sector. Utilising the *Real Skills Plus ICAYMH/AOD* competency framework to inform curriculum development within the training sector can create a "job-ready" infant, child, adolescent, and youth mental health/AOD workforce. Services can provide opportunities for students to enter the workforce by offering scholarships, mentoring programmes, and more clinical placement/intern opportunities, as well as creating a supportive environment for career advancement that could alleviate staff shortages and retain graduates. Immigration policies in place, such as allowing clinical roles and nearly all allied health roles to be placed straight to residency pathways, would also be an effective strategy to attract more overseas workers into the health sector (Radio New Zealand News, 2023).

- **Retention:** Exploring and mitigating reasons for high vacancy rates and turnover, and implementing effective retention strategies for the workforce, is even more vital due to the higher vacancies and turnover rates that are being currently reported, particularly for specialist staff. Providing supervision and mentoring opportunities with lower contact time, or part-time positions, could aid retention of senior staff. Funding (remuneration) appears to be one of the key determinants in high turnover observed. Global shortages and demand for skilled workers, with countries offering better salaries and lower costs of living, are leading to more migrant departures than arrivals (Statistics New Zealand, 2022), particularly to Australia (Stuff News, 2023). Therefore, a review of the current funding models, in partnership with the NGO and PHO sectors, needs to occur. An increase in funding can allow services to offer better remuneration packages, create greater pay parity and, particularly for NGOs, allow the offer of longer-term employment contracts, which can address some of the retention challenges.
  - **Look after the workforce:** Current trends show an increasing service user demand within current workforce capacity, which can lead to stress and burnout, and this has been indicated as one of the reasons for high turnover rates in some services. Therefore, prioritising workforce resilience protects the mental and physical health and wellbeing of staff, aids workforce retention and ultimately improves the quality of services provided. An example of a model of care that places an emphasis on self-care and staff wellness, as both an individual and organisational responsibility, is the trauma-informed care approach. Online training modules and a face-to-face workshop on self-care (which has received positive feedback from the workforce) have been developed and are widely available.
  - **Expand and develop existing roles:** Development of new and existing roles could be a fast-track solution to address shortages, such as exploring whether interpreters could train as cultural advisors, and possible co-therapists.
  - **Explore new ways of working:** Working in partnership with other services can be an effective strategy in sharing limited resources. This is already occurring in some areas where Te Whatu Ora services provide clinical support and senior clinical staff for advice/consultation to NGOs, in exchange for cultural services and support. Establishing a consultation team of Asian clinicians, who are available to regions, could also aid in clarifying diagnosis and ensuring that culturally appropriate clinical interventions are used for Asian service users.

**Increase workforce capability:** Due to the growing complexity of mental health needs (e.g., complex interactions between socioeconomic and psychosocial factors), identifying and developing the right knowledge and skills needed by the existing Asian and non-Asian workforce to work more safely and effectively (clinically and culturally) with Asian children and families is critical.

- **Identify and develop knowledge and skills of the Asian workforce:**
  - **Asian workforce working with Asian service users:** Services need to be actively engaged in identifying knowledge and skills needed to work effectively with infants, children, adolescents, and youth and targeting development based on gaps, using competency assessment tools such as *Real Skills Plus ICAYMH/AOD*. Currently, there are no data on the RSP competency levels of the Asian workforce. Therefore, identifying levels of required knowledge and skills of the Asian workforce using appropriate competency development tools (e.g., CALD) is required. Identifying levels of cultural skills to work with Asian infants, children, adolescents and youth and their families is also essential. Even within the current Asian workforce, staff will require different levels of cultural knowledge and skill development; for instance, NZ-born Asian staff will have different competency levels and areas of development compared to overseas-born Asian staff. Promoting the learning and enhancing of Asian language skills (such as Mandarin, Cantonese, Hindi, Vietnamese, Korean), to improve cultural understanding and facilitate effective communication with Asian children, youth, and their families, could be an area for development. Providing and having access to ongoing cultural supervision from an ethnically diverse group of experienced Asian practitioners should also be considered to provide additional support to Asian staff. Investing in the capability/competency development of the Asian workforce can also enable them to provide cultural supervision to the non-Asian workforce, to ensure clinical and cultural safety for Asian service users and their families. With increasing service user preference to access information and services using digital platforms, it is also essential to equip the workforce with the skills to utilise technology and digital health tools in delivering services (i.e., virtual appointments, telephone and text messages and use of social media to

- maintain contact and provide services). While face-to-face appointments have resumed post-pandemic, “virtual” contact will continue to be available for those who prefer this method of service delivery.
- **Asian workforce working with non-Asian service users:** It is imperative that the Asian workforce has the necessary cultural knowledge and skills to work effectively with Māori and Pacific populations, as they make up a large proportion of service users. Training and development for the Asian workforce would need to involve understanding cultural values, beliefs, and practices within a whānau ora and family-centred approach to provide culturally sensitive and appropriate care.
  - **Working with Māori:** Integrating and applying Kaupapa Māori frameworks and models of care, which are based on Māori values, knowledge, and worldviews, is important. This includes incorporating tikanga Māori (Māori customs) and whakapapa (genealogy) into mental health practice. Integrating trauma-informed care with a Māori lens and recognising historical and cultural contexts, intergenerational trauma experienced by Māori and the impact it has on the mental health of Māori children and youth, while focusing on healing and resilience, is needed.
  - **Working with Pacific:** Due to the paucity of Pacific mental health training available, there is a need to develop and roll out training and education that focuses on a deep understanding of Pacific cultures, values, and practices to enhance engagement with families that is also trauma informed. Training on mental health issues that are prevalent among Pacific children and youth, such as acculturation stress, identity formation, migration-related challenges, and cultural adjustment difficulties is needed. How to incorporate Pacific worldviews, beliefs, models (e.g., *Fonofale Model*) and practices, which include integrating traditional healing approaches, spirituality, and Pacific cultural practices, must also be considered.
  - **Enable access to targeted knowledge and skills training:** Once competency needs are identified, it is vital to create and enable opportunities for further development and training. Staff shortages have been reported as a significant barrier to accessing training and upskilling required. Funding allocation for training, particularly in NGO services, have also created challenges in the vital upskilling of staff. Until recruitment, retention and resourcing issues are addressed, shared training between Te Whatu Ora and NGO/PHO services, and the development and provision of more online training, could provide opportunities for further development, until adequate resources and workforce capacity have been built up.

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Appendices

Appendix A: Population Data

Table 1. 0-19 yrs. Population by Ethnicity & Area (2020-2032)

0-19 yrs. Population by Ethnicity & Area	Total				Māori				Pacific				Asian				Other Ethnicity			
	2020	2022	2032	% Change (22-32)	2020	2022	2032	% Change (22-32)	2020	2022	2032	% Change (22-32)	2020	2022	2032	% Change (22-32)	2020	2022	2032	% Change (22-32)
Northern	491,740	491,240	500,470	1.9%	107,390	109,290	110,570	1.2%	84,200	86,950	85,300	-1.9%	122,470	131,200	170,270	30%	177,680	163,800	134,330	-18.0%
Northland	50,920	52,130	51,740	-0.7%	27,690	28,750	29,960	4.2%	1,440	1,530	1,350	-11.8%	1,970	2,460	3,840	56.1%	19,820	19,390	16,590	-14.4%
Waitematā	161,240	160,810	168,510	4.8%	26,120	26,440	27,290	3.2%	16,600	17,150	17,530	2.2%	42,600	47,270	66,910	41.5%	75,920	69,950	56,780	-18.8%
Auckland	109,320	104,730	102,310	-2.3%	13,640	13,120	11,320	-13.7%	18,120	17,980	15,780	-12.2%	34,640	36,720	43,780	19.2%	42,920	36,910	31,430	-14.8%
Counties Manukau	170,260	173,570	177,910	2.5%	39,940	40,980	42,000	2.5%	48,040	50,290	50,640	0.7%	43,260	44,750	55,740	24.6%	39,020	37,550	29,530	-21.4%
Midland	265,655	270,350	269,490	-0.3%	108,120	112,780	121,140	7.4%	8,820	9,505	10,120	6.5%	22,295	25,465	37,040	45%	126,420	122,600	101,190	-17.5%
Waikato	118,740	120,080	121,210	0.9%	43,350	45,310	49,810	9.9%	4,950	5,270	5,650	7.2%	12,960	14,750	22,150	50.2%	57,480	54,750	43,600	-20.4%
Lakes	32,070	31,980	30,120	-5.8%	17,060	17,430	17,840	2.4%	1,020	1,080	1,020	-5.6%	2,290	2,690	3,950	46.8%	11,700	10,780	7,310	-32.2%
Bay of Plenty	66,655	69,310	70,710	2.0%	26,960	28,410	31,490	10.8%	1,745	2,000	2,200	10.0%	4,920	5,480	7,370	34.5%	33,030	33,420	29,650	-11.3%
Tairāwhiti	14,945	15,180	14,390	-5.2%	10,020	10,330	9,920	-4.0%	430	435	410	-5.7%	305	375	460	22.7%	4,190	4,040	3,600	-10.9%
Taranaki	33,245	33,800	33,060	-2.2%	10,730	11,300	12,080	6.9%	675	720	840	16.7%	1,820	2,170	3,110	43.3%	20,020	19,610	17,030	-13.2%
Central	230,995	242,570	233,200	-3.9%	68,980	74,750	79,470	6.3%	17,645	19,285	20,250	5.0%	25,310	29,525	42,010	42%	119,060	119,010	91,470	-23.1%
Hawke's Bay	47,240	47,900	46,140	-3.7%	19,940	20,560	21,550	4.8%	2,700	3,030	3,440	13.5%	2,470	2,910	4,320	48.5%	22,130	21,400	16,830	-21.4%
MidCentral	17,825	48,920	47,760	-2.4%	7,500	17,170	18,700	8.9%	795	2,560	2,760	7.8%	760	4,710	6,200	31.6%	8,770	24,480	20,100	-17.9%
Whanganui	48,410	17,800	17,440	-2.0%	16,370	7,730	8,300	7.4%	2,360	850	900	5.9%	4,060	890	1,310	47.2%	25,620	8,330	6,930	-16.8%
Capital & Coast	40,450	75,080	40,080	-46.6%	11,110	11,460	12,410	8.3%	4,150	4,480	4,650	3.8%	5,830	6,990	11,010	57.5%	19,360	17,840	12,010	-32.7%
Hutt	77,070	40,770	69,820	71.3%	14,060	13,930	14,240	2.2%	7,640	7,940	8,080	1.8%	12,190	13,500	18,500	37.0%	43,180	39,710	29,000	-27.0%
Wairarapa	11,800	12,100	11,960	-1.2%	3,730	3,900	4,270	9.5%	405	425	420	-1.2%	485	525	670	27.6%	7,180	7,250	6,600	-9.0%
Southern	281,140	280,205	273,375	-2.4%	50,270	51,980	57,340	10.3%	11,095	12,065	13,440	11.4%	30,245	33,880	49,545	46%	189,530	182,280	153,050	-16.0%
Nelson Marlborough	36,330	36,840	34,170	-7.2%	7,280	7,690	8,660	12.6%	1,140	1,280	1,270	-0.8%	2,420	2,720	3,820	40.4%	25,490	25,150	20,420	-18.8%
West Coast	7,340	7,160	6,525	-8.9%	1,550	1,580	1,680	6.3%	135	130	110	-15.4%	275	340	445	30.9%	5,380	5,110	4,290	-16.0%
Canterbury	140,000	139,730	139,310	-0.3%	23,390	24,300	27,430	12.9%	6,400	6,980	7,930	13.6%	19,860	22,070	32,110	45.5%	90,350	86,380	71,840	-16.8%
South Canterbury	14,170	14,105	13,620	-3.4%	2,530	2,580	2,820	9.3%	390	465	560	20.4%	940	1,060	1,550	46.2%	10,310	10,000	8,690	-13.1%
Southern	83,300	82,370	79,750	-3.2%	15,520	15,830	16,750	5.8%	3,030	3,210	3,570	11.2%	6,750	7,690	11,620	51.1%	58,000	55,640	47,810	-14.1%
TOTAL	1,269,530	1,284,365	1,276,535	-0.6%	334,760	348,800	368,520	5.7%	121,760	127,805	129,110	1.0%	200,320	220,070	298,865	36%	612,690	587,690	480,040	-18.3%

Population Projections (Base 2018 Census, Prioritised Ethnicity), Source: NZ Statistics

## Appendix B: Programme for the Integration of Mental Health Data (PRIMHD)

Table 1. Northern Region 0-19 yrs. Service User by Area, Gender & Ethnicity (2019 & 2021)

Service Users by Ethnicity & Gender (2019)							Service Users by Ethnicity & Gender (2021)					% Change				
Service of Domicile	Gender	Ethnicity				Total	Ethnicity				Total	Ethnicity				Total
		Asian	Māori	Other	Pacific		Asian	Māori	Other	Pacific		Asian	Māori	Other	Pacific	
Northland	Female	17	596	482	34	1,118	12	606	526	31	1,171	-29	2	9	-9	5
	Male	11	765	559	29	1,349	14	646	411	16	1,084	27	-16	-26	-45	-20
	Other	-	1	1	-	2	-	1	1	-	2	-	-	-	-	-
	Unknown	-	-	3	-	3	-	-	2	-	2	-	-	-33	-	-33
	Total	28	1,362	1,045	63	2,472	26	1,253	940	47	2,259	-7	-8	-10	-25	-9
Waitemata	Female	294	589	1,760	160	2,779	349	667	2,098	196	3,287	19	13	19	23	18
	Male	218	804	1,893	241	3,129	265	647	1,763	212	2,863	22	-20	-7	-12	-9
	Other	1	-	9	-	10	-	2	5	-	7	-	-	-44	-	-30
	Unknown	-	3	5	-	7	-	3	8	-	11	-	-	60	-	57
	Total	513	1,396	3,667	401	5,925	614	1,319	3,874	408	6,168	20	-6	6	2	4
Auckland	Female	307	434	900	242	1,839	379	400	1,068	221	2,031	23	-8	19	-9	10
	Male	220	452	855	283	1,787	237	378	743	213	1,547	8	-16	-13	-25	-13
	Other	2	2	2	-	6	1	4	7	-	12	-50	100	250	-	100
	Unknown	-	-	6	-	6	-	-	3	-	3	-	-	-50	-	-50
	Total	529	888	1,763	525	3,638	617	782	1,821	434	3,593	17	-12	3	-17	-1
Counties Manukau	Female	322	1,135	1,121	619	3,157	358	1,030	1,276	560	3,189	11	-9	14	-10	1
	Male	360	1,361	1,399	735	3,790	318	1,125	1,170	579	3,152	-12	-17	-16	-21	-17
	Other	-	2	3	1	6	-	4	2	1	7	-	100	-33	-	17
	Unknown	-	1	6	-	7	-	2	5	1	8	-	100	-17	-	14
	Total	682	2,499	2,529	1,355	6,960	676	2,161	2,453	1,141	6,356	-1	-14	-3	-16	-9
Regional Total		1,752	6,145	9,004	2,344	18,995	1,933	5,515	9,088	2,030	18,363	10	-10	1	-13	-3
National Total		2,663	19,005	33,371	3,556	57,879	3,017	17,775	34,047	3,104	57,550	13	-6	2	-13	-1

Note: Unknown refers to gender not stated or inadequately described.

