



Proactive Release

Submissions on the Child and Youth Wellbeing Strategy

August 2019

The Department of the Prime Minister and Cabinet has released the following submission received during its public consultation on the child and youth wellbeing strategy.

Some of the information contained within this release is considered to not be appropriate to release and, if requested, would be withheld under the Official Information Act 1982 (the Act).

- Where this is the case, the information has been withheld, and the relevant section of the Act that would apply, has been identified.
- Where information has been withheld, no public interest has been identified that would outweigh the reasons for withholding it.

Key to redaction codes and their reference to sections of the Act:

- **9(2)a** – Section 9(2)(a): to protect the privacy of natural persons, including deceased people.

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Child and Youth Wellbeing Strategy – Submission Template

This document is intended for individuals or groups who wish to make a formal submission on the child and youth wellbeing strategy.

Please complete this template and email it to: childandyouthwellbeing@dpmc.govt.nz

A guide to making a submission is available on the DPMC website <https://dpmc.govt.nz/our-programmes/child-and-youth-wellbeing-strategy>

Submissions will close on **Wednesday 5 December**.

Please provide details for a contact person in case we have some follow up questions.

Contact Name:	9(2)□(a)
Email Address:	
Phone Number:	
Organisation Name:	<p><u>Counties Manukau Children’s Team</u></p> <p>9(2)□(a)</p>
Organisation description: (tell us about your organisation – i.e. who do you represent? How many members do you have? Are you a local or national organisation?)	<p>Children’s Teams initially came under the then governments Children Action Plan and were provided with a mandate to require Ministries to share information where children were considered to be vulnerable and at risk of harm aged 0-18yrs but do not meet statutory threshold for care and protection. Any professional working with children who have complex needs and are failing to thrive and achieve can be referred and it is consent based. We are not a service but a trans-disciplinary approach to reduce silo working and the numbers of cars up the driveway. The aim is to get all professionals across the workforce to work together with one lead professional, and to one child centred plan, agreed with the whanau to reduce harm, meet needs and ensure the child’s voices are heard. The most significant difference is the ability to share information into one IT client record platform, a panel of experts including local iwi, health, education, police and social services to contribute their expertise and service brokers from police health education and MSD to support Lead professionals directly working with children and families.</p>

	<p>Counties Manukau is one of ten Children’s Teams across the country and consist of a core staff of eight people supporting the workforce in Manukau.</p>
<p>Executive Summary: (Please provide a short summary of the key points of your Submission - 200 words)</p>	<p>Our focus has been on the 16 potential focus areas based on evidence we have found over the past two years. We agree with the proposed outcomes framework and offer both insights and suggestions. As we have discovered no one approach works in isolation. Change needs to occur at multiple levels including legislative frameworks, degree of organisational accountability, community involvement and individual responsibility. Our social constructs are not solution focused but outcomes directed. As a team we unequivocally agree with the seven principles proposed.</p> <p>Overall we have identified the earlier supports are in place the more likely that the long term future of children will be secure. We should change the thinking from “ no wrong door” to “one door for all”.</p>

Submission Content

1. Legislative frameworks need to address response to Family Harm as we currently work with consent – should have a more proactive clear response e.g. 3 door knocks no sighting of the child or caregiver then a mandated response to intervene for children living in homes where family violence is present.
2. There needs to be a national drive across the whole workforce including police, education health NGO's to understand safeguarding children is everyone's responsibility before it gets to the care and protection threshold. More importantly we need to engage with and provide training to communities who see the indicators often before professionals do. Training should be mandatory (including professionals in adult services) to ensure that meeting contract deliverables has less of a focus than seeing indicators of risk and vulnerability and the earliest point and what to do about them. We have to stop looking at it being police and statutory services responsibility.
3. The "intensive intervention" should be statutory and "intensive prevention" should be other agency responsibility with a clear threshold identified by a quasi statutory/ mandated agency who could introduce the FGC process at a lower level – a "then what" plan for whānau with dependent children for whom a statutory intervention may be required if concerns and risk factors are not addressed.
4. Lack of evidence-based services addressing the issues and not funded to work outside 9-5pm or over Xmas as there needs to be a continuation of services rather than rely on crisis-services only, which are already over prescribed, and be made accountable for what they are doing. When family do not engage return to the three door knocks approach (see point 1).
5. All services need to have a joined up approach and share information starting when a child is born and to be tracked throughout their lives – one door for all which includes children with social or behavioural problems and unaddressed health issues.
6. There should be no cost for getting a birth certificate.
7. Consider reducing the number of NGO's to make the system simpler and easier to access. The most agencies we have identified up the drive way is 18
8. Suggestion of a safe house in every street so there is neighbourhood/ community response to put the child at the centre as services are too far away. Communities with mixed populations have shown to be the safest and happiest. Community efforts to create "neighbourhood nanas" where children know they can go to feel safe and seek support
9. Health, Police, NGO's Education can work in silo and therefore often feel they are left "holding the baby" when they are all holding the same baby as each other just not in an integrated way.
10. Have to move away from the contract deliverables to child's need approach in funding models. Consider Children's needs being met through the money following the child rather than distributed to organisations
11. Models of care in health, education social sector, justice think they are speaking the same language but not the case.
12. Community hubs with integrated rather than co-located services should be explored particularly in partnership with IWI and Marae.
13. One of the most significant trends we see is condoned truancy, children away from school for 19 days back on the 20th before non enrolled. There is no clear or consistent messaging on consequences to parents caregivers not sending their child to school. The legislative framework is such that only the highest level cases are

