

# Care and protection/family violence: Aotearoa New Zealand

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 Nicola Atwool
 

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Social Work Programme, School of Social Science, University of Otago, New Zealand

## International Round-up

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### Overview of Child, Youth and Family research in Aotearoa New Zealand

I have worked and researched in the areas of child protection and family violence for more than 40 years, and I currently teach in a social work programme, continuing to carry out research and to provide community-based training for practitioners. There is limited funding to support research in these areas, but academics in our social work programmes manage to publish on areas related to decision-making in social work, risk perception and inequality (Keddell, 2017; Keddell, Davie, & Barson, 2019; Keddell & Hyslop, 2019; 2018), critical commentary (Hyslop, 2016; 2017) and the readiness of social work graduates to enter the work force (Beddoe, Hay, Maidment, Ballantyne, & Walker, 2018). A major project led by Robyn Munford and Jackie Sanders explored youth transitions and resilience in multi-service users ([www.youthsay.co.nz](http://www.youthsay.co.nz)). They developed the PARTH intervention model for working with youth from this research (see <http://www.youthsay.co.nz/massey/fms/Resilience/Documents/The%20PARTH%20Poster.pdf>). My research has a practice focus and has recently focused on children in care and changes to the care and protection system (Atwool, 2013; 2016; 2017; 2018; 2019; Fernandez & Atwool, 2013).

### New developments

Child protection and family violence operate as two sectors despite the obvious overlap and there has been unprecedented change in both areas. Major change in the care and protection arena, including the establishment of a new Ministry for Children Oranga Tamariki to replace the Child Youth and Family (CYF) from 1 April 2017, has heralded a number of significant new developments. Key aspects of these are highlighted in the following paragraphs.

### Care and protection

Significant legislative changes including the renaming of the legislation to the Oranga Tamariki Act, 1989 have been implemented. A new section 7AA requires the Chief Executive to recognise and provide a practical commitment to the principles of te Tiriti o Waitangi (this is the Treaty of Waitangi, but it is worth noting that the English and Māori versions differ) which is an agreement between some Māori leaders and the Crown). This strengthens the obligation to work in partnership with the indigenous people of New Zealand and reflects the on-going concern about the significant over-representation of indigenous children in the care system. New Zealand has a population just short of 4.8 million, with 1.1 million aged under 18. Māori (indigenous population) make up 26% of the youth population (14.9% of the total population). The number of children in care in December 2018 was 6,400 of whom 59% identify as Māori and 9% identify as Māori and Pacific.

Despite these changes and a commitment to practice being child-centred and trauma-informed, the Ministry has been subject to criticism, especially in relation to practice with indigenous children. A case involving the attempted removal of a baby immediately following birth attracted widespread media attention and highlighted an increase in the numbers of children being removed at birth. There has been an internal review of the specific case and shortcomings have been acknowledged. Practice changes are currently being implemented (Oranga Tamariki, 2019). In addition, the Office of the Children's Commissioner (OCC) is reviewing practice in relation to baby removals, the Ombudsman (2019) is undertaking a review of legal aspects of baby removal, and an independent indigenous review is underway. Iwi (Māori tribe: see <https://teara.govt.nz/en/tribal-organisation/page-1>) are seeking more active engagement in decision-making about indigenous children and, in some areas, independent services are being established to provide care when state intervention is deemed necessary.

Care standards have been introduced and an independent body has been set up to monitor these. The delay between the introduction of care standards and decisions about the way that monitoring will take place is a concern, so an interim process has been established. The OCC continues to have oversight, but the final form is yet to be determined. High levels of concern about the quality of care have resulted in the establishment of a Royal Commission of Inquiry into historic abuse in State and faith-based care. The first round of public hearings has taken

place and a proactive approach to addressing past concerns will be needed if faith is to be restored in the capacity of state systems to ensure that the mistakes of the past are not being repeated in the present.

Legislative changes in the area of transition from care have raised the care-leaving age from 17 to 18, allow young people to remain living with a caregiver until 21 and allow young people to receive advice and support to 25. This is a significant and long-awaited development (Atwool, 2016). There is, however, no history of engagement beyond care, and non-government organisations are only just establishing services. Success will depend on the availability of resources. The expectation that young people will access existing avenues of financial support may not be realistic, especially if young people experience barriers that result in no substantive improvement in support. Youth in transition will need adult support to help them navigate the complex pathways to resources.

The voices of care-experienced youth have been to the fore since their involvement in the 2015 Independent Review of CYF. For the first time, New Zealand has an independent body, VOYCE – Whakarongomai (Voice of the Young and Care Experienced – Listen to me. See [www.voyce.org.nz](http://www.voyce.org.nz)), which will provide individual and systemic advocacy for children in care. They are working in partnership with the Ministry for Children, which also has a work stream responsible for hearing the voices of children in care. VOYCE – Whakarongomai recently presented at the CREATE conference in Australia and will host a conference in New Zealand in 2020, the first in which care-experienced youth will take the lead.

