

# Lifewise

The Lifewise Trust is a community and social services agency of The Methodist Church of New Zealand (which has sponsored and delivered social services in the Auckland area for over 150 years).

Lifewise strives actively to progress its vision of a socially just and inclusive society. It weaves together and seeks to implement principle- and strengths-based approaches that uphold its core purposes and demonstrate its values of respect, integrity and courage in all its undertakings. A core organisational purpose is to provide services that redress social disadvantage and dislocation, and address the fundamental, underlying factors that contribute to these.

Today, Lifewise is a sizeable not-for-profit agency with over 250 staff and volunteers. Its operations are spread geographically from Taupo to the top half of the North Island. It provides a wide range of services to disadvantaged and marginalised communities to address community and societal issues such as, child abuse, parenting difficulties, homelessness, social exclusion/isolation, poverty, homebased support for older persons, mental illness and family hardship. See <u>www.lifewise.org.nz</u> for more details and to access a copy of the 2010/11 annual report.

The core work of Lifewise includes:

- Family Services for children and families, Lifewise offers a range of services and homebased programmes to encourage and support parents, including parenting courses, intensive social work support, family advice and foster care. It delivers over 12,000 foster care bednights per year.
- **Homecare Services** Lifewise delivers services to clients in the home to help around 1500 older people live independent lives. Lifewise Home care is also an Individualised Funding provider and fund-holder for over 200 younger people living with disabilities in the community.
- Early Childhood Education Services Lifewise supports the delivery of early childhood education in South Auckland through Centres catering largely for Pasifika children and families.
- The Lifewise Hub an inner city service for the homeless and marginalised. As well as the more traditional emergency food and shelter services it provides through its community cafe in K Road and the Auckland Night Shelter, the Hub works in formalised partnerships with mental health and addiction treatment services and in collaboration with other organisations to provide essential life skills, and access to housing and training and employment programmes. A significant client group is comprised of young homeless people who have not made the transition from state foster care to independence successfully.
- **Capacity-building** Lifewise provides management, administrative, governance and accounting support to a range of small organisations and projects across the Upper North Island. These range from community development projects, mental health and addictions services, advocacy services and sustainable food initiatives.

# Lifewise's Interest and Expertise

A large number of Lifewise's services work alongside children in vulnerable circumstances and their families on a day to day basis. Lifewise has considerable experience in working with these children and shares the government's concern for them and their families.

Lifewise acknowledges and congratulates the Minister on her leadership on this issue and for creating the opportunity for individuals and organisations throughout NZ to participate in sharing their views on solutions. Lifewise urges the Minister to continue to make ending child abuse in this country one that is collaborative will all political parties.

### **Contact Details**

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Lifewise would like to take up any opportunity to speak to this submission.

# Lifewise's Response to the Green Paper

### **Definition of Vulnerability**

The definition of vulnerability in the Green Paper seems narrowly focussed on children at risk of abuse, harm or neglect. Lifewise takes a broader perspective.

It is a characteristic of *all* children that they are vulnerable at different stages in life, especially at key transition points, such as at birth, during early childhood, and in adolescence. *Some* children are vulnerable at other times due to their living situation or circumstances. Consequently, to address vulnerability in children, a range of initiatives is required – those to address *general* vulnerability and those to address *particular* vulnerability.

This view can be represented at a public policy level through the Proportionate Universality Approach (Marmot, 2010). Under this approach, **universal measures** are needed to help all children do well at key life stages; **targeted measures** are required to reduce the risks to those most at risk of harm; and **quality assistance** interventions are needed for those already experiencing the consequences of harm. Lifewise notes that this approach is taken by the Scottish government (The Scottish Government, 2010) in its plan to end child poverty and which is cited in the Green Paper.

#### **Targeting versus Universal Approaches to Addressing Vulnerability**

When addressing vulnerability in individual children (including abused children) it is typical to also consider resilience or protective factors that are already present in the child, or which can be provided for the child to mitigate the effects of that abuse. Lifewise believes the same consideration should be applied when considering the issue of vulnerability for children globally. Therefore, a key set of interventions in any action plan to protect vulnerable children relate to the protective factors which mitigate children's vulnerability as a whole population. These include initiatives at the individual and family level, at community and neighbourhood level, and at a structural and policy level.