referred as the numbers are so high

14. Consider requirement for parents to engage in ECE at age 3yrs as many children enter school currently with very poor social skills and reading ability. Health needs and immunisations sometimes not addressed.
15. According to Education Counts Statistics (2016) Māori and Pacifica students in Counties Manukau are more likely to be expelled which impacts on them achieving education milestones and coming to the attention of multiple social services
16. Transience is impacting on a child's education when parents are unable to pay rent, escaping family harm, trying to fly under the radar of statutory services has a significant impact on children thriving educationally (not just condoned truancy).
17. Parental leave needs to be longer to support the first 1000 days as well as access to high quality funded child care
18. UNCROC should overarch all child related services to ensure children get what they are entitled to. UNCROC gives children and young people up to the age of 18 the right to:
 - life, survival and development
 - the Government making sure that the best interests of the child are taken into account when making decisions about the child
 - access to education and health care
 - grow up in an environment of happiness, love and understanding
 - protection from discrimination of any sort
 - develop their personalities, abilities and talents
 - protection from sexual exploitation, abuse and economic exploitation
 - special measures to protect those that are in conflict with the law
 - an opinion and for that opinion to be heard
 - be informed about and participate in achieving their rights
 - Special measures to protect those belonging to minority groups.
19. Childrens team panels are required to meet for the purpose of information sharing with the child at the centre while they are under intensive prevention and intervention.
20. Stop relying on goodwill and make all child centred services a reputable profession
21. Educating parents whānau with dependent children where parenting capacity needs to be strengthened to ensure child care is the focus
22. Introduction of a universal basic income particularly for whānau struggling with social or economic issues who have dependent children. Included in this to remove GST from fruit and vegetables and eradication of loan sharks and clothing vans visiting low income neighbourhoods .Pay nurses and teachers what they deserve.
23. Stable and affordable housing is the cornerstone to a child's wellbeing. To have a sense of belonging and community is essential for children to feel safe. According to Maslow the Physiological needs - the biological requirements for human survival, e.g. air, food, drink, shelter, clothing, warmth, sleep must be present. If these needs are not satisfied the human body cannot function optimally. Maslow considered physiological needs the most important as all the other needs become secondary until these needs are met. These are followed by Safety needs - protection from elements, security, order, law, stability, freedom from fear then after physiological and safety needs have been fulfilled, and the third level of human needs is social and involves feelings of belongingness. The need for interpersonal relationships motivates behavior
24. Parents with addictions and mental health issues to be viewed as unwell not offenders and be provided with treatment. DHB waiting lists needs tackling
25. Both central and local government need to support grass root initiatives and not make

the funding process so difficult.

26. Child focused practitioners working with Maori whanau able to access training to speak a level of Te Reo so child & whanau has sense their identity is valued.
27. Many Maori tamaiti living in Auckland are urbanised and not connected to their hapu and iwi. Who represents the Maori of South Auckland? We are too caught up in addresses rather than identity. The NZ Deprivation index (2013) records Māori in Counties Manukau live primarily in the most impoverished area of the country. There is evidence that people who live in areas of concentrated high deprivation (decile 8, 9, 10) are more likely to be at risk of poor social and economic outcomes and in greater need of social services
28. Consider the wider cultural complexities and working in collaboration with churches who measure mana in dollars with the impact of families accessing foodbanks or children going to school hungry to be able to provide a tithe to the churches putting them further in debt.
29. All schools should have multi cultural units so children and whanau can opt to learn in a environment that matches culture and confidence eg. Kia Aroha College power lenses learning model. This describes an approach that is about empowering students and families and about looking at learning a different way. In this model another whole body of legitimate knowledge sits alongside what is mandated in the national curriculum or '**School Learning**.' They value '**Self Learning**' just as highly as academic learning. The children's languages, their cultural norms, how they "live as Māori," how they can learn and succeed 'as Māori,' or as Samoan, or whoever they are, how they develop a strong cultural identity, their wairua/spirituality, whānaungatanga/their connectedness – are all high status learning, valid in their own right. The third learning area is '**Global Learning**' lens – which connects the young people to the many worlds and cultures outside school, and particularly to learning needed for the future through information and communications technology

Please note that your submission will become official information. This means that the Department of the Prime Minister and Cabinet may be required to release all or part of the information contained in your submission in response to a request under the Official Information Act 1982.

The Department of the Prime Minister and Cabinet may withhold all or parts of your submission if it is necessary to protect your privacy or if it has been supplied subject to an obligation of confidence.

Please tell us if you don't want all or specific parts of your submission released, and the reasons why. Your views will be taken into account in deciding whether to withhold or release any information requested under the Official Information Act and in deciding if, and how, to refer to your submission in any possible subsequent paper prepared by the Department.