



Beyond Blue submission on the NSW Mental Health and Wellbeing Strategy

28 August 2025

Introduction

- Beyond Blue welcomes the opportunity to contribute to the development of the next NSW Mental Health and Wellbeing Strategy (the Strategy).
- In the face of lagging mental health system reform, particularly at a national level, and volatile social, economic, environmental and geopolitical conditions, Beyond Blue continues to advocate for person-centred system reform, and a wellbeing economy that prioritises health equity and action on the social determinants of mental health.
- This submission outlines key themes to drive sustainable long-term system and social change that is responsive to conditions that are driving distress. It is structured to reflect the two key themes of the consultation paper:
 - **the mental health service system in NSW**
 - **mental health and wellbeing in NSW communities**

Recommendations

Mental health service system

1. Improve access to supports and make systems easier to navigate for mental health consumers and their supporters.
2. Invest in prevention, promotion, early intervention and digital supports within a stepped care model.
3. Embed lived and living experience in system design, delivery and monitoring.
4. Prioritise system enablers including (a) whole-of-government collaboration and shared responsibility for outcomes; (b) innovative action to address workforce shortages and support a diverse, future-focused workforce including peer workers and non-clinical roles; and (c) investment in research and frameworks to collect, understand and use mental health and wellbeing data in policy-making.
5. Continue to work with First Nations Peoples to invest in First Nations-led, system-wide approaches to promoting social and emotional wellbeing and mental health and reducing suicide.

Mental health and wellbeing in NSW communities

6. Addressing the determinants driving distress and health inequities
7. Increase investment in settings-based approaches that promote mental health and wellbeing and connect people to supports.
8. Combat stigma and discrimination.

This submission presents data and insights specific to NSW from **Australia's Mental Health and Wellbeing Check** - a nationally representative survey conducted by the ANU's Social Research Centre on behalf of Beyond Blue. Beyond Blue is pleased to offer the NSW Mental Health Commission a more detailed data pack if this will be of assistance.

The submission has been shaped by insights from NSW members of Beyond Blue's lived experience group - Blue Voices, who participated in two focus groups facilitated in July 2025. Their contributions are reflected in *blue italics* throughout the document. We extend our sincere thanks to the Blue Voices community members for their generosity of time and their commitment to transforming lived experience into meaningful solutions.

Context

Strong foundations and new opportunities

- Beyond Blue commends the comprehensive approach taken in the previous Strategy, *Living Well: A Strategic Plan for Mental Health in NSW 2014 – 2024*. It aligned with Beyond Blue's role to work with the community to improve mental health and make it easier for people to feel better earlier, get well, and stay well.
- It laid strong foundations, which should continue to be prioritised going forward, including:
 - reform that is designed, delivered and monitored with people who have lived and living experience, their families, kinship groups and carers;
 - tangible actions to promote individual and community wellbeing, investment in prevention and strategies to connect people with support early;
 - recognition that mental health is shaped by social, economic, and environmental factors and governance mechanisms that challenged the NSW Government to improve cross-government collaboration and shared responsibility; and
 - a robust monitoring framework that keeps the Strategy live, including (a) a public-facing dashboard that reflects a holistic view of mental health and wellbeing; and (b) regular public reporting.
- The development of the next NSW 10-year Strategy is occurring during a critical window of opportunity for reform. The Productivity Commission is [reviewing](#) the National Mental Health and Suicide Prevention Agreement, and has called it fundamentally flawed and unfit for purpose to deliver the systemic, coordinated change it promised. Both this Agreement and the National Health Reform Agreement, which guide the distribution of significant mental health funding nationally, expire soon.
- The Productivity Commission has also recently called for a National Prevention Investment Framework, including long-term funding mechanisms and new governance, co-contribution and evaluation models in its [Interim Report on Delivering Quality Care More Efficiently](#).
- Beyond Blue encourages all governments to harness this national momentum for change to drive long overdue system reform for everyone in Australia.

