



Integrated primary mental health and addiction workforce

Profile update 1 July to 31 December 2022

February 2023

Acknowledgements

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Executive summary

Background

Health coaches and health improvement practitioners (HIPs) are part of a team that provide integrated primary mental health and addiction (IPMHA) services for people. This is the third report looking at the profile of people registered for health coach and HIP training.

Method

This report is based on information received from people registered for health coach and HIP training between 1 July and 31 December 2022, regardless of whether they began training during this period. Employers register people for training directly, and Te Pou requests trainees complete a form about their personal and professional profile. The analyses summarise people's characteristics and compare results with information about trainees registered before 1 July 2022.

Profile

Health coaches

Thirty-nine out of 114 people registered for health coach training provided information to Te Pou (34 percent response).

- Nearly half (44 percent) of health coaches are aged 39 or younger, 33 percent are 40 to 54, and 23 percent are 55 and older.
- Three-quarters (77 percent) are female, 23 percent are male, and none identify as gender diverse.
- One-third (36 percent) are Māori. Relatively few (3 percent) identify in a Pasifika ethnic group, and 10 percent identify in an Asian ethnic group.
- The average full-time equivalent (FTE) position for health coaches is 0.8.
- About three-fifths (59 percent) work in a primary healthcare organisation (PHO).
- One-fifth (18 percent) were previously employed in the mental health and addiction sector.
- This current group of health coach trainees report a similar profile to those registered before 1 July 2022 across most measures. Exceptions are that a smaller share:
 - identify as Māori (36 percent compared to 43 percent prior to 1 July) or in a Pasifika ethnic group (3 percent compared to 10 percent)
 - were previously employed in the mental health and addiction sector (18 percent compared to 28 percent).

HIPs

Eighty-nine out of 95 people registered for HIP training provided information to Te Pou (95 percent response).

- Three-fifths of HIPs are aged under 55 (30 percent are 39 and younger, 30 percent are 40 to 54, and 39 percent 55 and older).
- Most (84 percent) are female, 16 percent are male, and none identify as gender diverse.
- One quarter (24 percent) identify as Māori, one in 10 identify in a Pasifika or Asian ethnic group (9 and 8 percent respectively), and 76 percent identify in other ethnic groups.
- The average FTE position is 0.75.
- Three-fifths (61 percent) of HIPs were previously employed in the mental health and addiction sector. Most of these people were previously employed by either Te Whatu Ora or NGOs.
- HIPs are most likely to be registered through either the Nursing Council of New Zealand, the Social Workers Registration Board, or the Occupational Therapy Board.
- Current HIP trainees report a similar profile to trainees registered before 1 July 2022 across most measures. The exception is that a greater share of current trainees identify as Māori (24 percent compared to 18 percent) or in a Pasifika ethnic group (9 percent compared to 7 percent), and slightly fewer identify as Asian (8 percent compared to 10 percent).

Conclusion

The profile of health coaches and HIPs is fairly consistent over time. However, low response from health coach trainees may impact results' reliability. Te Pou is currently working to improve data collection from health coaches.

The report concludes workforce development priorities include growing the share of workers identifying as Māori, or in Pasifika or Asian ethnic groups, as well as men and gender diverse people. Workforce planning is needed to mitigate the future impact of ageing on the HIP workforce.

As expected, this report shows that mental health, addiction, and other health services are a major workforce pipeline into health coach and HIP roles. Recent changes to the professional requirements for HIPs to include Te Whatu Ora accredited counsellors registered within the New Zealand Association of Counsellors (NZAC) may increase future opportunities to employ people from other sectors.

Background

Primary healthcare provided by general practices (GPs) and PHOs is often the first point of contact for people seeking support. Primary healthcare is uniquely placed to support people with mental health challenges and problematic substance use that have an impact on their lives and who are not eligible for secondary services. In 2018, *He Ara Oranga: Report of the Government Inquiry into Mental Health and Addiction* (2018) highlighted the need to expand people's access to, and choice of services and support (2018; Ministry of Health, 2021). In response, Manatū Hauora Ministry of Health began a 5-year rollout of IPMHA services including funding and training for new health coach and HIP roles. The oversight of health coach and HIP training now sits with Te Whatu Ora. Te Pou is contracted to deliver and coordinate training programmes for these roles.

This is the third report looking at the profile of people registered for health coach and HIP training.

- The first IPMHA workforce profile report was published in July 2022 (Te Pou, 2022a). This was based on a survey of trainees up to 31 December 2021.
- The second IPMHA workforce profile report was published in August 2022 (Te Pou, 2022b) for trainees registered between 1 January to 30 June 2022.

This report presents information about health coaches and HIPs registered between 1 July to 31 December 2022.

This information will support future planning and understanding of the new IPMHA workforce, including how representative it is of the people served. It will help ensure long-term sustainable growth for these roles within the broader mental health and addiction, primary healthcare, and community sectors.

Method

This report is based on information received from health coach and HIP trainees registered between 1 July and 31 December 2022. Trainees are asked to complete a form about their socio-demographic profile, employment, and previous work history.

In the 6 months to 31 December 2022, employers enrolled 114 people for health coach training and 94 for HIP training. Te Pou or health coach training providers administered forms directly to registered trainees. Te Pou followed up missing forms with reminder emails. All people enrolled could commence scheduled training regardless of whether they had completed the form.

The analyses in this report include only people who provided information. This group may include people who are enrolled for future training but have not yet started, and people who

began and have not yet completed training. For information about people completing training during this period see the evaluation reports available at, <https://www.tepou.co.nz/>

Analyses compare the profile of people registered between 1 July to 31 December 2022 with those registered before 30 June 2022. Analyses use all valid information. Any incomplete or missing information is excluded. Averages are used to describe the mean value – the sum of all values divided by the total number of valid responses. Analyses were undertaken using Microsoft Excel.

Workforce profile

This section describes the characteristics of people registered for health coach training, followed by HIP training. Findings are colour coded as summarised below.

