

Cabinet Paper material

Proactive release

Minister & portfolio	Hon Jan Tinetti, Associate Minister of Education
Name of package	Government Response to the Report of the Health Select Committee on Petition 20140/134 of Lucy McSweeney
Date considered	22 March 2021
Date of release	28 April 2021

These documents have been proactively released:

Cabinet Paper: Government Response to the Report of the Health Select Committee on Petition 20140/134 of Lucy McSweeney

22 March 2021

Associate Minister of Education

Government Response to Government Response to the Report of the Health Select Committee on Petition 20140/134 of Lucy McSweeney

22 March 2021

Joint Ministry of Education and Ministry of Health

Cabinet Minute: CAB-21-MIN-0079

22 March 2021

Cabinet Office

Cabinet Minute: SWC-MIN-0020

17 March 2021

Cabinet Office

Joint Report: Government Response to Petition 2014/134 of Lucy McSweeney on Mental Health Education in the curriculum

4 February 2021

Joint Ministry of Education and Ministry of Health

Material redacted

Some deletions have been made from the documents as the information withheld does not fall within scope of the Minister's portfolio responsibilities, and is not relevant to the proactive release of this material.

You can read the Official Information Act 1982 here:

<http://legislation.govt.nz/act/public/1982/0156/latest/DLM64785.html>

In Confidence

Office of the Associate Minister of Education

Chair, Cabinet Social Wellbeing Committee

Government Response to the Report of the Health Select Committee on Petition 20140/134 of Lucy McSweeney

Proposal

1. This paper seeks approval of the government's response to the Health Committee's report on *Petition 2014/134 of Lucy McSweeney* on Mental Health Education in The New Zealand Curriculum, prepared jointly by the Ministries of Education and Health.

Background

2. Lucy McSweeney provided written notification of her online petition (2014/134) to the Office of Hon. Nikki Kaye in April 2017. Petition 2014/134 of Lucy McSweeney was referred to the Health Committee of the 51st Parliament on 8 June 2017 for consideration and report.
3. The petition called for "better curriculum guidelines, adequate teacher training and general funding for mental health education in the New Zealand high school curriculum" up to and including Year 13.
4. The current Government is prioritising improving mental wellbeing, particularly for children and young people. The Child and Youth Wellbeing Strategy (2019) aims for New Zealand to be the best place in the world to be a child or young person. This priority also forms a key consideration in the government response to the COVID-19 pandemic.
5. In May 2019, the Government responded to *He Ara Oranga: The Report of the Government Inquiry into Mental Health and Addiction* which called for a more collaborative approach to mental health and addiction and committed to ensuring all New Zealanders, particularly children and young people, can access mental health, addiction, and wellbeing supports that work for them, when and where they need it.
6. This response was jointly developed by the Ministries of Education and Health. Hon. Andrew Little as Minister of Health has agreed that I present the joint report to Cabinet.

The Health Committee findings

7. The Health Committee Report, August 2020, found that young people in New Zealand experience disproportionately poor mental health outcomes, and notes that good mental health is vital to young people succeeding. This necessitates dealing with mental health issues as they arise as well as proactively promoting mental wellbeing.

8. The report emphasises the importance of a collaborative approach between key stakeholders, recommending that the ministries of health and education work closely together to support the development and implementation of mental health promotion, prevention, and early intervention initiatives.
9. The report concludes that mental wellbeing is an issue for all New Zealanders, and that mental health and wellbeing education should be a systemic and core part of New Zealand's curriculum.
10. The Health Committee Report, August 2020 recommends that

Recommendation 1: The Government investigate how best to embed mental health education in the New Zealand curriculum in a systemic and meaningful way.

Recommendation 2: That the Ministries of Health and Education should be heavily involved in this process.

Comment on the Health Committee findings and recommendations

11. Effectively embedding mental health education in The New Zealand Curriculum in a "systemic and meaningful way" requires integration and alignment of a range of mental health and wellbeing initiatives in education settings.