Self-reported health in NSW – a snapshot

- Despite Living Well's strengths, persistent barriers and challenges remain.
- Both at a national level and in NSW, Australia's Mental Health and Wellbeing Check found increasing prevalence of mental health conditions over the past two years and an increase in many of the drivers of poor mental health. Rates of poor mental health are even higher among people already marginalised because of their gender, sexuality or cultural identity.
- In NSW, 51% of people in NSW report mild to severe symptoms of anxiety/depression (up from 44% in 2022).¹
- Financial pressure (46%), relationship challenges (35%), housing affordability (34%), change in health of family member (25%) and job insecurity (21%) are the leading causes of distress for people in NSW. In fact, housing affordability has had a significant impact (quite a bit and extremely) on the mental health of people in NSW (38% in comparison to the general population 34%).²

¹ Social Research Centre (2024). Australia's Mental Health and Wellbeing Check (NSW State Data Report). Beyond Blue. Unpublished.

² Ibid

Theme 1 - The mental health service system in NSW

Recommendations

1. Improve access to supports and make systems easier to navigate for mental health consumers and their supporters.
2. Invest in prevention, promotion and early intervention and digital supports within a stepped care model.
3. Embed lived and living experience in system design, delivery and monitoring.
4. Prioritise system enablers including (a) whole-of-government collaboration and shared responsibility for outcomes; (b) innovative action to address workforce shortages and support a diverse, future-focused workforce including peer workers and non-clinical roles; and (c) investment in research and frameworks to collect, understand and use mental health and wellbeing data in policy-making.
5. Continue to work with First Nations Peoples to invest in First Nations-led, system-wide approaches to promoting social and emotional wellbeing and mental health and reducing suicide.

Improving help-seeking and navigation

"The biggest barrier now is cost. Not just for the service itself, but even just getting a mental health care plan."

"You have to already have your wits about you to even take on a mental health care plan. But when you're struggling, you've got nothing in the tank to figure out that initial barrier."

"The system is failing, and it's exhausting having to constantly advocate just to get the help you need."

"You get mixed messages. It's total confusion. There's no central resource. Too many places, too many directions."

"Create a secure, personalised digital tool where individuals can track their mental health history, supports, preferences, and triggers — making continuity of care easier across services."

"Create a 'no wrong door' system where individuals can be refereed quickly and easily between services."

"A growing shift towards holistic, community-based and trauma informed care may reshape health systems."

- Despite a decade of reform under Living Well, the mental health system remains costly, fragmented and overwhelming for people to navigate. In NSW, cost remains the top barrier (48%) to seeking professional mental health support, followed by long wait times (28%) and concerns that people won't feel safe, respected or understood (15%)³.
- The Strategy should articulate and measure specific actions the NSW Government will take, in partnership with the Commonwealth, to improve access to support and experiences of help-seeking for people in NSW, including policy measures to reduce costs, promote cultural and psychological safety and improve integration between services.

Invest in prevention, promotion, early intervention, digital supports and stepped care for everyone

"Stop treating crisis as the entry point for care."

"Take people at their word when they recognise they are in crisis—there is no such thing as 'sick enough' in mental illness."

We need ... "increased services and attention to rural/remote region...not just the big cities"

³ Social Research Centre (2024). Australia's Mental Health and Wellbeing Check (NSW State Data Report). Beyond Blue. Unpublished.

“Expand telehealth with culturally safe and trauma-informed care for people who cannot attend in-person services.”

- Half of people in NSW wait until they are experiencing high levels of distress before seeking support.⁴
- For most consumers, support options remain limited, particularly for those in rural or remote areas.
- We are long overdue for thoughtful, meaningful reform that distributes funds carefully across the entire mental health continuum, from effective prevention, promotion and early intervention approaches to specialist support for people with more severe and complex needs.
- National Mental Health Commission modelling of prevention interventions found that nine in ten had a **positive return on** investment, ranging from \$1.05 to \$3.06 for every dollar invested.⁵ Despite this, the Wellbeing and Prevention Coalition in Mental Health have estimated that 1% of mental health spending goes towards prevention.⁶
- The Strategy should make it easier for people to stay well, get help early and access a range of stepped care options so they can choose the level of care that is right for them, regardless of where they live.

Centre lived and living experience as a driver of innovation

“People with lived experience are consistently under-utilised, excluded, or tokenised even when they offer precisely the insight needed for reform.”

- The experiences of people with lived and living experience of mental ill-health and/or suicide must be central to government policy, decision making, strategy development, and system reform. Genuine and properly resourced community co-design builds trust and is necessary for designing solutions that meaningfully improve the experiences of people navigating the mental health system.
- The Strategy should continue to push NSW to improve its approach to embedding lived experience engagement in the design, delivery, governance, and evaluation.

