



New Zealand Council Of
Christian Social Services

The Green Paper for Vulnerable Children

Submission from New Zealand Council of Christian
Social Services

February 2012

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SUBMISSION SUMMARY

1. **Who we are:** The New Zealand Council of Christian Social Services (NZCCSS) represents six denomination based networks: the Anglican Care Network, the Baptist, Catholic, and Presbyterian social services agencies, and the Methodist and The Salvation Army churches.
2. **What we do:** NZCCSS shares Government's concern for the wellbeing of children in vulnerable circumstances and their families. A large number of our services work alongside children in vulnerable circumstances and their families on a day to day basis.
3. **Why we are concerned:** All children are dependent on our love and care. Too many of our children are not faring well. Allowing people, especially our youngest people to be treated like this, is morally wrong. It is also short-sighted, as the future wellbeing of our community depends on the wellbeing of the next generation. It is expensive too; as we pay the financial costs in social services, health, justice etc., and the social costs of reduced trust, reduced social cohesion, increased fear, and growing international opprobrium.
4. **Over-arching principles:** NZCCSS wishes to see:
 - a. All children valued
 - b. All being able to participate and belong
 - c. Parents acknowledged
 - d. Structures which support parents ability to parent well
 - e. Development of a context to help this to happen. This requires:
 - Recognising childhood is valuable in itself, and is not just a prelude to adulthood
 - Te Tiriti O Waitangi taken seriously to undo some of the negative impact of colonisation
 - Respect for one another's inherent value
 - Recognising poverty and inequality damage children
 - Fostering quality relationships
 - Consistent government policies which promote rather than undermine child wellbeing.
5. **NZCCSS supports a number of points in the Green Paper** including: the definition of vulnerability being problematic; that some basic things *reduce* vulnerability e.g. a good start in life; and, some basic things *increase* vulnerability e.g. poverty.
6. **NZCCSS has some high level concerns about the paper** which include: its seemingly confused goals, its limited picture of children as largely economic beings, and its failure to address issues it recognises as significant e.g. poverty, binge drinking culture, and the needs of Pasifika and refugee children.
7. **NZCCSS wants parents to be able to parent.** For this to happen, measures are needed at three levels: (i) structural approaches to ensure parents are able to parent; (ii) supportive social and community values to ensure parents are able to parent; and (iii) social services and support to ensure parents are able to parent.

8. **NZCCSS recommends:**

Parents are assisted to be good parents. This requires:

A. Dealing with structural factors:

- a. **Taking the Treaty of Waitangi seriously:** a real partnership between Māori and the Crown could result in improved Māori whānau wellbeing.
- b. **Taking a proportionate universal approach,** as it is likely to be the most effective way of reducing the proportion of our children in vulnerable circumstances.
- c. **Focusing on prevention rather than cure** as is recommended by the Government's chief science advisor.
- d. **Working to reduce both poverty and excessive inequality;** both of which are immoral, interfere with children's cognitive and behavioural development, are socially disruptive, disproportionately affect Māori, Pasifika, refugee and particular geographic communities; and are contrary to our international obligations.
- e. **Addressing our housing problems:** which have a negative impact on family / whānau physical, mental and social health and wellbeing.

B. Fostering supportive social and community values:

- a. **Valuing children as human beings** together with their sense of identity, belonging, purpose, meaning, culture, control over life, and moral and spiritual wellbeing.
- b. **Working to encourage quality relationships** as family change is associated with low child wellbeing. Living in violent households predicts abuse, abuse of others, playground bullying, juvenile crime, and intimate partner violence.
- c. **Assisting children / families / whānau to have access to their culture** as children grow up at cross purposes with themselves when deprived of their culture.
- d. **Working to develop strong communities** as children are less likely to become vulnerable when they have neighbourhood links, and links with wider whānau.

C. Ensuring effective social services and policies:

- a. **Helping children to be born healthy** via access to quality pre and post natal care; good maternity services, good maternal nutrition, reduced drug and alcohol exposure.

- b. Helping ensure improved early attachment** via encouraging breastfeeding, avoiding / reducing post-natal depression, access to parental leave in the first year of life with a minimum income for healthy living.
 - c. Improving access to equitable early childhood education** to assist cognitive and social development.
 - d. Working to improve educational success**, as lack of educational success is associated with a host of problems, e.g. poor job prospects, poor mental health, adverse life events etc.
 - e. Enabling parents to address difficulties early** as social and /or emotional problems are associated with poorer school achievement, increased conduct problems, anti-social behaviour, delinquency and serious mental health problems. Physical and /or intellectual disabilities in children are associated with compromised development, caregiver stress and depression.
 - f. Consistent policies** mindful of our children's needs are more likely to foster our children's wellbeing. It makes no sense help children on the one hand e.g. via anti-violence services, and work to reduce it on the other, e.g. via alcohol policies encouraging increased consumption.
 - g. Ensuring quality services** that are well connected rather than fragmented, and are combined with other measures e.g. improving mental wellbeing, community support, and reducing drug and alcohol abuse. Families do better when services are staffed by skilled, reliable workers who provide excellent support and are knowledgeable about services and resources.
 - h. Fostering effective practices within services** which incorporate mentor-like relationships based on respect and trust; engagement with clients for as long as necessary, and ability to connect to a wide range of family support services. Services do better when they are culturally appropriate, and are integrated with other government and community agencies.
9. **Specific recommendations relating to Green Paper questions can be found in the table at the end of this submission.**

“Let the children come to me; do not hinder them, for to such belongs the kingdom of God. Truly, I say to you, whoever does not receive the kingdom of God like a child shall not enter it.” And he took them in his arms and blessed them, laying his hands on them.

(Mark 10:13-16 ESV)

INTRODUCTION

Who is the New Zealand Council of Christian Social Services?

1. The New Zealand Council of Christian Social Services (NZCCSS) has considerable expertise around the needs of children in vulnerable circumstances. We represent six denomination based networks: the Anglican Care Network, the Baptist, Catholic, and Presbyterian social services agencies, and the Methodist and The Salvation Army churches. These members are responsible for around 500 social service sites in Aotearoa New Zealand including child and family services. More information about NZCCSS can be found in Appendix 1.

Thanks

2. NZCCSS congratulates the Government for prioritising child wellbeing, and is pleased Government wishes every child to thrive, belong and achieve. We are pleased to see Government is taking a consultative approach in addressing these issues.

NZCCSS interest and expertise

3. NZCCSS shares Government’s concern for the wellbeing of children in vulnerable circumstances and their families. A large number of our services work alongside children and their families in such circumstances on a day to day basis. They have a wise understanding of what helps our struggling families and what does not. Their knowledge of family needs and experience is considerable.
4. NZCCSS knowledge around needs of children in vulnerable circumstances and their families stems from three sources:
 - Our members work alongside of children, families, whānau. Many provide family oriented services to families in need.
 - Our own analytical work. We undertake on-going analysis of trends in poverty and vulnerability and publish some of this on a regular basis. This work includes information about children and families.
 - Our research on what works and does not work for families in difficult circumstances conducted in 2009 and published as *Grassroots Voices* (New Zealand Council of Christian Social Services, 2009).

