



Together we are making a difference

Lessons learnt from the Aotearoa New Zealand Equally Well collaborative

Caro Swanson and Helen Lockett

 www.tepou.co.nz/equallywell

 @EquallyW #EquallyWell

The Equally Well collaborative

Evidence informs
both ***What*** we do
and ***How*** we do it



The beginnings

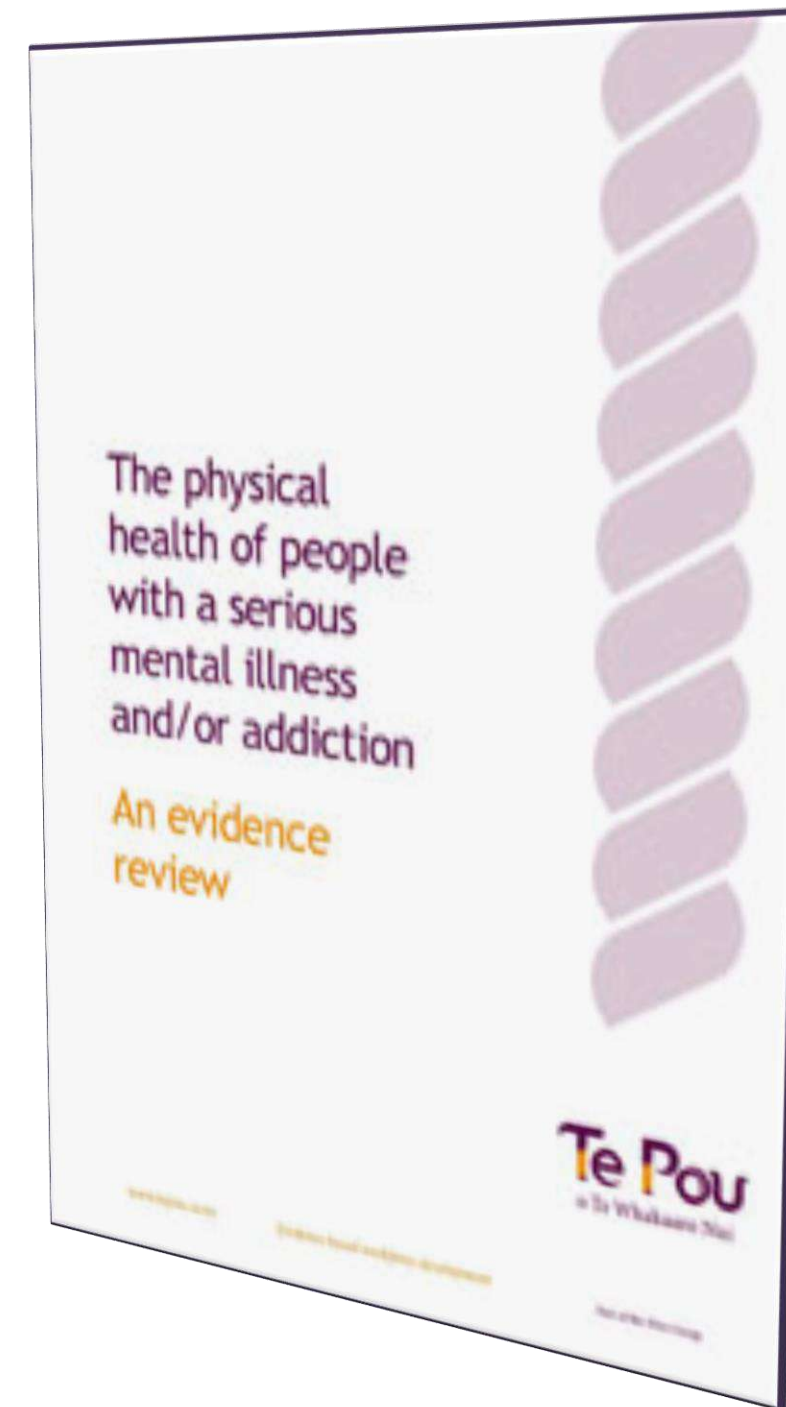
A meeting of leaders from the non-government mental health and addiction sector were discussing the number of untimely and unexpected deaths of people using their services

This is not acceptable

Understand the issues

Phase 1 (from mid 2013)

- Evidence collection
- Listening to people's experiences and concerns
- Making some new friends