Ministry of Education led initiatives

12. The Ministry of Education is developing Mental Health Education Curriculum Guidelines which are due for release late 2021. These Guidelines will support teaching and learning about mental health in New Zealand schools.
13. Mental health education is one of the seven key areas of learning within Health and Physical Education in The New Zealand Curriculum. It is compulsory for students in years 1 - 10 and optional for students in 11 - 13.
14. Schools have been provided with an extensive range of resources to enhance student's mental health, wellbeing, resilience, and interpersonal skills. These include the new Curriculum Lead (Wellbeing) roles, being implemented to support the delivery of a high-quality Health and Physical Education local curriculum; increased access to guidance counsellors to help students and ākonga deal with mental health and wellbeing issues; the launch of updated Relationships and Sexuality Education Guidelines in 2020; and the provision to secondary schools of the New Zealand Council for Educational Research publication, *Mental health education and hauora: Teaching interpersonal skills, resilience and wellbeing*.
15. The Ministry of Education continues to develop a curriculum progress map that will sit within the record of learning, so that information on progress in social and emotional learning is shared with tamariki, their whānau and teachers alongside other progress information.
16. In addition to the above, in response to COVID-19 the Government has allocated an Urgent Response Fund (URF) for centre-based early learning

services, schools and kura to support the wellbeing needs of their learners and ākonga, and to support education workforce wellbeing.

Ministry of Health led initiatives

17. In response to He Ara Oranga, the Ministry of Health is targeting investment to expand access to, and choice of mental health and addiction supports that meet the needs of children and young people in primary health and community settings.
18. District Health Boards (DHBs) provide a variety of school-based mental health and addiction supports to meet the needs of local communities.
19. School Based Health Services (SBHS) are nurse-led primary care services available to students in deciles 1 to 5 public secondary schools, Teen Parent Units and Alternative Education settings nationally. SBHS are able to connect students and schools with appropriate support for increased student mental health and additional wellbeing needs.
20. Mana Ake provides mental wellbeing support, advice, and guidance to children aged 5–12 in schools across Canterbury and Kaikōura and their schools, teachers and whānau.
21. Sparklers at Home is a toolkit for parents and whānau to support primary and intermediate school-aged children. Work is underway with the Ministry of Education to extend Sparklers at Home.
22. The Ministry of Health also provides a range of other services that support student and community wellbeing in the areas of sexual and reproductive health, nutrition and physical activity and smoking cessation. This includes Healthy Active Learning, a joint initiative between the Ministries of Health and Education and Sport NZ. This initiative takes a holistic approach to wellbeing and includes development of curriculum resources and guidance. There is also a collaborative design process underway to develop a new approach to health promotion to support wellbeing in schools.

Timing of the government response

23. The government response must be presented to the House by 23 March 2021.

Consultation

24. While agencies other than the Ministries of Education and Health have not been consulted on this Cabinet Paper they are aware of the Government Response to the Report of the Health Select Committee.

Financial implications

25. The initiatives in this paper are being funded through departmental baselines and partially through the Budget 2020 Wellbeing initiative CAB-20-MIN-0219.09.

Communications

26. Key messages are available through both the Ministries of Education and Health for any media that may arise from this petition and Cabinet Paper.

Proactive Release

27. The Associate Minister of Education intends to release this Cabinet paper as part of communication activities on the government's response to the petition. Proactive release is subject to redaction as appropriate under the Official Information Act 1982.

Recommendations

The Associate Minister of Education recommends that the Cabinet Social Wellbeing Committee:

1. **note** that on August 2020 the Health Committee presented its report to the House entitled "Petition 2014/134 of Lucy McSweeney"
2. **note** that the Select Committee recommended that the government investigate how best to embed mental health education in the New Zealand curriculum in a systemic and meaningful way, and that the Ministries of Health and Education should be heavily involved in this process
3. **note** the submission of the Associate Minister of Education and in particular her advice that you agree to the Government Response to the Health Committee's final Report to the House, subsequent to the Health Committee consideration of *Petition 2014/134 of Lucy McSweeney*, prepared jointly by the Ministries of Education and Health
4. **approve** the government response, attached to this submission, to the Report of the Health Committee entitled "Petition 2014/134 of Lucy McSweeney"
5. **note** that the government response must be presented to the House by 23 March 2021
6. **agree** to invite the Associate Minister of Education to present the government response to the House in accordance with Standing Order 252
7. **agree** to invite the Associate Minister of Education to write to the petitioner enclosing a copy of the government response to the report of the Health Select Committee on the petition, after the response has been presented to the House.

Authorised for lodgement

Hon Jan Tinetti

Associate Minister of Education



Cabinet

Minute of Decision

This document contains information for the New Zealand Cabinet. It must be treated in confidence and handled in accordance with any security classification, or other endorsement. The information can only be released, including under the Official Information Act 1982, by persons with the appropriate authority.