Contact details

5. NZCCSS would like to take up any opportunity to speak to this submission. Our contact details are Philippa Fletcher, Policy Advisor NZCCSS, philippa.fletcher@nzccss.org.nz;

and Trevor McGlinchey, Executive Officer NZCCSS, eo@nzccss.org.nz. We can also be contacted on 04 4732624.

BASIS OF SUBMISSION

6. NZCCSS agrees the wellbeing of our children is critical to our national wellbeing both now and in the future. Our submission is based on the following over-arching principles:

All children are vulnerable

7. Children are both precious and vulnerable. All of them are dependent on both the society they live in, and the love and care of the adults around them for their wellbeing. We frequently hear “a society is judged by its treatment of its weakest and most vulnerable members” (United Nations Secretary General, 2010).

All need to be able to participate and belong

8. In Aotearoa New Zealand, support for those in vulnerable circumstances is linked to participation and belonging. The 1972 Royal Commission on Social Security’s core principle was that the state should “ensure . . . that everyone is able to enjoy a standard of living much like that of the rest of the community and thus is able to feel a sense of participation and belonging to the community” (New Zealand Royal Commission of Inquiry into Social Security, 1972, pp. 65-66). The view was reiterated in the 1988 Royal Commission on Social Policy.

Acknowledge parents

9. NZCCSS acknowledges most parents do an outstanding job including some in very difficult circumstances. Our own members acknowledge parents by taking a strengths-based approach and build on what is already working.

Structures supporting the vulnerable are the first priority

10. Our children live in a social context. How we structure our society has a huge impact on whether our children thrive, belong and achieve. It also impacts on the adults around them. For this reason, we will get nowhere in assisting our children unless we address the context in which they and their families live.

Addressing the context

Children are valuable in themselves

11. The Christian tradition, UN Convention on the Rights of the Child (UNCROC), and Te Ao Māori (Henare, M et al., 2011) all value children in themselves. We want to avoid situations where children are referred to...’as burdens on their parents; as adults-to-be; as victims of adult choices about relationships; and as threats to social order and stability’ (Child Poverty Action Group, 2011).
12. As Michael Gorman, Christchurch City Missioner has stated “we really must get over the view that childhood is a training ground for being an adult. No one says that middle

age is a training ground for old age. Childhood is a state of being and, if sadly life for an individual goes no further, it is still of great value” (personal correspondence).

Te Tiriti o Waitangi provides a basis

13. In Aotearoa New Zealand, the Treaty of Waitangi provides a basis for honouring rights, roles, and special relationships of tangata whenua to their land and resources. “When Māori and non-Māori at the same levels of deprivation are compared, Māori health status still remains lower than non-Māori” (Durie, 2004, p. 63). The unflattering statistics about Māori children are hardly surprising when Māori are unable to exercise their “tino rangitiratanga” as guaranteed in the Treaty of Waitangi.

Valuing ourselves and one another

14. Culture, identity, meaning and purpose in life all have a part to play. They help foster secure identities, which help us respect both ourselves and others. Discrimination makes people ill (Cantwell-Smith, 1963) (Eckersley, 2011) (Eckersley R et al, 2006) (Layard, 2005). How we treat each other makes a significant impact on our social and individual wellbeing (Moodie, 2008).

Poverty and inequality damage children and must be addressed

15. The international evidence is piling up. Both poverty and inequality make life worse for children. Poverty is associated with stress that leads to family turmoil, violence, instability, chaotic households, lower social support, crowding, neighbourhood degradation; poor healthcare, food and housing; reduced social involvement, reduced educational opportunities; noisier dangerous environments, drug and alcohol use; mental illness; poorer cognitive development; reduced community tolerance, and poverty of the human spirit. (Albee, 2006); (Centre for Social Research and Evaluation, 2011); (Public Health Advisory Committee, 2010); (Waldegrave, C and K, 2009). Unemployment, poor job quality, and debt are also associated with a variety of negative indices (Department of Health, Mental Health Division, 2010); (Eckersley, 2011).
16. The OECD and IMF are the latest publishers about negative effects of inequality (Berg, A and Ostry, J, 2011); (OECD, 2011). Reducing inequality in Aotearoa New Zealand could help reduce our infant mortality, teenage pregnancy levels, mental illness, imprisonment rates, and obesity levels (Barber, 2011).

High quality relationships are crucial

17. Our children do better when they are nurtured within quality relationships. This means promoting a society where strong families, strong whānau and well-connected communities are the norm. Investing at a political and community level to build good relationships should be beneficial to our children (Ainsworth, 1969); (Albee, 2006) (Bowlby, 1951); (Champagne, F and Meaney, M, 2006); (David, 2006); (Department of Health, Mental Health Division, 2010); (Hoghugh, 1998); (Marmot, 2010); (Public Health Advisory Committee, 2010); (Hall, D and Lynch, M, 1998); (Infometrics, 2011); (Winston, 2002).

Government policies work better when they are consistent

18. There are many drivers of dysfunction in communities and societies, e.g. alcohol abuse, problem gambling, illegal drug abuse. Government policy needs to be consistent and ensure it does not encourage dysfunction. One example is our current approach to alcohol. We cannot foster high levels of alcohol consumption via low pricing, easy availability and wide-ranging advertising, and then wonder why we have problems with foetal alcohol syndrome, emergency departments overwhelmed by alcohol related problems, and alcohol related family violence (Prime Minister's Chief Science Advisor, 2011) (NZCCSS, 2011). Policies that do not directly relate to children can also help or hinder child wellbeing.

THE GREEN PAPER: GENERAL COMMENTS

Support for the Green Paper

19. NZCCSS agrees too many children are doing badly, and seeks a society both morally and structurally attuned to nurturing our children. We support the points underpinning the Government's vision stated on page 2.¹
20. We agree with a number of key points identified within the Green Paper:
- a. **Definitional issues**, e.g. The United Nations Convention on the Rights of the Child (UNCROC) providing a good base (p.3); "Vulnerability" being difficult to measure (pp.4 and 22). People moving in and out of vulnerability (p.4).
 - b. **Factors which can help reduce vulnerability**, e.g. The Treaty of Waitangi providing a vehicle for nation building (p.3); all of us taking responsibility for New Zealand's children (p.1); importance of a good start in life and early brain development (p.3); need for strong communities is crucial (p.7); well aligned child centred policies and practices across government sectors with common goals (p.13); action plans similar to those in Scotland and Australia (p.14); proportionate universality, i.e. some services are best provided universally, others are better targeted and some children require specific services (p.19); high quality services (p.26); and, focusing on prevention rather than cure (p.20).
 - c. **Factors which can increase vulnerability**, e.g. Poverty's impact on "... cognitive and behavioural development, ... readiness to learn at school, ... access to services and opportunities;" Poverty being a "a greater issue in specific locations, e.g. isolated rural communities, ... [and] a greater issue for Māori, Pasifika and refugee communities" (p.4); having a disability (p.4); parents with drug and/ or alcohol issues (p.5); parents with mental health issues (p.4); adolescent alcohol, drug and mental health issues (p.6); binge drinking culture

¹ Healthy, protected from harm; Have their basic physical needs met (food, shelter, clothing); Be loved and supported by parents/caregivers, family and whānau and communities; Be confident in their identity, language and culture; Be confident in their identity; Have positive connections with friends and adults; Achieve strong foundations for lifelong learning; Have the support they need to contribute positively to their own and New Zealand's future; Children who are Maori succeed as Maori; Children achieve in their own culture.