It takes a system

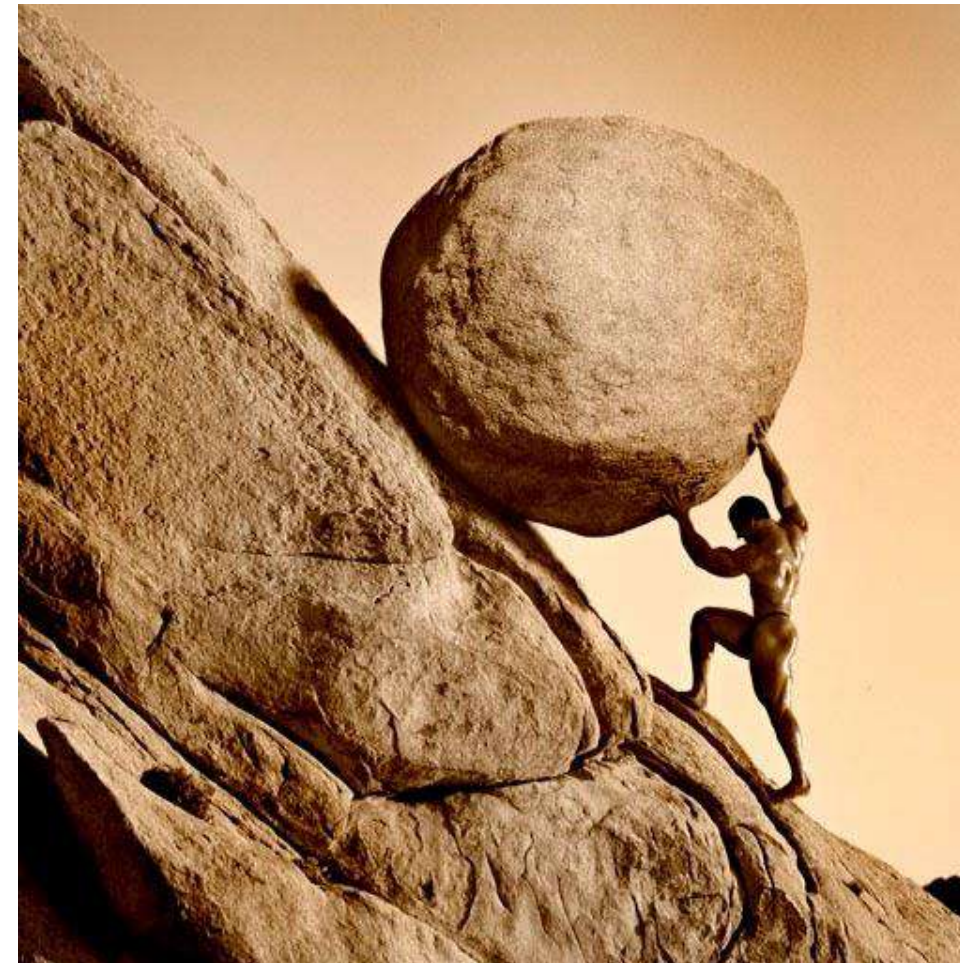
“... because of the complex and interrelated factors contributing to this disparity, a systemic approach is needed”

Nease, 2014



Wicked problems

Wicked problems are difficult to define and they fight back when you try to solve them.



