

# One Million Children and the Measure of a Nation

## Key Messages from Social Policy Briefings for Todd Foundation Strategic Planning, August 2010

*The following are selected verbatim extracts from various Government and community organisation briefing documents (listed at the end of this paper), collated by **Garth Nowland-Foreman** for Todd Foundation's strategic planning process (August 2010). They focus on the key areas of the Foundation's interest in the well-being of children and young people.*

"The true measure of a nation's standing is how well it attends to its children – their health and safety, their material security, their education and socialization, and their sense of being loved, valued, and included in the families and societies into which they are born."

(Innocenti Research Centre, 2007)

### Demographics

There are just over one million **children and young people** under 18 years living in New Zealand today. While their number is growing, children and young people represent a decreasing proportion of the New Zealand population [from around 22 percent in 2000 to around 12 percent in 2150]. The majority of children and young people live in major urban centres [71 percent of under 18 year olds]). There is increasing ethnic diversity in the urban child population. By 2026, Maori children and young people [are projected to] make up 28 percent of the population under 18, Pacific children and young people 18 percent and Asian children and young people 18 percent.

There were approximately 90,000 children between 0 and 14 years in 2006 who had a **disability** that limited their activities. Just over half of these children had been living with their disability since birth; almost a quarter had disabilities resulting from disease or illness, and three percent had disabilities resulting from injuries. Maori boys have the highest rate of all groups at 17 percent.

Forty percent of children and young people with disabilities (involving moderate or high needs) live in "dependent or superannuitant" families.

Twenty-eight percent of families include an adult family member with some degree of disability. Where the disability is moderate to severe (21 percent of all families), this is associated with lower overall economic living standards and an increasing likelihood of being in severe hardship.

New Zealand had the fourth highest **teenage pregnancy rates** among 20 Organisation for Economic Cooperation and Development (OECD) countries in 2004-06. Rates

Children's Commissioner (2008) concludes "It is clear that health, education and social service sectors individually and collectively continue to fail a large group of Maori and Pacific Island children and young people."

During the 1980s and 1990s, **inequality** increased more in New Zealand than in any of the 20 OECD countries for which comparable data are available. The increase in inequality was accompanied by a concomitant decline in child wellbeing among some groups. From the late 1990s to the present, there have been improvements in child wellbeing. For example, a strong economy and Working for Families tax credits have reduced the number of New Zealand's children and young people living in poverty on both relative and absolute measures. Nevertheless, in 2006/7, 230,000 or 22 percent of all children and young people were living in households with incomes below the 60 percent-of median-income poverty line, after taking account of housing costs. This figure included 170,000 children and young people (16 percent) below the more restrictive 50-percent-of- median-income threshold.

**Child poverty** is unevenly distributed across society. For children living in sole-parent families, the rate of poverty (49 percent) is five times as high as that for children in couple households (nine percent). Poverty rates are also significantly higher among Maori and Pacific Island children than Pakeha children.

Thirty-nine percent of all births in 2006 were in the three poorest areas (lowest NZ Deprivation Index decile areas). In contrast, only 7.7 percent of children were born in the wealthiest areas.

Poverty increases the risks of **neglect, physical and emotional abuse**. There is a correlation between deprived neighbourhoods and higher risks of child physical abuse and neglect. Although most parents find ways to overcome structural disadvantage, deprived neighbourhoods exacerbate the conditions under which child physical abuse and neglect can flourish. Neglect, emotional abuse, physical abuse, sexual violence, witnessing family violence, and other prolonged childhood traumas are detrimental, affecting children not just at the time but potentially throughout life. Effects are visible in adult obesity, alcohol and drug abuse, heart disease, strokes, diabetes, attempted suicides and early death.