Table 2. Midland Region 0-19 yrs. Service User by Area, Gender &amp; Ethnicity (2019 &amp; 2021)

Service of Domicile	Service Users by Ethnicity & Gender (2019)						Service Users by Ethnicity & Gender (2021)					% Change				
	Gender	Ethnicity				Total	Ethnicity				Total	Ethnicity				Total
		Asian	Māori	Other	Pacific		Asian	Māori	Other	Pacific		Asian	Māori	Other	Pacific	
Waikato	Female	96	1,167	2,031	106	3,346	101	1,110	2,239	89	3,513	5	-5	10	-16	5
	Male	95	1,416	2,042	118	3,622	88	1,073	1,782	83	3,014	-7	-24	-13	-30	-17
	Other	-	-	4	-	4	-	-	8	-	8			100	-	100
	Unknown	1	-	11	-	12	-	2	5	-	7	-100		-55	-	-42
	Total	192	2,583	4,088	224	6,984	189	2,185	4,034	172	6,542	-2	-15	-1	-23	-6
Lakes	Female	19	453	533	19	1,020	23	516	635	18	1,187	21	14	19	-5	16
	Male	10	471	454	11	940	22	452	429	11	912	120	-4	-6	-	-3
	Other	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Unknown	-	-	2	-	2	-	-	2	-	2	-	-	-	-	-
	Total	29	924	989	30	1,962	45	968	1,066	29	2,101	55	5	8	-3	7
Bay of Plenty	Female	30	757	875	34	1,676	43	839	1,181	35	2,093	43	11	35	3	25
	Male	18	957	930	33	1,926	29	913	951	26	1,914	61	-5	2	-21	-1
	Other	-	-	-	-	-	-	3	-	-	3	-	-	-	-	-
	Unknown	-	1	3	1	5	-	2	6	2	10	-	100	100	100	100
	Total	48	1,715	1,808	68	3,607	72	1,757	2,138	63	4,020	50	2	18	-7	11
Tairāwhiti	Female	2	335	133	15	478	8	344	164	4	518	300	3	23	-73	8
	Male	6	393	180	3	577	1	300	170	7	476	-83	-24	-6	133	-18
	Other	-	2	1	-	3	-	2	2	-	4	-	-	100	-	33
	Unknown	-	1		-	1	-	1	-	-	1	-	-	-	-	0
	Total	8	731	314	18	1,059	9	647	336	11	999	13	-11	7	-39	-6
Taranaki	Female	8	159	351	5	521	7	148	381	13	547	-13	-7	9	160	5
	Male	4	166	353	11	531	9	154	244	10	417	125	-7	-31	-9	-21
	Other	-	2	1	-	3	-	1	1	-	2	-	-50	-	-	-33.3
	Unknown	-	-	-	-	-	-	1	626	-	1	-	-	-	-	-
	Total	12	327	705	16	1,055	16	304	626	23	967	33	-7	-11	44	-8
Regional Total		289	6,280	7,904	356	14,667	331	5,861	8,200	298	14,629	15	-7	4	-16	-0.3
National Total		2,663	19,005	33,371	3,556	57,879	3,017	17,775	34,047	3,104	57,550	13	-6	2	-13	-1

Note: Unknown refers to gender not stated or inadequately described.

Table 3. Central Region 0-19 yrs. Service User by Area &amp; Ethnicity (2019 &amp; 2021)

Service of Domicile	Gender	Service Users by Ethnicity & Gender (2019)				Service Users by Ethnicity & Gender (2021)						% Change				
		Ethnicity				Total	Ethnicity				Total	Ethnicity				Total
		Asian	Māori	Other	Pacific		Asian	Māori	Other	Pacific		Asian	Māori	Other	Pacific	
Hawke's Bay	Female	4	365	463	27	846	15	312	374	19	714	275	-15	-19	-30	-16
	Male	4	388	372	28	782	5	281	305	23	612	25	-28	-18	-18	-22
	Other	-	-	1	-	1	-	-	-	-	1	-	-	-100	-	-
	Unknown	-	-	3	-	3	-	-	1	-	-	-	-	-67	-	-100
	Total	8	753	839	55	1,632	20	593	680	42	1,327	150	-21	-19	-24	-19
MidCentral	Female	17	335	616	45	999	33	368	714	32	1142	94	10	16	-29	14
	Male	25	363	618	48	1048	15	376	539	30	956	-40	4	-13	-38	-9
	Other	-	-	2	-	2	-	2	1	-	3	-	-	-50		50
	Unknown	-	-	-	-	-	-	-	2	-	2	-	-			-
	Total	42	698	1236	93	2,049	48	746	1256	62	2,103	14	7	2	-33	3
Whanganui	Female	6	203	292	11	494	7	201	316	8	527	17	-1	8	-27	7
	Male	6	196	293	7	488	6	190	252	7	454	-	-3	-14	-	-7
	Other	-	1	1	-	2	-	-	1	-	1	-	-100	-	-	-50
	Unknown	-	-	-	-	-	-	-	-	-		-	-	-	-	-
	Total	12	400	586	18	984	13	391	569	15	982	8	-2	-3	-17	-0.2
Capital & Coast	Female	84	400	949	127	1,527	94	391	1114	122	1,710	12	-2	17	-4	12
	Male	73	432	868	113	1,463	71	362	783	99	1,306	-3	-16	-10	-12	-11
	Other	1	2	20	1	24	3	5	36	-	43	200	150	80	-100	79
	Unknown	-	2	2	-	4	-	-	4	-	4	-	-100	100	-	-
	Total	158	836	1839	241	3,018	168	758	1937	221	3,063	-100	-9	5	-8	1
Hutt Valley	Female	31	272	491	57	837	40	271	574	63	941	29	0	17	11	12
	Male	35	323	466	36	853	27	251	400	37	712	-23	-22	-14	3	-17
	Other	-	1	9	-	10	-	1	18	-	19	-	-	100	-	90
	Unknown	-	1	-	-	1	-	1	-	-	1	-	-	-	-	-
	Total	66	597	966	93	1,701	67	524	992	100	1,673	2	-12	3	8	-2
Wairarapa	Female	3	99	183	9	291	9	106	230	8	351	200	7	26	-11	21
	Male	1	79	150	3	231	8	109	164	7	286	700	38	9	133	24
	Other	-	-	1	-	1	-	-	3	1	4	-	-	200	-	300
	Unknown	-	-	4	-	4	-	-	1	-	1	-	-	-75	-	-75
	Total	4	178	338	12	527	17	215	398	16	642	325	21	18	33	22
Regional Total		290	3,462	5,804	512	9,911	333	3,227	5,832	456	9,790	15	-7	0	-11	-1
National Total		2,663	19,005	33,371	3,556	57,879	3,017	17,775	34,047	3,104	57,550	13	-6	2	-13	-1

Note: Unknown refers to gender not stated or inadequately described.

Table 4. Southern Region 0-19 yrs. Service User by Area &amp; Ethnicity (2019 &amp; 2021)

Service of Domicile	Service Users by Ethnicity & Gender (2019)						Service Users by Ethnicity & Gender (2021)					% Change				
	Gender	Ethnicity				Total	Ethnicity				Total	Ethnicity				Total
		Asian	Māori	Other	Pacific		Asian	Māori	Other	Pacific		Asian	Māori	Other	Pacific	
Nelson Marlborough	Female	21	192	749	14	975	24	236	877	24	1158	14	23	17	71	19
	Male	15	225	650	13	903	14	233	705	15	965	-7	4	8	15	7
	Other	-	1	1	-	2	-	2	3	-	5	-	100	200	-	150
	Unknown	-	-	2	-	2	1	-	1	-	2	-	-	-50	-	-
	Total	36	418	1402	27	1,882	39	471	1586	39	2,130	8	13	13	44	13
West Coast	Female	1	38	138	2	177	3	42	165	-	207	200	11	20	-100	17
	Male	3	55	190	5	250	-	47	145	3	195	-100	-15	-24	-40	-22
	Other	-	-	3	-	3	-	-	1	-	1	-	-	-67	-	-67
	Unknown	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Total	4	93	331	7	430	3	89	311	3	403	-25	-4	-6	-57	-6
Canterbury	Female	100	751	2439	92	3,324	152	748	2737	91	3,693	52	-	12	-1	11
	Male	85	755	2163	71	3,023	115	727	2048	68	2,937	35	-4	-5	-4	-3
	Other	-	3	19	-	21	-	7	21	-	28	-	133	11	-	33
	Unknown	-	5	24	-	27	-	4	21	-	25	-	-20	-13	-	-7
	Total	185	1514	4645	163	6,395	267	1486	4827	159	6,683	44	-2	4	-2	5
South Canterbury	Female	4	86	360	9	459	6	110	456	6	577	50	28	27	-33	26
	Male	2	85	352	10	449	9	81	365	10	463	350	-5	4	-	3
	Other	-	-	4	-	4	-	-	2	-	2	-	-	-50	-	-50
	Unknown	-	-	2	-	2	-	-	2	-	2	-	-	-	-	-
	Total	6	171	718	19	914	15	191	825	16	1044	150	12	15	-16	14
Southern	Female	44	437	1,888	52	2,406	56	490	1946	53	2,531	27	12	3	2	5
	Male	51	442	1,612	67	2,159	37	410	1354	49	1,847	-27	-7	-16	-27	-14
	Other	-	3	11	-	14	1	2	16	-	19	-	-33	45	-	36
	Unknown	1	2	22	1	25	-	3	19	-	22	-100	50	-14	-100	-12
	Total	96	884	3,533	120	4,604	94	905	3,335	102	4,419	-2	2	-6	-15	-4
Regional Total		327	3,080	10,629	336	14,225	418	3,142	10,884	319	14,679	28	2	2	-5	3
National Total		2,663	19,005	33,371	3,556	57,879	3,017	17,775	34,047	3,104	57,550	13	-6	2	-13	-1

Note: Unknown refers to gender not stated or inadequately described.

Table 5. Northern Region 0-19 yrs. Service User Access Rates by Area, Ethnicity &amp; Age Group (yrs.) (2019 &amp; 2021)

Northern Region	Year	Service Type	Māori					Pacific					Asian					Other					Total				
			0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19
Northland	2019	Te Whatu Ora	0.2%	1.5%	3.7%	7.1%	3.0%	0.3%	1.5%	3.1%	7.9%	2.9%	0.1%	0.8%	1.4%	2.7%	1.1%	0.3%	1.8%	4.7%	9.2%	4.0%	0.2%	1.6%	4.0%	7.7%	3.2%
		NGO	0.0%	0.1%	2.1%	6.5%	2.0%	0.0%	0.2%	2.0%	4.5%	1.4%	0.0%	0.2%	0.2%	1.4%	0.4%	0.0%	0.1%	1.3%	4.6%	1.5%	0.0%	0.1%	1.7%	5.4%	1.7%
		Total	0.2%	1.7%	5.8%	13.5%	4.9%	0.3%	1.7%	5.1%	12.4%	4.3%	0.1%	1.0%	1.7%	4.1%	1.4%	0.3%	1.9%	6.0%	13.8%	5.4%	0.3%	1.7%	5.7%	13.1%	4.9%
	2021	Te Whatu Ora	0.3%	1.2%	3.4%	6.1%	2.7%	0.3%	0.9%	1.7%	4.7%	1.7%	0.1%	0.0%	1.3%	2.8%	0.8%	0.2%	1.2%	4.3%	9.4%	3.6%	0.2%	1.1%	3.7%	7.2%	2.9%
		NGO	0.0%	0.1%	1.5%	5.9%	1.7%	0.0%	0.0%	1.7%	4.7%	1.4%	0.0%	0.0%	0.0%	2.1%	0.3%	0.0%	0.1%	0.8%	4.5%	1.2%	0.0%	0.1%	1.2%	5.2%	1.5%
		Total	0.3%	1.3%	5.0%	12.0%	4.4%	0.3%	0.9%	3.3%	9.3%	3.1%	0.1%	0.0%	1.3%	4.9%	1.1%	0.2%	1.3%	5.1%	13.8%	4.8%	0.2%	1.2%	4.9%	12.3%	4.4%
Waitemata	2019	Te Whatu Ora	0.8%	3.5%	5.8%	10.1%	4.9%	0.4%	1.7%	2.3%	4.5%	2.3%	0.3%	0.8%	1.6%	2.7%	1.2%	0.9%	3.6%	5.2%	8.0%	4.6%	0.6%	2.6%	4.2%	6.7%	3.5%
		NGO	0.0%	0.0%	0.2%	2.1%	0.6%	0.0%	0.0%	0.0%	0.4%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.6%	0.2%	0.0%	0.0%	0.1%	0.7%	0.2%
		Total	0.8%	3.5%	6.0%	12.2%	5.4%	0.4%	1.7%	2.3%	5.0%	2.4%	0.3%	0.8%	1.6%	2.8%	1.2%	0.9%	3.6%	5.2%	8.6%	4.8%	0.7%	2.6%	4.2%	7.4%	3.7%
	2021	Te Whatu Ora	0.7%	3.0%	5.0%	10.1%	4.6%	0.5%	1.6%	2.3%	4.4%	2.2%	0.3%	0.7%	1.3%	3.6%	1.3%	0.9%	3.5%	5.8%	9.3%	5.2%	0.6%	2.3%	4.1%	7.6%	3.6%
		NGO	0.0%	0.0%	0.2%	1.6%	0.4%	0.0%	0.0%	0.1%	0.5%	0.1%	0.0%	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.1%	0.6%	0.2%	0.0%	0.0%	0.1%	0.7%	0.2%
		Total	0.7%	3.0%	5.2%	11.7%	5.0%	0.5%	1.6%	2.4%	4.9%	2.4%	0.3%	0.7%	1.3%	3.8%	1.3%	0.9%	3.5%	5.9%	10.0%	5.4%	0.6%	2.3%	4.2%	8.3%	3.8%
Auckland	2019	Te Whatu Ora	1.0%	2.2%	5.4%	11.1%	5.1%	0.6%	1.4%	2.4%	4.4%	2.3%	0.5%	0.8%	1.6%	2.8%	1.4%	1.1%	2.0%	4.1%	6.6%	3.8%	0.8%	1.5%	3.2%	5.5%	2.9%
		NGO	0.4%	0.3%	1.3%	3.6%	1.4%	0.0%	0.1%	0.5%	1.5%	0.5%	0.0%	0.0%	0.1%	0.3%	0.1%	0.1%	0.1%	0.3%	0.8%	0.3%	0.1%	0.1%	0.4%	1.0%	0.4%
		Total	1.4%	2.6%	6.6%	14.7%	6.5%	0.6%	1.5%	2.9%	5.8%	2.8%	0.5%	0.8%	1.7%	3.1%	1.5%	1.2%	2.1%	4.4%	7.4%	4.1%	0.8%	1.6%	3.6%	6.5%	3.3%
	2021	Te Whatu Ora	1.0%	2.1%	4.6%	9.9%	4.6%	0.6%	0.7%	2.3%	4.0%	2.0%	0.4%	0.6%	1.8%	3.7%	1.5%	1.3%	1.9%	4.3%	7.3%	4.3%	0.7%	1.2%	3.2%	5.9%	3.0%
		NGO	0.3%	0.2%	1.0%	3.2%	1.2%	0.0%	0.1%	0.3%	0.9%	0.4%	0.0%	0.0%	0.2%	0.4%	0.2%	0.1%	0.0%	0.3%	0.8%	0.4%	0.1%	0.0%	0.3%	1.0%	0.4%
		Total	1.3%	2.3%	5.6%	13.1%	5.9%	0.6%	0.8%	2.6%	4.9%	2.4%	0.4%	0.6%	2.0%	4.1%	1.7%	1.3%	1.9%	4.6%	8.1%	4.7%	0.8%	1.3%	3.5%	6.9%	3.4%
Counties Manukau	2019	Te Whatu Ora	0.8%	3.0%	4.8%	9.6%	4.3%	0.4%	1.0%	2.0%	3.6%	1.8%	0.4%	1.0%	1.8%	2.5%	1.3%	1.3%	4.7%	6.2%	8.4%	5.4%	0.6%	2.3%	3.6%	5.8%	3.0%
		NGO	0.1%	0.2%	1.9%	6.1%	1.9%	0.0%	0.1%	0.8%	3.0%	1.0%	0.0%	0.1%	0.4%	0.9%	0.3%	0.1%	0.3%	0.7%	2.5%	1.0%	0.1%	0.2%	0.9%	3.0%	1.0%
		Total	0.8%	3.1%	6.7%	15.6%	6.3%	0.4%	1.1%	2.8%	6.6%	2.7%	0.4%	1.1%	2.2%	3.4%	1.6%	1.4%	5.0%	6.9%	10.9%	6.3%	0.7%	2.4%	4.6%	8.8%	4.1%
	2021	Te Whatu Ora	0.8%	2.2%	4.1%	7.9%	3.7%	0.5%	0.7%	1.6%	3.3%	1.5%	0.4%	0.9%	1.3%	3.0%	1.3%	1.2%	3.3%	6.4%	9.2%	5.3%	0.6%	1.7%	3.2%	5.7%	2.8%
		NGO	0.0%	0.1%	1.4%	5.5%	1.6%	0.0%	0.1%	0.7%	2.2%	0.7%	0.0%	0.0%	0.2%	1.0%	0.3%	0.0%	0.2%	0.8%	2.7%	1.0%	0.0%	0.1%	0.8%	2.8%	0.9%
		Total	0.9%	2.3%	5.4%	13.4%	5.3%	0.5%	0.8%	2.3%	5.5%	2.3%	0.4%	0.9%	1.5%	4.0%	1.5%	1.2%	3.5%	7.3%	12.0%	6.4%	0.6%	1.8%	4.0%	8.5%	3.7%
Regional Total	2019	Te Whatu Ora	0.7%	2.6%	4.8%	9.3%	4.2%	0.4%	1.2%	2.2%	4.0%	2.0%	0.4%	0.9%	1.7%	2.7%	1.3%	1.0%	3.3%	5.1%	7.8%	4.5%	0.6%	2.2%	3.7%	6.2%	3.2%
		NGO	0.1%	0.2%	1.5%	4.9%	1.5%	0.0%	0.1%	0.6%	2.2%	0.7%	0.0%	0.0%	0.2%	0.4%	0.2%	0.1%	0.1%	0.4%	1.5%	0.5%		0.1%	0.6%	2.0%	0.7%
		Total	0.8%	2.8%	6.3%	14.2%	5.8%	0.4%	1.3%	2.7%	6.2%	2.7%	0.4%	0.9%	1.9%	3.1%	1.5%	1.0%	3.4%	5.5%	9.3%	5.0%	0.7%	2.3%	4.4%	8.2%	3.9%
	2021	Te Whatu Ora	0.7%	2.1%	4.2%	8.3%	3.7%	0.5%	0.9%	1.9%	3.7%	1.8%	0.4%	0.7%	1.5%	3.4%	1.3%	0.9%	2.8%	5.4%	8.7%	4.9%	0.6%	1.7%	3.6%	6.5%	3.1%
		NGO	0.1%	0.1%	1.1%	4.3%	1.3%	0.0%	0.1%	0.5%	1.6%	0.6%	0.0%	0.0%	0.1%	0.6%	0.2%	0.0%	0.1%	0.4%	1.5%	0.5%		0.1%	0.5%	1.9%	0.6%
		Total	0.7%	2.2%	5.3%	12.6%	5.1%	0.5%	1.0%	2.4%	5.3%	2.3%	0.4%	0.7%	1.6%	4.0%	1.5%	1.0%	2.9%	5.8%	10.2%	5.4%	0.6%	1.8%	4.1%	8.4%	3.7%

\*Calculated using 2019 &amp; 2021 Population Projections (Base 2018 Census, prioritised ethnicity) &amp; full year Service User data from PRIMHD.