#### Individual versus Community-based Initiatives

The last 30 years of individualised casework, as the main paradigm for social work practice in New Zealand, has failed to substantially address the rising rate of child abuse. A new paradigm for practice is required. Lifewise supports the Green Paper's acknowledgement of the role of community as part of a shared responsibility approach. Just as secure attachment is a buffer against future behavioural problems in children, by strengthening human connections, securely connected neighbourhoods and communities protect their inhabitants from the effects of harm. Disconnected communities and neighbourhoods result in the needs for increased numbers of social workers and health professionals needed to replace the torn social fabric of those communities.

There is a growing body of literature and research to support initiatives at a neighbourhood level being at least part of a new practice paradigm. These include the recommendations of the 2000 report by the United States National Research Council and the Institute of Medicine Committee on Integrating the Science of Early Childhood Development, *From Neurons to Neighborhoods: The Science of Early Childhood Development*. Among its recommended strategies were ones aimed at a neighbourhood level. They included: building neighbourhood connections and strengthening the informal supports of neighbourhood; strengthening and integrating formal institutions so that they are inclusive of and responsive to residents' priorities; creating and strengthening organisations to engage with residents who are isolated or alienated; and developing local leadership through opportunities for leadership training and mentoring.

Several studies have linked environmental factors such as: residential turnover and mobility, the economic status or resources of the neighbourhood, increased economic distress or disadvantage, overcrowding, and per capita density of alcohol outlets to the rate of child maltreatment. However, the impact on child abuse is not simply from the material resources of the neighbourhoods studied.

In a meta-analysis of studies examining the effect between neighbourhood characteristics and child well-being, Coulton et al (2007) refer to several studies pointing to the connection between neighbours as being an important factor in determining the rates of child abuse in those neighbourhoods. They cite studies which indicate:

"... that neighbours in areas with high maltreatment rates expressed less willingness to exchange child care with neighbours and reported more stress in their lives ... that the difference between neighbourhoods with high and low child maltreatment rates was more precisely related to social integration (or lack thereof) rather than social impoverishment ... it is not the poverty rates so much as the extent to which neighbours know and rely on each other that is related to child maltreatment rates ...and that impoverishment had a weaker effect on maltreatment rates when neighbours were more connected and more likely to support each other's parenting." (p. 1133)

Less connected neighbours are not only less likely to seek support from their neighbours for family troubles that may reduce child abuse risk, they are also less likely to report child abuse witnessed in the neighbourhood out of a sense of fear or distrust of their neighbours.

Efforts to reduce levels of child maltreatment and non-accidental injury through increasing neighbourliness, community engagement, and connection appear to have had some success. An example of this type of intervention includes the 'Strong Communities' project which has been underway since 2002, implementing neighbourhood-based strategies to address child abuse and family well-being in three counties of South Carolina in the USA.

The focus of the Strong Communities initiative is on *creating "environments in which every child and parent can be confident that someone will notice and someone will care whether they have cause for joy, sorrow or worry."* (Melton-Kimbrough and Melton, 2008)

Their results indicate that between 2004 and 2007 officially substantiated cases of maltreatment, non-accidental injury and hospitalisation have reduced significantly for children in those counties. By comparison, the rates significantly increased or decreased by substantially smaller amounts in a neighbouring comparison county.

A further piece of science-based research, based on the evolutionary theory, concerns the work of evolutionary biologist David Sloane Wilson. In a series of experiments being conducted in New York,

The Binghampton Neighborhood Project is a collaboration between Binghamton University and a group of community leaders attempting to grow and measure 'prosociality' in neighbourhoods as a means of increasing well-being and improving the quality of life in cities.

The Scottish Government's action plan to address child poverty in Scotland referred to in the Green Paper also acknowledges the importance of locality-based approaches through emphasising building on the *positive* aspects of neighbourhoods and communities instead of concentrating on the *negatives*, and on supporting individuals and communities to have more control over their own circumstances.

