Royal New Zealand Plunket Society, Inc

Submission on the Inquiry into the determinants of wellbeing for Māori Children

March 2012

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The Chair
Māori Affairs Committee
Parliament Buildings
Wellington

Tēnā koe

Inquiry into the determinants of wellbeing for Māori Children – Submission

The Royal New Zealand Plunket Society Inc. (Plunket) is very pleased to support the Māori Affairs Select Committee decision to hold an Inquiry into the determinants of wellbeing for Māori Children (the Inquiry). Plunket has a 105 year history as a national organisation providing universal Well Child health services and parenting education and support services in the community, to around 90% of whānau in New Zealand. Plunket recognises the Inquiry will also add value in its contribution to the Green Paper for Vulnerable Children and together will ultimately determine how the nation can do better in supporting families and whānau to achieve better outcomes for tamariki Māori.

The vision that Plunket aspires to is: “Mā te mahi ngātahi e puāwai ai ā tātou tamariki”, by working together our children will blossom, “Together the best start for every child”. Plunket is therefore committed to ensuring tamariki Māori achieve at least equal outcomes to other children and advocate for seamless planned approaches to tamariki wellbeing that build on strengths, improve capacity, capability and are founded on partnership, with Māori, iwi, whānau, hapu and communities.

Plunket are happy to provide further advice or clarification on any of the points raised in our submission. Plunket wishes to appear before the committee to speak to our written submission. The contact point for this submission is: Jenny Prince, Chief Executive Officer: jenny.prince@plunket.org.nz, 04 4710 177. I will be accompanied by Sonya Rimene, General Manager, Māori – sonya.rimene@plunket.org.nz.

Nāku noa, nā

Jenny Prince
Chief Executive Officer

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Jenny Prince
Chief Executive Officer
EXECUTIVE SUMMARY

The Inquiry seeks to gain viewpoints on the current situation and how government can improve programmes and services to tamariki Māori. It also poses questions about whether social determinants need to be given greater consideration and how whānau can play a larger role in improving the wellbeing of tamariki Māori.

Plunket’s Māori Strategy, plans and policies\(^1\) have been developed to build on the health gains achieved by Plunket and reaffirm its commitment towards achieving the best health outcomes for tamariki Māori and their whānau. It is also in recognition and understanding of the compelling evidence and research that demonstrates that ‘Tamaki Māori are strengthened when they are connected to their identity, language and culture through whānau, hapu and iwi.’\(^2\)

“All Māori whakapapa to Io Matua and nga atua. This relationship meant that, for children, they were ata ahua - they were the face of Io, of the supreme being. Children therefore were perfect underneath everything. This belief was what stopped any maltreatment of the child. To harm the child was to harm the atua. For the religious parents, this concept is easier to accept than for nonreligious people. Fundamentally, the child was considered tapu......”\(^3\)

Plunket supports Te Tiriti o Waitangi as the founding document of partnership between the Crown and Hapu and it being at the fore-front of the Inquiry in recognition of being pivotal to the wellbeing of whānau, hapu and Iwi. The Treaty Principles need to be integral to all Government policy and practice.

We urge Government to establish the principles of Partnership, Protection and Participation as the context for working with Iwi/Māori. We ask that Government continue to improve their focus on strong partnerships and relationships with Iwi/Māori; enabling Māori participation and protecting Māori rights.

Plunket further supports the submission provided to the Māori Affairs Select Committee from the National NGO Alliance for the Prevention of Family Violence and its focus on the social determinants of well-being for Māori children.

Plunket wishes the Inquiry to consider a number of ideas we believe will change the outcomes for tamariki Māori. The points are described in the body of this submission under the headings:

- Historic and current tamariki Māori profiles;
- Extent of public funding into tamariki Māori across government sectors;
- How can public funding across government sectors ensure tamariki Māori wellbeing;
- Social determinants towards healthy growth and development of tamariki Māori;
- Significance of whānau for strengthening tamariki Māori; and
- Policy and legislative pathways to address findings.

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\(^1\) Māori Protocols, Karakia, Waiata; Māori Consultation and Engagement; Māori Strategic Plan; Whānau Awhina, Whānau Ora Policy, Te Whare Tangata ki te Tai Ao.