Children whose infancy is marked by unpredictability and violence are likely to struggle to excel – or even keep up – at school. Children who do not experience warm loving carers during infancy are less likely to develop empathy and so struggle with future relationships. Young children who lack stimulation, live in boring empty environments and are deprived of frequent human interaction have much of their life's potential stolen. These scenarios of relational poverty might help to explain our negative tail of underachievement in NCEA. Some traumatised and neglected children may become aggressive; others may dissociate and shut down; some truant from school and some end up in prison. Without appropriate and effective early interventions, some abused and neglected children's life trajectories will all too often involve ruinous harm to others and themselves. Some become the people who are pitied in our media as children and then all too quickly despised, feared and locked up as dangerous teens and adults. Unsurprisingly they can become abusive or neglectful parents. In the long term, the cost of compassionate early and effective assistance for these children may be inconsequential compared to the cost of doing too little too late.

The picture is complex: Not all children and young people in poverty or all children and young people living in socially deprived areas will have poor longer-term outcomes or experience family dysfunction or violence. Damaged adults sometimes beget damaged children. Relational and income poverty hugely increases stress on families and children and the probability of poorer health, educational, income and

employment outcomes in adulthood. This then leads on to an increased inter-generational risk of poverty and hardship.

In New Zealand, around 97,000 **community and voluntary organisations** undertake a vast array of activities and functions [Around 25,000 are registered as charities]. Ninety percent of these have no paid staff and rely completely on New Zealand's more than one million volunteers. The International Non-profit Comparative Project, based in Johns Hopkins University, suggests that non-profit organisations have two broad functions: those that involve the direct delivery of *services* (such as education, health, housing, social services, etc); and those that involve the *expression* of culture, religion, advocacy, recreation and sport, etc. Office for the Community and Voluntary Sector (2008) notes that while expressive-type organisations comprise the vast majority of non-profit organisations and have the most volunteers, government agencies have tended to pay closer attention to the service-type organizations, especially when contracting with non-profit health and social services. Expressive non-profit organisations, however, play a critical role in creating healthy, cohesive communities and mobilising volunteers. Expressive organisations are generally smaller, more numerous, rely more heavily on donations for income, and engage more volunteers relative to paid staff. Service organisations tend to be larger, less numerous, rely on contract funding and have fewer volunteers relative to the number of paid staff.

## Education

**Early childhood education** policies have a profound impact on children and their families. Quality early childhood education has been demonstrated nationally and internationally to have long-lasting benefits for both individuals and society. Insufficient funding was identified as “the major issue confronting [early childhood services]” in a 2007 national survey. Almost a third of parents surveyed stated that they had difficulties in paying fees and donations.

Ministry of Education (2008) notes that children in our most disadvantaged communities are less likely to participate in early childhood education, and there is evidence of a shortage of high quality early childhood education in these areas. In 2008, 82 percent of Year 1 children at decile 1 schools had previously participated in early childhood education, compared with 99 percent in decile 10 schools.

Poverty also affects the education prospects of **school-aged children**. Levels and methods of funding for low-decile schools are an issue, both because of relatively low parent and community contributions, and because of the sheer scale of student needs.

Compared to other countries, a greater proportion of our young people achieve at the highest levels. The latest international studies show that New Zealand Year 5 students, on average, perform significantly above the international means in reading and science, and around the international mean in mathematics. The average performance of New Zealand 15-year-olds in mathematics, science and reading literacy places New Zealand among the top countries of the OECD.

New Zealand has a higher proportion of students who achieve at the lower levels of literacy and numeracy than most other countries with high average attainment. The latest international study on reading literacy showed that about eight percent of New Zealand Year 5 students did not reach the

lowest reading benchmark. The international median, for the 19 OECD countries that took part in this study, was four percent. Maori (18 percent) and Pasifika (16 percent) students were less likely to reach the lowest reading benchmark. Students in schools serving communities with high levels of economic disadvantage (decile 1-3 schools) were also less likely to reach the lowest reading benchmarks.

The Ministry of Education (2008) particularly notes that identity, language and culture are key to education success wherever learners are located in the system, and that there is evidence of unmet need for special education services and support.