Document key:

- Health coaches 1 July to 31 December 2022
- HIPs 1 July to 31 December 2022
- All (corresponding people) to 30 June 2022

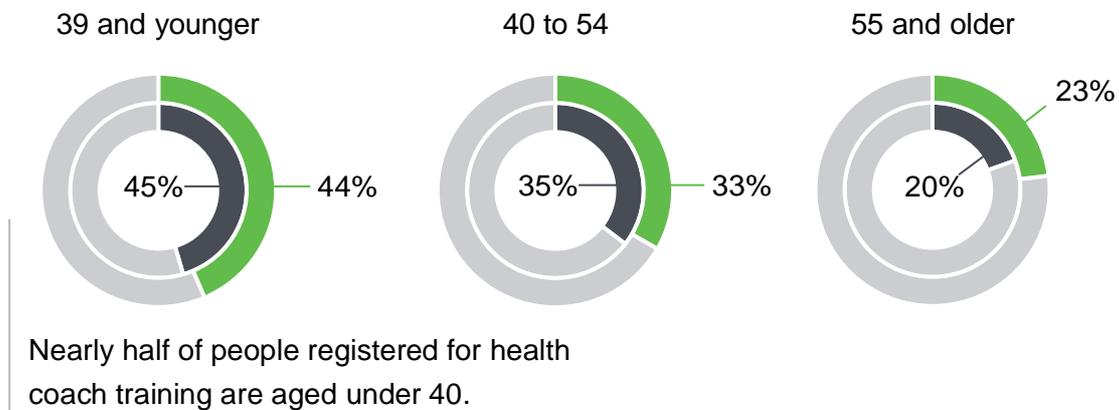
Health coaches

A total of 114 people enrolled for health coach training between 1 July and 31 December 2022. Of these, 39 people completed the Te Pou form (34 percent response rate). Te Pou is currently working to improve the completeness of collections for this group.

Who are the people registered for health coach training?

Age

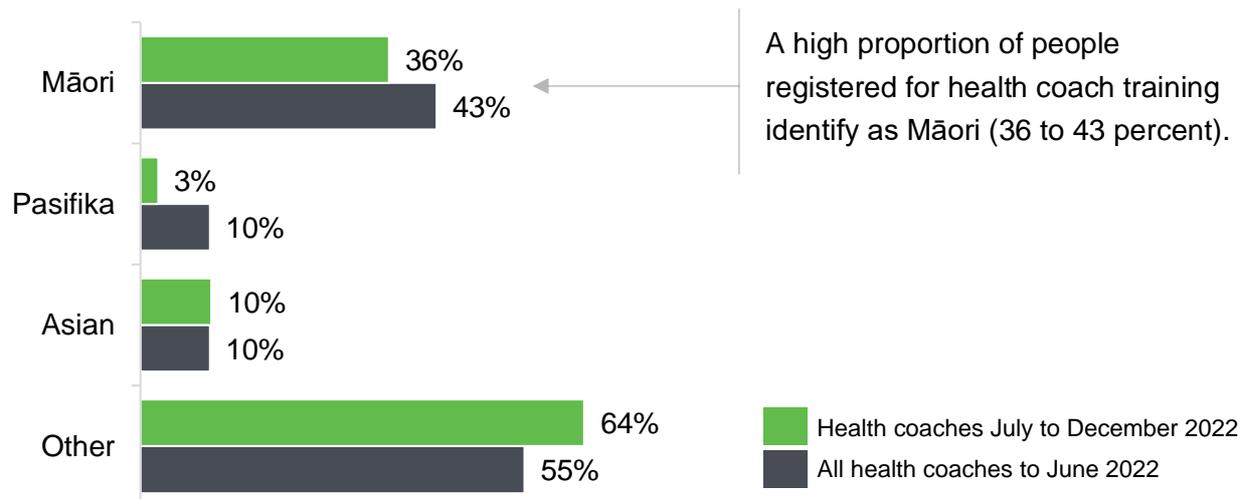
The average age of health coaches is just over 42 years old. This is similar to people registered before July 2022 (41 years).