Report of the Cabinet Social Wellbeing Committee: Period Ended 19 March 2021

On 22 March 2021, Cabinet made the following decisions on the work of the Cabinet Social Wellbeing Committee for the period ended 19 March 2021:

Out of scope

81

SWC-21-MIN-0020

**Government Response to the Report of the Health
Select Committee on Petition 2014/134 of Lucy
McSweeney**
Portfolio: Associate Education (Hon Jan Tinetti)

CONFIRMED

Out of scope

Michael Webster
Secretary of the Cabinet

Proactively Released by the Associate Minister of Education



Cabinet Social Wellbeing Committee

Minute of Decision

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Government Response to the Report of the Health Select Committee on Petition 2014/134 of Lucy McSweeney

Portfolio **Education**

On 17 March 2021, the Cabinet Social Wellbeing Committee:

- 1 **noted** that in August 2020, the Health Committee presented its report to the House entitled “Petition 2014/134 of Lucy McSweeney”;
- 2 **noted** that the Health Committee recommended that the government investigate how best to embed mental health education in the New Zealand curriculum in a systemic and meaningful way, and that the Ministries of Health and Education should be heavily involved in this process;
- 3 **agreed** to the Government Response to the Report of the Health Committee on Petition 2014/134 of Lucy McSweeney (the government response), attached under SWC-21-SUB-0020;
- 4 **noted** that the government response must be presented to the House by 23 March 2021;
- 5 **invited** the Associate Minister of Education (Hon Jan Tinetti) to:
 - 5.1 present the government response to the House in accordance with Standing Order 252;
 - 5.2 write to the petitioner enclosing a copy of the government response to the report of the Health Select Committee on the petition, after the response has been presented to the House.

Rachel Clarke
Committee Secretary

Present:

Hon Grant Robertson
Hon Dr Megan Woods
Hon Chris Hipkins
Hon Carmel Sepuloni (Chair)
Hon Andrew Little
Hon Nanaia Mahuta
Hon Poto Williams
Hon Damien O'Connor
Hon Kris Faafoi
Hon Peeni Henare
Hon Jan Tinetti
Hon Dr Ayesha Verrall
Hon Aupito William Sio
Hon Meka Whaitiri
Hon Priyanca Radhakrishnan

Officials present from:

Office of the Prime Minister
Office of the Chair
Officials Committee for SWC

Proactively Released by the Associate Minister of Education

**Government Response to
Report of Health Committee
on
Petition 2014/134 of Lucy McSweeney**

Presented to the House of Representatives

In accordance with Standing Order 252

Government response to Report of Health Committee on Petition 2014/134 of Lucy McSweeney

Introduction

1. The Government has carefully considered the Health Committee's report on Petition 2014/134 of Lucy McSweeney, which called for better guidelines, adequate training and funding for mental health education in the New Zealand high school curriculum up to and including year 13, covering the key issues of:
 - Causes and symptoms of common mental health issues
 - How to support those experiencing mental distress
 - Available pathways for help
 - Positive wellbeing actions.
2. The Government responds to the report in accordance with Standing Order 252.
3. Written notification of Ms McSweeney's online petition was received through written correspondence from Ms McSweeney to the Office of Hon. Nikki Kaye. The petition was referred to the Health Committee of the 51st Parliament on 8 June 2017.
4. The current Government is prioritising improving mental wellbeing, particularly for children and young people. The Child and Youth Wellbeing Strategy (2019) aims for New Zealand to be the best place in the world to be a child or young person. This priority also forms a key consideration in the government response to the COVID-19 pandemic.
5. In May 2019, the Government responded to *He Ara Oranga*: the Report of the Government Inquiry into Mental Health and Addiction which called for a more collaborative approach to mental health and addiction and committed to ensuring all New Zealanders, particularly children and young people can access mental health, addiction and wellbeing supports that work for them, when and where they need it.
6. The Government notes the 2016 Education Review Office resource *Wellbeing for success: a resource for schools*, which identified five vital aspects in schools that successfully promote and respond to student wellbeing:
 - i. Agreed values and vision that underpin mental wellbeing actions in schools
 - ii. The school's curriculum being designed and monitored in alignment with valued goals
 - iii. Students being a powerful force in wellbeing and other decisions
 - iv. Students' wellbeing is actively monitored
 - v. Systems in place and followed, in response to wellbeing issues.

Recommendations and Government response

7. **Recommendation 1:** That the Government investigate how best to embed mental health education in the New Zealand curriculum in a systemic and meaningful way.
8. **Recommendation 2:** That the Ministries of Health and Education should be heavily involved in this process.