Table 6. Midland Region 0-19 yrs. Service User Access Rates by Area, Ethnicity & Age Group (yrs.) (2019 & 2021)

Midland Region	Year	Service Type	Māori					Pacific					Asian					Other					Total				
			0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19
Waikato	2019	Te Whatu Ora	0.3%	1.3%	2.5%	5.5%	2.3%	0.1%	1.0%	2.1%	3.7%	1.7%	0.1%	0.2%	0.8%	2.2%	0.7%	0.5%	2.2%	4.1%	6.9%	3.5%	0.3%	1.5%	3.0%	5.8%	2.6%
		NGO	0.3%	2.0%	4.8%	8.4%	3.7%	1.2%	1.9%	3.8%	4.8%	2.9%	0.1%	0.5%	1.0%	2.5%	0.9%	0.3%	3.1%	4.7%	6.2%	3.7%	0.3%	2.3%	4.3%	6.5%	3.3%
		Total	0.6%	3.3%	7.2%	13.9%	6.0%	1.3%	2.9%	5.9%	8.5%	4.6%	0.1%	0.7%	1.8%	4.6%	1.5%	0.8%	5.3%	8.8%	13.1%	7.2%	0.6%	3.9%	7.4%	12.3%	6.0%
	2021	Te Whatu Ora	0.2%	0.7%	2.1%	4.6%	1.8%	0.0%	0.6%	1.4%	2.8%	1.2%	0.0%	0.2%	0.7%	1.9%	0.6%	0.2%	1.8%	4.2%	7.5%	3.6%	0.2%	1.1%	2.9%	5.7%	2.4%
		NGO	0.1%	1.8%	3.8%	6.8%	3.1%	0.2%	1.5%	2.6%	4.4%	2.2%	0.0%	0.5%	1.1%	1.9%	0.7%	0.1%	2.3%	4.8%	7.0%	3.7%	0.1%	1.8%	3.9%	6.3%	3.0%
		Total	0.3%	2.5%	5.9%	11.4%	4.9%	0.2%	2.0%	4.0%	7.2%	3.3%	0.0%	0.7%	1.8%	3.8%	1.3%	0.4%	4.1%	8.9%	14.5%	7.3%	0.3%	3.0%	6.8%	12.0%	5.5%
Lakes	2019	Te Whatu Ora	0.0%	1.5%	2.2%	6.0%	2.4%	0.0%	0.3%	1.9%	2.7%	1.3%	0.0%	0.0%	0.0%	2.2%	0.4%	0.3%	2.7%	5.4%	8.7%	4.4%	0.1%	1.8%	3.3%	6.6%	2.9%
		NGO	0.0%	0.0%	3.8%	9.0%	3.1%	0.0%	0.0%	1.2%	5.4%	1.6%	0.0%	0.0%	1.5%	2.7%	0.8%	0.0%	0.0%	5.3%	11.3%	4.2%	0.0%	0.0%	4.1%	9.3%	3.3%
		Total	0.1%	1.5%	6.1%	15.0%	5.5%	0.0%	0.3%	3.1%	8.1%	2.9%	0.0%	0.0%	1.5%	4.9%	1.3%	0.3%	2.7%	10.7%	20.0%	8.5%	0.1%	1.8%	7.4%	16.0%	6.2%
	2021	Te Whatu Ora	0.0%	0.9%	2.1%	6.0%	2.2%	0.0%	0.0%	1.7%	3.1%	1.2%	0.1%	0.3%	1.1%	2.1%	0.7%	0.1%	2.0%	5.7%	11.1%	4.7%	0.1%	1.2%	3.3%	7.4%	2.9%
		NGO	0.0%	0.1%	4.6%	9.1%	3.4%	0.0%	0.3%	2.4%	3.1%	1.5%	0.0%	0.0%	2.2%	3.5%	1.0%	0.0%	0.1%	6.4%	13.3%	4.9%	0.0%	0.1%	5.0%	10.0%	3.7%
		Total	0.1%	1.1%	6.7%	15.2%	5.6%	0.0%	0.3%	4.1%	6.2%	2.7%	0.1%	0.3%	3.3%	5.6%	1.7%	0.1%	2.1%	12.1%	24.3%	9.6%	0.1%	1.3%	8.3%	17.4%	6.6%
Bay of Plenty	2019	Te Whatu Ora	0.6%	1.8%	3.6%	7.7%	3.3%	0.9%	0.8%	2.5%	5.1%	2.2%	0.0%	0.3%	1.0%	2.5%	0.8%	0.3%	1.9%	4.9%	9.5%	4.1%	0.4%	1.7%	4.1%	8.2%	3.5%
		NGO	0.2%	1.5%	4.0%	6.9%	3.1%	0.0%	0.8%	1.5%	4.4%	1.5%	0.0%	0.3%	0.1%	0.8%	0.3%	0.0%	0.6%	1.8%	3.1%	1.4%	0.1%	0.9%	2.6%	4.5%	1.9%
		Total	0.8%	3.3%	7.6%	14.6%	6.4%	0.9%	1.5%	4.0%	9.5%	3.7%	0.0%	0.7%	1.1%	3.3%	1.0%	0.4%	2.4%	6.7%	12.6%	5.5%	0.5%	2.6%	6.6%	12.7%	5.4%
	2021	Te Whatu Ora	0.3%	1.5%	4.1%	6.7%	3.1%	0.2%	1.1%	2.0%	4.2%	1.8%	0.1%	0.1%	1.8%	2.6%	0.9%	0.4%	2.2%	5.1%	11.2%	4.6%	0.3%	1.8%	4.4%	8.5%	3.6%
		NGO	0.1%	1.4%	4.7%	6.6%	3.2%	0.0%	0.2%	1.8%	4.2%	1.4%	0.0%	0.1%	0.8%	1.1%	0.4%	0.0%	0.7%	2.2%	4.5%	1.8%	0.0%	0.9%	3.1%	5.2%	2.2%
		Total	0.4%	2.9%	8.8%	13.3%	6.3%	0.2%	1.3%	3.7%	8.4%	3.2%	0.1%	0.2%	2.6%	3.8%	1.3%	0.5%	2.9%	7.3%	15.7%	6.3%	0.4%	2.7%	7.5%	13.7%	5.8%
Tairāwhiti	2019	Te Whatu Ora	0.4%	1.8%	2.9%	5.1%	2.5%	0.0%	0.0%	1.8%	5.3%	1.6%	0.8%	0.0%	1.3%	5.0%	1.5%	1.0%	3.2%	4.9%	5.4%	3.7%	0.5%	2.1%	3.3%	5.1%	2.7%
		NGO	0.5%	2.9%	5.6%	9.8%	4.6%	0.0%	0.0%	2.7%	8.4%	2.6%	0.0%	0.0%	2.5%	1.7%	0.9%	0.8%	3.5%	4.6%	7.3%	4.1%	0.6%	2.9%	5.1%	8.9%	4.3%
		Total	0.9%	4.7%	8.5%	14.9%	7.1%	0.0%	0.0%	4.5%	13.7%	4.2%	0.8%	0.0%	3.8%	6.7%	2.4%	1.9%	6.7%	9.5%	12.7%	7.7%	1.1%	5.0%	8.4%	14.0%	7.0%
	2021	Te Whatu Ora	0.5%	1.7%	3.1%	6.6%	2.8%	1.0%	0.0%	1.8%	2.9%	1.4%	0.0%	0.0%	2.5%	4.3%	1.3%	1.2%	3.1%	6.5%	6.8%	4.4%	0.6%	2.0%	3.9%	6.5%	3.2%
		NGO	0.3%	2.0%	4.0%	8.0%	3.4%	1.0%	0.8%	1.8%	1.0%	1.1%	0.0%	0.0%	2.5%	2.9%	1.1%	0.4%	2.6%	5.6%	6.7%	3.9%	0.3%	2.3%	4.3%	7.3%	3.4%
		Total	0.7%	3.8%	7.0%	14.6%	6.3%	2.0%	0.8%	3.6%	3.8%	2.5%	0.0%	0.0%	5.0%	7.1%	2.4%	1.6%	5.7%	12.1%	13.6%	8.3%	1.0%	4.1%	8.2%	13.7%	6.6%
Taranaki	2019	Te Whatu Ora	0.1%	0.4%	2.6%	7.4%	2.5%	0.0%	2.3%	0.6%	4.5%	2.0%	0.2%	0.2%	0.0%	2.9%	0.6%	0.1%	1.4%	3.3%	8.5%	3.2%	0.1%	1.0%	2.9%	7.8%	2.8%
		NGO	0.0%	0.0%	0.2%	2.4%	0.6%	0.0%	0.0%	0.0%	1.0%	0.3%	0.0%	0.0%	0.0%	0.3%	0.1%	0.0%	0.0%	0.1%	1.1%	0.3%	0.0%	0.0%	0.2%	1.5%	0.4%
		Total	0.2%	0.5%	2.8%	9.7%	3.1%	0.0%	2.3%	0.6%	5.5%	2.3%	0.2%	0.2%	0.0%	3.2%	0.7%	0.1%	1.4%	3.5%	9.6%	3.5%	0.1%	1.0%	3.1%	9.2%	3.2%
	2021	Te Whatu Ora	0.2%	0.6%	2.6%	6.9%	2.5%	0.0%	1.0%	1.5%	9.7%	2.9%	0.1%	0.2%	1.2%	2.7%	0.8%	0.1%	0.6%	3.1%	8.5%	2.9%	0.1%	0.6%	2.8%	7.7%	2.6%
		NGO	0.0%	0.0%	0.2%	1.0%	0.3%	0.0%	0.0%	0.0%	1.2%	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.9%	0.2%	0.0%	0.0%	0.1%	0.9%	0.2%
		Total	0.2%	0.6%	2.8%	7.8%	2.7%	0.0%	1.0%	1.5%	10.9%	3.2%	0.1%	0.2%	1.2%	2.7%	0.8%	0.1%	0.6%	3.2%	9.4%	3.2%	0.1%	0.6%	2.9%	8.6%	2.9%
Regional Total	2019	Te Whatu Ora	0.3%	1.4%	2.8%	6.3%	2.6%	0.2%	0.9%	2.0%	4.0%	1.7%	0.1%	0.2%	0.7%	2.3%	0.7%	0.4%	2.1%	4.3%	8.0%	3.7%	0.3%	1.6%	3.3%	6.7%	2.9%
		NGO	0.2%	1.5%	4.0%	7.7%	3.2%	0.6%	1.2%	2.6%	4.6%	2.2%	0.0%	0.4%	0.8%	2.0%	0.7%	0.2%	1.6%	3.3%	5.2%	2.6%	0.2%	1.4%	3.4%	5.9%	2.7%
		Total	0.6%	2.9%	6.8%	14.0%	5.8%	0.9%	2.1%	4.7%	8.6%	4.0%	0.1%	0.6%	1.5%	4.3%	1.3%	0.6%	3.7%	7.6%	13.1%	6.3%	0.5%	3.0%	6.69%	12.5%	5.6%
	2021	Te Whatu Ora	0.2%	1.0%	2.7%	5.8%	2.4%	0.1%	0.6%	1.6%	3.6%	1.4%	0.1%	0.2%	1.0%	2.2%	0.7%	0.3%	1.8%	4.5%	8.9%	3.9%	0.2%	1.3%	3.4%	6.9%	2.9%
		NGO	0.1%	1.3%	3.8%	6.6%	2.9%	0.2%	0.9%	2.2%	3.8%	1.7%	0.0%	0.3%	1.1%	1.7%	0.6%	0.1%	1.3%	3.5%	6.0%	2.7%	0.1%	1.2%	3.4%	5.9%	2.6%
		Total	0.3%	2.3%	6.5%	12.4%	5.3%	0.3%	1.6%	3.8%	7.4%	3.2%	0.1%	0.5%	2.1%	3.9%	1.3%	0.4%	3.1%	7.9%	14.9%	6.6%	0.3%	2.4%	6.7%	12.7%	5.4%

Table 7. Central Region 0-19 yrs. Service User Access Rates by Area, Ethnicity & Age Group (yrs.) (2019 & 2021)