Gender



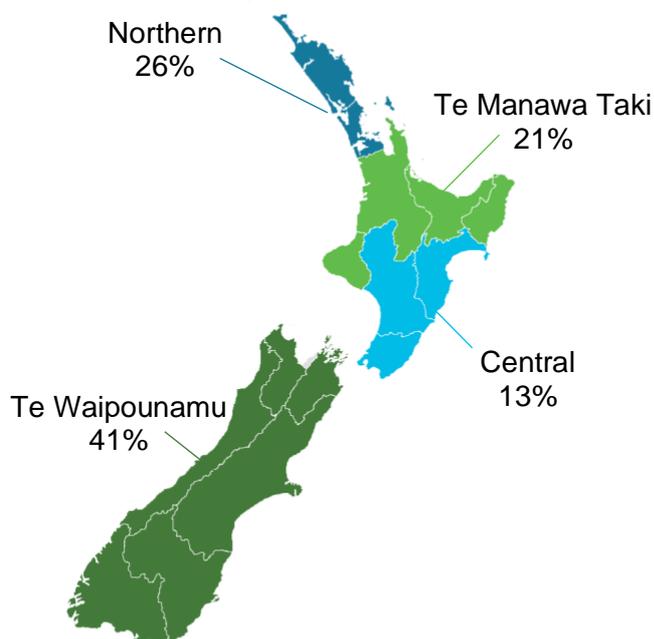
Ethnicity



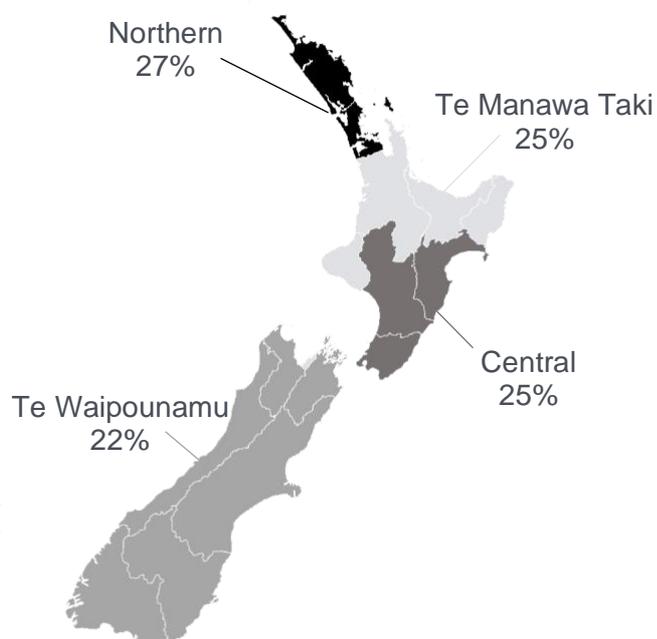
Note. Proportions will add up to more than 100% as people may select more than one category. Other category includes New Zealand European and European among others.

Where do people who are registered for health coach training work?

Health coaches July to December 2022



All health coaches to June 2022



Health coaches registered between July to December 2022 are most likely to work in Te Waipounamu (41 percent).¹

¹ Where health coaches work largely reflects the phased rollout of funding.

How are people registered for health coach training working?

FTEs employed

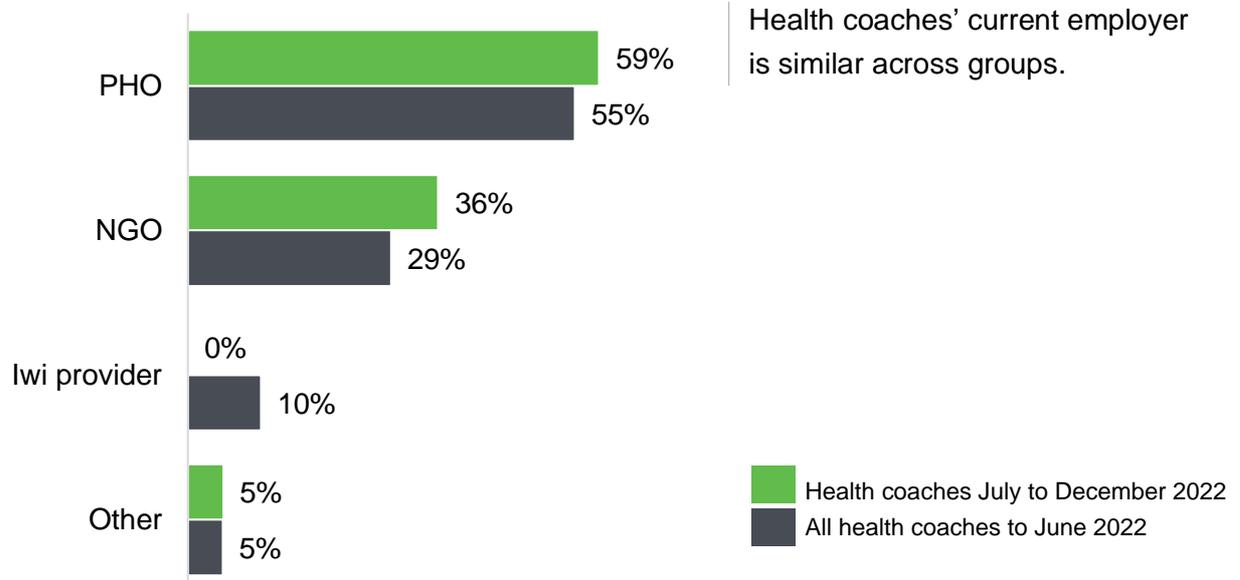
The average FTE position employed for people registered for health coach training is 0.8, ranging from 0.3 to 1.0 FTE position.

Hours worked per week



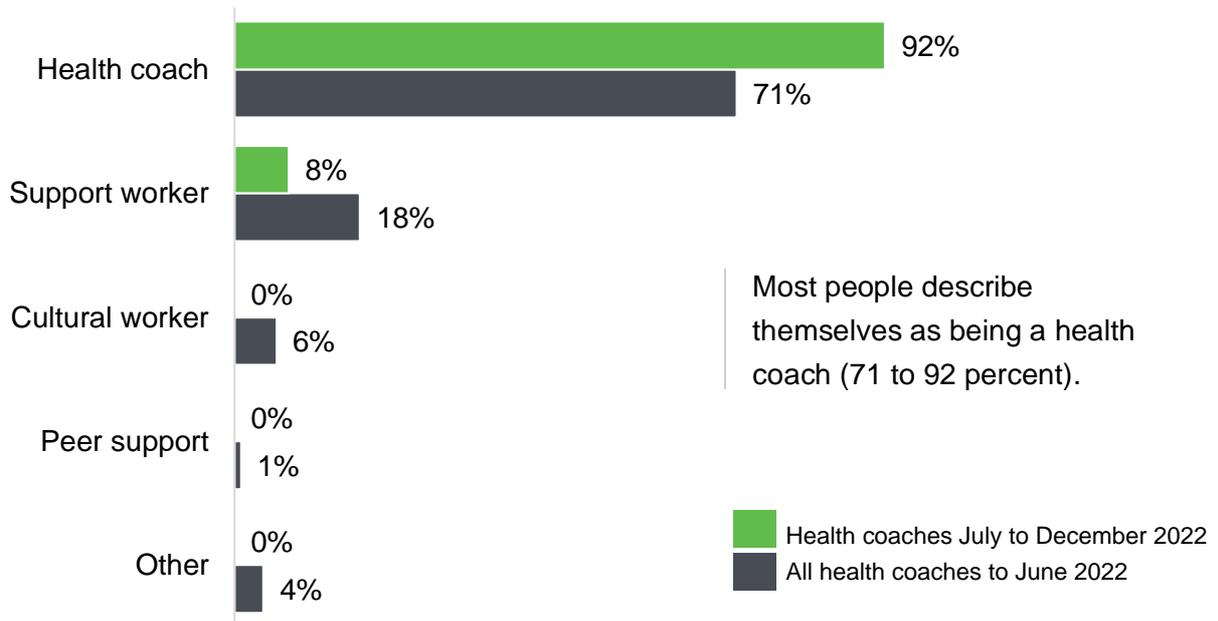
About two-thirds (62 to 69 percent) of people registered for health coach training work full-time, or 30 or more hours per week.