System enablers

(a) Improved cross-government coordination

- Cross-portfolio coordination remains a challenge that has tangible impacts for people experiencing mental health challenges.
- The Strategy must continue to innovate to promote a whole-of-government approach characterised by collaboration and shared responsibility for outcomes. It should be supported by joint funding arrangements between different levels of government and between the health and non-health sectors. A example of such innovation is the proposed joint governance arrangements proposed by the Productivity Commission to support the new National Prevention Investment Framework.

(b) Innovative action to address workforce shortages

“The system’s failed. There was a mass resignation of psychiatrists in NSW due to low pay.”

“Fund care coordinators or system navigators, particularly for people with complex needs.”

“Fund and embed peer workers across all levels of the system, including decision-making roles.”

“Develop robust training, career pathways and protections for peer workers to ensure they are valued and supported.”

- There are critical gaps in the mental health workforce, which are disproportionately concentrated in clinical and emergency response and doesn’t adequately support the delivery of prevention, promotion

⁴ Ibid

⁵ National Mental Health Commission (2019). [The economic case for investing in mental health prevention](#).

⁶ Wellbeing and Prevention Coalition in Mental Health (2025). [Submission: A national framework to support government investment in prevention](#).

and early intervention. There will never be enough counsellors, psychologists and psychiatrists to meet growing demand. While continued investment in clinical workforces is required, diversification is necessary if we are to build a future-focused workforce that responds creatively to the realities of Australia's workforce shortages.

- The Strategy should articulate action to contribute to the full implementation of the National Mental Health Workforce Strategy 2022–2032 and drive awareness of, and investment in, complementary workforces to build confidence in non-clinical services. This includes mental health coaches, prevention and promotion practitioners, First Nations Social and Emotional Wellbeing Workers and traditional healers (as set out in the Gayaa Dhuwi (Proud Spirit) Declaration Implementation Plan), peer workers and multidisciplinary workforces responsible for supporting children.

(c) Invest in research and frameworks to collect, understand and use mental health and wellbeing data in policy-making

“Expand research and innovation.”

“Research into effects of AI...”

- The Strategy should support ongoing research, evaluation and knowledge translation to ensure mental health policy remains evidence-informed and equipped to respond to the fast-changing digital and global environment within which people live, learn, work and play.
- This should include research into increasing understanding of prevention and promotion, including effective ways to promote early help-seeking; medium and long-term outcomes of early intervention initiatives, identifying the components of system change and actions that can support reforms in the mental health sector.
- Good data is essential for informed decision making, and good monitoring is critical to ensure the Strategy is dynamic, responsive, and effective at adapting to the changing health needs of people in NSW over the next decade.
- The [NSW Performance and Wellbeing Framework](#) made a strong start in connecting budget decisions with wellbeing. Yet more can be done to embed wellbeing into policy development, appraisal, and cost-benefit analysis across portfolios. For example, by adopting an approach aligned with the [UK's Green Book Supplementary Guidance on Wellbeing](#), which provides a structured methodology for assessing the direct and indirect wellbeing impacts of policy options, including how to quantify, monetise, and incorporate wellbeing outcomes into cost-benefit analysis. It also outlines how wellbeing should be considered at all stages of policymaking—from strategic planning to evaluations.
- Similarly, [Living Well Indicators](#) created a strong foundation for monitoring progress of the previous Strategy across health and non-health domains. In developing the next monitoring framework, NSW should consider embedding indicators for both mental illness and mental wellbeing (such as the long-form Warwick-Edinburgh Mental Wellbeing Scales or the ONS4 Personal Wellbeing measure) in economic and social policy interventions to build our understanding, and the evidence base, for policy interventions that address determinants to promote mental health and wellbeing.
- The Strategy's outcomes, monitoring and evaluation frameworks must remain adaptable to ensure alignment with outcome measures in other national and state frameworks as they are developed and promote consistency across interrelated policy domains.

First Nations social and emotional wellbeing

- The Strategy should build on the partnerships developed and action undertaken with First Nations Peoples under Living Well to promote social and emotional wellbeing. It should articulate how NSW will support and fund First Nations-led, self-determined reform, with reference to the recommendations made by the peak leadership body, Gayaa Dhuwi (Proud Spirit).