Central Region	Year	Service Type	Māori					Pacific					Asian					Other					Total				
			0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19
Hawke's Bay	2019	Te Whatu Ora	0.1%	1.2%	3.9%	8.4%	3.2%	0.0%	1.1%	2.1%	3.9%	1.7%	0.1%	0.2%	0.2%	1.0%	0.3%	0.0%	1.7%	3.8%	8.1%	3.5%	0.1%	1.3%	3.5%	7.6%	3.1%
		NGO	0.0%	0.0%	0.3%	2.1%	0.5%	0.0%	0.0%	0.0%	1.3%	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%	0.8%	0.3%	0.0%	0.0%	0.2%	1.3%	0.4%
		Total	0.1%	1.2%	4.1%	10.5%	3.8%	0.0%	1.1%	2.1%	5.2%	2.0%	0.1%	0.2%	0.2%	1.0%	0.3%	0.0%	1.7%	3.9%	8.9%	3.8%	0.1%	1.3%	3.7%	8.9%	3.5%
	2021	Te Whatu Ora	0.2%	0.9%	3.0%	6.6%	2.6%	0.1%	0.2%	1.4%	3.5%	1.2%	0.0%	0.0%	0.2%	3.1%	0.7%	0.1%	1.2%	3.1%	6.8%	2.9%	0.1%	0.9%	2.8%	6.3%	2.5%
		NGO	0.0%	0.0%	0.2%	1.3%	0.4%	0.0%	0.0%	0.1%	0.8%	0.2%	0.0%	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.1%	0.8%	0.2%	0.0%	0.0%	0.1%	0.9%	0.3%
		Total	0.2%	0.9%	3.2%	7.8%	2.9%	0.1%	0.2%	1.6%	4.4%	1.4%	0.0%	0.0%	0.3%	3.3%	0.7%	0.1%	1.2%	3.2%	7.5%	3.1%	0.1%	0.9%	2.9%	7.2%	2.8%
MidCentral	2019	Te Whatu Ora	0.1%	1.8%	3.8%	6.0%	2.9%	0.4%	0.6%	0.8%	5.8%	1.8%	0.1%	0.4%	1.1%	1.7%	0.8%	0.3%	2.5%	5.0%	7.0%	3.9%	0.2%	1.9%	4.1%	6.1%	3.1%
		NGO	0.0%	0.2%	1.7%	4.1%	1.4%	0.0%	0.0%	3.1%	6.5%	2.2%	0.0%	0.0%	0.5%	0.7%	0.3%	0.0%	0.1%	0.9%	2.7%	1.0%	0.0%	0.1%	1.3%	3.1%	1.1%
		Total	0.1%	2.0%	5.5%	10.1%	4.3%	0.4%	0.6%	3.9%	12.3%	4.0%	0.1%	0.4%	1.6%	2.4%	1.0%	0.3%	2.6%	6.0%	9.7%	4.9%	0.2%	2.1%	5.4%	9.2%	4.3%
	2021	Te Whatu Ora	0.3%	1.4%	3.3%	8.6%	3.3%	0.2%	0.6%	2.2%	5.4%	2.0%	0.0%	0.2%	1.6%	2.1%	0.9%	0.1%	1.9%	5.6%	8.4%	4.2%	0.1%	1.5%	4.3%	7.7%	3.5%
		NGO	0.0%	0.0%	0.8%	3.8%	1.1%	0.0%	0.0%	0.4%	1.9%	0.5%	0.0%	0.0%	0.3%	0.5%	0.2%	0.0%	0.1%	0.9%	2.0%	0.8%	0.0%	0.1%	0.8%	2.5%	0.8%
		Total	0.3%	1.5%	4.2%	12.3%	4.4%	0.2%	0.6%	2.6%	7.2%	2.5%	0.0%	0.2%	1.9%	2.6%	1.0%	0.1%	2.0%	6.5%	10.5%	5.0%	0.1%	1.6%	5.1%	10.2%	4.3%
Whanganui	2019	Te Whatu Ora	0.4%	1.6%	6.3%	11.0%	4.5%	0.5%	0.0%	1.5%	7.7%	2.0%	0.8%	0.6%	2.5%	2.5%	1.5%	0.9%	3.3%	7.0%	11.6%	5.9%	0.6%	2.2%	6.0%	10.4%	4.8%
		NGO	0.0%	0.2%	1.1%	2.5%	0.9%	0.0%	0.0%	0.0%	1.3%	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.6%	1.3%	1.7%	0.9%	0.0%	0.3%	1.1%	1.9%	0.8%
		Total	0.4%	1.8%	7.3%	13.5%	5.4%	0.5%	0.0%	1.5%	9.0%	2.3%	0.8%	0.6%	2.5%	2.5%	1.5%	0.9%	3.9%	8.3%	13.2%	6.8%	0.6%	2.6%	7.1%	12.3%	5.6%
	2021	Te Whatu Ora	0.5%	1.3%	4.7%	12.0%	4.2%	0.5%	0.5%	0.9%	4.4%	1.4%	0.7%	1.4%	1.2%	2.1%	1.3%	1.1%	3.3%	5.5%	12.6%	5.7%	0.8%	2.1%	4.8%	11.4%	4.6%
		NGO	0.0%	0.3%	1.2%	2.2%	0.9%	0.0%	0.0%	0.5%	1.1%	0.4%	0.0%	0.0%	0.0%	1.1%	0.2%	0.0%	0.5%	1.5%	2.2%	1.1%	0.0%	0.4%	1.3%	2.1%	0.9%
		Total	0.5%	1.6%	5.9%	14.3%	5.1%	0.5%	0.5%	1.4%	5.6%	1.8%	0.7%	1.4%	1.2%	3.2%	1.5%	1.1%	3.8%	7.0%	14.8%	6.7%	0.8%	2.5%	6.1%	13.5%	5.5%
Hutt	2019	Te Whatu Ora	0.4%	2.5%	4.9%	8.3%	3.9%	0.0%	0.5%	2.4%	3.4%	1.6%	0.0%	0.8%	1.9%	2.0%	1.0%	0.3%	2.8%	5.7%	8.2%	4.3%	0.2%	2.1%	4.7%	6.8%	3.4%
		NGO	0.0%	0.2%	2.4%	3.8%	1.5%	0.0%	0.1%	0.4%	1.7%	0.6%	0.0%	0.0%	0.2%	0.4%	0.1%	0.0%	0.1%	0.6%	1.9%	0.7%	0.0%	0.1%	1.0%	2.2%	0.8%
		Total	0.4%	2.7%	7.3%	12.2%	5.4%	0.0%	0.6%	2.8%	5.0%	2.2%	0.0%	0.8%	2.1%	2.4%	1.1%	0.3%	2.9%	6.3%	10.0%	5.0%	0.2%	2.3%	5.7%	9.0%	4.2%
	2021	Te Whatu Ora	0.4%	1.9%	3.5%	7.9%	3.3%	0.1%	1.0%	1.8%	4.3%	1.8%	0.1%	0.6%	1.4%	2.1%	0.9%	0.3%	2.3%	5.4%	9.5%	4.5%	0.3%	1.7%	3.9%	7.5%	3.2%
		NGO	0.0%	0.1%	1.9%	3.5%	1.3%	0.0%	0.2%	0.6%	1.0%	0.5%	0.0%	0.0%	0.3%	0.4%	0.1%	0.0%	0.2%	0.8%	2.6%	1.0%	0.0%	0.1%	1.0%	2.4%	0.9%
		Total	0.4%	1.9%	5.4%	11.4%	4.6%	0.1%	1.1%	2.4%	5.3%	2.3%	0.1%	0.6%	1.7%	2.5%	1.0%	0.3%	2.5%	6.2%	12.2%	5.4%	0.3%	1.9%	4.9%	9.9%	4.1%
Capital & Coast	2019	Te Whatu Ora	0.2%	3.0%	5.4%	8.3%	4.3%	0.2%	0.9%	2.2%	3.8%	1.8%	0.1%	0.8%	1.5%	2.9%	1.2%	0.2%	2.7%	4.8%	6.6%	3.9%	0.2%	2.2%	4.1%	6.0%	3.3%
		NGO	0.1%	0.3%	4.0%	2.9%	1.8%	0.0%	0.0%	3.4%	1.5%	1.2%	0.0%	0.0%	0.1%	0.2%	0.1%	0.0%	0.1%	0.4%	1.1%	0.4%	0.0%	0.1%	1.3%	1.3%	0.7%
		Total	0.3%	3.3%	9.4%	11.2%	6.1%	0.2%	0.9%	5.5%	5.2%	3.1%	0.1%	0.9%	1.6%	3.1%	1.3%	0.2%	2.8%	5.1%	7.7%	4.3%	0.2%	2.3%	5.4%	7.2%	4.0%
	2021	Te Whatu Ora	0.0%	2.0%	3.9%	9.3%	3.8%	0.1%	1.0%	2.1%	3.7%	1.8%	0.0%	0.4%	1.1%	3.8%	1.2%	0.1%	1.9%	4.2%	8.5%	4.2%	0.1%	1.5%	3.5%	7.4%	3.3%
		NGO	0.0%	0.3%	3.6%	2.7%	1.7%	0.0%	0.2%	1.9%	1.5%	0.9%	0.0%	0.0%	0.1%	0.2%	0.1%	0.0%	0.1%	0.6%	1.1%	0.5%	0.0%	0.1%	1.2%	1.3%	0.7%
		Total	0.0%	2.3%	7.5%	12.0%	5.5%	0.1%	1.2%	4.0%	5.2%	2.8%	0.0%	0.5%	1.2%	4.1%	1.3%	0.1%	2.0%	4.8%	9.6%	4.8%	0.1%	1.7%	4.7%	8.7%	4.1%
Wairarapa	2019	Te Whatu Ora	0.1%	1.1%	2.9%	8.8%	3.1%	0.0%	1.0%	3.6%	6.0%	2.7%	0.0%	0.0%	0.9%	3.5%	0.9%	0.1%	1.7%	4.5%	8.9%	3.8%	0.1%	1.4%	3.8%	8.5%	3.4%
		NGO	0.0%	0.1%	2.2%	5.1%	1.8%	0.0%	0.0%	0.9%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.6%	0.8%	2.8%	1.1%	0.0%	0.4%	1.2%	3.4%	1.2%
		Total	0.1%	1.2%	5.1%	13.9%	4.8%	0.0%	1.0%	4.5%	6.0%	2.9%	0.0%	0.0%	0.9%	3.5%	0.9%	0.1%	2.3%	5.3%	11.8%	4.8%	0.1%	1.8%	5.0%	11.9%	4.6%
	2021	Te Whatu Ora	0.0%	2.3%	4.0%	7.5%	3.4%	0.0%	2.7%	2.5%	4.8%	2.6%	0.0%	1.5%	2.9%	7.4%	2.4%	0.1%	1.3%	5.0%	9.8%	4.0%	0.1%	1.7%	4.5%	8.7%	3.7%
		NGO	0.0%	0.4%	2.9%	5.9%	2.2%	0.0%	0.0%	0.8%	3.8%	1.2%	0.0%	1.5%	1.9%	1.1%	1.0%	0.0%	0.7%	2.0%	3.3%	1.5%	0.0%	0.6%	2.2%	4.0%	1.7%
		Total	0.0%	2.7%	7.0%	13.4%	5.6%	0.0%	2.7%	3.3%	8.6%	3.7%	0.0%	1.5%	2.9%	7.4%	2.4%	0.1%	1.9%	7.0%	13.0%	5.5%	0.1%	2.2%	6.8%	12.7%	5.3%
Regional Total	2019	Te Whatu Ora	0.2%	1.9%	4.5%	8.1%	3.6%	0.1%	0.8%	2.0%	4.1%	1.8%	0.1%	0.7%	1.4%	2.3%	1.0%	0.2%	2.5%	4.9%	7.6%	4.0%	0.2%	1.9%	4.2%	6.8%	3.3%
		NGO	0.0%	0.1%	1.8%	3.2%	1.2%	0.0%	0.0%	1.9%	2.0%	1.0%	0.0%	0.0%	0.2%	0.3%	0.1%	0.0%	0.1%	0.6%	1.6%	0.6%	0.0%	0.1%	1.0%	1.9%	0.8%
		Total	0.2%	2.1%	6.3%	11.3%	4.8%	0.1%	0.8%	4.0%	6.1%	2.8%	0.1%	0.7%	1.6%	2.6%	1.1%	0.2%	2.6%	5.5%	9.2%	4.7%	0.20%	2.06%	5.20%	8.75%	4.1%
	2021	Te Whatu Ora	0.2%	1.5%	3.5%	8.3%	3.3%	0.1%	0.8%	1.9%	4.1%	1.8%	0.1%	0.4%	1.2%	3.1%	1.0%	0.2%	1.9%	4.6%	8.7%	4.1%	0.2%	1.5%	3.7%	7.6%	3.3%
		NGO	0.0%	0.1%	1.5%	2.8%	1.1%	0.0%	0.1%	1.0%	1.4%	0.6%	0.0%	0.0%	0.2%	0.4%	0.1%	0.0%	0.2%	0.7%	1.6%	0.7%	0.0%	0.1%	0.9%	1.8%	0.7%
		Total	0.2%	1.6%	5.0%	11.1%	4.4%	0.1%	1.0%	2.9%	5.5%	2.4%	0.1%	0.5%	1.4%	3.5%	1.2%	0.2%	2.1%	5.3%	10.3%	4.8%	0.18%	1.62%	4.64%	9.43%	4.0%



Table 8. Southern Region 0-19 yrs Service User Access Rates by Area, Ethnicity & Age Group (yrs) (2019 & 2021)

Central Region	Year	Service Type	Māori					Pacific					Asian					Other					Total				
			0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19
Nelson Marlborough	2019	Te Whatu Ora	0.2%	1.6%	4.5%	8.3%	3.5%	0.4%	0.6%	3.5%	3.2%	1.9%	0.0%	0.3%	1.5%	3.1%	1.1%	0.1%	1.8%	4.8%	9.5%	4.3%	0.1%	1.6%	4.5%	8.7%	3.8%
		NGO	0.1%	0.8%	2.7%	5.9%	2.3%	0.0%	0.3%	0.6%	0.8%	0.4%	0.0%	0.0%	0.4%	1.5%	0.4%	0.0%	0.2%	1.0%	3.6%	1.2%	0.0%	0.3%	1.2%	3.8%	1.4%
		Total	0.3%	2.4%	7.1%	14.3%	5.8%	0.4%	0.9%	4.2%	4.0%	2.3%	0.0%	0.3%	1.9%	4.6%	1.5%	0.1%	2.0%	5.8%	13.0%	5.5%	0.1%	1.9%	5.8%	12.5%	5.2%
	2021	Te Whatu Ora	0.4%	1.6%	6.0%	8.6%	4.1%	0.0%	0.6%	2.8%	5.6%	2.2%	0.1%	0.4%	1.7%	2.9%	1.1%	0.4%	1.8%	5.5%	10.5%	4.8%	0.4%	1.6%	5.3%	9.4%	4.3%
		NGO	0.1%	0.4%	3.0%	5.2%	2.1%	0.0%	0.0%	0.6%	3.7%	1.0%	0.0%	0.0%	0.7%	0.9%	0.3%	0.0%	0.4%	1.3%	3.8%	1.4%	0.0%	0.3%	1.6%	3.9%	1.5%
		Total	0.5%	2.0%	9.0%	13.8%	6.2%	0.0%	0.6%	3.3%	9.3%	3.1%	0.1%	0.4%	2.4%	3.8%	1.5%	0.4%	2.2%	6.9%	14.3%	6.2%	0.4%	2.0%	6.9%	13.4%	5.8%
West Coast	2019	Te Whatu Ora	0.0%	3.3%	5.3%	11.4%	4.8%	0.0%	7.5%	8.6%	5.0%	5.8%	0.0%	1.3%	1.4%	2.9%	1.1%	0.3%	4.4%	4.8%	9.4%	4.7%	0.2%	3.9%	4.8%	9.6%	4.6%
		NGO	0.3%	1.0%	1.1%	2.5%	1.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.4%	0.0%	0.4%	0.5%	1.1%	1.6%	2.5%	1.4%	0.4%	1.0%	1.5%	2.4%	1.3%
		Total	0.3%	4.3%	6.3%	13.9%	6.0%	0.0%	7.5%	8.6%	5.0%	5.8%	0.0%	1.3%	2.9%	2.9%	1.5%	0.8%	5.5%	6.4%	11.9%	6.2%	0.6%	4.9%	6.3%	11.9%	5.9%
	2021	Te Whatu Ora	0.2%	2.4%	4.9%	9.2%	4.0%	0.0%	2.5%	2.5%	4.0%	2.4%	0.0%	0.0%	1.2%	2.9%	0.6%	0.0%	2.1%	5.0%	10.0%	4.3%	0.1%	2.1%	4.6%	9.5%	4.0%
		NGO	0.0%	0.5%	1.6%	4.9%	1.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.9%	0.3%	0.2%	0.9%	2.3%	3.5%	1.7%	0.1%	0.7%	2.0%	3.7%	1.6%
		Total	0.2%	2.9%	6.5%	14.1%	5.7%	0.0%	2.5%	2.5%	4.0%	2.4%	0.0%	0.0%	1.2%	5.7%	0.9%	0.2%	3.0%	7.2%	13.5%	6.0%	0.2%	2.8%	6.6%	13.2%	5.6%
Canterbury	2019	Te Whatu Ora	0.2%	2.8%	5.4%	9.5%	4.3%	0.1%	1.1%	2.5%	4.0%	1.8%	0.1%	0.2%	0.9%	1.6%	0.6%	0.1%	2.5%	4.4%	6.5%	3.6%	0.1%	2.1%	4.0%	6.1%	3.1%
		NGO	0.6%	0.4%	2.2%	6.9%	2.4%	0.4%	0.1%	0.8%	2.0%	0.8%	0.1%	0.0%	0.2%	1.2%	0.3%	0.2%	0.1%	1.3%	4.4%	1.6%	0.3%	0.1%	1.3%	4.2%	1.5%
		Total	0.7%	3.3%	7.6%	16.4%	6.7%	0.5%	1.1%	3.2%	6.0%	2.6%	0.1%	0.3%	1.1%	2.8%	1.0%	0.4%	2.6%	5.7%	10.9%	5.2%	0.4%	2.3%	5.3%	10.3%	4.7%
	2021	Te Whatu Ora	0.1%	2.9%	5.6%	8.7%	4.2%	0.2%	0.7%	2.0%	4.2%	1.7%	0.0%	0.4%	1.1%	2.3%	0.9%	0.1%	2.5%	4.7%	7.0%	3.8%	0.1%	2.1%	4.2%	6.4%	3.3%
		NGO	0.3%	0.3%	1.9%	6.1%	2.0%	0.2%	0.2%	0.5%	1.9%	0.7%	0.0%	0.1%	0.3%	1.4%	0.4%	0.2%	0.1%	1.4%	4.6%	1.7%	0.2%	0.2%	1.3%	4.3%	1.5%
		Total	0.4%	3.2%	7.4%	14.8%	6.2%	0.3%	0.9%	2.5%	6.1%	2.3%	0.1%	0.5%	1.4%	3.7%	1.2%	0.3%	2.6%	6.0%	11.6%	5.5%	0.3%	2.3%	5.5%	10.7%	4.8%
South Canterbury	2019	Te Whatu Ora	0.2%	2.9%	6.0%	9.3%	4.5%	0.0%	3.2%	2.4%	7.5%	3.0%	0.0%	0.5%	0.0%	1.5%	0.4%	0.1%	2.9%	5.4%	9.2%	4.5%	0.1%	2.8%	5.3%	8.7%	4.2%
		NGO	0.0%	0.0%	2.9%	7.2%	2.5%	0.0%	0.0%	1.2%	7.5%	1.8%	0.0%	0.0%	0.5%	0.5%	0.2%	0.0%	0.1%	2.4%	7.1%	2.4%	0.0%	0.1%	2.4%	6.7%	2.2%
		Total	0.2%	2.9%	8.9%	16.6%	7.0%	0.0%	3.2%	3.5%	15.0%	4.8%	0.0%	0.5%	0.5%	2.0%	0.7%	0.1%	2.9%	8.1%	16.2%	6.9%	0.1%	2.8%	7.7%	15.4%	6.5%
	2021	Te Whatu Ora	0.3%	4.4%	5.4%	9.7%	4.9%	0.0%	3.0%	3.3%	5.6%	2.9%	0.0%	0.0%	2.4%	2.2%	1.0%	0.1%	2.7%	6.2%	11.7%	5.2%	0.1%	2.8%	5.7%	10.5%	4.8%
		NGO	0.0%	0.0%	2.5%	8.1%	2.6%	0.0%	0.0%	0.8%	2.2%	0.7%	0.0%	0.0%	0.5%	1.7%	0.5%	0.0%	0.0%	3.1%	9.0%	3.0%	0.0%	0.0%	2.7%	8.2%	2.6%
		Total	0.3%	4.4%	7.8%	17.7%	7.5%	0.0%	3.0%	4.2%	7.8%	3.5%	0.0%	0.0%	2.9%	3.9%	1.5%	0.1%	2.7%	9.3%	20.8%	8.2%	0.1%	2.8%	8.4%	18.6%	7.4%
Southern	2019	Te Whatu Ora	0.08%	2.10%	4.14%	6.51%	3.25%	0.00%	0.88%	3.14%	6.32%	2.58%	0.0%	0.2%	0.7%	1.9%	0.8%	0.0%	0.6%	1.1%	1.4%	0.8%	0.1%	1.8%	3.9%	5.9%	3.1%
		NGO	0.11%	1.32%	3.42%	5.42%	2.60%	0.00%	0.88%	1.57%	3.29%	1.44%	0.0%	0.3%	0.8%	1.3%	0.7%	0.0%	0.0%	0.5%	1.1%	0.4%	0.0%	1.3%	3.1%	5.1%	2.5%
		Total	0.20%	3.43%	7.56%	11.93%	5.85%	0.00%	1.75%	4.71%	9.61%	4.01%	0.0%	0.5%	1.6%	3.2%	1.5%	0.0%	0.6%	1.6%	2.5%	1.3%	0.1%	3.0%	7.0%	11.0%	5.6%
	2021	Te Whatu Ora	0.1%	0.8%	3.8%	6.6%	2.9%	0.1%	0.6%	1.8%	3.8%	1.6%	0.0%	0.2%	1.0%	1.8%	0.8%	0.1%	0.9%	3.1%	6.8%	3.0%	0.1%	0.8%	3.1%	6.1%	2.7%
		NGO	0.2%	1.3%	3.6%	6.0%	2.9%	0.0%	1.2%	2.4%	3.2%	1.7%	0.0%	0.0%	0.5%	1.2%	0.5%	0.0%	1.1%	3.5%	6.1%	2.9%	0.0%	1.0%	3.3%	5.5%	2.6%
		Total	0.2%	2.1%	7.5%	12.6%	5.8%	0.1%	1.8%	4.3%	7.0%	3.2%	0.0%	0.2%	1.5%	2.9%	1.3%	0.1%	2.0%	6.6%	12.9%	5.9%	0.1%	1.9%	6.3%	11.6%	5.4%
Regional Total	2019	Te Whatu Ora	0.1%	2.4%	4.9%	8.4%	3.9%	0.1%	1.1%	2.8%	4.7%	2.1%	0.0%	0.3%	0.9%	1.8%	0.7%	0.1%	2.3%	4.5%	7.0%	3.7%	0.1%	2.0%	4.1%	6.6%	3.3%
		NGO	0.3%	0.8%	2.7%	6.1%	2.4%	0.2%	0.3%	1.0%	2.4%	0.9%	0.0%	0.1%	0.4%	1.2%	0.4%	0.1%	0.5%	1.9%	4.8%	2.0%	0.2%	0.5%	1.9%	4.5%	1.8%
		Total	0.5%	3.2%	7.6%	14.5%	6.3%	0.3%	1.4%	3.8%	7.1%	3.0%	0.1%	0.3%	1.3%	3.1%	1.1%	0.3%	2.8%	6.4%	11.8%	5.7%	0.3%	2.6%	6.0%	11.1%	5.1%
	2021	Te Whatu Ora	0.2%	2.1%	5.1%	8.1%	3.8%	0.1%	0.8%	2.1%	4.3%	1.7%	0.0%	0.4%	1.1%	2.2%	0.9%	0.1%	1.9%	4.5%	7.7%	3.8%	0.1%	1.7%	4.1%	7.0%	3.3%
		NGO	0.2%	0.6%	2.6%	6.0%	2.3%	0.1%	0.4%	1.0%	2.4%	1.0%	0.0%	0.0%	0.4%	1.3%	0.4%	0.1%	0.5%	2.1%	5.2%	2.1%	0.1%	0.4%	2.0%	4.8%	1.9%
		Total	0.4%	2.7%	7.7%	14.1%	6.1%	0.2%	1.2%	3.1%	6.7%	2.7%	0.1%	0.4%	1.5%	3.5%	1.3%	0.2%	2.4%	6.6%	12.8%	5.9%	0.2%	2.1%	6.1%	11.7%	5.2%