\(^3\) Jenkins K, Harte H: Traditional Māori Parenting: May 2011
RECOMMENDATIONS

1) Government must increase its investment in the early years (0-5 years) to achieve positive change in the health and wellbeing of tamariki Māori;

2) Plunket supports distribution of resources in relation to need, defined in collaboration with government agencies, iwi, hapu, whānau and local communities to ensure equity of access to care, to improve tamariki Māori wellbeing;

3) Government focus efforts and redistribute resources to ensure that policy and action is centred on the importance of adequate income, healthy and safe housing, affordable, accessible and appropriate health services, and successful participation in education;

4) Plunket supports investment in and strengthening of the child protection system so that children who are identified as vulnerable receive the protection and care they need;

5) Plunket recommend all services use ‘assessment of need and targeting services’ to support tamariki Māori (0-5 years) to access health, education and social services;

6) Plunket agrees that tamariki prosper when they are supported by strong parents, whānau, hapu, iwi and communities;

7) Plunket supports the principles of Whānau Ora to enhance best outcomes for whānau; and

8) Plunket supports the establishment of a Minister for Children, Children’s Act and Children’s Action Plan to improve the health and wellbeing of tamariki Māori.

1. HISTORIC AND CURRENT TAMARIKI MĀORI PROFILES

Government must increase its investment in the early years (0-5 years) to achieve positive change in the health and wellbeing of tamariki Māori.

It is widely recognised that the advent of colonisation and the events that followed has greatly contributed to the social and economic differences between Māori and non-Māori. Plunket does not intend to reiterate the historic and current statistics that support these differences. Plunket would like to acknowledge the positive contribution of the Kohanga Reo, Kura Kaupapa and Māori provider services towards the wellbeing of tamariki Māori. Government must continue to support and invest in successful evidence based Māori initiatives.

Table (i) below identifies the total number of Māori new born babies receiving Well Child services from Plunket and the total number of Māori babies born in New Zealand between 2005 and 2011. It clearly identifies that Māori over the last six years have consistently chosen to enrol with Plunket Well Child services. Plunket are invited into whānau homes, we are manuhiri who have an opportunity to work with whānau, refer to others to provide wrap-around services through a process of assessing whānau need and agreeing a plan of care to connect whānau with the support they need. The Māori whānau who do not enrol with Plunket are either enrolling with Tamariki Ora services or receiving no service. It is critical that Government explore ways of ensuring all tamariki Māori are enrolled with child health services.

“The early years are critical for optimal child development and the realisation for the child’s full potential as a loving, socially engaged, well-educated and trained adult, contributing to national social and economic life at their full potential.”

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2. **EXTENT OF PUBLIC FUNDING INTO TAMARIKI MĀORI ACROSS GOVERNMENT SECTORS**

Plunket supports distribution of resources in relation to need, defined in collaboration with government agencies, iwi, hapu, whānau and local communities to ensure equity of access to care, to improve tamariki Māori wellbeing.

The extent of public funding into tamariki Māori across government sectors needs to consider the different methods, approaches, processes and, ways in which the needs of tamariki Māori can be met. Improved funding models, informed by evidence and with outcome measures monitored for effectiveness would assist in improving health and reducing inequalities for tamariki Māori. Current contracts and output focused service agreements compromise and consequently reduce the effectiveness result, in slow or too little change in outcomes for tamariki, and may increase the risk to those most vulnerable, tamariki Māori.

3. **HOW CAN PUBLIC FUNDING ACROSS GOVERNMENT SECTORS ENSURE TAMARIKI MĀORI WELLBEING**

Plunket explores the public funding options for vulnerable children of which tamariki Māori figure disproportionately. Plunket supports:

- Increased investment in the early years (children aged from birth to five years) is needed to align New Zealand with comparable OECD countries and is inarguable in terms of health and economic outcomes.
• Government focus efforts and redistribute resources to ensure that policy and action is centred on the importance of adequate income, healthy and safe housing, affordable, accessible and appropriate health services, and successful participation in education;

• Government establish Minister for Children, legislation designed to improve the wellbeing of children in the form of a Children’s Act and development of a Children’s Action Plan with VOTE across health, education and social services;

• Government take a long term view when investing in programmes and services in recognition of the importance of the early years of the child; and

• Plunket supports investment in and strengthening of the child protection system so that children who are identified as vulnerable receive the protection and care they need.