Sources: Fixen et al., 2013; Rittel and Webber, 1973

September 2014 - an evidence-informed Call to Action

Te Pou o te
Whakaaro Nui

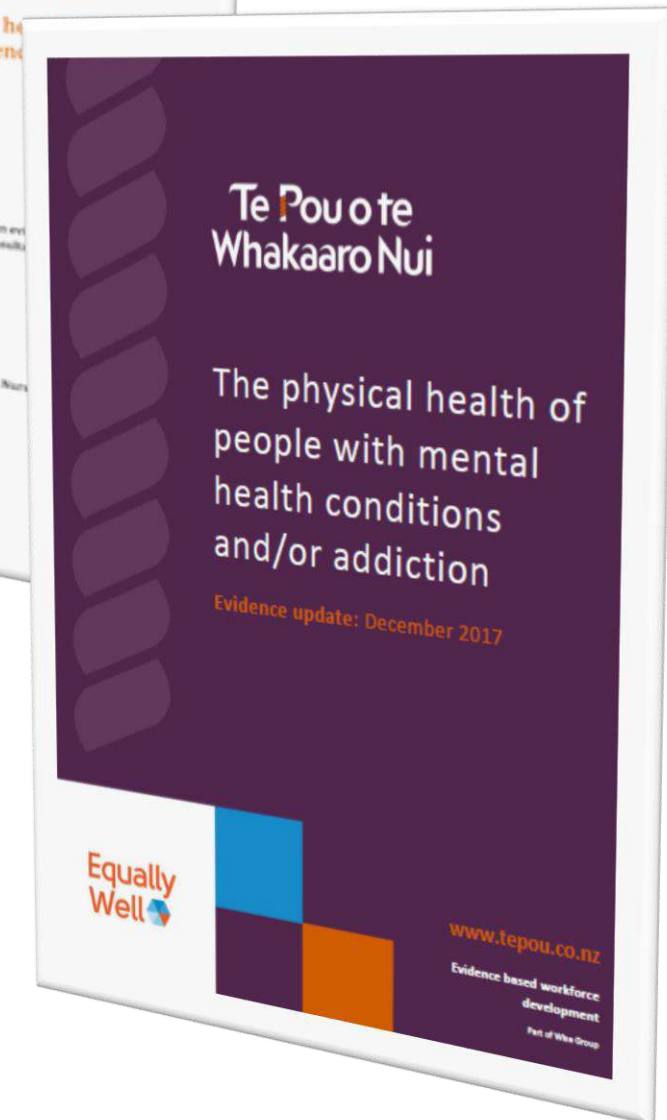
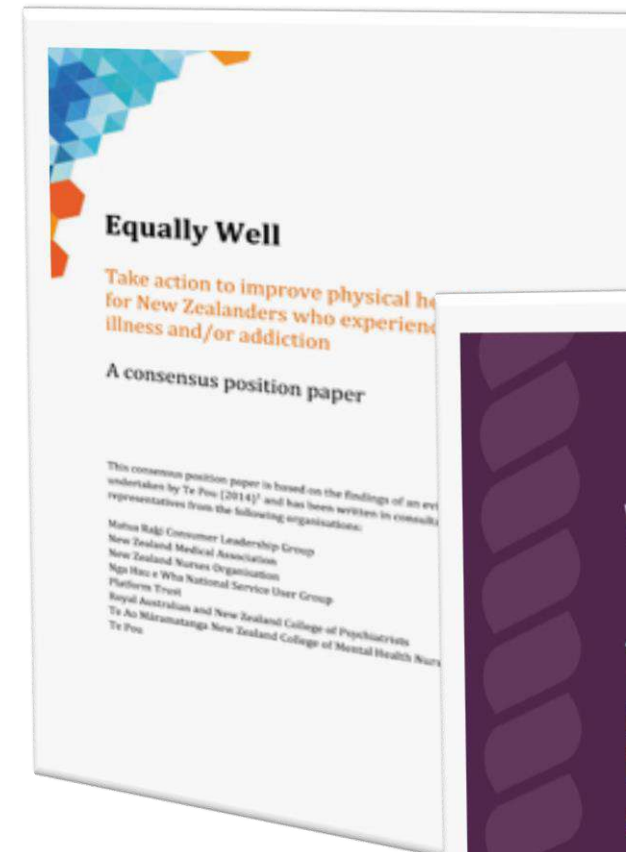


Matua Raki
National Addiction Workforce Development

PLATFORM













Te Ao Māramatanga
New Zealand College of Mental Health Nurses Inc



November 2014 – Equally Well summit

Growing the crowd

loomeo

	Harm Reduction Approach to Psychiatric Drugs (12) Equally Well · 19 Aug	☆
	Conferences and events 2016 (1) Equally Well · 4 Aug	☆
	Detoxing from psychiatric medications (19) Equally Well · 4 Aug	☆
	New Kings Fund report (5) Equally Well · 3 Aug	☆
	metabolic screening (3) Equally Well · 25 Jul	☆
	Liver health (7) Equally Well · 6 Jul	☆
	Cardiovascular disease guidelines review (11) Equally Well · 30 Jun	☆
	archiving our older discussion threads (1) Equally Well · 29 Jun	☆
	Physical Health Resources (1) Equally Well · 27 Jun	☆
	Shared care initiatives (3) Equally Well · 23 Jun	☆