(p.6); early sexual activity and pregnancies (p.6); and New Zealand's poor social spending on children (p.20).

High level NZCCSS concerns

Confused definition of vulnerability

21. The Green Paper defines children in vulnerable circumstances as those “under 18 years ... who without significant support and intervention, will not thrive, belong or achieve” (p.6). It also states “vulnerability “is difficult to define (p.4) and that people can move in and out of vulnerability (p.4). The result is we are unclear what the paper is aiming to cover.
22. NZCCSS agrees “vulnerability” is difficult to define and that people can move in and out of vulnerability. We are pleased the paper acknowledges Christchurch provides a clear illustration of just how any of us can easily become vulnerable (p.4). Christchurch's earthquakes demonstrate most of us are just ‘one step away’ from homelessness, benefit dependency, or unemployment (Poverty Action Waikato, and Hamilton Christian Social Services, 2011). Our ability to get out of difficult situations depends on a host of resiliency factors (see (Kirkwood, T et al, 2008)).
23. Given all of us can become vulnerable, and vulnerability is fluid, labelling particular individuals or families as ‘vulnerable’ is inappropriate.
24. However, despite the definitional difficulties, one of our service providers has provided a clear illustration of what vulnerability can look like:

The most children in vulnerable circumstances we see are those where the family appears to be constantly in a state of chaos and stress. Everyday life is a struggle. Mum has 3 or 4 children and is on a benefit-It's not enough to cover rent and feed the family and they rely on food parcels up to twice a week to cover the basics. Accessing assistance is a problem (getting to Work and Income, doctors etc.) because they have no car and can't afford the bus fare or the bus timetable makes it difficult to get in and back home in time for kids after school. There are mounting debts. Parent and child/children have health problems, sometimes serious. There have been family violence/abuse within family issues, which have led to re-location, and loss of family support .It becomes difficult to make supportive connections with new neighbours and often a loss of confidence to make new links. The problems indeed can seem insurmountable but one thing that is nearly always present is that the kid's parents do love them and are doing the best they can, Ian Donnelly, Catholic Social Services, Dunedin (personal correspondence).

Limited notions of children's value

25. Limited notions of why we should be concerned about child wellbeing underpin the Green Paper. It does refer to costs to both the individual and society (p.3). NZCCSS agrees with this concern which has been well documented (\$8 billion (Pearce, 2011, p. 1); around 3% of GDP (Infometrics, 2011, p. 3)).

26. However, children are our treasure, our future depends on them (Asher, 2011, p. 2); (Henare, M et al., 2011); (Te Puni Kōkiri, et. al, 2011), and we want to see them valued in their own terms. Children are not just economic units, as implied in a WHO definition of wellbeing, and which tends to underlie the Green Paper.² As well as present and future costs, NZCCSS is concerned to both ensure children are valued as persons in their own right, who are at home in their own skins and in the universe at large (see Cantwell –Smith’s definition of faith),³ and who are not left floundering in miserable circumstances.

Green Paper fails to address identified needs

27. The Green Paper identifies the array of issues contributing to child wellbeing listed in paragraph 20. Sadly, it does not address those needs. It largely avoids structural issues, e.g. the Treaty of Waitangi as a vehicle for nation building, addressing poverty, binge drinking culture, Pasifika and refugee children’s needs.
28. Instead it takes an individual approach based on the punitive rather than the supportive. Rather than preventing vulnerability before it occurs, universal prevention measures are absent, and the paper focuses on targeting after difficulties have arisen. ‘Vulnerability’ seems to become redefined as ‘abused’, and the focus becomes high end need and services.
29. Instead of aiming to nurture our children, it appears government wants a mandate to reduce funding to adolescent oriented activities in favour of activities for younger children (p.21), reduce service provision for people and families without ‘vulnerable’ children (p.22), and increase surveillance via more monitoring (p.24), and mandatory reporting (p.25).

² “ a state of well-being in which an individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community.”
http://www.who.int/features/factfiles/mental_health/en/index.html

³ “a quality of human living. At its best it has taken the form of serenity and courage and loyalty and service; a quiet confidence and joy which enable one to feel at home in the universe and to find meaning in the world and in one’s own life, a meaning that is profound and ultimate, and is stable no matter what may happen to oneself at the level of the immediate event ...” (Cantwell-Smith, 1963)

RECOMMENDATIONS – WHAT NZCCSS WANTS FOR CHILDREN IN AOTEAROA NEW ZEALAND

30. NZCCSS wants parents to be able to parent. For this to happen, measures are needed at three levels: (i) structural approaches to ensure parents are able to parent; (ii) supportive social and community values to ensure parents are able to parent; and (iii) social services and support to ensure parents are able to parent.

Structural approaches to ensure parents are able to parent

The Treaty of Waitangi as a “vehicle for nation building”

31. This is mentioned in the Green Paper (p.3). However, we are yet to have a real partnership between Māori and the Crown. In addition, commentators tell us we are getting it wrong for Māori because we are valuing the wrong things (Henare, M et al., 2011). Addressing these issues could result in improved Māori whānau wellbeing.

Proportionate universal approach

32. All children are born vulnerable and people can move in and out of vulnerability, so NZCCSS wants a context supportive of child wellbeing: **universal measures** to help our children do well at key life stages; **targeted measures** to reduce the risks to those most at risk; and **quality assistance** for those in difficulty. Marmot calls this **proportionate universality** (Marmot, 2010), and it is used in the Australian and Scottish models cited in the Green Paper (Green Paper p. 14, 20).

Prevention rather than cure

33. We supports the Prime Minister’s Chief Science advisor’s view *prevention and intervention strategies applied early in life are more effective in altering outcomes and reap more economic returns over the life course than do prevention and intervention (or punitive) strategies applied later* (Prime Minister's Chief Science Advisor, 2011). The early years are crucial for brain development, so a good early start benefits everyone (Waldegrave, C and K, 2009).

Address poverty and inequality

34. The Green paper states, poverty “can interfere with a child’s cognitive and behavioural development, ... readiness to learn at school,... access to services and opportunities.” It is also “a greater issue in specific locations, e.g. isolated rural communities ...” “Māori, Pasifika and refugee communities” are also disproportionately affected by poverty (p.4).
35. It is hard to be a good parent when you do not have enough money to buy the basics, e.g. children do better when they are well nourished (Public Health Advisory Committee, 2010, p. 51).