Table 8. National 0-19 yrs Service User Access Rates by Area, Ethnicity & Age Group (yrs) (2019 & 2021)

	Year	Service Type	Māori					Pacific					Asian					Other					Total				
			0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19	0-4	5-9	10-14	15-19	0-19
National Total	2019	Te Whatu Ora	0.4%	2.1%	4.1%	8.0%	3.5%	0.3%	1.1%	2.2%	4.1%	2.0%	0.2%	0.7%	1.4%	2.5%	1.1%	0.4%	2.6%	4.7%	7.6%	4.0%	0.4%	2.0%	3.8%	6.5%	3.2%
		NGO	0.2%	0.7%	2.6%	5.6%	2.1%	0.1%	0.2%	1.0%	2.3%	0.9%	0.0%	0.1%	0.3%	0.7%	0.2%	0.1%	0.6%	1.5%	3.2%	1.4%	0.1%	0.5%	1.5%	3.3%	1.4%
		Total	0.5%	2.7%	6.7%	13.6%	5.7%	0.4%	1.3%	3.2%	6.4%	2.8%	0.3%	0.8%	1.7%	3.2%	1.4%	0.5%	3.1%	6.2%	10.8%	5.4%	0.5%	2.4%	5.4%	9.9%	4.6%
	2021	Te Whatu Ora	0.4%	1.6%	3.7%	7.5%	3.2%	0.4%	0.9%	1.9%	3.8%	1.7%	0.2%	0.6%	1.3%	3.0%	1.2%	0.4%	2.1%	4.8%	8.4%	4.2%	0.3%	1.6%	3.7%	6.9%	3.2%
		NGO	0.1%	0.6%	2.3%	5.0%	1.9%	0.0%	0.2%	0.8%	1.8%	0.7%	0.0%	0.1%	0.3%	0.8%	0.2%	0.1%	0.5%	1.6%	3.5%	1.5%	0.1%	0.4%	1.5%	3.3%	1.3%
		Total	0.4%	2.2%	6.0%	12.5%	5.2%	0.4%	1.0%	2.6%	5.6%	2.4%	0.2%	0.6%	1.6%	3.8%	1.4%	0.4%	2.6%	6.4%	11.9%	5.7%	0.4%	2.0%	5.2%	10.2%	4.5%

## Appendix D: Contracted Services

Table 1. 2022 Youth Primary Mental Health Contracted Services = 20		
Region	Area	Service
Northern	Auckland	Procare Health
		Youthline Auckland Charitable Trust
Midland	Bay of Plenty	Eastern Bay Primary Health Alliance
		Nga Mataapuna Oranga: Te Manu Toroa
		Western Bay of Plenty Primary Health Organisation
	Tairāwhiti	Midlands Regional Health Network Charitable Trust
	Taranaki	Tui Ora
Central	Hawke's Bay	Health Hawke's Bay
		Totara Health
	MidCentral	THINK Hauora
	Whanganui	National Hauora Coalition
		Te Oranganui Trust
		Whanganui Regional Health Network
	Hutt Valley	Hutt Valley Youth Health Trust
		Te Awakairangi Health Network
	Capital & Coast	Ora Toa PHO
		Te Whanganui-a-Tara Youth Development
		Tu Ora Compass Health (Capital & Coast & Wairarapa)
Southern	Canterbury	St John of God Hauora Trust
	Southern	Adventure Development

**Table 2. 2022 Youth Forensics Contracted Services = 11**
**Te Whatu Ora Services = 9**

Region	Service
Northern	Te Tai Tokerau
	Te Toka Tumai Auckland
	Counties Manukau
Midland	Waikato
Central	Capital & Coast
Southern	Nelson Marlborough
	Waitaha Canterbury
	South Canterbury
	Southern
<b>NGO = 2</b>	
Northern	Waitemata: EMERGE Aotearoa
Midland	Waikato: Nga Ringa Awhina O Hauora Trust

**Table 3. 2022 AOD Contracted Services = 59**
**Te Whatu Ora Services = 14**

Northern	Te Tai Tokerau
	Waitemata
	Counties Manukau
Midland	Waikato
	Hauora a Toi Bay of Plenty
	Tairāwhiti
Central	Te Pae Hauora O Ruahine o Tararua MidCentral
	Whanganui
	Hutt
	Capital & Coast
	Wairarapa
Southern	Nelson Marlborough
	South Canterbury
	Southern

## 2022 AOD Contracted Services = 59

NGO = 45

Northern	Northland	Rubicon Charitable Trust Board
	Auckland	Mahitahi Trust (Auckland & Counties Manukau)
		Odyssey House Trust (Auckland & Counties Manukau)
	Counties Manukau	Raukura Hauora O Tainui Trust
		Youthline Auckland Charitable Trust
Midland	Waikato	Care NZ
		Hauora Waikato Māori Mental Health Services
		Odyssey House Trust
		Raukawa Charitable Trust
		Taumarunui Community Kokiri Trust
		Te Korowai Hauora o Hauraki
	Bay of Plenty	Get Smart Tauranga Trust
		Maketu Health & Social Services
		Nga Kakano Foundation Charitable Trust
		Nga Mataapuna Oranga: Te Manu Toroa
		Nga Mataapuna Oranga: Pirirākau Hauora Charitable Trust
		Poutiri Charitable Trust
		Rakeiwhenua Trust t/a Tuhoe Hauora
		Te Pou Oranga O Whakatohea
		Te Runanga O Ngai Te Rangī Iwi Trust
		Te Runanga O Te Whānau Charitable Trust
		Tuwharetoa Ki Kawerau Health, Education & Social Services
	Lakes	Manaaki Ora Trust
		Mental Health Solutions
Central	Hawke's Bay	Te Taiwhenua o Heretaunga Trust
	MidCentral	Best Care (Whakapai Hauora) Charitable Trust
		Raukawa Whānau Ora
		The Youth One Stop Shop
		Whaioro Trust Board
	Hutt Valley	Hutt Valley Youth Health Trust
		PACT Group
	Capital & Coast	EMERGE Aotearoa
		KYS One Stop Shop Trust
		Te Runanga o Toa Rangatira
		Te Whanganui-a-Tara Youth Development
	Wairarapa	Mental Health Solutions
Southern	Canterbury	Ashburton Community Alcohol & Drug Service
		Christchurch City Mission
		Community Wellbeing North Canterbury Trust
		Odyssey House Trust - Christchurch
		Purapura Whetu Trust
		St John of God Hauora Trust
		Steppingstone Trust
	South Canterbury	Adventure Development (South Canterbury & Southern)
	Southern	Aroha Ki Te Tamariki Charitable Trust

## Appendix E: ICAYMH/AOD Workforce Data

Table 1. Te Whatu Ora Inpatient ICAYMH Workforce by Occupation (2022/23)

Inpatient ICAYMH Workforce by Occupation (Actual FTEs, 2022/23)	Clinical Intern	Mental Health Assistant	Nurse	Occupational Therapist	Psychiatrist	Psychotherapist	Psychologist	Registrar/Senior Medical Officer	Social Worker	Other Clinical	Clinical Sub-Total	Cultural	Mental Health Support	Non-Clinical Sub-Total	Administrator	Manager	Total
Auckland	0.8	10.2	25.7	2.0	6.9	3.0	10.0	3.0	1.0	-	62.6	-	1.6	1.6	3.0	2.5	69.7
Capital & Coast	-	-	15.8	2.0	0.81	-	1.0	1.66	1.0		22.27	1.5	8.8	10.3	1.0	-	33.57
Canterbury	-	-	37.06	2.6	2.3	-	2.2	0.6	1.8	0.8	47.36	0.5	-	0.5	2.0	1.0	50.86
Total	0.8	10.2	78.56	6.6	10.01	3.0	13.2	5.26	3.8	0.8	132.23	2.0	10.4	12.4	6.0	3.5	154.13

1. Includes Consult Liaison Service.

2. Includes Child & Adolescent Day Programme.

Table 2. Te Whatu Ora Inpatient ICAYMH Vacancies by Occupation (2022/23)

Inpatient ICAYMH Vacancies by Occupation (Vacant FTEs, 2022/23)	Nurse	Occupational Therapist	Psychiatrist	Psychologist	Social Worker	Clinical Sub-Total	Mental Health Support	Non-Clinical Sub-Total	Total
Auckland	2.62	0.4	1.84	1.0		5.86	-	-	5.86
Capital & Coast	4.15	-	0.39	-	1.0	5.54	0.2	0.2	5.74
Canterbury	4.76	-	0.3	-		5.06	-	-	5.06
Total	11.53	0.4	2.53	1.0	1.0	16.46	0.2	0.2	16.66

Table 3. Te Whatu Ora Inpatient ICAYMH Workforce by Occupation &amp; Ethnicity (2022/23)

Te Whatu Ora Inpatient ICAYMH Workforce by Occupation & Ethnicity (Headcount, 2022/23)		Clinical Intern	Mental Health Assistant	Nurse	Occupational Therapist	Psychiatrist	Psychotherapist	Psychologist	Registrar/ Senior Medical Officer	Social Worker	Other Clinical	Clinical Sub-Total	Cultural	Mental Health Support	Non-Clinical Sub-Total	Administrator	Manager	Total
Māori	Auckland	-	2	4	-	1	-	-	-	-	-	7	-	1	1	-	-	8
	Capital & Coast	-	-	3	-	-	-	-	2	-	-	5	2	3	5	-	-	10
	Canterbury	-	-		-	-	-	1	-	-	-	1	1	-	1	-	-	2
	Total	-	2	7	-	1	-	1	2	-	-	13	3	4	7	-	-	20
Pacific	Auckland	-	4	6	-	-	-	-	-	-	-	10	-	-	-	-	-	10
	Capital & Coast	-	-	5	-	-	-	-	-	-	-	5	-	4	4	-	-	9
	Canterbury	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-	1
	Total	-	4	12	-	-	-	-	-	-	-	16	-	4	4	-	-	20
Asian	Auckland	-	-	7	1	1	-	3	-	-	-	12	-	-	-	1	-	13
	Capital & Coast	-	-	2	-	-	-	-	-	-	-	2	-	-	-	-	-	2
	Canterbury	-	-	5	-	1	-	-	-	-	-	6	-	-	-	-	-	6
	Total	-	-	14	1	2	-	3	-	-	-	20	-	-	-	1	-	21
NZ European	Auckland	1	-	2	-	3	3	6	-	-	-	15	-	-	-	-	-	15
	Capital & Coast	-	-	4	1	1	-	-	-	1	-	7	-	1	1	-	-	8
	Canterbury	-	-	40	3	2	-	1	1	2	-	49	-	-	-	3	1	53
	Total	1	-	46	4	6	3	7	1	3	-	71	-	1	1	3	1	76
Other	Auckland	-	-	12	2	5	1	4	5	3	3	35	-	-	-	2	-	37
	Capital & Coast	-	-	3	1	-	-	1	-	-	-	5	-	1	1	1	-	7
	Canterbury	-	-	5	-	-	-	-	-	1	-	6	-	-	-	-	-	6
	Total	-	-	20	3	5	1	5	5	4	3	46	-	1	1	3	-	50
Grand Total		1	6	99	8	14	4	16	8	7	3	166	3	10	13	7	1	187

Table 4. Te Whatu Ora Community ICAYMH/AOD Workforce by Occupation (2022/23)