Employer



Health coaches' current employer is similar across groups.

Current role title

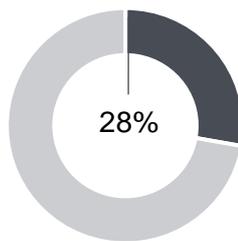
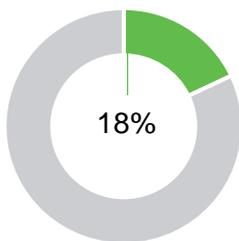


Note. All roles include health coach responsibilities. Totals may add up to more than 100% as people could choose multiple categories.

Where have people registered for health coach training come from?

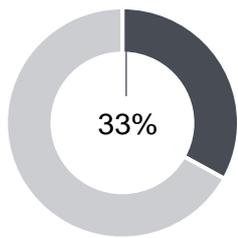
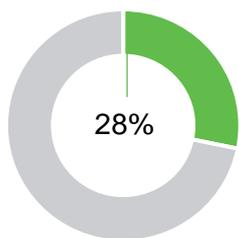
Previous sector employed in

Mental health and addiction Mental health and addiction



Other health

Other health

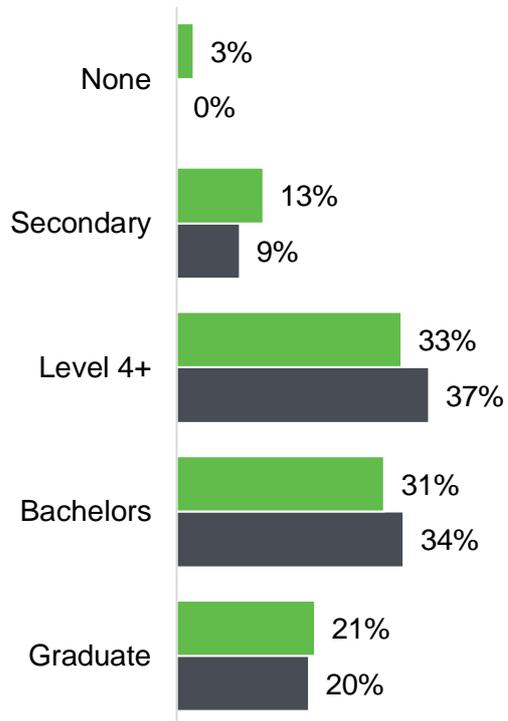


Proportionately fewer people registered for health coach training between July to December 2022 came from the mental health and addiction sector compared to those registered before 30 June 2022.

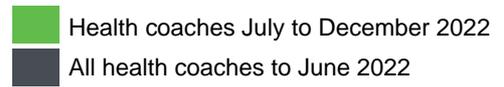
A similar proportion of current people registered for health coach training came from other healthcare services compared to those registered before 30 June 2022.

Health coaches July to December 2022 All health coaches to June 2022

Education



Around half of health coaches have a bachelor's degree or higher.



Health improvement practitioners

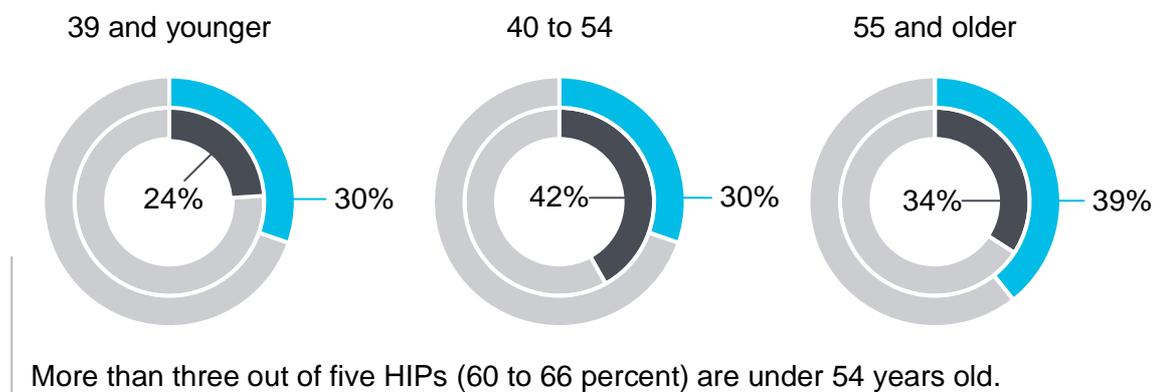
This section describes the profile of people registered for HIP training.

A total of 94 people enrolled for HIP training between 1 July to 31 December 2022. Of these 89 people completed registration forms (95 percent response).