Response:

- Embedding mental health education in *The New Zealand curriculum* in a “systemic and meaningful way” will need to integrate and align with other mental health and wellbeing initiatives in education settings. Supporting mental health and wellbeing in schools is most effective when it is embedded using a whole-school approach that includes the teaching of wellbeing curriculum in conjunction with supportive school environments, culture, leadership, connections with whānau and local communities and targeted mental health and learning supports for children and young people who need them.
- The Ministry of Education is developing Mental Health Education Curriculum Guidelines to support teaching and learning about mental health in New Zealand schools. These guidelines provide further detail about best practice in this area of learning in *The New Zealand Curriculum* and are due for release in 2021. The Guidelines aim to support teachers, leaders, and boards of trustees to deliver high quality mental health education that is safe, inclusive, and equitable, and will support a whole-school approach to mental health education that is underpinned by wellbeing. They will also provide clarity about the key learning at each level of the curriculum. Development of the guidelines has involved wide consultation with many experts and sector groups, including schools, whanau, and ākonga themselves, to ensure they are fit for purpose.

Ministry of Education led initiatives

- Mental health education is one of the seven key areas of learning within Health and Physical Education in *The New Zealand Curriculum*. It is compulsory for students in years 1 to 10 and optional for students in 11 to 13. Within mental health education, students develop competencies for mental wellness, and build resilience through strengthening their personal identity and sense of self-worth, through managing change and loss, and through engaging in processes for responsible decision making. They learn to demonstrate empathy, and they develop skills that enhance relationships. Students use these skills and understandings to take critical action to promote personal, interpersonal, and societal well-being.
- All secondary schools have recently been provided with a copy of the New Zealand Council Educational Research publication, *Mental health education and hauora: Teaching interpersonal skills, resilience and wellbeing*. This resource supports teaching children and young people about mental health, wellbeing, resilience, and interpersonal skills. It covers ways to enhance student learning in four broad areas:
 - i) personal identity and wellbeing,
 - ii) communication and relationships with others
 - iii) social issues and social justice (especially against discrimination and exclusion),
 - iv) health promotion and action.

The lesson plans are appropriate for multiple year and curriculum levels and are particularly useful for Years 7–11 health education.

- The Ministry of Education is currently working with schools, kura, ākonga, parents, whānau, iwi and communities to develop curriculum progress resources that map individual student growth across *Te Marautanga o Aotearoa* and *The New Zealand Curriculum*. The resources aim to support teachers and school leaders to notice and respond to student social and emotional learning, as well as their progress in literacy and numeracy.

- An additional \$32.8 million has been allocated for new Curriculum Leads (Wellbeing) to support the delivery of a high-quality Health and Physical Education local curriculum. The Curriculum Leads (Wellbeing) roles will include the provision of support to schools to teach students about mental health and healthy relationships, and to support schools and Boards of Trustees to develop localised curriculum and policies to promote the wellbeing of children and young people. A role of the Curriculum Leads (Wellbeing) will be to support the implementation of the new Mental Health Education guidelines.
- In July 2020 an investment of \$75.8 million to increase access to guidance counsellors to help students and ākonga deal with mental health and wellbeing issues was announced.
- The Ministry of Education Relationships and Sexuality Education Guidelines which focuses on consensual, healthy and respectful relationships as being essential to student wellbeing, available in two volumes: one for Years 1-8 and one for Years 9-13.
- In addition to the above, in response to COVID-19 the Government is providing a \$50 million Urgent Response Fund (URF) for centre-based early learning services, schools and kura to support the wellbeing needs of their learners and ākonga, and a further \$16 million to support education workforce wellbeing. This includes funding for:
 - Resources and materials for improving learner wellbeing/reducing stress, anxiety, depression, grief.
 - Catch-up learning support, small group tutoring.
 - Boosting learner attendance, engagement, participation and progress.
 - Professional advice, such as mentors, counsellors, child psychologists and behaviour support workers to advise on responses to children or young people's needs.
 - Community support by a service or school, such as before or after school care.
 - Additional teacher time or teacher aide time to support children and young people with COVID-19 lockdown wellbeing needs.
 - Teacher release to provide additional support to students.
 - Additional support for learners with including those who are neurodiverse and gifted.
 - Connecting with iwi, hapū, community organisations, churches, local services and others who know their communities and are well placed to support families and whānau.