Te Whatu Ora Community FTEs by Occupation (2022/23)	Alcohol & Drug Practitioner	Co-Existing Problems Clinician	Clinical Intern	Counsellor	Family Therapist	Nurse (MH, RN)	Occupational Therapist	Psychiatrist	Psychotherapist	Psychologist	Registrar/Senior Medical Officer	Social Worker	Other Clinical	Clinical Sub-Total	Cultural	Mental Health Consumer Advisor	Mental Health Support	Peer Support	Youth Worker	Other Non-Clinical	Non-Clinical Sub-Total	Administrator	Manager	Total
Northern	9.0	2.0	6.8	7.0	2.6	65.7	35.0	16.32	9.2	51.68	3.7	49.33	2.0	293.03	7.5	1.2	2.0	3.0	-	-	13.7	15.3	11.7	333.73
Northland	4.0	2.0	-	3.0	-	17.8	4.0	1.8	-	6.6	1.0	8.6	-	48.8	-	0.2	2.0	-	-	-	2.2	3.0	3.2	57.2
Waitemata	5.0	-	0.8	4.0	0.6	17.7	12.1	4.2	7.4	11.3	1.2	21.1	-	85.4	-	-	-	-	-	-	-	6.3	3.5	95.2
Auckland	-	-	-	-	-	13.2	11.1	5.95	1.8	21.88	1.5	9.6	1.0	66.03	7.5	-	-	-	-	-	7.5	5.5	-	79.03
Counties Manukau	-	-	6.0	-	2.0	17.0	7.8	4.37	-	11.9	-	10.03	1.0	92.80	-	1.0	-	3.0	-	-	4.0	0.5	5.0	102.3
Midland	3.3	2.0	-	-	2.0	32.32	14.06	11.5	0.6	30.95	1.6	33.1	5.08	136.51	2.0	-	3.6	-	-	1.0	6.6	10.0	7.3	160.41
Waikato	-	-	-	-	-	8.8	6.56	5.5	-	10.85	1.6	8.0		41.31	-	-	2.6	-	-	-	2.6	4.0	2.3	50.21
Lakes	-	-	-	-	-	2.1		2.0	-	5.2	-	3.0	0.2	12.5	-	-	-	-	-	-	-	2.0	1.0	15.5
Bay of Plenty	2.8	2.0	-	-	-	16.32	7.5	2.0	0.6	8.3	-	11.3	3.88	54.7	-	-	1.0	-	-	1.0	2.0	1.0	3.0	60.7
Tairāwhiti	0.5	-	-	-	2.0	2.0		1.0	-	3.0	-	6.0		14.5	2.0	-	-	-	-	-	2.0	2.0	1.0	19.5
Taranaki	-	-	-	-	-	3.1		1.0	-	3.6	-	4.8	1.0	13.5	-	-	-	-	-	-	-	1.0	-	14.5
Central	5.45	5.1	3.0	2.6	1.8	51.46	13.5	12.65	2.2	31.8	15.14	37.9	4.4	187.0	2.63	-	14.0	-	1.35	1.53	19.51	19.3	11.0	236.81
Hawke's Bay	1.8	-	-	1.8	1.8	5.4	1.0	1.2	-	5.0	7.1	-	-	25.1	1.0	-	1.0	-	-	-	2.0	3.0	3.0	33.1
MidCentral	-	0.5	-	-	-	8.3	3.2	1.0	-	5.4	-	8.5	1.2	28.9	-	-	-	-	-	-	-	3.6	1.0	33.5
Whanganui	2.0	3.6	-	-	-	5.4		1.4	-	-	-	4.0	0.7	17.1	-	-	-	-	1.35	0.6	1.95	2.0	1.0	22.05
Capital & Coast	1.65	-	0.8	-	-	29.56	7.4	5.85	1.4	12.2	6.64	12.1	0.5	78.1	1.63	-	12.0	-	-	0.93	14.56	6.5	4.0	103.16
Hutt	-	-	2.2	-	-	1.0	1.9	2.8	0.8	7.6	0.6	12.3	2.0	31.2	-	-	-	-	-	-		3.0	2.0	36.2
Wairarapa	-	1.0	-	0.8	-	1.8		0.4	-	1.6	-	1.0	-	6.6	-	-	1.0	-	-	-	1.00	1.2	-	8.8
Southern	1.0	-	1.0	1.0	-	57.23	16.68	19.05	1.6	36.25	0.2	35.6	6.2	175.81	4.0	-	2.4	0.2	-	1.2	7.8	22.15	10.0	215.76
Nelson Marlborough	-	-	-	1.0	-	9.63	-	2.3	-	9.4	0.2	6.3	1.9	30.73	-	-	1.0	-	-	-	1.0	3.0	1.0	35.73
West Coast	-	-	-	-	-	2.8	-	0.15	-	1.0	-	0.9	-	4.85	-	-	-	-	-	-	-	-	1.0	5.85
Canterbury	-	-	1.0	-	-	27.1	8.18	9.6	-	17.75	-	24.1	1.4	89.13	4.0	-	-	-	-	1.0	5.00	13.7	6.0	113.83
South Canterbury	1.0	-	-	-	-	-	4.9	0.6	-	0.8	-	1.5		8.8	-	-	1.40	0.2	-	0.2	1.8	0.8	-	11.4
Southern	-	-	-	-	-	17.7	3.6	6.4	1.6	7.3	-	2.8	2.90	42.3	-	-	-	-	-			4.65	2.0	48.95
Total	18.75	9.1	10.8	10.6	6.4	206.71	79.24	59.52	13.6	150.68	20.64	155.93	17.68	792.35	16.13	1.2	22.0	3.2	1.35	3.73	47.61	66.75	40.0	946.71



Table 5. Te Whatu ora Community ICAYMH/AOD Vacancies by Occupation (2022/23)

Te Whatu Ora Community Vacant FTEs by Occupation (2022/23)	Alcohol & Drug Practitioner	Family Therapist	Nurse (MH, RN)	Occupational Therapist	Psychiatrist	Psychotherapist	Psychologist	Registrar/Senior Medical Officer	Social Worker	Other Clinical	Clinical Sub- Total	Cultural	Mental Health Consumer	Mental Health Support	Other Non- Clinical	Non-Clinical Sub-Total	Admin	Manager	Total
Northern	2.5	-	23.3	5.6	8.44	2.4	13.7	-	5.47	27.07	88.48	-	0.2	2.0	-	2.2	1.4	1.0	93.08
Northland	-	-	5.0	-	3.7	-	1.0	-	-	-	9.7	-	0.2	2.0	-	2.2	-	-	11.9
Waitemata	2.5	-	9.3	4.2	2.6	2.4	9.6	-	5.0	-	35.6	-	-	-	-	-	0.4	1.0	38.0
Auckland	-	-	-	-	-	-	-	-	-	26.07	26.07	-	-	-	-	-	1.0	-	27.07
Counties Manukau	-	-	9.0	1.4	2.14	-	3.1	-	0.47	1.0	17.11	-	-	-	-	-	-	-	17.11
Midland	3.5	2.0	7.7	-	-	1.0	3.15	-	2.0	-	19.35	-	-	0.4	-	0.4	-	-	19.75
Waikato	-	-	1.6	-	-	1.0	0.85	-	2.0	-	5.45	-	-	0.4	-	0.4	-	-	5.85
Lakes	-	-	5.1	-	-	-	-	-	-	-	5.1	-	-	-	-	-	-	-	5.1
Bay of Plenty	3.0	-	-	-	-	-	0.3	-	-	-	3.3	-	-	-	-	-	-	-	3.3
Tairāwhiti	0.5	2.0	1.0	-	-	-	2.	-	-	-	5.5	-	-	-	-	-	-	-	5.5
Central	0.35	-	22.0	7.0	6.89	1.6	8.6	3.4	6.43	4.0	60.27	0.3	-	4.5	1.2	6.0	1.5	2.0	69.77
Hawke's Bay	-	-	1.0	-	1.8	-	0.6	-	1.0	-	4.4	-	-	-	-	-	-	-	4.4
MidCentral	-	-	1.0	-	1.5	-	0.5	2.8	1.0	2.0	8.8	-	-	-	-	-	-	-	8.8
Capital & Coast	0.35	-	17.0	3.3	2.89	1.6	7.3	-	3.63	1.0	37.07	0.3	-	2.0	1.2	3.5	1.5	-	42.07
Hutt	-	-	0.6	3.7	0.1	-	0.2	0.6	-	1.0	6.2	-	-	-	-	-	-	1.0	7.2
Wairarapa	-	-	2.4	-	0.6	-	-	-	0.8	-	3.8	-	-	2.5	-	2.5	-	1.0	7.3
Southern	-	-	9.04	4.3	4.2	0.3	6.97	-	3.0	0.8	28.61	1.5	0.8	-	-	2.3	0.4	-	31.31
Nelson Marlborough	-	-	2.24	-	0.8	-	0.87	-	2.0	-	5.91	-	0.5	-	-	0.5	-	-	6.41
Canterbury	-	-	1.6	1.2	2.8	-	1.6	-	-	-	7.2	1.5	-	-	-	1.5	0.4	-	9.1
South Canterbury	-	-	1.0	0.1	0.6	-	-	-	-	-	1.7	-	-	-	-	-	-	-	1.7
Southern	-	-	4.2	3.0	-	0.3	4.5	-	1.0	0.8	13.8	-	0.3	-	-	0.3	-	-	14.1
Total	6.35	2.0	62.04	16.9	19.53	5.3	32.42	3.4	16.9	31.87	196.71	1.8	1.0	6.9	1.2	10.0	3.3	3.0	213.91

Table 6. Te Whatu Ora Community ICAYMH/AOD Vacancies &gt; 3 months by Occupation (2022/23)

Te Whatu Community Vacant FTEs > 3mo by Occupation (2022/23)	Alcohol & Drug Practitioner	Counsellor	Family Therapist	Nurse (MH, RN)	Occupational Therapist	Psychiatrist	Psychotherapist	Psychologist	Registrar/Senior Medical Officer	Social Worker	Other Clinical	Clinical Sub-Total	Cultural	Mental Health Consumer	Mental Health Support	Other Non-Clinical	Non-Clinical Sub-Total	Administration	Total
Northern	2.5	1.0	-	3.0	-	3.7	-	1.0	-	0.47	26.07	37.74	-	0.2	-	-	0.2	1.0	38.94
Northland	-	-	-	1.0	-	3.7	-	1.0	-	-	-	5.7	-	0.2	-	-	0.2	-	5.9
Waitemata	2.5	1.0	-	2.0	-	-	-	-	-	-	-	5.5	-	-	-	-	-	-	5.5
Auckland	-	-	-	-	-	-	-	-	-	-	26.07	26.07	-	-	-	-	-	1.0	27.07
Counties Manukau	-	-	-	-	-	-	-	-	-	0.47	-	0.47	-	-	-	-	-	-	0.47
Midland	0.5	-	2.0	1.0	-	-	-	2.0	-	-	-	5.5	-	-	-	-	-	-	5.5
Tairāwhiti	0.5	-	2.0	1.0	-	-	-	2.0	-	-	-	5.5	-	-	-	-	-	-	5.5
Central	-	-	-	8.6	5.1	2.86	1.4	5.7	0.6	3.33	1.0	28.59	-	-	3.5	1.2	4.7	1.5	34.79
Hawke's Bay	-	-	-	-	-	-	-	-	-	1.0	-	1.0	-	-	-	-	-	-	1.0
MidCentral	-	-	-	-	-	1.0	-	1.8	-	-	-	2.8	-	-	-	-	-	-	2.8
Capital & Coast	-	-	-	8.6	2.4	1.16	1.4	3.1	-	1.53	1.0	19.19	-	-	1.0	1.2	2.2	1.5	22.89
Hutt	-	-	-	-	2.7	0.1	-	0.8	0.6	-	-	4.2	-	-	-	-	-	-	4.2
Wairarapa	-	-	-	-	-	0.6	-	-	-	0.8	-	1.4	-	-	2.5	-	2.5	-	3.9
Southern	-	-	-	5.74	3.3	3.6	1.0	6.2	-	1.0	1.0	21.84	1.0	1.5	0.2	-	2.7	-	24.54
Nelson Marlborough	-	-	-	2.24	-	0.8	-	-	-	-	-	3.04	-	0.5	-	-	0.5	-	3.54
West Coast	-	-	-	1.5	-	-	-	1.0	-	-	-	2.5	-	-	-	-	-	-	2.5
Canterbury	-	-	-	-	0.3	2.2	-	0.7	-	-	-	3.2	1.0	-	-	-	1.0	-	4.2
South Canterbury	-	-	-	1.0	2.0	0.6	-	-	-	-	-	3.6	-	-	0.2	-	0.2	-	3.8
Southern	-	-	-	1.0	1.0	-	1.0	4.5	-	1.0	1.0	9.5	-	1.0	-	-	1.0	-	10.5
Total	3.0	1.0	2.0	18.34	8.4	10.16	2.4	14.9	0.6	4.8	28.07	93.67	1.0	1.0	3.7	1.2	7.6	2.5	103.77

Table 7. Te Whatu Ora Community Māori ICAYMH/AOD Workforce by Occupation (2022/23)

Te Whatu Ora Community Māori Workforce by Occupation (Head Count 2022/23)	Alcohol & Drug Practitioner	Co-Existing Problems Clinician	Clinical Placement	Counsellor	Family Therapist	Nurse (MH, RN)	Occupational Therapist	Psychiatrist	Psychotherapist	Psychologist	Social Worker	Other Clinical	Clinical Sub- Total	Cultural	Mental Health Support	Non-Clinical Sub-Total	Administrator	Manager	Total
Northern	4	1	2	3	1	9	4	-	2	8	8	-	42	6	1	7	-	6	55
Northland	4	1	-	1	-	4	1	-	-	3	2	-	16	-	1	1	-	2	19
Waitemata	-	-	-	2	-	1	1	-	1	-	-	-	5	-	-	-	-	-	5
Auckland	-	-	1	-	-	2	1	-	1	2	-	-	7	6	-	6	-	-	13
Counties Manukau	-	-	1	-	1	2	1	-	-	3	6	-	14	-	-	-	-	4	18
Midland	-	3	-	-	-	9	1	-	-	5	11	1	30	2	2	4	3	1	38
Waikato	-	-	-	-	-	3	1	-	-	-	1	-	5	-	2	2	-	1	8
Lakes	-	-	-	-	-	1	-	-	-	3	1	-	5	-	-	-	-	-	5
Bay of Plenty	-	3	-	-	-	4	-	-	-	1	5	1	14	-	-	-	1	-	15
Tairāwhiti	-	-	-	-	-	1	-	-	-	-	3	-	4	2	-	2	1	-	7
Taranaki	-	-	-	-	-	-	-	-	-	1	1	-	2	-	-	-	1	-	3
Central	-	-	-	-	-	13	1	1	-	2	9	-	26	2	2	4	3	1	34
Hawke's Bay	-	-	-	-	-	2	-	-	-	-	2	-	4	1	-	1	-	1	6
MidCentral	-	-	-	-	-	3	-	-	-	-	3	-	6	-	-	-	-	-	6
Whanganui	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	1	-	2
Capital & Coast	-	-	-	-	-	7	1	1	-	2	-	-	11	1	2	3	-	-	14
Hutt	-	-	-	-	-	-	-	-	-	-	2	-	2	-	-	-	2	-	4
Wairarapa	-	-	-	-	-	1	-	-	-	-	1	-	2	-	-	-	-	-	2
Southern	-	-	-	-	-	7	-	-	-	2	1	-	10	5	2	7	2	-	19
Nelson Marlborough	-	-	-	-	-	2	-	-	-	-	-	-	2	-	-	-	-	-	2
West Coast	-	-	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	-	1
Canterbury	-	-	-	-	-	2	-	-	-	2	1	-	5	5	-	5	2	-	12
South Canterbury	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2	-	-	2
Southern	-	-	-	-	-	2	-	-	-	-	-	-	2	-	-	-	-	-	2
Total	4	4	2	3	1	38	6	1	2	17	29	1	108	15	7	22	8	8	146

Table 8. Te Whatu Ora Community Pacific ICAYMH/AOD Workforce by Occupation (2022/23)

Te Whatu Ora Community Pacific Workforce by Occupation (Headcount 2022/23)	Clinical Placement	Nurse (MH, RN)	Occupational Therapist	Psychiatrist	Psychologist	Social Worker	Other Clinical	Clinical Sub-Total	Cultural	Mental Health/ Community Support	Non-Clinical Sub-Total	Administrator	Total
Northern	2	9	7	1	-	4	1	24	2	-	2	1	27
Northland	-	1	-	-	-	-	-	1	-	-	-	-	1
Waitemata	-	1	-	-	-	2	-	3	-	-	-	1	4
Auckland	-	-	4	-	-	1	-	5	2	-	2	-	7
Counties Manukau	2	7	3	1	-	1	1	15	-	-	-	-	15
Midland	-	2	-	-	-	-	-	2	-	-	-	-	2
Waikato	-	1	-	-	-	-	-	1	-	-	-	-	1
Tairāwhiti	-	1	-	-	-	-	-	1	-	-	-	-	1
Central	1	2	-	-	1	1	-	5	2	7	9	2	16
Capital & Coast	-	2	-	-	1	1	-	4	2	7	9	2	15
Hutt	1	-	-	-	-	-	-	1	-	-	-	-	1
Southern	-	-	-	1	-	1	-	2	-	-	-	1	3
Canterbury	-	-	-	1	-	1	-	2	-	-	-	-	2
Southern	-	-	-	-	-	-	-	-	-	-	-	1	1
Total	3	13	7	2	1	6	1	33	4	7	11	4	48