36. Children growing up in poverty is also contrary to our international obligations. Aotearoa New Zealand is a signatory to the UN Convention on the Rights of the Child and is required to uphold “the right of every child to a standard of living adequate for the child's physical, mental, spiritual, moral and social development” (Article 27).
37. Inequality impacts on social inclusion. Health, wellbeing, urban design, taxation and labour market policies aimed at reducing inequality are all likely to improve social cohesion, and the wellbeing of our children (Department of Health, Mental Health Division, 2010).

Warm, safe, affordable, accessible housing

38. Aotearoa New Zealand's housing problems have a negative impact on our children. Poorer quality housing results in higher levels of stress hormones and behavioural problems (Kirkwood, T et al, 2008, p. 54). Cold, damp, mouldy housing is linked with respiratory illnesses and asthma (Public Health Advisory Committee, 2010, p. 50). Crowded housing is linked to rheumatic fever (Public Health Advisory Committee, 2010, p. 4)

Supportive social and community values to ensure parents are able to parent

Children valued as human beings

39. Ignoring identity, belonging, purpose, meaning, culture, control over life, moral and spiritual qualities could be resulting in negative measures, (e.g. growing rates mental illness) increasingly appearing amongst some of our most privileged young people (Eckersley, 2011). Spiritual wellbeing goes way beyond the usual utilitarian thinking about human beings. In addition, it is particularly valued by indigenous cultures and could underpin some of the concerns about measuring the ‘wrong things’ when we measure Māori wellbeing (see footnote 3 above).

Quality relationships

40. Children do better when they are nurtured by both biological parents who cohabit and treat each other well enough (Winston, 2002, p. 205). Family change is associated with low child wellbeing (The Children's Society, 2012, p. 20). Living in violent households predicts abuse, abuse of others, playground bullying, juvenile crime, and intimate partner violence. Moving house to escape violence predicts greater social isolation and loss of friends (Hall, D and Lynch, M, 1998), altered brain chemistry, (Public Health Advisory Committee, 2010, p. 52), and higher levels of ADHD, and / or conduct disorder (Hall, D and Lynch, M, 1998). Anti- violence programmes, parent support, voluntary groups, community parent advisers, reduced alcohol / illegal drug consumption, school programmes to promote better interpersonal skills and reduce bullying can help. Good parenting programmes can help mitigate the effects of low incomes (Public Health Advisory Committee, 2010, p. 50; Marmot, 2010, p. 16).

Children have access to their culture

41. Culture has a significant impact on human development and aspirations' (Ministry of Youth Development, quoted in (Ball, J (Quigley and Watts Ltd), 2010, p. 12)). Children grow up at cross purposes with themselves when deprived of their culture. Pasifika populations and many of our new immigrant cultures are collective rather than individual, recognise future and past generations, and spirituality is central. Working with these populations requires a bio-psycho-social-spiritual worldview, the priority of the collective over the individual, "culturally appropriate evaluations" (Siataga, 2011), and understanding there are other ways of knowing apart from research published in 'esteemed publications' and conducted in ways deemed legitimate by the publication.

Strong communities

42. Children are less likely to become vulnerable when they have neighbourhood links, and links with wider whānau. Good early childhood education, community facilities and organisations, walkable neighbourhoods, participatory democracy, reduced discrimination, city design encouraging neighbourly activity, reduced social inequality; good places to play, green spaces, all make a difference (Friedli L and Parsonage, 2009, p. 63), (Public Health Advisory Committee, 2010, p. 50).

Social services and support to ensure parents are able to parent

Our children born healthy

43. Measures include access to quality pre and post natal care; good maternity services, good maternal nutrition, reduced drug and alcohol exposure (Hoghughi, 1998) (Kirkwood, T et al, 2008) (Prime Minister's Chief Science Advisor, 2011) (Public Health Advisory Committee, 2010).

Improved early attachment

44. Encouraging breastfeeding, avoiding / reducing post-natal depression, access to parental leave in the first year of life with a minimum income for healthy living (associated with reduced death rates among babies and young children), all help (Champagne, F and Meaney, M, 2006) (Department of Health, Mental Health Division, 2010) (Hoghughi, 1998) (Marmot, 2010) (Public Health Advisory Committee, 2010).

Access to equitable early childhood education

45. Good quality early childhood education for 3-5 year olds assists cognitive and social development. "Readiness for school is important predictor of health and wellbeing across a lifetime" (Public Health Advisory Committee, 2010).

Educational success

46. Children do better when they can develop physically, intellectually, emotionally, socially and spiritually. Lack of educational success is associated with a host of

problems, e.g. poor job prospects, poor mental health, adverse life events etc. (Barry, M; Friedli, L, 2008).

Address difficulties early

47. Social and /or emotional problems are associated with poorer school achievement, increased conduct problems, anti-social behaviour, delinquency and serious mental health problems (Public Health Advisory Committee, 2010, p. 50). Physical and /or intellectual disabilities in children are associated with compromised development, caregiver stress and depression – both detrimental to child wellbeing (see (Walker, S et.al., 2011, p. 8)). If children cannot live with their families, well supported foster placement is preferable to institutionalisation (Walker, S et.al., 2011, p. 10).
48. Access to appropriate healthcare can help, as can home visiting programmes, and age appropriate developmental assistance.

49. Ensure consistent policies

It makes no sense to foster child wellbeing on the one hand, and work to reduce it on the other. Government policies are more likely to assist our children to do well if they are all mindful of children's needs. Details on how this can happen are contained in our specific responses to the Green paper questions in the table at the end of this submission.

50. Ensure quality services

Avoid fragmented and inefficient services by multiple agencies (Hoghughi, 1998, p.1545). Child protection services work better when combined with measures to “improve mental wellbeing, community supports, and to reduce drug and alcohol abuse” (Public Health Advisory Committee, 2010, p. 55). Families do better when services are staffed by skilled, reliable workers who provide excellent support and are knowledgeable about services and resources (New Zealand Council of Christian Social Services, 2009).

Ensure effective practices

51. Effective practices include mentor-like relationships incorporating respect and trust which enables positive growth. This means engaging with clients for as long as necessary and facilitating access to a wide range of family support services. Services do better when they are culturally appropriate and are integrated with other government and community agencies (New Zealand Council of Christian Social Services, 2009, pp. 96-97).

SPECIFIC RESPONSES TO GREEN PAPER QUESTIONS

Green Paper Questions	NZCCSS Considerations	NZCCSS Recommends
<i>Share Responsibility</i>		
<p>Parents and Care Givers What services and programmes could government agencies consider in a review of support for parents and caregivers?</p>	<ol style="list-style-type: none"> 1. Services and programmes are variable in quality of provision and of individual experiences. 2. Consistently high quality services are more likely to be delivered when there is good quality Government contracting and results measurement practices. 3. Contracting agencies can then work directly with communities to ensure services and programmes best meet community needs. 4. Services to families in need needing immediate reviewing includes social wage policies, e.g. employment policy (including minimum wage) and taxation policy. 5. Other services impacting on parents' ability to be good parents include services which help provide a good universal base line, e.g. Well Child Services, and other ante and post natal support, accessible, affordable early childhood service, effective school ecology programmes, home visiting programmes which are known to be effective, adolescent mental health / drug / substance programmes etc. We need programmes all parents can access. 	<ol style="list-style-type: none"> 1. Government funding agencies should develop fair and consistent contracting mechanisms which are regularly reviewed for both effectiveness and how well services are matched to the needs of individual communities. 2. Review social wage policies to promote greater social and economic equity (e.g. employment and taxation policies, family friendly workplaces etc.). 3. See other recommendations below.
<p>Have government agencies got the balance right in supporting parents, caregivers and family and whānau to meet their responsibilities, while</p>	<ol style="list-style-type: none"> 1. The Green Paper tends to place a high level of blame at an individual level rather than considering the structural issues that lead to greater vulnerability for children. 	<ol style="list-style-type: none"> 1. Focus on measures to help parents succeed as parents, such as support to address difficulties early, e.g. effective, accessible affordable PHOs.