4. SOCIAL DETERMINANTS FOR HEALTHY GROWTH AND DEVELOPMENT OF TAMARIKI MĀORI

Plunket recommend all services use ‘assessment of need and targeting services’ to support tamariki Māori (0-5 years) to access health, education and social services.

E tipu, e rea mō ngā rā o tou ao
Ko ō ringa ki te rākau a te Pākehā
Hei ora mō tō tinana
Ko tō ngākau ki ngā taonga a ō ātipuna
Hei tikitiki mō tō mahunga
Ko tō wairua ki Te Atua
Nāna nei ngā mea katoa
(Sir Apirana Ngata)

Plunket is acutely aware that children are born and, grow up in a complex inter-related system of parental, family, community, national and global influences. No change in child vulnerability is possible, unless the social, cultural and economic determinants of health are addressed and there is a coordinated approach to providing the health, education and welfare systems that support families. Therefore we ask that Government focus efforts and resource to ensure that policy and action are centred on the importance of adequate income, healthy and safe housing, affordable, accessible and appropriate health services, and successful participation in education.

‘... ultimately, Māori development is about Māori people and if there is economic growth but no improvement in health well-being, then the exercise is of questionable value. Equal recognition of both social and economic goals is therefore imperative.’

Plunket acknowledges the impact and effect of social, cultural and economic determinants on healthy growth and development of tamariki Māori. An estimated 35% of children aged 0-14 years live in NZDep2006 decile 10 (the most deprived decile) of which 72.4% are Māori. In 2011, Plunket identified 6,296 new born Māori babies living within decile 8-10 compared to 13,079 non-Māori new born babies. Māori new born babies

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6 Crampton et al, 2007: NZDep is a measure of social and economic deprivation with the three main purposes of allocating resource, enabling research and providing data for advocacy.
comprised 48% of the total number of new born babies living within decile 8-10. It is very concerning that such a high number of Māori babies are being born into poverty, leading to poorer access to healthcare.

“...tragedy of poverty among Māori children is now evident on a scale not experienced in recent times. Poverty starves the mauri or life force of nga uri potiki Māori, the most vulnerable sector of Māori society, with potentially dire long-term consequences if not addressed immediately. Today, the injustice of pohara, poverty is an issue of significance under Te Tiriti o Waitangi.”

“Children in their first years of life are the most vulnerable to the long term damaging consequences of deprivation.”

Plunket supports the report prepared for Te Puni Kokiri, Ministry of Māori Development titled ‘Te Hoe Nuku Roa’, which developed a more comprehensive description of Māori well-being and pointed to the appropriateness and benefits of a capabilities approach.

“New measurements and models focusing on Māori and Pasifika capabilities need to be developed that examine Māori and Pasifika participation in their own worlds and within New Zealand society more broadly. The challenge is to identify culturally appropriate spiritual, environmental, extended family, and economic indicators of quality of life, especially for small children.”

Plunket suggest supporting tamariki Māori and whānau who have systemic needs that require wrap-around services. The system requires an assessment of needs to target services appropriately to those with the greatest need. The system would be universal, identify services available for tamariki and be accessible to parents, care-givers, whānau when accessing health, education and social services for their tamariki.

Proposed Assessment Criteria:

On registration of birth all families/whānau caring for children (0-5 years) are eligible for an assessment of needs to target services appropriately to those with the greatest need which may include access to the following services:

a) ensure their tamariki can participate in approved early childhood education when their tamariki reaches three years of age;

b) ensure their tamariki are enrolled with the Well Child/Tamariki Ora health service, which includes completion of the immunisation schedule, unless they make an informed choice not to;

c) ensure their tamariki is registered with a general practitioner;

d) all teenage parents including both mother and father under the age of 18 and other parents (step father, grandparents, caregivers, significant others) of at-risk families be required to participate in an approved budgeting and parenting programme and that access be provided to these programmes free of charge;

e) at-risk families, including mother and father be required to participate in an intensive early intervention parenting programme and have free access to quality early childhood education and childcare services from 18 months of age: and

f) all families/whānau caring for tamariki 0-5 years who are community card holders or eligible for a community card.