Around a third of school leavers fail to obtain NCEA Level 2 qualifications or higher. **Leaving school** with low or no qualifications narrows the opportunities available to young people and can have serious impacts throughout their lives. It also has serious consequences for New Zealand's economic and social development. In comparison with other OECD countries, New Zealand has low educational enrolment rates of young people aged 15 to 19, and there has been little change in this area over the last decade. In 2006, 74 percent of young people aged 15 to 19 were enrolled in education. New Zealand ranked 24<sup>th</sup> out of 29 OECD countries on this measure. (In 2006, New Zealand education enrolment rates for those aged 20 to 29 were just above the OECD average. Education enrolment rates were more than four times the OECD average for older New Zealanders, 40 years and over.)

The education system consistently under-performs for particular groups of students, including Maori and Pasifika. Students with disabilities or other specific barriers to learning are also more likely to experience poor educational outcomes. Ministry of Education (2008) notes this has significant consequences for social mobility and equality of opportunity, and represents a major cost to society and the economy. Changing demographics make addressing system under-performance for these groups even more important. In 2007, 84 percent of Asian school leavers obtained NCEA Level 2 or higher, compared with 71 percent of European, 56 percent of Pasifika and 44 percent of Maori school leavers. In 2007, 48.5 percent of school leavers from decile 1 schools obtained NCEA Level 2 or higher, compared with 86.4 percent of school leavers from decile 10 schools.

Ministry of Education (2008) notes that educational underachievement is most concentrated in low-decile schools serving communities with high levels of socio-economic disadvantage. However, the success of some low-decile schools shows this does not need to be the case. In addition, in recent years the proportion of Maori and Pasifika school leavers obtaining qualifications at NCEA Level 2 or above has grown at a faster rate than that of the total population. While ethnic attainment gaps remain significant, it is clear that progress can and is being made.

Ministry of Youth Affairs (2008) observes good progress in lifting educational results and in improving young people's **transitions** from school to education, training or employment. However, about 9 percent of young people are at risk of not moving effectively into continuing education, training or employment. In the first instance we need to make sure young people are better engaged in school – whether at primary or secondary level. More effort needs to be put into those young people who have already disengaged from the education system. The New Zealand youth 'inactivity' rate [neither employed nor studying nor engaged in home duties] of 9.2 percent was higher than the OECD average of 7.7 percent in 2004.

The education advocacy of the Office for the Children's Commissioner focuses on overall objectives of:

- Positive outcomes for children and young people and their schools by maintaining them within the education system
- Reducing barriers to learning created by conflict between the child's parents and the educational setting
- Improving relationships between the early childhood and school sectors and the wider community.

### Health and social hazards

In New Zealand, a child growing up in a low-income household has on average a 1.4 times higher risk of dying during childhood than a child from a high-income household. Children born into **poverty** are more likely to be born prematurely, to have a low birth weight and to die before the age of one. A poor child is three times more likely to be sick, and hospitalisation rates for children from low-income areas are significantly higher than for those from wealthier areas.

Poor nutrition, a stressful environment and sub-standard housing are factors that diminish a child's ability to fight infection.

**Maori and Pasifika children** are most at risk of poor health. Insufficient disposable income, substandard housing, inadequate nutritious food and unequal access to health care all contribute to the risk of poor health. Of all ethnic groups, Pasifika children have the highest rates of infant mortality and of hospitalization for preventable diseases.

Ministry of Youth Affairs (2008) notes good health is fundamental to young people's positive development. Poor health often has a cumulative impact on learning, socialisation and development. From early adolescence **young people** are more likely to drink, to drive fast cars and to experiment with drugs and sex. A high proportion of young people who come into conflict with the law suffer from unresolved physical or mental health problems. Access to youth-friendly health services can help with some of these problems. The youth suicide death rate has fallen since the mid-1990s, but is still unacceptably high for Maori, increasing in the years up to 2003-05.

New Zealand children have higher rates of **preventable illnesses and deaths from injuries** than children in almost any other OECD country [5<sup>th</sup> highest child maltreatment death rates out of 21 OECD countries]. They have comparatively high infant mortality rates and low immunisation rates.