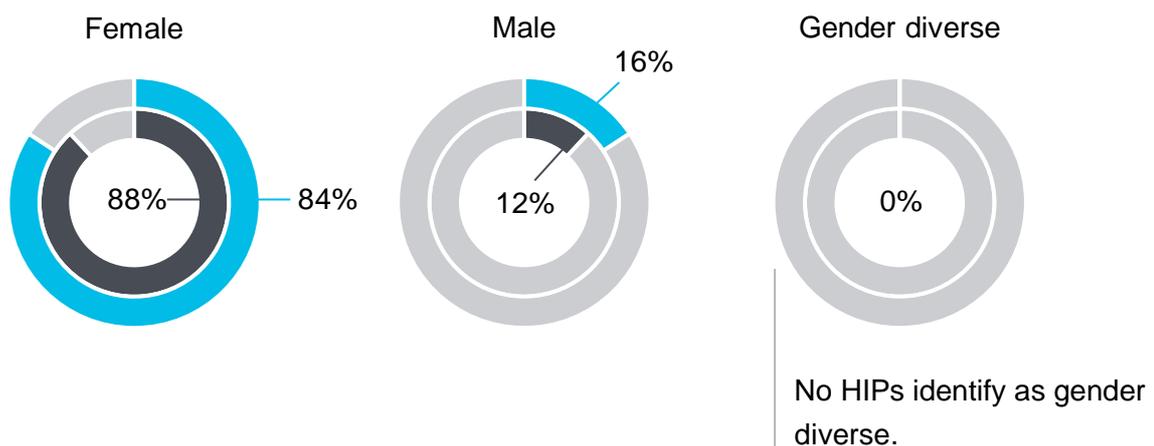
Who are the people registered for HIP training?

Age

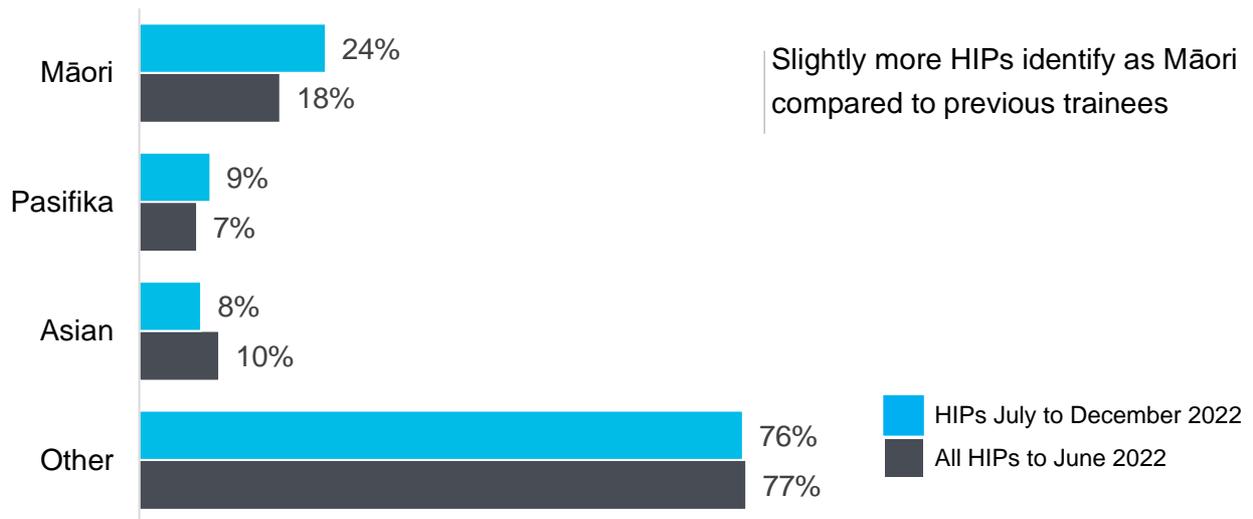
The average age of people registered for HIP training is just under 49 years old. This is similar to people registered before July 2022 (47 years).



Gender

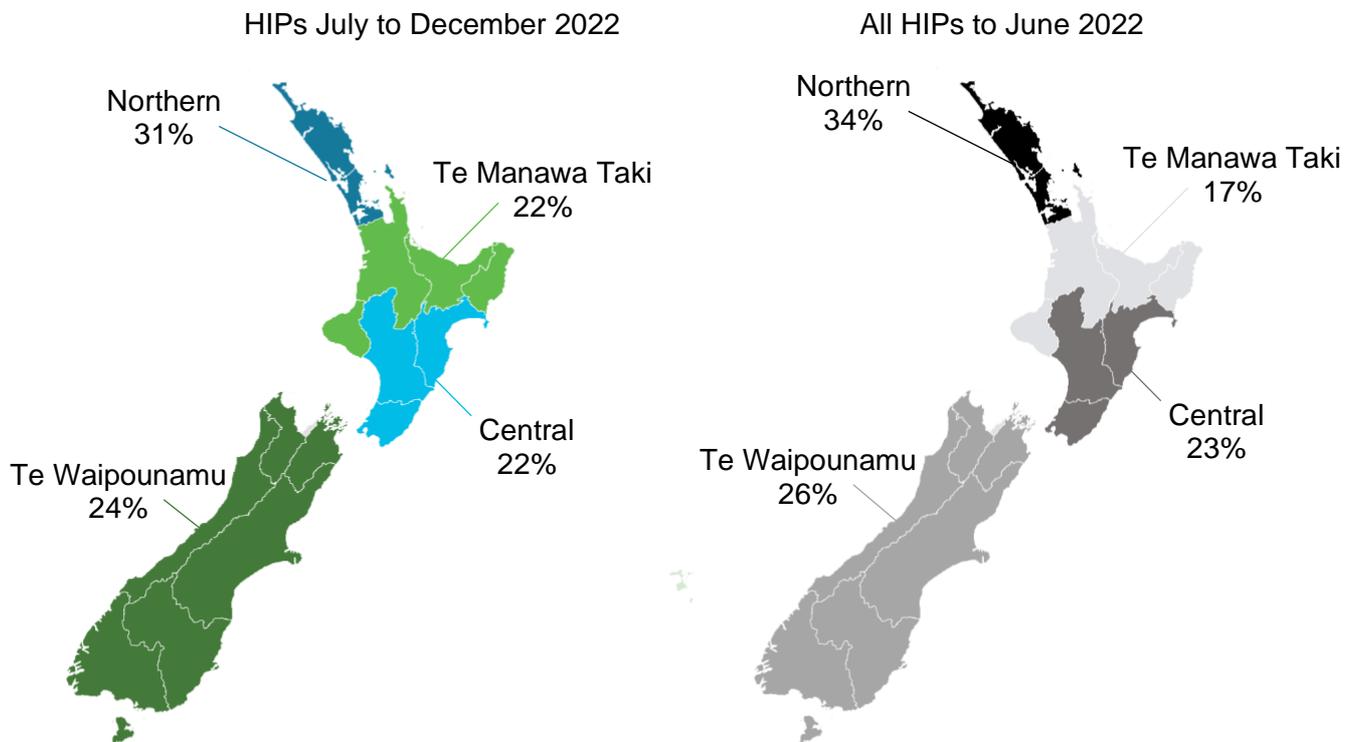


Ethnicity



Note. Proportions will add up to more than 100% as people may select more than one category. Other category includes New Zealand European and European among others.