Excerpt from Gayaa Dhuwi (Proud Spirit) position paper: [System-Wide Approach to Aboriginal and Torres Strait Islander Social and Emotional Wellbeing, Mental Health, and Suicide Prevention](#)

To end the cycle of review without reform, Australian Governments must:

1. Immediately fund implementation of the Gayaa Dhuwi (Proud Spirit) Declaration Framework and Implementation Plan 2025-2035.
2. Embed nationally consistent cultural safety standards across the mental health system, ensuring they are reflected in policy, practice, funding, accountability, and leadership to deliver culturally safe and equitable care for Aboriginal and Torres Strait Islander Peoples.
3. Establish binding mechanisms for accountability under the National Mental Health and Suicide Prevention Agreement.
4. Integrate Aboriginal and Torres Strait Islander-led solutions, including the National Aboriginal and Torres Strait Islander Suicide Prevention Strategy 2025-2035, and the National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing, into national reform agendas.
5. Address governance fragmentation and ensure coordinated implementation between mechanisms under the National Agreement on Hey the Gap and the National Mental Health and Suicide Prevention Agreement.
6. Adequately fund and deliver national workforce strategies to strengthen the Aboriginal and Torres Strait Islander workforce required to support the mental health system.
7. Embed Aboriginal and Torres Strait Islander governance across all aspects of mental health system design, implementation, and evaluation.
8. Provide real decision-making capabilities to the SEWB Policy Partnership through increased autonomy and authority.

Theme 2 - Mental health and wellbeing in NSW communities

Mental health and wellbeing in NSW communities

5. Addressing the determinants that drive distress and health inequities
6. Increase investment in settings-based approaches that promote mental health and wellbeing and connect people to supports.
7. Combat stigma and discrimination.

“A truly supportive health system is not just about treating illness - it's about creating the conditions in which people can thrive. This means aligning policy, funding and services with the reality of people's lives.”

- Blue Voices members discussed what they consider important to support good mental health and wellbeing. The key themes included:
 - Connection and sense of belonging
 - Safety and respect
 - Freedom from discrimination, in health care and more broadly
 - Access to, and choice of, mental health support
 - Culture
 - Physical health and wellbeing
 - Joy, celebration and optimism.

Prioritise promotion and prevention, including by addressing social determinants

“Create one-stop wellbeing hubs where people can access therapy, peer support, art/creative programs, job services, housing support, and youth engagement — all under one roof.”

- Despite a decade of hard work and investment under Living Well, prevalence rates and levels of distress are not decreasing. If we are to see mental health trends improve, the Strategy must prioritise increased investment in promotion and prevention as outlined by the Prevention Coalition Consensus Statements, [Primed for prevention: A consensus statement on the prevention of mental disorders](#) and [Starting upstream: building a strong and sustainable preventative mental health system for Australia](#).
- The Strategy should learn from emerging and innovative practice, such as the (a) proposed National Prevention Investment Framework⁷ and (b) recently released [Wellbeing in Victoria: a strategy to promote good mental health](#), which sets out a ten-year vision to promote good mental health and prevent mental illness by improving conditions that help people to feel and function well.
- The Strategy should also connect with the primary prevention approach in the [National Suicide Prevention Strategy](#), which aims to address key drivers of psychological distress and suicide – many of which overlap with the drivers of poor mental health and wellbeing.
- This approach is supported by emerging research. A recent study projected the health and economic benefits of improving the social determinants of mental health within Brisbane South. If social cohesion, childhood difficulties, substance misuse and unemployment improved by 5% in the average yearly change from 2024 to 2034, the economic benefits were projected to be \$146.64 million, \$234.50 million, \$281.67 million and \$100.43 million, respectively.⁸ Quality-adjusted life years, deaths by suicide, emergency department presentations and self-harm hospitalisations also improved.⁹
- The Strategy should target specific social and economic determinants that have a strong evidence-based nexus to mental health and wellbeing, including financial distress and cost-of-living pressures, racism and discrimination, loneliness and social isolation and adverse childhood events (ACEs).