Green Paper Questions	NZCCSS Considerations	NZCCSS Recommends
<p>also protecting the needs of vulnerable children?</p> <p>When should government agencies step in and intervene with families and whānau?</p>	<ol style="list-style-type: none"> 2. Addressing issues of families who are bringing up their children while living in poverty, and working towards a welfare and minimum wage system that promotes inclusion rather than poverty and marginalisation, will make a huge difference to the well-being of our children. 3. Given the life outcomes for “children in care” government agencies should only take this high level direct action when they are certain that no other intervention will result in improving the child’s life course within their family or whānau. 4. Quality interventions by effective Government and NGO service providers working in trusting relationships are mostly effective in producing long term change. 	<ol style="list-style-type: none"> 2. Enable improved measurement, e.g. an official poverty level, and targets to help ensure that children are not living with families in poverty. 3. Ensure real incentives, rather than punitive measures, to assist families find and keep employment. 4. Provide employers with incentives to have family friendly policies so parents can better combine their parenting role with their work role. Ensure high quality childcare and after school care is present in low decile neighbourhoods. 5. Prioritise public transport infrastructure and pricing, so that people living in low decile neighbourhoods can access public transport at the times it is needed to get to and from work, while children are in school or care. 6. When work is not appropriate, ensure benefit levels are sufficient to promote inclusion and participation in mainstream society. 7. Ensure NGO and community based support systems are properly developed and resourced; enabling high quality provision of services to high needs families in

Green Paper Questions	NZCCSS Considerations	NZCCSS Recommends
		<p>the community.</p> <p>8. Ensuring quality training, proper funding, and high levels of organisational accountability in relevant NGOs is likely to result in less need for the removal of children, and consequently greater child wellbeing in the long term.</p>
Communities		
<p>How can Government encourage communities to take more responsibility for the wellbeing of their children?</p> <p>What barriers need to be removed to allow communities to take responsibility for the wellbeing of their children</p>	<ol style="list-style-type: none"> 1. Government should put in place more support for community development initiatives. There are numerous examples of community led actions that are creating strong, vibrant and healthy communities. 2. Local government measures e.g. urban planning, walkability of neighbourhoods, green spaces, places to play, community facilities and activities e.g. children’s sport are a positive influence on child-wellbeing. 3. Families, whānau and community members do not want to ‘report’ on family, whānau or community members because the stakes can be very high – removal of children. This can result in family, whānau and community tension and the fear of reprisal. 4. Ensuring that communities have good access to effective non-regulatory services that support parents. 	<ol style="list-style-type: none"> 1. Support NGOs working in community development so their initiatives have greater impact. This requires more support for volunteers and volunteer management 2. Encourage local government and community measures fostering participatory democracy, child-friendly urban design, local sport and other clubs, and school level community-based children’s sports and other activities. 3. Ensure non-regulatory preventative services are linked to skilled professionals who can provide quality, trusting relationship-based support where higher levels of need are identified 4. Place a greater emphasis on community based preventative measures which provide neighbourhood services and promote community inclusion at a low-

Green Paper Questions	NZCCSS Considerations	NZCCSS Recommends
<p>What can you do in your community to support or initiate community-led actions to support children who are vulnerable and their families and whānau?</p>	<ol style="list-style-type: none"> 5. NZCCSS can engage with and support community groups that are working at a local level to create more connected and socially aware communities. 6. NZCCSS can profile what works and what is not working 	<p>risk level of support e.g. low fences, an absence of gated communities, design that reduces social inequality as much as possible.</p> <ol style="list-style-type: none"> 5. NZCCSS supports NGOs working in the community development field to help foster effective initiatives. This could be further helped by government improving support for volunteers and volunteer management. 6. NZCCSS shares information on effective practice via publications, media releases, support for work of others, hui, and circulating resources. This could be further helped by government working to foster a more collaborative environment.

Green Paper Questions	NZCCSS Considerations	NZCCSS Recommends
<i>Show Leadership</i>		
Vulnerable Children’s Action Plan		
<p>How can an action plan help improve outcomes for vulnerable children?</p> <p>What goals could the government include in the plan?</p> <p>What actions could be included in the plan?</p> <p>What could be the priorities for children who are vulnerable for the early years, for primary school aged children and adolescents?</p>	<ol style="list-style-type: none"> 1. The plan should focus on issues identified in paras. 31 -51 in the first part of this submission. 2. As vulnerability is fluid and children move in and out of vulnerable situations, we should have a Children’s Action Plan rather than a vulnerable children’s action plan. 3. The plan should be based proportionate universalism – all children have access to quality services and support, targeted services when warranted by risk, specialist services when indicated. 4. The plan should focus on the recommendations made in the first section for this submission. 5. Activities should be focussed on fostering child-friendly policy, measures which will improve child wellbeing, and improving delivery and effectiveness of children’s services 6. Priorities must be focused on reducing child poverty levels, and increasing the participation and involvement of marginalised families and their children in their communities. 	<ol style="list-style-type: none"> 1. Model the action plan on the Australian and Scottish models of “proportionate universality” as this helps: <ol style="list-style-type: none"> a. Reduce vulnerable circumstances in the first place; b. Enable more effective targeting where it is needed; c. Free up resources to provide greater support for those who still need specific support; d. Ensure children and their families who find themselves at greater levels of vulnerability have more resources and support provided. 2. The Children’s Action Plan should have goals around: <ol style="list-style-type: none"> a. Focusing on prevention rather than cure; b. Power sharing and respect based on the Treaty of Waitangi; c. Reducing child poverty and inequality; d. Support services to parents to help ensure a good start in life, e.g. ante / post natal care / early attachment etc.; e. Warm, safe, accessible, affordable housing; f. Improved educational outcomes; g. Reduced youth offending; h. Building quality relationships, e.g. reduced family and community violence, abuse and neglect; i. Access to healthcare and effective early