8 Ibid.
9 Ibid
5. SIGNIFICANCE OF WHĀNAU FOR STRENGTHENING TAMARIKI MĀORI

Plunket agrees that tamariki prosper when they are supported by strong parents, whānau, hapu, iwi and communities.
Plunket supports the principles of Whānau Ora to enhance best outcomes for whānau.

Plunket agrees primary responsibility for the wellbeing and care of tamariki Māori rests with their whānau, hapu and the communities they live in. But, government also has a role and responsibility to assist and support in an enabling way.

"The major socialisation fact in the pre-European Māori family as reported by the earliest European observers, was the place of the nurturing warrior – the father as carer along with the mother. The whole whānau contained multiple parents in grandparents, uncles and aunts and minders in older cousins as well as siblings. All were committed to raising the children, very much in the model left from the primal whānau."

Therefore it is important for the roles and responsibilities of parents, grandparents, and the wider whānau to be included in the development of government and service plans, policies, practices and programmes to support best outcomes for tamariki Māori.

Plunket is exploring new and innovative ways of improving health outcomes to tamariki Māori and whānau. A current example is the development of Iti Noa, He Pito Mata which is a parenting education resource developed from existing resources such as Tikanga Whakatipu Ririki, Whakatipu and Thriving Under 5 based on a Māori framework. Plunket looks for opportunities to work with Iwi/Māori organisations to enable whānau to access Iti Noa, He Pito Mata that is relevant and meaningful to support the needs of whānau.

Whānau Ora is a Government programme aiming to build whānau capability, strengthen whānau connections, support the development of whānau leadership and enhance best outcomes for whānau. Plunket supports the principles of Whānau Ora as an approach to improving outcomes and are supportive of preventative interventions underpinned by a strength based community development focus. It is desirable any decisions as the result of this Inquiry involve Whānau Ora.

Working with Māori whānau, hapu, iwi and Māori leaders implies a commitment to building relationships, and approaches that are founded in reciprocity and respect. Plunket believes having strong relationships with Iwi/Māori, are an essential component of improving health outcomes for tamariki Māori and whānau.

6. POLICY AND LEGISLATIVE PATHWAYS TO ADDRESS FINDINGS

Plunket supports the establishment of a Minister for Children, Children’s Act and Children’s Action Plan to improve the health and wellbeing of tamariki Māori.

Plunket recommends the establishment of a Minister for Children, legislation specifically designed to improve the wellbeing of children in the form of a Children’s Act, and development of a Children’s Action Plan. We suggest policy decisions that influence child wellbeing, social, health and education outcomes must be located in a solid foundation agreed through cross party mandate and therefore not subject to fluctuation with the electoral cycle. We support the implementation of Child Impact Assessments to inform policy development in all local and central government activities.

10 Jenkins K, Harte H: Traditional Māori Parenting: May 2011
11 Harte H: Tikanga Whakatipu Ririki, A Way of Raising Children
12 SKIP: Whakatipu, A resource to support whānau parenting
13 Plunket: Thriving Under 5: 2011
Plunket suggests changes to legislation and policy and an attitudinal shift, led by Government, are needed so that New Zealand and New Zealanders agree to prioritise tamariki, increase investment in the early years and thereby establish a baseline demonstrating the elemental national commitment to the needs of tamariki. This will ultimately improve outcomes for tamariki Māori.

Plunket is committed to Māori well-being models being valued, respected and incorporated into all government agencies policies and practices to demonstrate a commitment to improving the wellbeing of tamariki Māori.

Plunket also believes policies and interventions will be more appropriate to improving the wellbeing of tamariki Māori if underpinned by the following principles:

a) Commitment to implementing the principles of Te Tiriti o Waitangi;
b) All New Zealander’s have timely and equitable access to affordable health and social services;
c) Government focus on early intervention; and

d) All New Zealander’s have affordable and appropriate access to effective primary health services.

The Whānau Ora approach supports collaboration and coordination of the Māori, health and social government sectors. Inclusion of other government sectors is desirable.

Lastly the February (2011) report of the United Nations Committee on the Rights of the Child recommended that inequalities in access to health services be addressed by a dual approach: coordination across all Government departments, and coordination between policies for health and policies aimed at reducing income inequality and poverty.