Ministry of Health led initiatives

- A large programme of work is underway to implement the response to *He Ara Oranga* and transform the approach to mental health and addiction. This programme of work includes targeted investment to expand access to, and choice of mental health and addiction supports that meet the needs of children and young people in primary health and community settings.
- District Health Boards (DHBs) provide a variety of school-based mental health and addiction supports to meet the needs of local communities. The mix and types of supports available vary across DHB regions and include activities such as suicide prevention services, Child and Adolescent Mental Health Services in-reach support, and on-school-site group and individual support options.

- School Based Health Services (SBHS) are nurse-led primary care services available to students in deciles 1 to 5 public secondary schools, Teen Parent Units and Alternative Education settings nationally. SBHS provide young people with access to youth friendly health services including mental health supports and increased opportunity for early intervention. SBHS are an important component of a school-wide wellbeing environment, as they connect students and schools to appropriate support for increased student mental health and additional wellbeing needs.
- Mana Ake provides mental wellbeing support to children aged 5–12 in schools across Canterbury and Kaikōura and provides advice, guidance and support for schools, teachers and whānau. Mana Ake kaimahi (workers) include psychologists, social workers, counsellors, teachers and youth workers.
- Sparklers at Home is a toolkit for parents and whānau to support primary and intermediate school-aged children. Work is underway with the Ministry of Education to build upon Sparklers at Home and make resilience-building and mindfulness resources available to primary and intermediate schools that align with the curriculum, are culturally responsive and meet the needs of teachers and children.
- The Ministry of Health also provides a range of other services that support student and community wellbeing in the areas of sexual and reproductive health, nutrition and physical activity and smoking cessation. This includes Healthy Active Learning, an initiative that takes a holistic approach to wellbeing and includes development of curriculum resources and guidance. There is also a collaborative design process underway to develop a new approach to health promotion to support wellbeing in schools.

Conclusion

9. The Government welcomes the Health Committee response to Lucy McSweeney's petition as it emphasises the important role of schools, school leadership, teachers and education in supporting mental wellbeing for children and young people.
10. The Ministry of Education has a large programme of work underway to provide educational resources and support to ensure ākonga receive high quality mental health education across all year levels. These initiatives will complement and enhance work led by the Ministry of Health to increase access to mental health and addiction support in primary and community settings.
11. The Ministries of Education and Health are already working together to support student wellbeing and will continue to take up opportunities to deliver collective impact.

Annex 2: Health Committee Report (Petition of Lucy McSweeney)

Attached as a separate PDF

Petition 2014-134 of Lucy McSweeney

Report of the Health Committee

August 2020

Proactively Released by the Associate Minister of Education



Joint Report: Government Response to Petition 2014/123 of Lucy McSweeney on Mental Health Education in the curriculum

To:	Hon Jan Tinetti, Associate Minister of Education Hon Andrew Little, Minister of Health		
Date:	4 February 2021	Priority:	Medium
Security Level:	In Confidence	METIS No:	1238303
Drafter:	Debra Martis, Ministry of Education Kieran Moorhead, Ministry of Health	DDI:	04 463 8855
Key Contact:	Pauline Cleaver	DDI:	04 463 8110
Messaging seen by Communications team:	Yes / No	Round Robin:	Yes / No

Purpose of Report

The purpose of this paper is for you to:

Agree to the Government Response to the Health Committee's final Report to the House, subsequent to the Health Committee consideration of *Petition 2014/134 of Lucy McSweeney*, prepared jointly by the Ministries of Education and Health. A copy of that Report is attached for your reference (Annex 2).

Summary

1. Lucy McSweeney provided written notification of her online petition (2014/134) to the Office of Hon. Nikki Kaye in April 2017. The petition called for "better curriculum guidelines, adequate teacher training and general funding for mental health education in the New Zealand high school curriculum".
2. Petition 2014/134 of Lucy McSweeney was referred to the Health Committee of the 51st Parliament on 8 June 2017 for consideration and report.
3. The Health Committee Report, August 2020 (Annex 2) recommends that the Government investigate how best to embed mental health education in *The New Zealand Curriculum* in a systemic and meaningful way, and that the Ministries of Education and Health should be heavily involved in this process.
4. The proposed Government response (Annex 1) includes a raft of initiatives addressing the improvement of mental wellbeing, particularly for children and young people. Notably, it includes the Ministry of Education's development of Mental Health

Education Curriculum Guidelines for schools. Annex 1 also outlines work being led by the Ministry of Health to improve the health and wellbeing of children and young people and ways in which the Ministries of Education and Health are working together as well as future opportunities for cross-agency collaboration.