Table 9. Te Whatu Ora Community Asian ICAYMH/AOD Workforce by Occupation (2022/23)

Te Whatu Ora Community Asian Workforce by Occupation (Headcount 2022/23)	Clinical Intern	Nurse (MH, RN)	Occupational Therapist	Psychiatrist	Psychotherapist	Psychologist	Registrar/ Senior Medical Officer	Social Worker	Other Clinical	Clinical Sub- Total	Mental Health Consumer	Non-Clinical Sub-Total	Administrator	Total
Northern	1	14	4	4	3	5	5	7	1	44	1	1	6	51
Northland	-	1	-	-	-	-	-	-	-	1	-	-	-	1
Waitemata	-	4	2	-	2	2	-	3	-	13	-	-	2	15
Auckland	-	2	1	1	1	1	1	1	1	9	-	-	3	12
Counties Manukau	1	7	1	3	-	2	4	3	-	21	1	1	1	23
Midland	-	-	2	1	-	1	1	-	-	5	-	-	-	5
Waikato	-	-	1	1	-	-	1	-	-	3	-	-	-	3
Bay of Plenty	-	-	1	-	-	1	-	-	-	2	-	-	-	2
Central	1	4	3	1	-	3	2	2	-	16	-	-	1	17
Hawke's Bay	-	-	-	-	-	1	2	-	-	3	-	-	-	3
MidCentral	-	3	1	-	-	2	-	-	-	6	-	-	-	6
Whanganui	-	1	-	-	-	-	-	-	-	1	-	-	-	1
Capital & Coast	-	-	2	-	-	-	-	1	-	3	-	-	1	4
Hutt	1	-	-	1	-	-	-	1	-	3	-	-	-	3
Southern	-	1	4	2	-	5	-	4	-	16	-	-	-	16
Nelson Marlborough	-	-	-	-	-	1	-	-	-	1	-	-	-	1
Canterbury	-	-	-	1	-	4	-	3	-	8	-	-	-	8
South Canterbury	-	-	4	-	-	-	-	1	-	5	-	-	-	5
Southern	-	1	-	1	-	-	-	-	-	2	-	-	-	2
Total	2	19	13	8	3	14	8	13	1	81	1	1	7	89

Table 10. Te Whatu Ora Community NZ European ICAYMH/AOD Workforce by Occupation (2022/23)

Te Whatu Ora Community NZ European Workforce by Occupation (Headcount, 2022/23)	Alcohol & Drug Practitioner	Co-Existing Problems Clinician	Clinical Intern	Counsellor	Family Therapist	Nurse (MH, RN)	Occupational Therapist	Psychiatrist	Psychotherapist	Psychologist	Registrar/Senior Medical Officer	Social Worker	Other Clinical	Clinical sub-Total	Mental Health/Community Support	Peer Support	Youth Worker	Other Non-Clinical	Non-Clinical Sub-Total	Administrator	Manager	Total
Northern	5	1	-	2	1	40	24	13	5	44	3	28	2	168	1	1	-	-	2	8	4	182
Northland	-	1	-	1	-	9	3	1	-	2	1	5	-	23	1	-	-	-	1	3	1	28
Waitemata	5	-	-	1	1	10	8	4	4	11	-	9	-	53	-	-	-	-	-	3	3	59
Auckland	-	-	-	-	-	10	6	5	1	22	1	10	2	57	-	-	-	-	-	2	-	59
Counties Manukau	-	-	-	-	-	11	7	3	-	9	1	4	-	35	-	1	-	-	1	-	-	36
Midland	2	-	-	-	-	21	9	2	-	11	-	18	4	67	2		-	-	2	5	5	79
Waikato	-	-	-	-	-	3	3	2	-	5	-	4	-	17	1	-	-	-	1	3	-	21
Lakes	-	-	-	-	-	2	-	-	-	1	-	1	1	5	-	-	-	-	-	1	1	7
Bay of Plenty	2	-	-	-	-	12	6	-	-	1	-	6	2	29	1	-	-	-	1	-	3	33
Tairāwhiti	-	-	-	-	-	-	-	-	-	-	-	3	-	3	-	-	-	-	-	1	1	5
Taranaki	-	-	-	-	-	4	-	-	-	4	-	4	1	13	-	-	-	-	-	-	-	13
Central	3	2	3	3	1	27	13	11	2	24	6	34	3	132	4	-	2	1	7	16	7	161
Hawke's Bay	2	-	-	2	1	4	1	1	-	2	-	4	-	17	1	-	-	-	1	4	2	24
MidCentral	-	-	-	-	-	3	4	1	-	4	1	7	2	22	-	-	-	-	-	4	1	27
Whanganui	-	1	-	-	-	4	-	-	-	-	-	3	1	9	-	-	2	1	3	1	2	15
Capital & Coast	1	-	1	-	-	14	6	6	1	9	5	9	-	52	2	-	-	-	2	3	1	58
Hutt	-	-	2	-	-	1	2	2	1	7	-	11	-	26	-	-	-	-	-	2	1	29
Wairarapa	-	1	-	1	-	1	-	1		2	-			6	1	-	-	-	1	2	-	9
Southern	1	-	2	1	-	45	15	11	2	31	1	29	7	145	2	1	-	-	3	26	13	187
Nelson Marlborough	-	-	-	1	-	6	-	-	-	7	1	5	3	23	1	-	-	-	1	2	2	28
West Coast	-	-	-	-	-	3	-	1	-	1	-	1	-	6	-	-	-	-	-	-	1	7
Canterbury		-	2	-	-	19	10	4	-	14	-	20	1	70	-	-	-	-	-	18	8	96
South Canterbury	1	-	-	-	-	-	1	-	-	-	-	1	-	3	1	1	-	-	2	1	-	6
Southern		-	-	-	-	17	4	6	2	9	-	2	3	43	-	-	-	-	-	5	2	50
Total	11	3	5	6	2	133	61	37	9	110	10	109	16	512	9	2	2	1	14	55	29	609

Table 11. Te Whatu Ora Community Other Ethnicity ICAYMH/AOD Workforce by Occupation (2022/23)

Te Whatu Oea Community Other Ethnicity Workforce by Occupation (Headcount 2022/23)	Alcohol & Drug Practitioner	Co-Existing Problems Clinician	Clinical Intern	Counsellor	Family Therapist	Nurse (MH, RN)	Occupational Therapist	Psychiatrist	Psychotherapist	Psychologist	Registrar/Senior Medical Officer	Social Worker	Other Clinical	Clinical Sub-Total	Mental Health Consumer	Mental Health Support	Peer Support	Other Non-Clinical	Non-Clinical Sub-Total	Administrator	Manager	Total
Northern	-	-	3	2	1	12	6	8	3	18	2	13	-	68	1	-	2	-	3	4	3	78
Northland	-	-	-	1	-	4	-	3	-	2	-	2	-	12	1	-	-	-	1	-	1	14
Waitemata	-	-	1	1	-	4	3	1	3	3	1	9	-	26	-	-	-	-	-	3	1	30
Auckland	-	-	-	-	-	-	3	1	-	8	-	1	-	13	-	-	-	-	-	1	-	14
Counties Manukau	-	-	2	-	1	4	-	3	-	5	1	1	-	17	-	-	2	-	2	-	1	20
Midland	2	-	-	-	2	7	3	11	1	21	1	7	1	56	-	-	-	1	1	2	2	61
Waikato	-	-	-	-	-	1	2	5	-	9	1	4	-	22	-	-	-	-	-	1	2	25
Lakes	-	-	-	-	-	1	-	2	-	2	-	1	-	6	-	-	-	-	-	1	-	7
Bay of Plenty	1	-	-	-	-	4	1	2	1	7	-	2	1	19	-	-	-	1	1	-	-	20
Tairāwhiti	1	-	-	-	2	1	-	1	-	3	-	-	-	8	-	-	-	-	-	-	-	8
Taranaki	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-	-	-	1
Central	3	4	-	-	1	14	3	8	1	10	6	4	2	56	-	1	-	2	3	4	3	66
Hawke's Bay	-	-	-	-	1	-	-	1	-	3	-	-	-	5	-	-	-	-	-	-	-	5
MidCentral	-	1	-	-	-	1	-	-	-	1	-	-	-	3	-	-	-	-	-	-	-	3
Whanganui	2	3	-	-	-	1	-	2	-	-	-	-	-	8	-	-	-	-	-	-	-	8
Capital & Coast	1	-	-	-	-	10	3	3	1	3	5	4	1	31	-	1	-	2	3	2	2	38
Hutt	-	-	-	-	-	-	-	1	-	3	1	-	1	6	-	-	-	-	-	-	1	7
Wairarapa	-	-	-	-	-	2	-	1	-	-	-	-	-	3	-	-	-	-	-	2	-	5
Southern	-	-	-	-	-	9	1	14	-	5	-	3	1	33	-	-	-	2	2	-	-	35
Nelson Marlborough	-	-	-	-	-	2	-	3	-	5	-	2	-	12	-	-	-	-	-	2	-	14
West Coast	-	-	-	-	-	-	-	1	-	1	-	-	-	2	-	-	-	-	-	-	-	2
Canterbury	-	-	-	-	-	9	1	9	-	2	-	2	1	24	-	-	-	1	1	-	-	25
South Canterbury	-	-	-	-	-	-	-	1	-	1	-	-	-	2	-	-	-	1	1	-	-	3
Southern	-	-	-	-	-	-	-	3	-	1	-	1	-	5	-	-	-	-	-	-	-	5
Total	5	4	3	2	4	42	13	41	5	54	9	27	4	213	1	1	2	5	9	10	8	240

Table 12. NNGO/PHO ICAYMH/AOD Workforce by Occupation (2022/23)

NGO/PHO Workforce by Occupation (Actual FTEs, 2022/23)	Alcohol & Other Drug Practitioner	CEP Clinician	Clinical Intern	Counsellor	Family Therapist	Nurse (MH, RN)	Occupational Therapist	Psychiatrist	Psychotherapist	Psychologist	Registrar/Senior Medical Officer	Social Worker	Other Clinical	Clinical Sub-Total	Cultural	Consumer Advisor	Educator	Mental Health Support	Peer Support	Whānau Ora Practitioner	Youth Worker	Other Non-Clinical	Non-Clinical Sub-Total	Administrator	Manager	Total
Northern	29.2	-	1.0	4.0	-	2.1	0.5	-	0.9	5.4	-	4.70	3.15	5-0.95	-	1.6	-	33.4	5.5	2.5	5.6	4.8	53.4	5.0	4.8	114.15
Northland	8.0	-	-	-	-	-	-	-	-	-	-	-	-	8.0	-	-	-	2.0	-	-	-	-	2.0	-	-	10.0
Waitemata	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6.6	-	2.5	-	-	9.1	-	-	9.1
Auckland	10.2	-	1.0	4.0	-	2.1	0.5	-	0.1	3.2	-	-	3.15	24.25	-	-	-	13.6	-	-	-	0.6	14.2	2.0	1.0	41.45
Counties Manukau	11.0	-	-	-	-	-	-	-	0.8	2.2	-	4.7	-	18.7	-	1.6	-	11.2	5.5	-	5.6	4.2	28.1	3.0	3.8	53.6
Midland	28.8	1.0	-	11.0	2.0	33.0	2.0	4.6	-	6.9	1.0	26.1	7.7	124.1	3.0	-	-	24.35	9.0	2.5	25.1	7.75	71.7	1.7	4.78	202.28
Waikato	15.4	-	-	-	2.0	26.0	1.5	4.6	-	2.9	1.0	11.0	-	64.4	2.0	-	-	11.9	1.0	-	5.0	2.5	22.4	-	1.0	87.8
Lakes	2.5	-	-	-	-	3.5	-	-	-	1.0	-	1.6	-	8.6	-	-	-	9.2	-	-	9.0	-	18.2	1.1	1.38	29.28
Bay of Plenty	9.9	1.0	-	10.0	-	2.5	0.5	-	-	3.0	-	9.5	6.7	43.1	1.0	-	-	2.25	7.0	2.5	6.5	4.25	23.5	0.6	1.4	68.6
Tairāwhiti	1.0	-	-	-	-	-	-	-	-	-	-	1.0	-	2.0	-	-	-	-	1.0	-	1.0	-	2.0	-	-	4.0
Taranaki	-	-	-	1.0	-	1.0	-	-	-	-	-	3.0	1.0	6.0	-	-	-	1.0	-	-	3.6	1.0	5.6	-	1.0	12.6
Central	22.8	-	-	16.88	-	7.4	-	-	-	5.8	-	6.66	11.9	71.44	0.51	-	-	16.05	1.0	-	16.20	15.93	49.69	1.38	4.38	126.89
Hawke's Bay	-	-	-	3.0	-	0.3	-	-	-	-	-	2.4	-	5.7	-	-	-	4.2	-	-	-	0.1	4.3	-	1.0	11.0
MidCentral	4.7	-	-	4.2	-	-	-	-	-	1.8	-	1.0	9.9	21.6	-	-	-	1.8	1.0	-	6.0	13.0	21.8	-	-	43.4
Whanganui	-	-	-	0.08	-	2.0	-	-	-	-	-	0.26	-	2.34	-	-	-	0.7	-	-	7.2	-	7.9	0.18	0.1	10.52
Capital & Coast	12.7	-	-	6.8	-	2.8	-	-	-	2.9	-	2.2	-	27.4	-	-	-	1.0	-	-	2.0	1.0	4.0	1.0	2.0	34.4
Hutt	5.4	-	-	2.0	-	-	-	-	-	0.7	-	0.8	2.0	10.9	-	-	-	8.35	-	-	-	0.7	9.05	-	0.7	20.65
Wairarapa	-	-	-	0.8	-	2.3	-	-	-	0.4	-	-	-	3.5	0.51	-	-	-	-	-	1.0	1.13	2.64	0.2	0.58	6.92
Southern	12.35	4.8	-	32.14	-	3.2	9.08	0.6	-	3.1	-	19.18	2.7	87.15	1.6	-	3.0	58.34	4.2	-	3.5	6.6	77.24	4.0	9.35	177.74
West Coast	0.5	1.0	-	-	-	-	-	-	-	-	-	-	1.5	3.0	-	-	-	-	-	-	3.0	2.0	5.0	-	-	8.0
Nelson Marlborough	-	-	-	0.83	-	-	0.83	-	-	-	-	0.83	-	2.49	-	-	-	1.6	-	-	0.5	-	2.1	-	-	4.59
Canterbury	4.25	1.0	-	19.45	-	0.8	-	-	-	2.0	-	10.9	-	38.4	-	-	3.0	36.84	3.0	-	-	-	42.84	-	5.0	86.24
South Canterbury	-	1.0	-	0.76	-	0.4	1.7	-	-	-	-	2.6	-	6.46	-	-	-	-	-	-	-	-	-	-	-	6.46
Southern	7.6	1.8	-	11.1	-	2.0	6.55	0.6	-	1.1	-	4.85	1.2	36.8	1.6	-	-	19.9	1.2	-	-	4.6	27.3	4.0	4.35	72.45
Total	93.15	5.8	1.0	64.02	2.0	45.7	11.58	5.2	0.9	21.2	1.0	56.64	25.45	333.64	5.11	1.6	3.0	132.14	19.7	5.0	50.4	35.08	252.03	12.08	23.31	621.06



Table 13. NGO/PHO ICAYMH/AOD Vacant FTEs by Occupation (2022/23)

NGO/PHO Vacancies by Occupation (Vacant FTEs, 2022/23)	Alcohol & Other Drug Practitioner	Nurse (MH, RN)	Psychologist	Social Worker	Other Clinical	Clinical Sub-Total	Cultural	Consumer Advisor	Mental Health/Community Support	Peer Support	Youth Worker	Other Non-Clinical	Non-Clinical Sub-Total	Administrator	Total
Northern	-	-	-	-	-	-	-	-	1.0	-	2.8	-	3.8	-	3.8
Counties Manukau	-	-	-	-	-	-	-	-	1.0	-	2.8	-	3.8	-	3.8
Midland	2.2	5.9	1.0	2.5	2.0	13.0	-	-	-	-	2.1	1.0	3.1	1.0	17.1
Waikato	1.0	-	-	1.0	-	2.0	-	-	-	-	1.0	-	1.0	1.0	4.0
Lakes	-	4.9	-	-	-	4.9	-	-	-	-	-	-	-	-	4.9
Bay of Plenty	1.2	1.0	1.0	1.5	-	4.1	-	-	-	-	1.1	1.0	2.1	-	6.2
Tairāwhiti	-	-	-	-	1.0	1.0	-	-	-	-	-	-	-	-	1.0
Taranaki	-	-	-	-	1.0	1.0	-	-	-	-	-	-	-	-	1.0
Central	-	-	-	-	5.5	5.5	-	-	-	-	1.0	0.7	1.7	-	7.2
MidCentral	-	-	-	-	4.5	4.5	-	-	-	-	-	0.7	0.7	-	5.2
Hutt	-	-	-	-	1.0	1.0	-	-	-	-	-	-	-	-	1.0
Wairarapa	-	-	-	-	-	-	-	-	-	-	1.0	-	1.0	-	1.0
Southern	-	-	1.5	1.0	-	2.5	0.4	0.1	1.5	0.2	-	-	2.2	-	4.7
Canterbury	-	-	-	-	-	-	0.4	0.1	1.0	0.2	-	-	1.7	-	1.7
Southern	-	-	1.5	1.0	-	2.5	-	-	0.5	-	-	-	0.5	-	3.0
Total	2.2	5.9	2.5	3.5	7.5	21.0	0.4	0.1	2.5	0.2	5.9	1.7	10.8	1.0	32.8