⁷ Productivity Commission (2025). [Delivering quality care more efficiently, Interim report](#), Canberra, August. Page 4

⁸ Crosland, P., Ho, N., Nguyen, KH. et al. (2025). [Modelled estimates of the health outcomes and economic value of improving the social determinants of mental health](#). Nat. Mental Health

⁹ Ibid

- The Strategy should also recognise that the most significant benefits of preventive health are achieved when actions begin early in life. By making children aged 0-12 a priority, it is possible to prevent the development of mental health concerns and support their wellbeing.

Reducing childhood adversity

The Centre of Research Excellence in Childhood Adversity and Mental Health at the Murdoch Children's Research Institute, co-funded by Beyond Blue and the National Health and Medical Research Council, found that children who experience ACEs are 6-10 times more likely to develop mental health problems later in life and half of most mental health conditions emerge by the age of 14.

It established a national network dedicated to strengthening Child and Family Hubs across Australia, which are proving to be an integrated and cost-effective prevention intervention. Co-locating health, social care and legal practitioners, provides the opportunity for them to work together to respond holistically to the needs of children and their families. With practitioners asking about adversity and providing support for families, Child and Family Hubs can reduce child mental health problems and contribute to improvements in warm parenting.

Promoting connection and belonging

On Friday 1 August 2025, the NSW Standing Committee on Social Issues released its Final Report on the [Inquiry into the prevalence, causes and impacts of loneliness in New South Wales](#). It delivered 20 recommendations to the NSW Government on addressing loneliness and fostering social connection. The report and recommendations reflect Beyond Blue's [submission](#) and evidence to Inquiry about the strong links between loneliness and poor mental health and the action needed. The Strategy should connect with the actions, outcomes and measures flowing from the NSW Government's response to the Inquiry.

Combatting racism and discrimination

Experiences of racism and discrimination in Australia continue to impact people's mental health and wellbeing and drive distress, exacerbated by local and global political discourse, including about the Voice to Parliament Referendum and anti-trans legislation and reviews.

The Closing the Gap report found that the incidence of racial prejudice reported by First Nations Peoples, increased from 43% in 2018 to 60% in 2022, while ANU estimates that nearly three quarters of First Nations Peoples experienced everyday racism during the referendum period.

The Australian Human Rights Commission released the [National Anti-Racism Framework](#) that sets out a roadmap for a whole-of-society anti-racism agenda. It puts First Nations racism at the forefront of reform. Its recommendations stipulate that "public and private institutions...including healthcare...must have policies in place to address racism in all its forms". NSW could provide a leadership role by including actions in the Strategy to combat racism in NSW as envisaged by the Framework.

In addition, outlining how the Strategy will contribute to the implementation of the National Action Plan for the Health and Wellbeing of LGBTIQ+ People is critical to promoting safer and more inclusive mental health care for all LGBTIQ+ people in NSW.

Support mental health and wellbeing in key settings

- Blue Voices members voiced strong support for mental health promotion in schools and workplaces:

"Create mentally healthy workplaces by setting national standards, supporting flexible work, and preventing burnout."

"Embed mental health into housing, education, employment, and financial wellbeing strategies."

"Wellbeing staff in all primary schools."

“Integrate mental health education into schools and early childhood centres. Especially emotional regulation.”

“Require businesses to provide EAP programs to their employees.”

- The Strategy should continue to fund and innovate to increase people’s access to programs that promote mental health and connect people to support in settings where they live, work, learn and play.
- **Workplaces:** Workplaces are an ideal setting to promote mental health and wellbeing, prevent risks and provide effective supports. Absenteeism and presenteeism due to mental ill-health accounts for \$17 billion in annual productivity losses¹⁰, however, extensive data indicates the productivity benefits of investing in effective mental health interventions at work. Incentivising investment in effective mental health treatments through tax concessions, subsidies and lower insurance premiums will have positive wellbeing and productivity outcomes.
- **Small businesses:** The Strategy should include targeted support for small businesses, who often lack the resources of larger businesses to implement workplace wellbeing programs. A NSW study found that 44% of large businesses were taking effective or integrated mental health action compared to just 21% of small businesses, with uptake among medium and large businesses increasing over previous years.¹¹ For example, by expanding investment in small business mental health initiatives like Beyond Blue’s New Access for Small Business Owners, combined with funded implementation support for small businesses to help them navigate, develop, implement and measure workplace mental health strategies.
- **Education:** While mental health literacy is growing in education settings, whole-of-school and learning community approaches remain essential for lasting impact.¹² These approaches involve the entire school community— children and young people, staff, leadership, families, and external partners— working collaboratively to create a culture that supports emotional wellbeing and resilience. We recommend that the Strategy leverage the existing investment in [Be You, the National Mental Health in Education initiative](#), to support whole-of-learning community approaches in schools and early learning services across New South Wales and that the government partners with Beyond Blue to develop a statewide implementation plan.