Where do people who are registered for HIP training work?



The share of HIPs in each region is similar to previous trainees.²

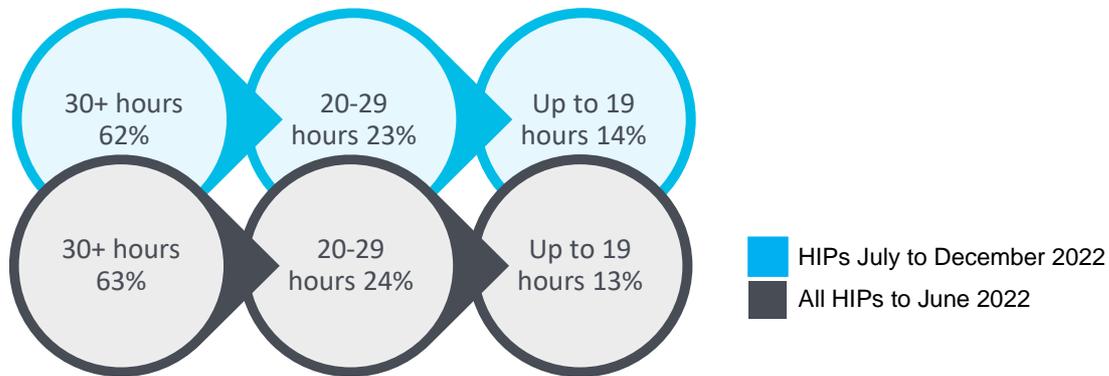
² Where HIPs work largely reflects the phased rollout of funding.

How are people registered for HIP training working?

FTEs employed

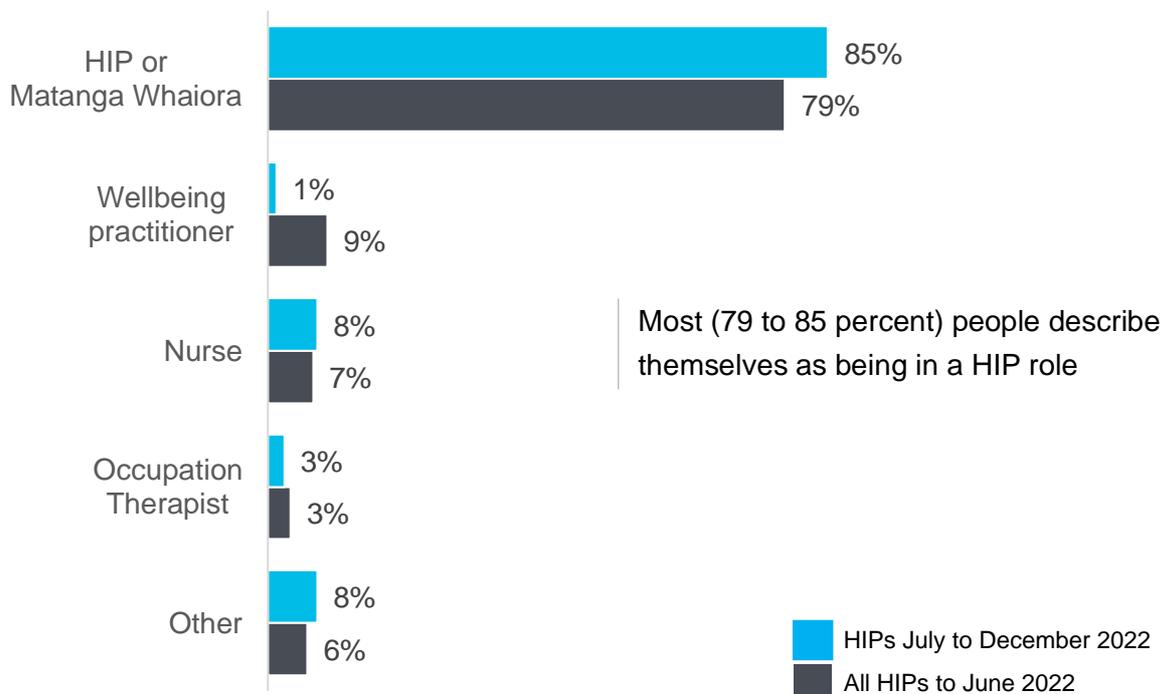
The average FTE position for HIP trainees is 0.75, ranging from 0 to 1.13.

Hours worked per week



Three-fifths (62 to 63 percent) of HIPs work full-time (30 or more hours per week).