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		<p>intervention;</p> <ul style="list-style-type: none"> j. Reducing drug and alcohol abuse; k. Child-friendly communities; l. Effective child wellbeing services when required; m. Effective service practices. <p>3. Actions can include:</p> <ul style="list-style-type: none"> a. A thorough analysis of what already exists and its effectiveness; b. Build on what is already working well; c. Devising actions to achieve the above goals where gaps are identified; d. Monitor our children’s wellbeing using effective measures e.g. child health monitor measures; e. Such monitoring could include: <ul style="list-style-type: none"> - Monitoring negatives - - children living with families in poverty - poverty related children’s diseases - children living in sub-standard homes - access to quality pre-school education and childcare in low decile communities - low educational achievement across the school system and on leaving school - access to quality Māori language education - access to free 24hr health care including: immunisation; GP checks; dental health; free prescriptions; child and adolescent mental health - children exposed to violence in the home

Green Paper Questions	NZCCSS Considerations	NZCCSS Recommends
		<ul style="list-style-type: none"> - children who experience bullying/ who bully - children charged with criminal offences - children taken into care - Monitoring positives – - Parents undertaking parenting courses - Children living in communities actively building community initiatives and supports - Families working with NGOs to address issues that will stop statutory engagement by CYF - Growth of the ability and fluency of tamariki Māori in te reo Māori - Involvement and achievement at all educational levels - Positive child health measures
Legislation Changes		
<p>What do you see as the value of using legislation to underpin a Vulnerable Children’s Action Plan?</p> <p>What other actions or principles would you like to see included in legislation?</p> <p>Who could legislation require to report on national progress against an Action Plan?</p> <p>What things should be included in such a report?</p>	<ol style="list-style-type: none"> 1. Without legislation underpinning the Children’s Action Plan it is likely to be ‘toothless’ and have little effect. 2. Legislation must be underpinned by a commitment to Te Tiriti o Waitangi and appropriate power-sharing arrangements 3. More work has to be done to achieve cross-agency / cross-party support. Child wellbeing should not be used as a political strategy by government or opposition parties – this means all parties (including those in power) have to compromise. 	<ol style="list-style-type: none"> 1. A Children’s Act to <ol style="list-style-type: none"> a. Incorporate a commitment to Te Tiriti o Waitangi and appropriate power-sharing arrangements; b. Ensure cross agency and cross- party responsibility; c. Include provisions for monitoring and accountability; d. Ensure other new legislation and policies do not run counter to child wellbeing. 2. Power-sharing with iwi and hapū and with their support with other Māori ‘authorities’. 3. Ministers and Chief Executives of Government could

Green Paper Questions	NZCCSS Considerations	NZCCSS Recommends
		<p>be required to report against specific goals.</p> <p>4. Monitoring reports could be done by the Families’ Commission, Children’s Commission and Te Puni Kōkiri, and include:</p> <ol style="list-style-type: none"> a. Monitoring measures listed above; b. The contribution made by government departments in addressing child wellbeing – particularly focussing on collaborative work; c. Identification of good practice exemplars at government department, organisational, iwi, hapū and community levels; d. Recommendations for focus in the following year.
<p>Working with whānau, hapū, iwi and Māori leaders</p>		
<p>How can the Government work in partnership with iwi, Māori organisations and their leaders to deliver services for vulnerable tamariki and their whānau?</p> <p>What services or programmes are working well to achieve tamariki ora?</p> <p>What could be improved to ensure that services generate tamariki ora?</p> <p>How can we get services to hard-to-</p>	<ol style="list-style-type: none"> 1. If politics is the “art of the possible”, then politicians need to work harder to make real honouring of the Treaty of Waitangi possible in New Zealand’s society. Recent experiences in such areas as: the foreshore and seabed, the sale of state assets, armed Police raids into Ruatoki etc. undermine real implementation of the principles of the Treaty. 2. We would probably all benefit from taking Mason Durie’s, Manuka Henare’s, and others’ concerns seriously that often we are measuring the wrong things. 3. Greater engagement of Māori throughout the upper echelons of all government social services agencies and departments is needed. 	<ol style="list-style-type: none"> 1. Developing better political models of power-sharing and mutual respect based on the Treaty of Waitangi. 2. Improved recognition of how collective cultures operate, e.g. a whānau focus is more appropriate than a tamariki focus. 3. Effective engagement and partnership with whānau, hapū, iwi and Māori leaders in government department/agency annual purchasing agreements, e.g. by having CEO and staff performance measures in this area.

Green Paper Questions	NZCCSS Considerations	NZCCSS Recommends
reach Māori whānau?	<ol style="list-style-type: none"> 4. Annual purchase agreements with government agencies predicated on achieving success for Māori children will all assist in developing effective partnerships with whānau, hapū, iwi and Māori leaders. 5. The measurement of the effectiveness of services and programmes for Māori needs to be built into all services and to inform future purchasing of these services. 6. All services must address Māori as specific kaupapa Māori services will not be available in all communities across all services. By measuring all government funded agencies effectiveness for Māori and then making purchasing decisions informed by these outcomes, NGOs and government agencies will focus on achieving them 7. Developing a highly trained and well engaged Māori social services workforce is essential. 	<ol style="list-style-type: none"> 4. Implementing Māori staff development and recruitment policies so that senior management of government departments and agencies include a strong proportion of Māori managers rather than a single Māori engagement staff member. 5. Include and monitor the achievement and demonstration of experience and skills in te ao Māori as a compulsory part of CEO/senior management performance appraisals. 6. Make the achievement of successful outcomes for Māori a high level requirement of all NGO service provision contracts and base purchasing and repurchasing decisions based on these results. 7. Put more resources into the further development of a highly skilled and well trained Māori social services workforce. 8. Start at the bottom, and foster te reo Māori throughout society throughout the country at all levels and contexts.

Green Paper Questions	NZCCSS Considerations	NZCCSS Recommends
<i>Make child-centred policy changes</i>		
<p>Review Government Spending Do you think Government should provide more targeted services for vulnerable children? If yes, where should funding be taken from to do so?</p> <p>Should Government reprioritise spending to provide more early intervention, that is, more services for younger children and/or services for children that address problems as they are beginning to surface?</p> <p>If so, where should funding be taken from?</p>	<ol style="list-style-type: none"> 1. NZCCSS rejects the notion that funding may need to be taken from one vulnerable group to provide prioritised services for another vulnerable group. This approach will lead to downstream costs and a more fragile societal structure. 2. Early intervention, both in age and in the life of a problem is better than trying to address issues later. However, if a problem manifests at a later age or a later point in the cycle of development, it still must be addressed. 3. Recent 'tax switches' ignored growing inequality, poverty and vulnerability in New Zealand; particularly the high levels of vulnerability of New Zealand's children growing up in poverty. 4. Rather than de-selecting another group of people in vulnerable circumstances, so that we can prioritise our children, we should be looking at those in our society who have more than enough and sharing resources through fairer and more equitable tax and other systems. 	<ol style="list-style-type: none"> 1. Ensuring our social wage e.g. the taxation system, minimum wage, and employment law etc. enable all New Zealanders to have access to goods and services conducive to child and family wellbeing. 2. Re-orienting these systems to both reduce poverty and increase our ability to use New Zealand's resources to enhance the wellbeing of all New Zealanders rather than just a privileged group. 3. Focus on early intervention, both early in age and wherever possible early in the 'problem cycle'. This is proven to be more effective until waiting till later in age and cycle. 4. Help youth with the transition from school to adult roles by better interventions to ensure success at school, increased involvement in training, and a focus on jobs.
Child First Allocation Policies		
<p>What priority should the Government give to the families and whānau of those caring for children who are vulnerable when allocating essential services?</p>	<ol style="list-style-type: none"> 1. A proportionate universal approach would provide a level of service to all children reducing the likelihood of children entering vulnerable circumstances. 2. Given the structural issues that give rise to children's vulnerability, government should be 	<ol style="list-style-type: none"> 1. Undertake a proportionate universal approach to child wellbeing to reduce the likelihood of children being in vulnerable circumstances. 2. Prioritise families early in the cycle so that there is minimal long-term impact on children. Services which