Before Blue is an early intervention mental health program for workplaces developed by Beyond Blue. This confidential coaching service is for people who are feeling stressed or overwhelmed about everyday life issues such as work, study, relationships, health or loneliness. Coaches use evidence-based Low intensity Cognitive Behavioural Therapy (LiCBT), which focuses on changing unhelpful thoughts, feelings, and behaviours.

New Access for Small Business Owners is a free and confidential, evidence-based mental health coaching program available nationally by phone or video call, with no GP referral required. It is designed for small business owners experiencing mild to moderate psychological distress and offers self-help resources delivered by competency based trained and clinically supervised coaches. Beyond Blue outcome monitoring data from January 2021 to July 2025 demonstrated that 77% of participants experienced a clinically significant improvement in their symptoms of depression and anxiety following their participation in the program.

¹⁰ Productivity Commission (2020). Mental Health, Report no. 95, Canberra. Page 297

¹¹ SafeWork NSW and NSW Government (2020). Re- execution of benchmarking tool survey among the NSW workforce.

¹² World Health Organization & United Nations Educational, Scientific and Cultural Organization (2021). [Making every school a health-promoting school: Global standards and indicators](#). World Health Organization.

Beyond Blue's **Be You program** is the national mental health and wellbeing initiative for early learning services and schools in Australia. It is funded by the Commonwealth Department of Health and Aged Care and delivered by Beyond Blue in collaboration with Early Childhood Australia and headspace. There are currently 2530 (43%) early learning services, and 2003 (63%) schools registered with Be You in New South Wales.

Be You is freely available for educators and those studying to become educators. Be You provides an effective model for implementing a whole-learning community approach to mental health and wellbeing and includes professional learning as well as practical tools and resources to establish positive, inclusive, and responsive learning environments.

The professional learning modules are structured around five key domains, including mentally healthy communities, family partnerships, and more. By participating in Be You, educators can enhance their ability to support mental health and wellbeing, meeting national, state, and territory requirements. Independent evaluation of Be You has shown promising early findings of improved learning outcomes and increased NAPLAN scores for learning communities engaged with Be You, compared to schools not engaged with Be You.

Students attending secondary schools engaged in Be You are significantly more likely to have improved social and emotional wellbeing scores than those attending secondary schools that are not engaged. The evaluation also found that the approaches promoted in Be You appeared to align with and support early learning services to meet and exceed the National Quality Standards.

Educators engaged with Be You are also more likely than non-Be You educators to:

- Feel confident recognising the signs and symptoms of mental health issues (74% vs 62%)
- Feel confident supporting a child or young person with a mental health condition (82% vs 69%)
- Know how to initiate conversations with parents and carers about mental health (78% vs 58%)
- Feel confident intentionally teaching social and emotional learning skills (88% vs 77%).

Combatting mental health stigma and discrimination

"Having depression/anxiety doesn't mean I am mentally 'unstable'."

"Launch public awareness campaigns that address stigma, normalise help seeking and educates people about early signs of mental ill health."

"Mental health discrimination...in health care...[and] insurance claims"

- Mental health stigma remains a pervasive challenge. Beyond Blue has called on the Commonwealth Government to release, fund and implement the National Stigma and Discrimination Reduction Strategy with states and territories.
- The Strategy should include tangible actions to contribute to reducing stigma, including targeting self-stigma and lowering the bar to help-seeking, in line with the National Stigma and Discrimination Reduction Strategy.

Conclusion

We commend the NSW Government for its commitment to mental health reform. This Strategy presents a critical opportunity to help people stay well, experience higher levels of wellbeing, access supports earlier and experience a system that is affordable, easy to navigate, inclusive, and grounded in lived experience. We urge the NSW Government to act in partnership with the Commonwealth and other States and Territories and on the insights shared by communities to drive change that prioritises equity, continuity, and compassion in all aspects of implementation.