Table 14. NGO/PHO Māori ICAYMH/AOD Workforce by Occupation (2022/23)

NGO/PHO Māori Workforce by Occupation (Headcount, 2022/23)	Alcohol & Other Drug Practitioner	Co-Existing Problems clinician	Clinical Intern	Counsellor	Family Therapist	Nurse (MH, RN)	Occupational Therapist	Psychologist	Social Worker	Other clinical	Clinical Sub- Total	Cultural	Consumer Advisor	Educator	Mental Health support	Peer Support	Whānau Ora Practitioner	Youth Worker	Other Non-Clinical	Non-Clinical Sub-Total	Administrator	Manager	Total
Northern	11	-	1	1	-	-	-	1	3	1	18	-	2	7	7	-	3	-	4	23	3	3	47
Northland	6	-	-	-	-	-	-	-	-	1	7	-	-	-	1	-	-	-	-	1	-	-	8
Waitemata	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	-	-	3	-	-	3
Auckland	2	-	1	1	-	-	-	-	-	-	4	-	-	-	2	-	-	-	-	2	-	-	6
Counties Manukau	3	-	-	-	-	-	-	1	3	-	7	-	2	7	4	-	-	-	4	17	3	3	30
Midland	18	-	-	6	2	20	1	5	23	3	78	5	-	-	7	9	5	17	4	47	2	3	130
Waikato	7	-	-	-	1	19	-	3	12	-	42	3	-	-	5	1	2	7	-	18	-	1	61
Lakes	2	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	5	-	5	2	1	10
Bay of Plenty	8	-	-	6	1	1	1	2	7	3	29	2	-	-	1	7	3	4	4	21	-	-	50
Tairāwhiti	1	-	-	-	-	-	-	-	1	-	2	-	-	-	-	1	-	1	-	2	-	-	4
Taranaki	-	-	-	-	-	-	-	-	3	-	3	-	-	-	1	-	-	-	-	1	-	1	5
Central	10	-	-	2	-	4	-	3	3	7	29	1	-	-	4	2	-	4	12	23	2	3	57
Hawke's Bay	-	-	-	1	-	1	-	-	2	-	4	-	-	-	3	-	-	-	-	3	-	-	7
MidCentral	5	-	-	-	-	-	-	-	1	6	12	-	-	-	-	2	-	1	11	14	-	-	26
Whanganui	-	-	-	-	-	2	-	-	-	-	2	-	-	-	-	-	-	-	-	-	1	1	4
Capital & Coast	5	-	-	1	-	1	-	2	-	-	9	-	-	-	1	-	-	2	1	4	1	1	15
Hutt	-	-	-	-	-	-	-	1	-	1	2	-	-	-	-	-	-	-	-	-	-	1	3
Wairarapa	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	2	-	-	2
Southern	3	1	-	4	-	-	2	1	4	2	17	2	-	2	7	1	-	-	2	14	2	2	35
West Coast	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1	1	2	-	-	3
Nelson Marlborough	-	-	-	1	-	-	1	-	1	-	3	-	-	-	2	-	-	-	-	2	-	-	5
Canterbury	-	1	-	1	-	-	-	-	1	-	3	-	-	2	4	1	-	-	-	7	-	-	10
Southern	3	-	-	2	-	-	1	1	2	2	11	2	-	-	1	-	-	-	2	5	2	2	20
Total	42	1	1	13	2	24	3	10	33	13	142	8	2	9	25	12	8	21	22	107	9	11	269

Table 15. NGO/PHO Pacific ICAYMH/AOD Workforce by Occupation (2022/23)

NGO/PHO Pacific Workforce by Occupation (Headcount, 2022/23)	Alcohol & Other Drug Practitioner	Co-Existing Problems Clinician	Counsellor	Nurse (MH, RN)	Social Worker	Other Clinical	Clinical Sub-Total	Consumer Advisor	Educator	Mental Health Support	Peer Support	Whānau Ora Practitioner	Youth Worker	Other Non-Clinical	Non-Clinical Sub-Total	Administrator	Manager	Total
Northern	4	-	1	3	3	4	15	1	2	11	9	1	3	-	27	1	2	44
Waitemata	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	1
Auckland	3	-	1	3	-	4	11	-	-	4	-	-	-	-	4	1	-	16
Counties Manukau	1	-	-	-	3	-	4	1	2	7	9	-	3	-	22	-	2	28
Midland	1	-	-	1	1	-	3	-	-	4	-	-	1	-	5	-	-	8
Waikato	-	-	-	1	1	-	2	-	-	3	-	-	-	-	3	-	-	5
Lakes	1	-	-	-	-	-	1	-	-	1	-	-	1	-	2	-	-	3
Central	-	-	2	-	-	1	3	-	-	1	-	-	-	4	5	-	-	8
MidCentral	-	-	-	-	-	-	-	-	-	-	-	-	-	4	4	-	-	4
Capital & Coast	-	-	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1
Hutt	-	-	1	-	-	1	2	-	-	1	-	-	-	-	1	-	-	3
Southern	-	1	1	-	-	-	2	-	-	1	-	-	-	-	1	-	-	3
Canterbury	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	1
Southern	-	1	1	-	-	-	2	-	-	-	-	-	-	-	-	-	-	2
Total	5	1	4	4	4	5	23	1	2	17	9	1	4	4	38	1	2	63

Table 16. NGO/PHO Asian ICAYMH/AOD Workforce by Occupation (2022/23)

NGO/PHO Asian Workforce by Occupation (Headcount, 2022/23)	Alcohol & Other Drug Practitioner	Clinical Intern	Counsellor	Nurse (MH, RN)	Occupational Therapist	Psychologist	Social Worker	Other Clinical	Clinical Sub-Total	Mental Health Support	Peer Support	Youth Worker	Other Non-Clinical	Non-Clinical Sub-Total	Manager	Total
Northern	4	3	3	1	-	2	-	1	14	9	-	2	2	13	-	27
Waitemata	-	-	-	-	-	-	-	-	-	3	-	-	-	3	-	3
Auckland	1	3	1	1	-	1	-	1	8	5	-	-	-	5	-	13
Counties Manukau	3	-	2	-	-	1	-	-	6	1	-	2	2	5	-	11
Midland	1	-	-	-	-	-	-	-	1	6	-	2	-	8	1	10
Waikato	1	-	-	-	-	-	-	-	1	1	-	1	-	2	-	3
Lakes	-	-	-	-	-	-	-	-	-	5	-	1	-	6	1	7
Central	5	-	1	-	-	-	1	-	7	4	-	5	2	11	1	19
Hawke's Bay	-	-	-	-	-	-	-	-	-	1	-	-	1	2	1	3
MidCentral	-	-	-	-	-	-	-	-	-	-	-	5	1	6	-	6
Capital & Coast	3	-	1	-	-	-	-	-	4	-	-	-	-	-	-	4
Hutt	2	-	-	-	-	-	1	-	3	3	-	-	-	3	-	6
Southern	-	-	1	-	1	-	1	1	4	-	1	-	-	1	-	5
Canterbury	-	-	1	-	-	-	-	1	2	-	1	-	-	1	-	3
Southern	-	-	-	-	1	-	1	-	2	-	-	-	-	-	-	2
Total	10	3	5	1	1	2	2	2	26	19	1	9	4	33	2	61

Table 17. NGO/PHO NZ European ICAYMH/AOD Workforce by Occupation (2022/23)

NGO/PHO NZ European Workforce by Occupation (Headcount, 2022/23)	Alcohol & Other Drug Practitioner	CEP Clinician	Clinical Intern	Counsellor	Family Therapist	Nurse (MH, RN)	Occupational Therapist	Psychiatrist	Psychotherapist	Psychologist	Social Worker	Other Clinical	Clinical Sub-Total	Educator	Mental Health Support	Peer Support	Whānau Ora Practitioner	Youth Worker	Other Non-Clinical	Non-Clinical Sub-Total	Administration	Manager	Total
Northern	11	-	19	30	-	-	1	-	4	8	-	6	79	2	7	-	-	-	2	11	1	2	93
Northland	2	-	-	-	-	-	-	-	-	-	-	-	2	-	1	-	-	-	-	1	-	-	3
Waitemata	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	1
Auckland	4	-	19	30	-	-	1	-	3	6	-	6	69	-	2	-	-	-	1	3	-	1	73
Counties Manukau	5	-	-	-	-	-	-	-	1	2	-	-	8	2	3	-	-	-	1	6	1	1	16
Midland	14	1	-	5	1	15	2	5	-	1	6	3	53	1	12	2	1	8	2	26	2	4	85
Waikato	11	-	-	-	1	9	2	5	-	1	-	-	29	-	7	-	1	-	-	8	-	-	37
Lakes	-	-	-	-	-	4	-	-	-	-	2	-	6	-	3	-	-	2	-	5	1	2	14
Bay of Plenty	3	1	-	4	-	1	-	-	-	-	4	3	16	1	2	2	-	4	1	10	1	2	29
Taranaki	-	-	-	1	-	1	-	-	-	-	-	-	2	-	-	-	-	2	1	3	-	-	5
Central	8	-	-	9	-	2	-	-	-	4	3	11	37	-	9	-	-	8	2	19	-	2	58
Hawke's Bay	-	-	-	1	-	1	-	-	-	-	2	-	4	-	2	-	-	-	-	2	-	-	6
MidCentral	1	-	-	3	-	-	-	-	-	2	-	11	17	-	2	-	-	5	1	8	-	-	25
Whanganui	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1	-	-	2	-	3	-	1	5
Capital & Coast	2	-	-	3	-	-	-	-	-	1	-	-	6	-	-	-	-	-	-	-	-	-	6
Hutt	5	-	-	2	-	-	-	-	-	1	-	-	8	-	4	-	-	-	1	5	-	1	14
Wairarapa	-	-	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	1	-	1	-	-	2
Southern	10	2	-	26	-	6	15	-	-	3	13	5	80	1	57	4	-	1	-	64	4	10	158
West Coast	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	2	1	3	-	-	4
Nelson Marlborough	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	1
Canterbury	6	-	-	15	-	1	-	-	-	1	10	-	33	1	35	2	-	-	-	38	-	4	75
Southern Canterbury	-	1	-	2	-	2	2	-	-	-	3	-	10	-	-	-	-	-	-	-	-	-	10
Southern	4	1	-	9	-	3	13	-	-	2	-	5	37	-	22	2	-	-	1	25	4	6	72
Total	43	3	19	70	1	23	18	5	4	16	22	25	249	4	85	6	1	17	7	120	7	18	394

Table 18. NGO/PHO Other Ethnicity ICAYMH/AOD Workforce by Occupation (2022/23)

NGO/PHO Other Ethnicity Workforce by Occupation Group (Headcount, 2022/23)	Alcohol & Other Drug Practitioner	Counsellor	Nurse (MH, RN)	Occupational Therapist	Psychiatrist	Psychologist	Registrar/Senior Medical Officer	Social Worker	Other Clinical	Clinical Sub-Total	Educator	Mental Health Support	Peer Support	Youth Worker	Other Non-Clinical	Non-Clinical Sub-Total	Administrator	Manager	Total
Northern	1	-	-	-	-	1	-	-	2	4	-	7	-	1	-	8	-	-	12
Northland	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	1
Auckland	1	-	-	-	-	1	-	-	2	4	-	4	-	-	-	4	-	-	8
Counties Manukau	-	-	-	-	-	-	-	-	-	-	-	2	-	1	-	3	-	-	3
Midland	1	-	1	1	-	1	1	-	-	5	-	1	-	3	-	4	-	1	10
Waikato	-	-	-	1	-	-	1	-	-	2	-	-	-	-	-	-	-	-	2
Lakes	-	-	1	-	-	1	-	-	-	2	-	1	-	-	-	1	-	-	3
Bay of Plenty	1	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1	-	1	3
Taranaki	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	2	-	-	2
Central	5	7	5	-	-	4	-	4	1	26	2	1	-	1	1	5	1	5	37
Hawke's Bay	-	1	1	-	-	-	-	-	-	2	-	-	-	-	-	-	-	1	3
MidCentral	-	2	-	-	-	1	-	-	1	4	-	-	-	1	-	1	-	-	5
Whanganui	-	1	-	-	-	-	-	1	-	2	-	-	-	-	-	-	-	-	2
Capital & Coast	3	2	2	-	-	2	-	3	-	12	-	-	-	-	1	1	-	1	14
Hutt	2	-	-	-	-	-	-	-	-	2	-	1	-	-	-	1	-	2	5
Wairarapa	-	1	2	-	-	1	-	-	-	4	2	-	-	-	-	2	1	1	8
Southern	3	8	-	1	1	1	-	3	-	17	-	3	1	-	-	4	-	2	23
West Coast	-	-	-	-	-	-	-	-	2	2	-	-	-	-	-	-	-	-	2
Canterbury	1	4	-	-	-	1	-	2	-	8	-	3	1	-	-	4	-	1	13
Southern	2	4	-	1	1	-	-	1	-	9	-	-	-	-	-	-	-	1	10
Total	10	15	6	2	1	7	1	7	3	52	2	12	1	5	1	21	1	8	82

Table 19. Total ICAYMH/AOD Workforce by Service Type, Ethnicity & Region (2022/23)

Total ICAYMH/AOD Workforce by Ethnicity (2022/23)	Māori			Pacific			Asian			NZ European			Other Ethnicity			Total		
	Te Whatu Ora*	NGO/PHO	Total	Te Whatu Ora*	NGO/PHO	Total	Te Whatu Ora*	NGO/PHO	Total	Te Whatu Ora*	NGO/PHO	Total	Te Whatu Ora*	NGO/PHO	Total	Te Whatu Ora*	NGO/PHO	Total
Northern	63	47	110	37	44	81	64	27	91	197	93	290	115	12	127	476	223	699
Midland	38	130	168	2	8	10	5	10	15	79	85	164	61	10	71	185	243	428
Central	44	57	101	25	8	33	19	19	38	169	58	227	73	37	110	330	179	509
Southern	21	35	56	4	3	7	22	5	27	240	158	398	41	23	63	328	224	551
National Youth Forensic	12	-	12	19	-	19	3	-	3	14	-	14	1	-	1	49	-	49
<b>Total</b>	<b>178</b>	<b>269</b>	<b>447</b>	<b>87</b>	<b>63</b>	<b>150</b>	<b>113</b>	<b>61</b>	<b>174</b>	<b>699</b>	<b>394</b>	<b>1,093</b>	<b>291</b>	<b>82</b>	<b>372</b>	<b>1,368</b>	<b>869</b>	<b>2,236</b>

\*Te Whatu Ora Services Includes Inpatient Workforce.

## Appendix F: Glossary of Terms

ACRONYM	DESCRIPTION
ACEs	Adverse Childhood Experiences
AOD	Alcohol & Other Drugs
CAPA	Choice and Partnership Approach
CBT	Cognitive Behaviour Therapy
CEP	Co-Existing Problems
COPMIA	Children of Parents with Mental Health Issues and Addictions
TE WHATU ORA	District Health Board
EIS	Early Intervention Service
HEEADSSS	Home, Education/Employment, Eating, Activities, Drinking & Other Drugs, Sexuality, Suicide and Depression, Safety
ICAFS	Infant Child & Adolescent Family Services
ICAYMHS	Infant, Child, Adolescent and Youth Mental Health Services
IY	Incredible Years
LGBTQI	Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, and Intersex
MOE	Ministry of Education
MOH	Ministry of Health/Manatū Hauora
NGO	Non-Governmental Organisation
PCIT	Parent Child Interactive Therapy
PHO	Primary Health Organisation
RSP	Real Skills Plus
SACS-BI	Substance Abuse & Choices Scale – Brief Interventions
SPARX	Smart, Positive, Active, Realistic, Xfactor, Thoughts
SPHC	Supporting Parents Healthy Children
YOSS	Youth One Stop Shop Service