Green Paper Questions	NZCCSS Considerations	NZCCSS Recommends
<p>What services do you think should be included in this policy?</p> <p>When should adults who care for children who are vulnerable be prioritized for services over others?</p>	<p>focussing on ensuring the resource base appropriately supports families and whānau - e.g. quality training and education, social welfare, employment law, and poverty reduction.</p> <p>3. Services we need to focus on are those which make the most difference to children who are vulnerable and promote their wellbeing. Children grow up in families. If the family is not well, it is unlikely the children will have high wellbeing.</p>	<p>can assist family wellbeing include: welfare, education, health, social services e.g. alcohol and drug.</p>
<p>Monitoring Children</p>		
<p>How much monitoring of children who are vulnerable should the Government allow?</p> <p>Who should monitor children who are vulnerable and under what circumstances?</p> <p>How can the possible negative consequences of increased monitoring be minimized?</p> <p>What other mechanisms could be used to keep track of children who are vulnerable and their families and whānau</p>	<p>1. We know from research into how teacher expectations can impact on child educational achievement, how much a 'label' can affect child outcomes. Children labelled as low achievers will achieve low results, and children with high achievement labels will achieve high results – even when there is no discernible difference in IQ or other factors between them! Therefore, we need to be very careful when allocating labels.</p> <p>2. Child 'monitoring' needs to occur at the skilled professional level where well trained 'care professionals' with a good knowledge of social difficulty are able to work within their professional guidelines and structures to ensure confidentiality and support are provided to overcome the vulnerability factors.</p> <p>3. These professionals will include health professionals, early childhood, primary and secondary teachers, social workers, counsellors etc.</p> <p>4. Without family confidence in skilled professionals,</p>	<p>1. NZCCSS is opposed to particular children being labelled as 'vulnerable' because labelling has negative impacts.</p> <p>2. Ensure professional guidelines and requirements of the 'care professions' include an understanding of children in vulnerable situations, and full knowledge of what steps to take when their professional judgement indicates child safety concerns.</p> <p>3. Analyse current professional guidelines regarding monitoring; identify any gaps; and then examine how these gaps can be addressed.</p> <p>4. Ensure quality training and updating programmes for professionals incorporate required practice competencies around monitoring.</p>

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	<p>families may not actively seek the support they need.</p> <p>5. Macro monitoring of statistical outcomes for children, broken down to communities will indicate which communities or set of circumstances will require greater resources or focus.</p>	<p>5. Where services are delivered by an unregulated workforce, ensure that funding arrangements mandate the training of workers in this area. Contracts should be conditional upon professional standards being maintained, but accompanied by appropriate professional supervision and support.</p>
Information Sharing		
<p>What information should professionals be able, or required to share about vulnerable children?</p> <p>Under what circumstances should they share information?</p> <p>Who should be able to share information, and with whom?</p> <p>What can else can Government do to make sure professionals and services have all the information they need to make the best decisions about services for children who are vulnerable and their families and whānau?</p>	<p>1. Information sharing is both a powerful tool for good, and a potential destroyer of previously good family reputations. Information must be factual and based on skilled professional observations, and within the context of professional guidelines and expectations.</p> <p>2. The wide sharing of information only in order to reduce personal risk of prosecution under a mandatory reporting regime has the potential to destroy families and whānau on personal rather than professional judgements.</p>	<p>1. Rejecting mandatory reporting. Families afraid of being reported fail to seek help; e.g. they are less likely to visit a GP.</p> <p>2. Encouraging sharing of factual information and quality, well-informed professional judgements between professionals, when it will facilitate effective support and service provision (or in extreme cases child safety interventions). We understand there is no barrier to effective information sharing which can and does occur now.</p> <p>3. Government modelling professional, well-informed sharing of information both inside and between government agencies, and where appropriate, with NGOs supporting vulnerable families.</p> <p>4. Government provides high quality training for its own staff, and shares the same training with NGOs and others involved in children’s welfare.</p> <p>5. Government examines current professional guidelines and requirements to ensure they are appropriate, and provides exemplars to assist in their development.</p>

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<i>Make child-centre practice changes</i>		
Improving the Workforce for Children		
<p>What can be done to improve or promote collaboration between professionals and services?</p> <p>What principles, competencies or quality standards should be included in the minimum standards for a workforce for children?</p> <p>Who should be included in a workforce for children?</p> <p>What other changes could be made to increase the effectiveness of those who work with vulnerable children</p>	<ol style="list-style-type: none"> 1. The idea of assuming a competitive approach is more efficient, and the contractor provider split ideology still exists in the process for providing services. This has resulted in an environment where organisations compete rather than be freely collaborative. 2. We need a more collaborative system of purchasing services where service providing organisations feel fully consulted and informed, and the contracting process is transparent and supported by the service providers. 	<ol style="list-style-type: none"> 1. Combine child protection services work with other measures to improve mental wellbeing, community supports, and reduced drug and alcohol abuse. 2. Ensure services are staffed by skilled, reliable workers who provide excellent support and are knowledgeable about services and resources. 3. Share training around common service provider factors, e.g. recognition, reporting and intervention etc. 4. Help service staff develop skills our service users have identified as important when working with children, e.g.: ability to listen to and respect children and young people, consistency, ability to deal with paperwork, reciprocity principles of koha, more male input, being able to help overcome isolation, believing in client's abilities, advocating persistently on client's behalf, being reliable and doing the job, being culturally sensitive, being prepared to learn, recognising the importance of whānau, trusting relationships, having good relationships with other professionals, able to offer a co-ordinated response (New Zealand Council of Christian Social Services,