Lifewise supports these community-led approaches and has invested in this approach itself through initiatives such as Know your Neighbours, Neighbours Day Aotearoa, and the Greater Glen Eden Network Initiative. Lifewise recommends this as an important area for further study and action as part of the government's partnered response proposal.

# The Impact of Social and Economic Policy

Instigating protective factors at the *wider social and economic policy* level are a key part of addressing the social context of vulnerability in children, yet are largely ignored in the Green Paper. Recognising the impact of poverty on almost every aspect of a child's life, Lifewise urges the government to address this as a matter of urgency through actions including:

- Immediate agreement to a cross-part commitment to a sustained strategy for ending child poverty in New Zealand, in particular for children living in the families of welfare beneficiaries whose children are disproportionally represented in poverty and other social statistics
- Setting targets to reduce child poverty in New Zealand and monitor and report on this regularly
- A cross-part commitment to address the increasing levels of inequality in New Zealand
- Giving paramouncy to the specific impact on children in policy considerations regarding the forthcoming reform of the welfare system, and monitoring and reporting on the specific impact on children of any reforms made
- Ensuring all children receive access to housing that is healthy, appropriate and affordable for their families, through dramatically increasing the resources available to the community housing sector and through implementing a minimum standard of acceptable rental accommodation in the private rental market
- Ensuring all children have access to quality early childhood education in their community
- Setting immediate targets for a significant reduction in the levels of communicable diseases prevalent in poorer households and regions and monitor and report on this regularly

# **Vulnerability at Points of Transition**

A number of children and young people have times of particular vulnerability for which specific support is required. In Lifewise's experience, these groups include:

- Those living with disability, especially those leaving institutional schooling at 16 or 17 without adequate support to independence into the community, or those younger adults whose family situation means their only accommodation option is an inappropriate care or facilities, e.g. a rest home.
- Those children living with disability who are unable to access mainstream education and therefore participate fully in their community and peer group, unable to access suitable mainstream education

• Those who have been in state care or other foster care who unsuccessfully transition to independence. Lifewise's experience with young homeless people suggests a significant group of these young people leave care to minimal effective support, few life skills, and no access to the basics resources for living. Lifewise recommends a more comprehensive support system be put in place for those leaving care, incorporating the suggestions and experiences of those young people.

### Vulnerability of those at High Risk Of or Who Have Experienced Abuse/Harm/Neglect

Lifewise acknowledges that there are children who require specialist intervention as result of risk of harm or as a result of their behaviour towards others. In Lifewise's experience, improvements could be made in the following areas:

- Increased levels of post-natal support provided by Plunket nurses and even by trained volunteers in the community. Lifewise has a number of foster parents or former foster parents whose skills and expertise could assist new mothers in their streets and neighbourhoods, through a 'softly-softly approach', linked to professional support when required.
- Early identification of children at risk of future behavioural issues through implementation of the findings of the Dunedin Multidisciplinary Health and Development Study (2011).
- Increased support for families when children are placed in their care as an outcome of a Family Group Conference. Frequently, Lifewise observes placements made to families who are not adequately resourced or otherwise supported over time to provide care to children in their wider family.

### **Mandatory Reporting**

In general, Lifewise does not agree with what appears to be the focus of the Green Paper that increased surveillance alone will reduce risk to children. More and more social workers and increasingly nosy neighbours is not the solution.

Lifewise does not support the introduction of mandatory reporting in New Zealand. The evidence for its effectiveness in other jurisdictions is at best equivocal. Lifewise believes that mandatory reporting will not add great value to the already responsible level of reporting by professionals in New Zealand now. In addition, the introduction of mandatory reporting is likely to result in an increased number of relatively insignificant reports of suspected abuse, the vast majority of which will not result in substantiated abuse. This will require the recruitment of additional social work staff to manage the increased workload for minimal gain in terms of addressing the issue of child abuse. It will also clutter the notifications system, potentially distracting social workers form the more risky instances of abuse which require their immediate intervention.