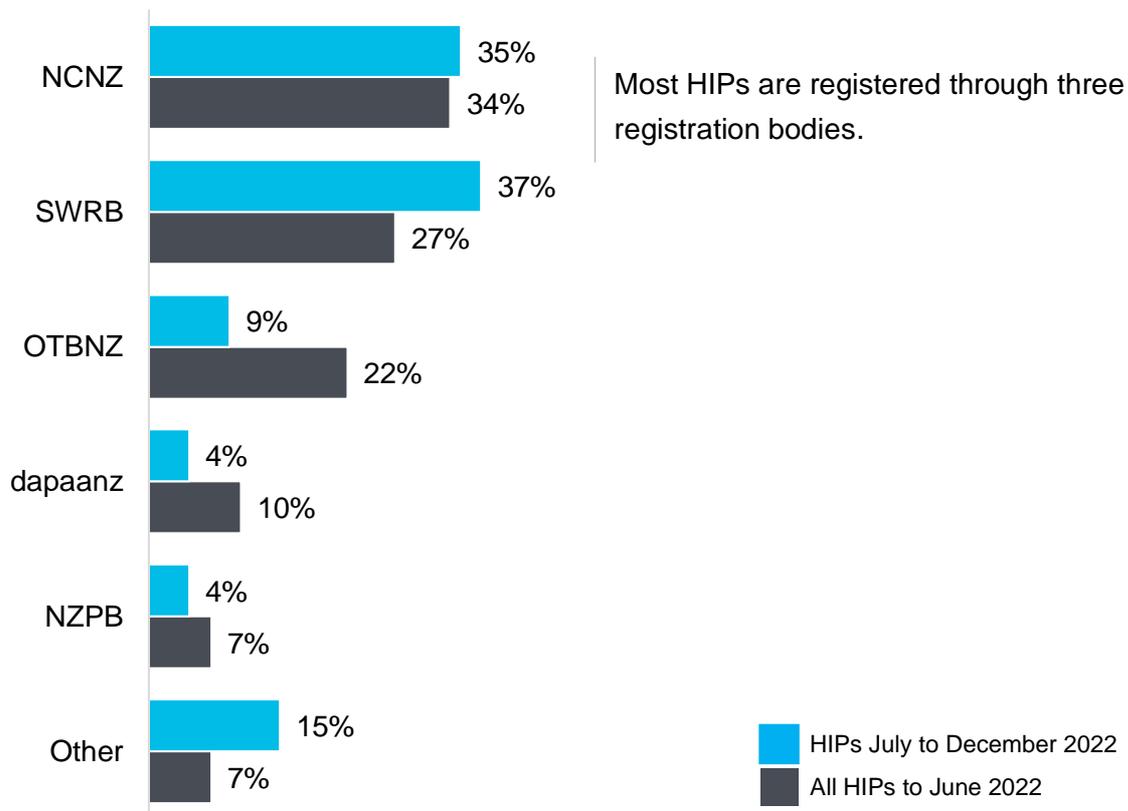
Current role title



Note. Proportions may add up to more than 100% as people may select more than one category. Other category includes variations on clinician and service titles and support workers among others.

Professional registration

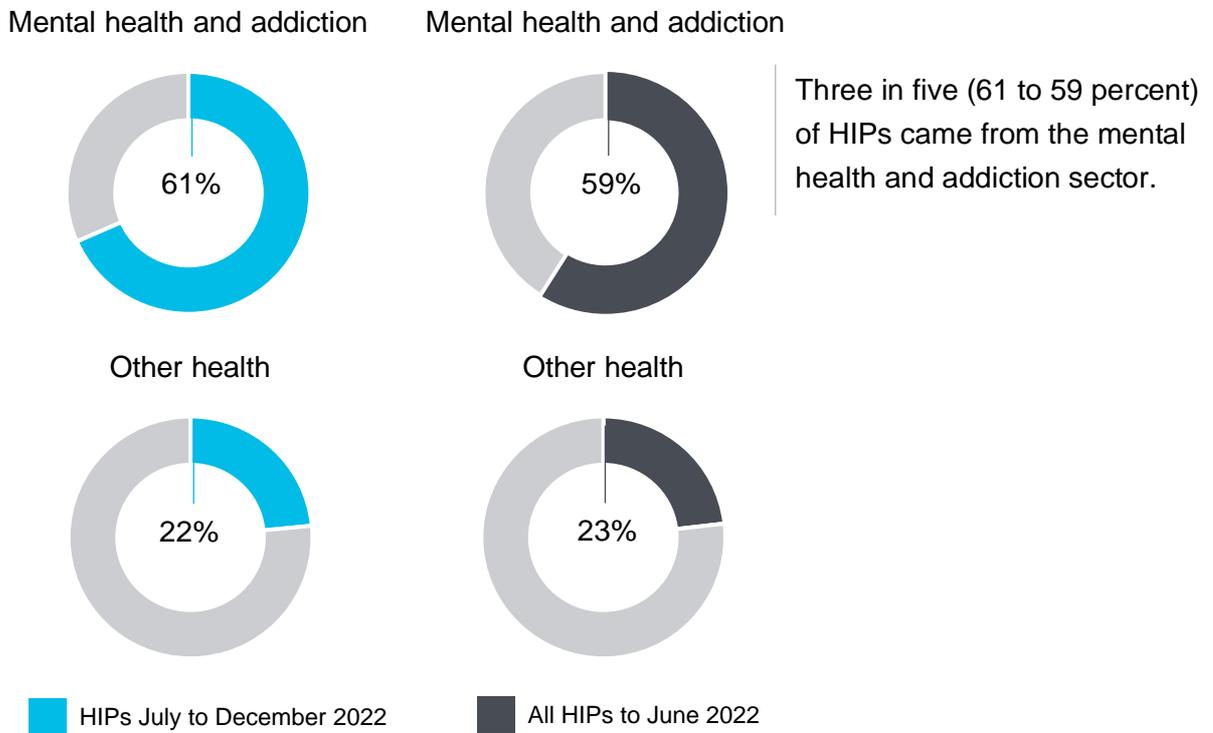
To undergo HIP training, a person must be registered to practice with a professional body under the Health Practitioners' Competency Assurance Act (HPCA), Social Workers Registration Board or *dapaanz* The Addiction Practitioners Association Aotearoa New Zealand. From September 2022, Te Whatu Ora accredited counsellors registered within NZAC are approved for HIP employment and training. None of the HIPs in this cohort meet these specific criteria. However, eight people have previously worked as counsellors with other relevant registration including the Social Workers Registration Board, New Zealand Psychologists Board, and Nursing Council of New Zealand.