Identified the drivers of inequalities

Health
systems

Workforce
issues

Exposure to
known risk
factors

Psychotropic
Medication

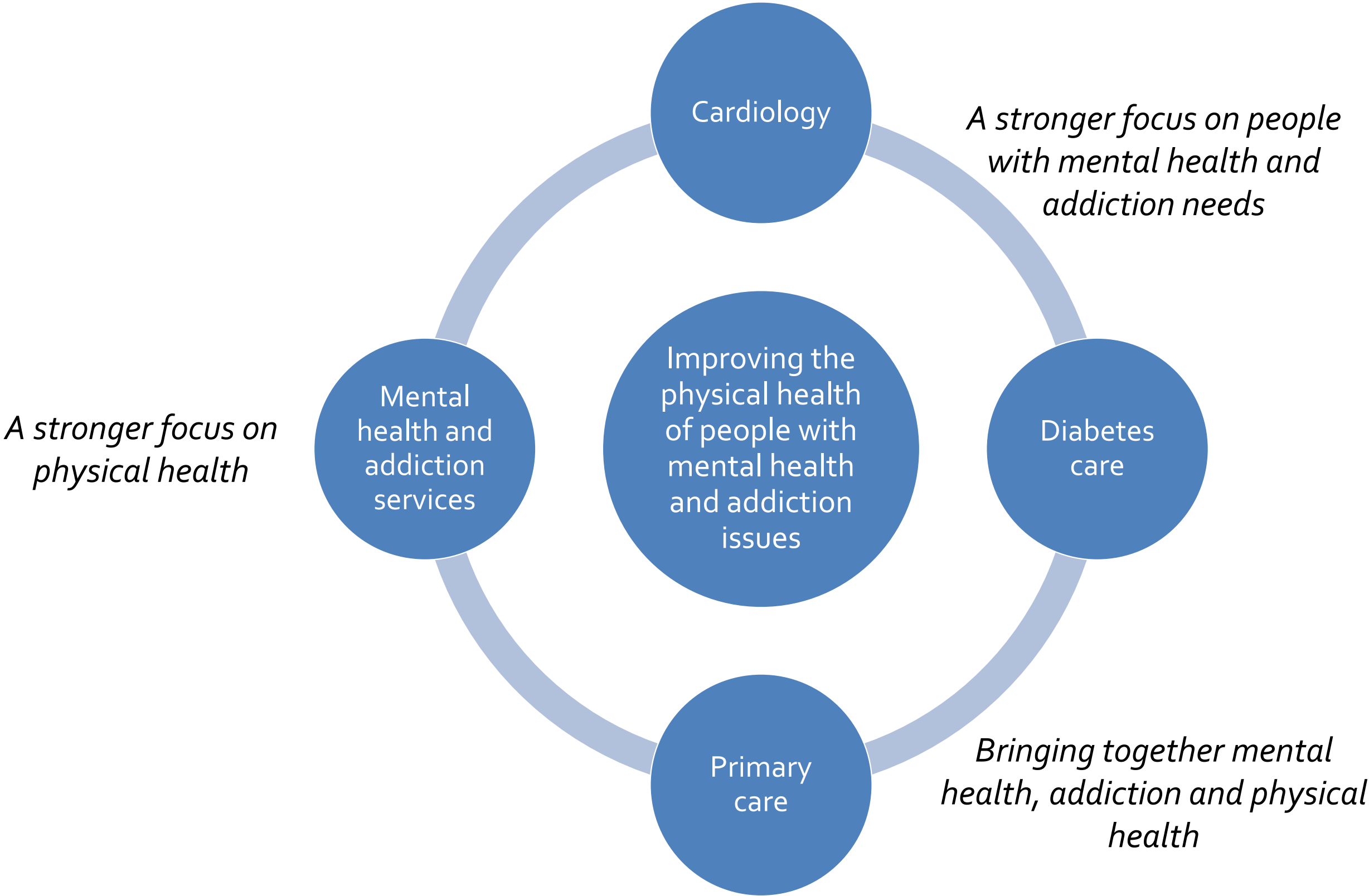
Socio-
economic
status

Adverse
childhood
experiences

**A fundamental shift in the
way we 'view' the issues**

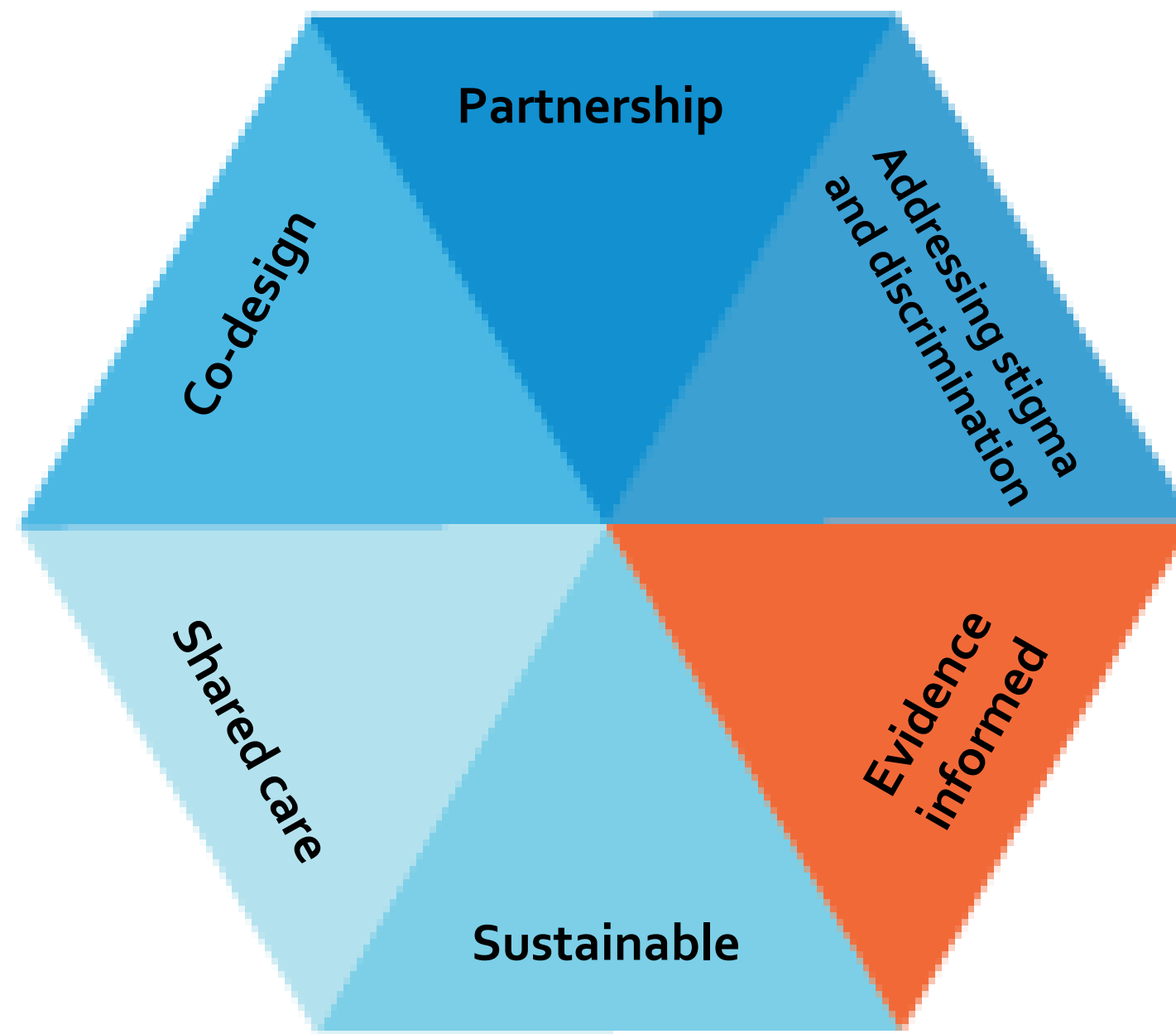


EQUALLY WELL: LEVERAGING CHANGE ACROSS THE HEALTH AND SOCIAL CARE SYSTEM



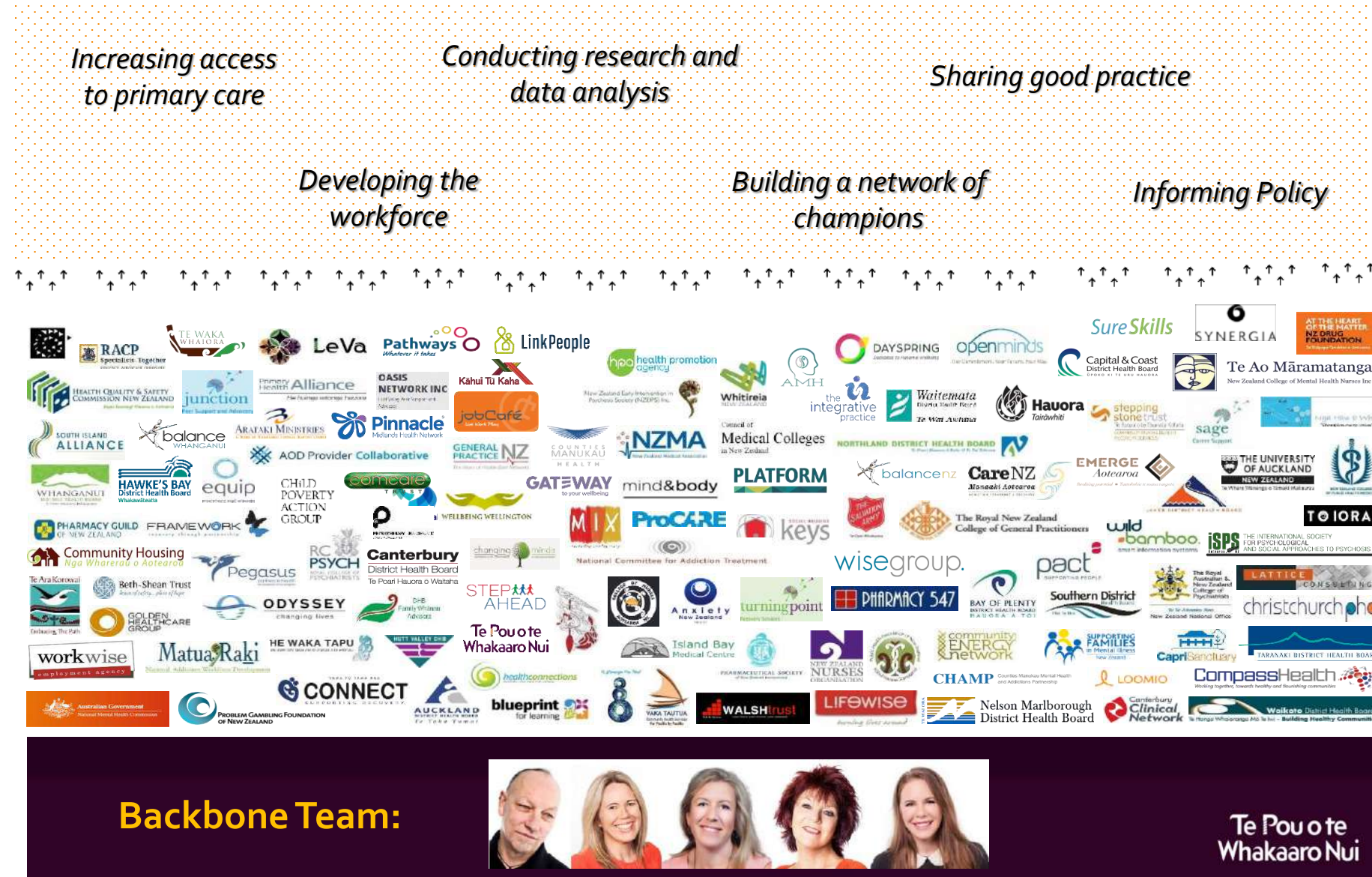


Equally Well underpinning principles



Collective impact brings people together, in a structured way, to achieve social change.

Collective impact



TheMHS award for innovation and excellence



“Equally Well demonstrates that a great deal of **value can be added to the health sector through collaboration** around a common goal.

...the number of organisations involved is impressive and there are excellent examples of organisations creating change.

Understanding health inequities using NZ data

Infographic



**Te Pou o te
Whakaaro Nui**

The physical health of people with mental health conditions and/or addiction



Evidence based workforce

Part of White Group

Be intentional about building and sustaining a collaboration

1. Create a sense of urgency
2. Involve the people affected from the outset
3. Help individuals and organisations see how they can contribute
4. Build a virtual community
5. Develop distributed leadership
6. Work with diversity, respect difference
7. Build understanding and bridges across different sectors

Leading by example - trust and mutual respect



“Helen brings a HUGE sense of justice, a soul deep caring for people that is resolute, immense drive and energy, tenacity that is legend, she listens, she explores, she confronts, she affirms”



“Caro brings OODLES of wisdom, personal insights, experience, and knowledge along with creativity, aroha, kindness, compassion, and is prepared to challenge and question”.

Ngā mihi nui ki a koutou

Helen.lockett@wisegroup.co.nz

Caro.swanson@tepou.co.nz

 @EquallyW

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