Office of the Children's Commissioner notes that public awareness of child physical abuse and the impact of family violence on children and young people has increased in the past decade. Notifications to Child, Youth and Family that require further investigation have increased from 22,868 in 2000/01 to 44,435 in 2008. [But they are intervening less.] In the year ended 30 June 2008, 46 percent of... notifications required further action (down from 62 percent of notifications in 2006/07).

Child abuse is 15 times more likely to occur in families exposed to family violence. During 2006, children were present at 51.5 percent of the 61,743 family violence incidents attended by Police. Ministry of Youth Affairs (2008) notes that New Zealand's young people experience too much **violence** – in the home, at school and in the community. This can lead to negative outcomes such as drug and alcohol abuse, problem behavior, disengagement from school, depression and suicide. Forty-five percent of [secondary] school students surveyed reported being hit or physically harmed by another person in the previous year... Around 15 percent had, in their home, witnessed physical violence against a child, 10 percent had witnessed physical violence between adults.

[Child, Youth and Family] have more **children and young people in care** than 10 years ago, but numbers are now reducing. Young people who display serious antisocial behavior are a small but growing cohort of children in care. High needs children and young people account for 20 percent of the total costs of children in care. [The] challenge is to ensure that high-cost plans have a rehabilitative effect rather than purely a containment one. Child, Youth and Family [also] need to play a stronger role in the transitions of our young people [leaving care].

St John & Wynd (2008) conclude that easy access to **social hazards** such as gambling and alcohol has had a devastating effect on New Zealand's low-income neighbourhoods. Nationally, nearly 47 percent of gambling venues are in decile 1,2 and 3 areas. Pokie machines are five times more likely to be concentrated in decile 1 and 2 areas than in other areas, and serve to transfer money from low-socio-economic areas to better-off ones. Children from low socio-economic areas are roughly twice as likely as those from affluent backgrounds to live in households with smokers.

St John & Wynd (2008) note that deregulation of the finance sector [credit providers and 'loan sharks'] has served as an open invitation for those at its fringes to prey on low-income communities.

## Juvenile justice

Child, Youth and Family (2008) note that **conduct problems** affect 5-10 percent of New Zealand children and are the single most important predictor of poor mental and physical health, academic underachievement, early school leaving, teenage parenthood, delinquency, unemployment and substance abuse. For many affected young people, the pathway from early conduct problems typically leads to youth offending, family violence and, ultimately, serious adult crime.

There were 1,591 Police apprehensions per 10,000 14-16 year olds in 2006. The total number of police apprehensions of this age group per year has remained stable since the mid 1990s, although there has been an increase in the proportion of violent offences.

Approximately 20 percent of **young offenders** commit about 80 percent of offences. Quoting research from the Ombusman, the Children's Commissioner (2008) notes: "About five percent youth offenders can justifiably be described as hard-core serious offenders. Of these hard-core young offenders, 85 percent are male and more than half are Maori. The majority have drug and alcohol problems, many have a history of child abuse and neglect, and are not enrolled or engaged in schooling."

Ministry of Youth Affairs (2008) concludes that the best time to turn young people away from later criminal activity is before the age of 5 years... It is also important to have the programmes and services available to those who do enter the youth justice system and who need targeted help. The lifetime cost to the New Zealand criminal justice system of a single chronic antisocial male is estimated at \$3million.

## Housing

Rates of home ownership are at their lowest since the early 1950s, reflecting decreased housing affordability and an absence of government-funded programmes to support home ownership for modest income households. Maori and Pasifika families are disproportionately affected by reduced housing affordability, and as a consequence are most likely to live in **inadequate, overcrowded housing**.

Low-income families increasingly unable to meet day-to-day expenses are often doubling up on the cheapest accommodation available, often state housing. **Transience** is a significant problem for the many thousands of low-income families in private rental accommodation, and has high costs for children's socialisation, education and health (St John & Wynd, 2008).

Social Sector Forum (2008) of Chief Executives of Ministries of Health Education, Social Development and Justice identify that living in inappropriate and poor quality housing leads to poorer health. New Zealand has an old housing stock that is damp and difficult to heat. This includes some Housing New Zealand houses. Living in damp and poorly insulated housing is resulting in unnecessary high energy costs and rates of respiratory disease. Household crowding makes the transmission of infectious diseases more likely, increases family stress and can adversely impact on educational outcomes.