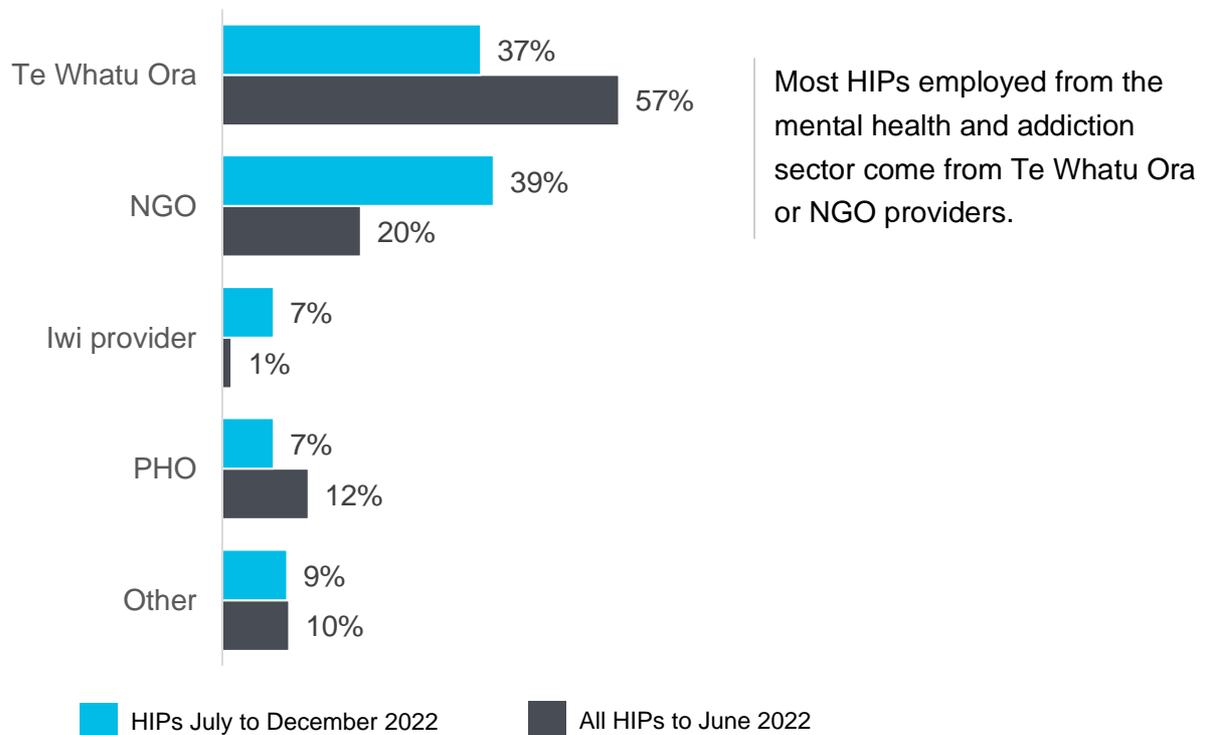
Note. Categories include: NCNZ Nursing Council of New Zealand; SWRB Social Workers Registration Board; OTBNZ Occupational Therapy Board of New Zealand; NZPB New Zealand Psychologists Board.

Where have people registered for HIP training come from?

Previous sector employed in

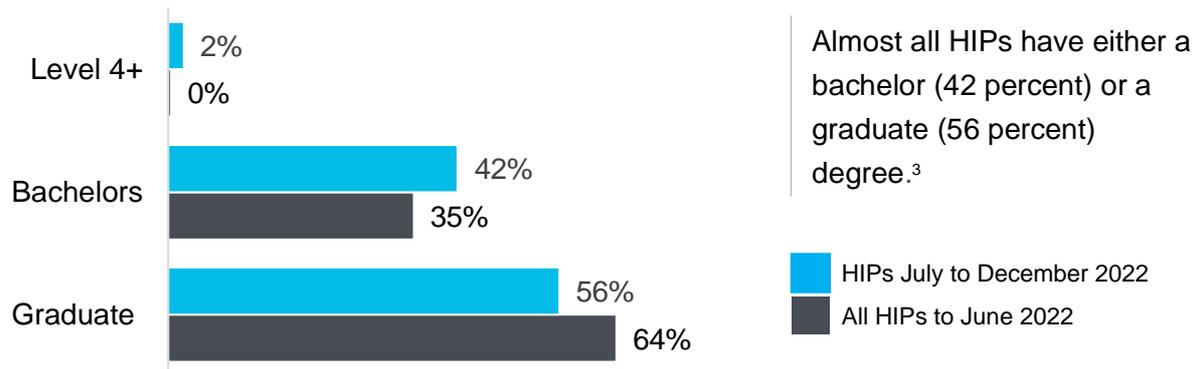


Previous mental health and addiction employer



Note. Other includes people who were previously self-employed or contractors, or employed by tertiary education providers, charities, and social enterprises.

Education



³ The high level of education for HIPs will reflect the training required to undertake HIP training.

Conclusion

Overall, the profile of health coach and HIP trainees registered between 1 July to 31 December 2022 is similar to those registered before 1 July 2022. However, caution is needed in interpreting information for health coach trainees as only one-third provided information. Te Pou is reviewing systems to improve future collections.

The information in this report reconfirms the need to prioritise ethnic diversity in the workforce. The share of Māori health coaches has declined compared to previous trainees, although they remain more than one-third of trainees. There is also relatively low representation of people from Pasifika and Asian ethnic groups. Likewise, attention is needed to gender diversity in the workforce, including growing the share of men and gender diverse people.

Workforce age is another priority area. HIPs tend to be older, with an average age of nearly 50, whereas health coaches are more likely to be aged under 40. Workforce planning needs to mitigate the risks associated with an aging HIP workforce over the next 15 years.

This report shows that mental health, addiction, and other health services continue to be the major workforce pipeline into health coach and HIP roles, although this may be reducing for health coaches. Changes to eligibility for HIP employment to include Te Whatu Ora accredited counsellors within NZAC registration may increase the number of people employed from other sectors in the future.

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