Of interest is information relating to the reporting of child abuse to CYFS over the 5 years reported in the latest Salvation Army state of the nation report, *The Growing Divide*. This graph (Fig 1 below) indicates a steep growth in the number of notifications received by CYFS in the 5 year period between 2006 and 2011, but only a relatively small increase in the number of substantiated reports of abuse once investigated. Lifewise's view is that situation/gap will only increase if mandatory reporting is introduced.



Figure One: Child Youth and Family Notifications and Substantiations 2006-2011

# Family Violence Initiatives

Lifewise supports awareness-raising initiatives such as the 'lt's not OK' campaign to raise awareness about family violence in the community. However, while the overall 'stop violence' message is very good, little is provided in the accompanying media advertising about how to actually begin a conversation with a friend, family member or colleague to address their violence or get help. Lifewise recommends the development of campaigns similar to those currently aimed at alcohol reduction whereby a 'script' is provided for those wanting to know how to raise a sensitive issue with someone close.

The prevalence of family violence in our communities poses extreme risk to children. The key component of any strategy designed to address this issue, should be centred around modifying the behaviour of perpetrators of violence. Given the sustained history of trauma and violence that characterises the personal experience of many family violence perpetrators, Lifewise doubts that the current relatively short-term programmes for offenders will produce long-term results for those highest risk offenders. Lifewise believes there is a lack of in-depth NZ research examining the outcomes of these programmes and proposes research be undertaken immediately, to review their effectiveness, and to consider if alternative approaches should be introduced, at least for some offenders.

# **Social Work Education**

Children at risk are reliant on the skills and experience of the professional intervening in their lives to notice risk and take appropriate action. This requires a high level of training and expertise on behalf of those professionals. Lifewise's experience of new graduate social workers is that they are ill-prepared for the work required of them in managing child protection cases. While no-one would realistically expect a new graduate to have a full understanding of the complexities of child abuse, there seems to be a lack of basic skills - assessment and intervention approaches - that can be

learned in a classroom setting. Lifewise recommends a review of the content and curriculum of current social work training programmes to ensure appropriate attention is being paid to this area of training.

### Collaboration

Lifewise strongly supports increased attention being paid to collaborative work between organisations working with families where there is significant risk of harm or where harm has already occurred. This is a fundamental principle in effective child protection work, yet in Lifewise's experience, not all organisations practice in this way. Lifewise believes that incentives and monitoring of collaboration is required. Lifewise believes that organisations contracted by the government to work with children at risk of harm should be required to demonstrate inter-agency collaboration as a key performance measure in their contract reporting.

### Summary - A Partnered Approach

The well-being of young children is dependent on their having stable, loving adults in their immediate world and a safe and predictable environment. In order to achieve this, a concerted and co-ordinated effort is required on all fronts. Everyone has a part to play - government, community agencies, professionals, businesses, academics, people in families, streets and neighbourhoods.

"The time has come to stop blaming parents, communities, business, and government -and to shape a shared agenda to ensure both a rewarding childhood and a promising future for all children. Central to this agenda is the importance of matching needs and capabilities. Families, for example, are the best vehicle for providing loving and caring relationships and for creating safe and nurturing environments that promote healthy physical, cognitive, linguistic, social, emotional, and moral development. Communities are ideally situated to provide a wide range of supports for families through formal voluntary organizations and informal social networks. Businesses have the opportunity to support family well-being through creating positive work environments, offering flexible work schedules, and providing important financial benefits, such as family health insurance and child care. Local, state, and federal governments have substantial opportunities to influence the quality of family life and the availability of resources to support child needs through such diverse mechanisms as tax policies to alleviate economic hardship, minimum wage laws to boost the incomes of low-wage workers, policies to support working parents and promote the health and development of their children, policies to support parent choice regarding employment, and funding for early intervention programs, among others. No single locus of responsibility can address all the needs of young children and their families. Effective policies clearly require aggregate responsibility." (Shonkoff and Phillips, 2000)

It's time to start.

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