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		2009, pp. 50-57).
Better Connecting Children to services		
<p>How can Government’s frontline services better connect children who are vulnerable and their families and whānau with the services they need?</p> <p>What services could be included in this action to better connect children who are vulnerable to the services they need?</p> <p>What other changes do you think could be made to ensure children who are vulnerable are connected to the services they would benefit from?</p>	<ol style="list-style-type: none"> 1. NZCCSS member experience and research demonstrates families and their children are better connected to services they need when these services are available within their communities and reflect their cultural imperatives. 2. This experience and research also demonstrated that real, long-term, and sustainable change for the better occurs when the service provider is a skilled and trusted professional. 3. While the statutory role is required in extreme cases; for most families effective early provision of quality services by a trusted professional produces changes that stop the potential escalation of harmful actions and promote child wellbeing in the context of their families and communities. 4. The statutory role, particularly the role of child removal from families means that families are unlikely to voluntarily engage. 	<ol style="list-style-type: none"> 1. Providing for more engagement at higher levels of need by NGOs and community organisations 2. Working with NGOs and community organisations to grow their capacity and capability to cover a wider range of support services at a higher level. This means: <ol style="list-style-type: none"> a. Assisting with training of the existing workforce, and ensuring new workforce entrants receive the education and training required; b. Assisting with the resourcing of these NGOs so that they have the physical capacity to take on the new roles and the financial capacity to retain highly qualified staff; c. Fostering effective practices e.g. mentor-like relationships incorporating respect and trust which enables positive growth; d. Enabling engagement with clients for as long as necessary; e. Facilitating organisations ability to access a wide range of family support services; f. Ensuring culturally appropriate services; g. Ensuring services are well integrated with other government and community agencies. 3. Addressing some of the gaps in service provision. Gaps our service users have identified include: spaces

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		<p>in early childhood education centres; affordable or free parenting programmes; respite care for parents with children with special needs; affordable or free counselling; adolescent mental health services; adolescent addiction treatment services; behaviour management support for parents with children and young people who are being violent; and supervised activities of interest to teenagers.</p>
<p>Improving Service Delivery</p>		
<p>How could early education centres and schools be better used as sites for delivery of a wide range of services?</p>	<p>1. The Victory School experience shows how educational centres can be a hub for wider community integration and collaborative service delivery</p>	<p>1. Investigating how early childhood centres and schools could assist with service delivery. 2. Government recognise this requires: a. Supportive staff relationships; b. Excellent leadership; c. Effective relationships with the services involved and with the wider community; d. Both sufficiency and certainty of funding; e. Ensuring the early childhood education centres delivery of early childhood education is not compromised.</p>
<p>What services could be better connected and how?</p>	<p>1. The capacity to join-up service support is great. For example, our members report children and caregivers who have been hospitalised due to cold and damp housing, who are then released from hospital to return to the same conditions. 2. They see numerous examples where family overcrowding has put children in very vulnerable positions, both because of health effects and in placing them in contact poor role models, or even dangerous situations.</p>	<p>1. Apply learning from the Whānau Ora programme experience. 2. Promote service collaboration at government, NGO and community levels by providing tools and skill development to assist this way of working. 3. Publish practice exemplars and place a responsibility on government agency CEOs to both be role models of this way of working, and to provide incentives for their organisations and the organisations they fund to do the same.</p>

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	<ol style="list-style-type: none"> 3. Lack of food, appropriate clothing, or the need to look after younger siblings often leads to children not attending school. 4. Children in school often change their learning patterns when exposed to traumatic changes in the home, where family counselling and parenting courses may be needed. 5. The list goes on. 	<ol style="list-style-type: none"> 4. Work to reduce poverty which is likely to both reduce service demand, and thus permit more time for better service connection.
<p>What other opportunities exist to deliver services more effectively for children who are vulnerable and their families and whānau?</p>	<ol style="list-style-type: none"> 1. The most effective way of reducing children’s vulnerability is to minimise this vulnerability by structural means. 2. The link between inequality, poverty and vulnerability is well documented. 3. The long-term impact of colonisation on indigenous people is also well recorded. 4. If we do nothing else, these two factors, if honestly addressed, in a constructive manner, and a sharing and open way, would go a long way to reducing the vulnerability of New Zealand’s children. 	<ol style="list-style-type: none"> 1. Address the structural issues of poverty 2. Give real effect to the Treaty of Waitangi

SUBMISSION CONCLUSION

52. The best way to support children in vulnerable circumstances is to prevent them from becoming vulnerable in the first place. This means structural change in the way Aotearoa New Zealand's resources are distributed. By reducing our nation's wealth and income disparities, we can improve our growth, social cohesion, address poverty, and reduce the threat to our social fabric (OECD, 2011).
53. All of us are responsible for our collective wellbeing. This means the work of helping our society deliver more widely based wellbeing for everyone falls to government, community, iwi, hapū, whānau, and families. It is government's job to put in place policies, processes, programmes and projects which help this to happen. This way we can all contribute to building a society supportive of our children (and everyone else).
54. Sometimes current and historical factors mean structural change is not enough. Families who still become vulnerable benefit from holistic support as early in the vulnerability cycle as possible.
55. Finally, our services tell us, and Grassroots Voices research shows, strong trusting relationships with skilled knowledgeable social service workers are at the heart of enabling families to do better (New Zealand Council of Christian Social Services, 2009).
56. This is the opposite approach to the largely punitive actions envisaged in the Green Paper. We know family service approaches work better than child protection approaches (Waldegrave, 2006, p. 57). However, "if New Zealand wanted to adopt a more holistic family services approach to child protection, there would need to be a substantial theoretical and procedural shift from seeing to punish "unsafe" families to ensuring parents are assisted to meet their obligations regarding the wellbeing and safety of their children" (Waldegrave, 2006).

Ma Te huruhuru, Ka rere Te manu

Me Whakahoki mai te Mana ki te

Whānau, Hapū, Iwi

Adorn the bird with feathers so it can fly

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APPENDIX 1: MORE INFORMATION ABOUT NZCCSS

The New Zealand Council of Christian Social Services (NZCCSS) has six foundation members: the Anglican Care Network, Baptist Union of New Zealand, Catholic Social Services, Methodist Church of New Zealand, Presbyterian Support New Zealand Inc. and The Salvation Army.

Collectively, these six members are responsible for over 500 social service delivery sites in their networks throughout New Zealand. Our members deliver a wide range of services that cover such areas as child and family services, services for older people, food-bank and emergency services, housing, budgeting, disability, addiction support, community development and employment services.

This size and diversity in services are amongst the many reasons for NZCCSS to celebrate its membership and the work that they do to meet people's needs throughout New Zealand.

NZCCSS Mission and Role

NZCCSS works for a just and compassionate society in Aotearoa New Zealand. We see this as a continuation of the mission of Jesus Christ. In seeking to fulfil this mission, we are committed to:

Giving priority to poor and vulnerable members of our society

Te Tiriti O Waitangi

The key roles of NZCCSS are to represent the common interests and vision of our members at the national level; to supply information and networking opportunities to support members provide quality services; and to develop, critique and advocate for policies that will assist poor, vulnerable and disadvantaged members of society.

A national Council, made up of two representatives from each denomination, governs NZCCSS. A small Secretariat team carries out the day-to-day work of the Council. This includes gathering and distributing information, research on social policy issues, and building relationships with government officials and others working in the community sector.

A Policy Group oversees the policy and research work that NZCCSS does in three key areas: child and family, housing and poverty and services for older people. Each Policy Group is made up of at least two council representatives plus social services managers, academics or others with particular expertise in that area. This means that the work that NZCCSS does is well informed by what is happening in our members' communities.

www.nzccss.org.nz or www.justiceandcompassion.org.nz