### **Family violence**

A number of reports in this sector have identified the need for a more integrated systemic response to family violence (Carne, Rees, Paton, & Fanslow, 2019; Family Violence Death Review Committee, 2016; Herbert & McKenzie, 2014; Wilson & Webber, 2014). A joint venture has been set up by government within the Ministry of Justice to address this issue. There have been two trials of an Integrated Safety Response (ISR) undertaken by the Police. These have proved effective in providing a more co-ordinated and earlier response to families (Mossman, Wehipeihana, & Bealy, 2019). They are, however, resource intensive, and alternatives are being developed to expand the provision of integrated responses at the local level. Whangaia Ngā Pā Harakeke is a police-led initiative with a clear focus on community engagement. Harakeke is symbolic of family and approximates in meaning to building stronger families. It is described as an initiative designed to reduce family harm in the community and the impact of family harm on families. The project allows for the appointment of kaiawhina (support workers) to work alongside police to facilitate engagement with families and whānau (extended families) experiencing violence and support their engagement with appropriate services. In our local community, Iwi leadership and partnership with Police have strengthened the initiative. Challenges are being encountered implementing a collaborative approach, and this remains a work in progress in a resource-constrained environment. In particular, there appears to be continuing difficulty in providing a co-ordinated response to family violence that integrates responses to perpetrators, victims and their children.

### **Shifting the paradigm**

Services in New Zealand are siloed and access depends on meeting thresholds that exclude all but people with the most acute need. There is growing recognition of the value of co-ordinated responses

and Māori have led the way with Whānau Ora (Family Well-being). The first phase was launched in 2010 and a second phase from 2014 is being implemented under the auspices of three Commissioning Agencies (two Māori, one Pasifika), shifting the funding from reliance on government contracts to a model based on outcomes. Whānau Ora offers a culturally anchored approach that is flexible and brings decision-making closer to communities. The focus is whānau empowerment and the service delivery model is based on navigators engaging with whānau, supporting them to develop plans and working with them to achieve short-, medium- and long-term goals. A review by an Independent Whānau Ora Review Panel (IWORP) in 2018 reported that positive results were being achieved but that it was too early to determine whether change will be enduring and that a critical element will be building resilience and capability (Independent Whānau Ora Review Panel, 2018). Challenges identified included the following: demand outstripping resources and the aspirational focus being overtaken by short-term crisis intervention; ‘navigators’ dealing with situations that were more appropriately addressed by clinicians or qualified social workers and a tendency for government services to opt out if Whānau Ora was involved. [The term ‘navigator’ refers to people in paid positions with a role is similar to key workers in coordinated service delivery models. The idea is that they work alongside families to help them navigate their way to the services they need.] The review recommended continuing and growing investment in the commissioning approach but noted the need to ensure that government agencies meet their service delivery responsibilities and commit to engaging with Whānau Ora.

A paradigm shift is needed to embrace the notion of services working alongside one another rather than the involvement of one agency allowing the opting out of others. Navigators or key workers work alongside families and whānau for as long as they are needed, helping them determine priorities and manage the potentially overwhelming competing demands. The PARTH model developed by Munford and Sanders provides a set of practice orientations to guide work with youth, and coordinated service delivery is implicit in this approach. Intensive wraparound models have also proved effective in work with high-needs youth (Shailer, Gammon, & de Terte, 2013; Otago Youth Wellness Trust, 2010) and application of this model to families and whānau with younger children has the potential to offer an alternative to statutory intervention.

### **Potential for optimism**

After 9 years of National led neoliberalism, there are a number of structural issues needing to be addressed including poverty, homelessness, inequality and the disproportionate impact on the indigenous population. The current coalition government has a focus on child well-being and has made commitments to child poverty reduction and addressing housing shortages. It is taking time to address these major issues and some frustration is being expressed about this. There has, however, been an unprecedented focus on providing resources in areas that have previously been overlooked including care and protection and family violence. A key challenge moving forward will be getting a more balanced investment of resources at the prevention and early intervention end of the spectrum. Years of failure mean that we currently have high investment in tertiary services across justice, health and the social services. There is evidence that the international trend toward conservatism is having an impact, but the response to seminal events such as the attack on the Christchurch mosques indicates that the majorities of New Zealanders want a fairer and more equitable society and are

prepared to take action to support this. The shape of the future will depend on whether the current government is given the opportunity to build on the foundations they have established or whether New Zealanders will succumb to the media-led negativity that is in line with international trends toward conservatism.

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