Recommended action

The Ministries of Education and Health recommend that you:

- a. **Agree** to the Government response to the Select Committee's report.

Agree / Disagree

- b. **Agree** to proactively release this report

Agree / Disagree




Ellen MacGregor-Reid
Deputy Secretary
Early Learning and Student Achievement

04/02/2021



Hon Jan Tinetti
Associate Minister of Education

11/02/2021



Toni Gutschlag
Deputy Director-General
Mental Health and Addiction

10/2/2021

Hon Andrew Little
Minister of Health

 / /

Background

1. Lucy McSweeney provided written notification of her online petition to the Office of Hon. Nikki Kaye in April 2017. It called for better guidelines, and adequate training and funding for mental health education in the New Zealand high school curriculum up to Year 13 covering the key areas of:

- Causes and symptoms of common mental health issues
- How to support those experiencing mental distress
- Available pathways for help
- Positive wellbeing actions

As of 21 September 2020, the petition had 10,447 signatures.

2. The Petition was referred by Parliament to the Health Committee which considered it on 8 June 2017.
3. The Health Committee Report, August 2020 (Annex 2) notes that some young people in Aotearoa experience poor mental health outcomes, and cites findings in *He Ara Oranga: Report of the Government Inquiry into Mental Health and Addiction* (2018) that our suicide rate for young people is among the worst in the Organisation for Economic Cooperation and Development (OECD). The Health Committee Report notes that good mental health is essential to young peoples' success, and outlines findings from research undertaken by the Parliamentary Library into the kinds of mental health initiatives that work well highlighting the crucial role school culture plays in the success of any initiative. Within the research findings, students and teachers highlighted the importance of learning about mental health as part of the health curriculum and helping young children develop resilience and learn how to regulate their emotions.
4. The Health Committee Report, August 2020 (Annex 2) recommends that
 - The Government investigate how best to embed mental health education in *The New Zealand Curriculum* (2007) in a systemic and meaningful way;
 - The Ministries of Education and Health should be heavily involved in this process.
5. School settings play an important role in supporting mental wellbeing for children and young people. The success of any initiative aimed at improving mental wellbeing in schools is heavily influenced by the wider school culture and existing strategies implemented in the school to support mental wellbeing. Taking a whole-school approach includes making improvements to school culture, mental wellbeing promotion activities, ensuring pathways to support are readily available for students and their whānau and embedding mental wellbeing education in the curriculum.
6. Mental health education is one of the seven key areas of learning within Health and Physical Education in *The New Zealand Curriculum*. It is compulsory for students in years 1 to 10 and optional for students in years 11 to 13. Within mental health education, students develop competencies for mental wellness, and build resilience through strengthening their personal identity and sense of self-worth, through managing change and loss, and through engaging in processes for responsible decision making. They learn to demonstrate empathy, and they develop skills that enhance relationships. Students use these skills and understandings to take critical action to promote personal, interpersonal, and societal wellbeing.

7. The Ministry of Education is developing Mental Health Education Curriculum Guidelines for schools. These aim to support teachers, leaders, and boards of trustees to deliver quality mental health education that is safe, inclusive, and equitable. These will be available to the sector in 2021.
8. The newly developed Curriculum Lead roles are tasked with supporting the implementation of the Mental Health Education Guidelines by providing front-line support to teachers and kaiako. The Curriculum Leads will work with individuals and groups of teachers and kaiako depending on the level of support they need. This could include how to work with their communities to determine what the guidelines mean to them and their ākonga. Additionally, the Curriculum Leads will provide the ministry with information about the uptake and level of understanding of the guidelines for any future improvements and refinements.
9. Mental health education and support for children and young people should be holistic and grounded in a wellbeing approach that recognises the social, cultural and economic factors that enable children, young people and their whānau to thrive. The proposed Government response (Annex 1) contains details of the Mental Health Education Curriculum Guidelines as well as detailed information from Ministries of Education and Health of initiatives to address the wellbeing of children and young people.

Proactive Release

10. It is intended that this Joint Report is proactively released as per your expectation that information be released as soon as possible. Any information which may need to be withheld will be done so in line with the provisions of the Official Information Act 1982.

Annexes

Annex 1: Government response to Report of Health Committee on Petition 2014-134 of Lucy McSweeney

Annex 2: Health Committee Report (Petition of Lucy McSweeney)