Ministry of Youth Affairs (2008) observes that **young people** are not always seen as ideal tenants and can end up on the fringes of the rental housing market. Groups such as young parents, young people with mental health needs, and young refugees struggle particularly to find suitable accommodation.

## Priorities for Action

**Children's Commissioner** (2008) identifies six key challenges:

- *Getting it right from the start* (The key goals of early intervention for children and their families are to promote healthy pregnancies, breastfeeding, secure attachment and resilience in the face of diversity. My vision is that the systematic assessment of children and young people will ensure that challenges, such as being born into a family where there are multiple risk factors, are detected early and appropriate responses are put in place immediately.)
- *Meeting the needs and rights of Maori children and young people* (As the proportion of children in the population shrinks, we will rely on a higher proportion of Maori children and young people, who are currently over represented in the under-achieving tail.)
- *Reducing child poverty in economic recession* (In essence poverty increases the risks of: illness and injury; child physical abuse and neglect; impaired cognitive development; poorer adult health; lower future earnings; and next generation being poor.)
- *Make early intervention systems work better* (It has proved difficult to get serious traction on early intervention policies that cut across government agencies in partnership with community agencies.)

- *Build on what we know works* (Promoting positive trends and lessening the impact of emerging negative trends will require inter-disciplinary research and policy development. Equally important is identifying which initiatives are working – and which are not - for whom and in which circumstances.)
- *Improve child and family programmes and services* (Research has consistently shown the importance of an integrated tiered service system of targeted and specialist programmes and services built on a strong base of universal programmes and services.)

**Social Sector Forum** (2008) of Chief Executives of the Ministries of Health, Education, Social Development and Justice identify five “promising areas of common interest”:

- Antenatal, infancy and early childhood
- Promoting good behavior among our children and young people
- Tackling problematic alcohol use
- Redeveloping our more deprived communities, and
- Effective engagement with our vulnerable families with children.

New Zealand Council of Christian Social Services (NZCCSS, 2008) notes that long term persistent **poverty** is entrenched within New Zealand. Worst affected are single parents caring for their children while on benefits, other careers, and those too sick or disabled to do paid work. “The social costs of leaving one sixth of our population in poverty become economic and fiscal costs that multiply over generations.”

Top priorities for a more just and compassionate society identified by NZCCSS (2008) are more action to:

- Support community-based organizations to grow the spirit of aroha tetahi ki tetahi – looking after each other
- Support families and communities in nurturing and protecting our children as taonga
- Provide older people with a range of choices for their homes, support and lifestyle
- Utilise our nation’s prosperity responsibly to eliminate poverty
- Enable access to good, affordable housing for everyone.

Child Poverty Action Group has 33 detailed policy recommendations covering income, tax, benefits, health, housing, education and other social hazards in *Left Behind* (St John & Wynd, 2008). The first is: “Pledge to end child poverty in terms of all poverty measures in New Zealand by 2020”.

NZCCSS (2008) argues that a well supported **community sector** is critical to maintaining social cohesion that will help us avoid the worst of the social impact of the economic downturn. It is important that the independence of community organizations is maintained. Flexible, time-generous social work that mentors people through change is a key to achieving positive outcomes [for families and children, and young people.]

Ministry of Youth Affairs (2008) reports international studies show that **youth work and mentoring** can make a difference in the lives of young people. It can help young people to build relationships of trust

and mutual regard and to have a sense of belonging. Youth work and mentoring can help young people re-engage with education and reduce substance abuse.

Office for Disability Issues (2008) notes that to **participate in society** as full and equal citizens, disabled people need access to the things that other people take for granted, such as information and transport.

One of the biggest issues facing disabled young people is the need for planned transitions from school to work, tertiary education or training and other meaningful day-time activities. We need to challenge people's assumptions about what disabled people can and cannot do. People want modern, appropriate disability supports.

### Further information is available from:

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