

The New Zealand Psychological Society

Te Rōpū Mātai Hinengaro o Aotearoa

Submission to the Social Services Select Committee Inquiry into the

Children, Young Persons, and Their Families (Oranga Tamariki) Legislation Bill

Prepared

by the

New Zealand Psychological Society

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1. Acknowledgement

1.1. The New Zealand Psychological Society welcomes the opportunity to comment on the Social Services Select Committee Inquiry into the Children, Young Persons, and Their Families (Oranga Tamariki) Legislation Bill.

2. Introduction

- **2.1.** The New Zealand Psychological Society (NZPsS) is the national, professional association that serves all psychologists in New Zealand. Our collective aim is to improve individual and community wellbeing by disseminating and advancing the rigorous practice of psychology.
- **2.2.** We have over 1200 members who apply psychology in a wide range of practical and academic contexts to health, education, corrections, young people's services and non-governmental organisations.
- **2.3.** We are experts in helping people solve complex, persistent problems that interfere with a person's wellbeing and functioning. All psychologists have a minimum of six years' university education. All psychologists have at least a Master's degree, and most have additional qualifications and experience. We are all registered with the New Zealand Psychologists Board and are required to maintain a high standard of ethical practice with regular supervision and yearly audit of our practise.
- **2.4.** Psychologists are trained to help resolve high risk situations quickly. We are also well placed to design preventative programmes because of our research and evaluation skills, knowledge of human behaviour and systems. Many of us have additional training in therapeutic approaches, counselling skills and organisational psychology. Where we are able to respond quickly, early in the life cycle of the person or in the life of the problem, we can reduce risk and create savings to free up resources for others.
- **2.5.** The NZPsS has high standards of ethical practice and a commitment to working with Māori and diverse cultural groups. As such we offer knowledge and skills in whānau/family based services that recognise the importance of stable and healthy environments in the developmental years.

3. Preamble

The wellbeing of families and children is at the heart of the work of psychologists. We are aware of the large body of research which unequivocally demonstrates that positive and secure attachment in childhood is predictive of mental wellbeing in adulthood¹. We are aware also that parental mental health problems are an important predictor of children's mental health and wellbeing². We note the following in relation to applying the expertise of psychologists to the health and wellbeing of children and their families:

- **3.1.** There is no mention of psychologists or the application of psychology in this Bill. This seems to be an omission in a piece of legislation that aims to offer solutions to the difficulties young people and their carers face.
- **3.2.** We acknowledge that our social work colleagues play an important role in supporting young people and their communities. Clinical, educational, community and counselling psychologists are also intimately involved in the lives of young people at risk including placement, court reports, training, advising and interventions e.g. family parenting programmes such as Parent Child Interactions Training, Whānau Ora, Triple P and Incredible Years.
- **3.3.** Psychologists are often seen as the bridge across the boundaries of health, education, social services, non-governmental organisations and the wider communities. We often take the lead in interagency planning meetings, for example, via Intensive Wraparound Services (IWS); High and Complex Needs (HCN); Family Group Conferencing (FGC) and Strengthening Families.
- **3.4.** It is common in surveys of parents with children who have special needs to request more access to psychologists.³
- **3.5.** Psychologists are unique in that they employ the wide systemic and theoretical base of psychology to generate solutions to problems such as behaviour management, parenting support, anxiety and trauma.^{4 5}

¹ Kenny, M. E. and Sirin, S. (2006) Parental Attachment, Self-Worth, and Depressive Symptoms Among Emerging Adults. Journal of Counselling & Development, 84, 61-71, cited in "Better Mental Health for All: A Public Health Approach to Mental Health Improvement" (2016) London: Faculty of Public Health and Mental Health Foundation.

² SCIE. (2011). and Huntsman. (2008). In Hansson, U. O'Shaughnessy, R. and Monteith, M. (October 2013) Maternal Mental Health and Poverty: The Impact on Children's Educational Outcomes. UNESCO Chairs: National University of Ireland Galway and University of Ulster, cited in "Better Mental Health for All: A Public Health Approach to Mental Health Improvement" (2016) London: Faculty of Public Health and Mental Health Foundation.

³ Ministry of Education. (2015). Engagement forums feedback: Special Education. Retrieved from <u>http://www.education.govt.nz/assets/Documents/Ministry/Initiatives/special-education-update/Complete-report-engagement-forums-feedback-Special-Education-Update-Nov-2015.pdf</u> "More child psychologists accessible to schools/parents, able to assess/ diagnose, via public health sector." Auckland Parents p37 ⁴ Management Advisory Service (1989 p6); Mitchell (2010) p206

⁵ Farrell, P., Woods, K., Lewis, S., Rooney, S., Squires, G., & O'Connor, M. (2006). A Review of the Functions and Contribution of Educational Psychologists in England and Wales in light of "Every Child Matters: Change for

- **3.6.** Psychologists provide a first response to trauma related events and issues across the lifespan. It is imperative that young people vulnerable to trauma, at a family level, school, societal and organisational level are supported so such events are eliminated or at the very least minimised.
- **3.7.** It is our professional experience that young Māori children, having been removed from their homes and not provided an alternative whakapapa home-base, risk being alienated from their cultural identity and as a consequence experience a range of trauma-related issues.⁶
- **3.8.** We hope that psychological expertise will be made available to families to avoid the unnecessary removal of children from their whanau, and to advise on and support the next best alternative/s to ensure children's safety and wellbeing.

4. Commendations

- **4.1.** We commend the proposal to extend the youth justice jurisdiction to include 17-yearolds
- **4.2.** We support the planned new entitlement for young person's transitioning out of care to remain or return to living with a caregiver up to age 21.
- **4.3.** We support the principle of early intervention response for a young person, whānau and community.
- **4.4.** The NZPsS upholds the intention for a practical commitment to the principles of the Treaty of Waitangi and the need to recognise mana tamaiti, whakapapa, and the practice of whanaungatanga for Māori children and young persons who come to the attention of government services.

Children". Retrieved from

http://webarchive.nationalarchives.gov.uk/20130401151715/http://www.education.gov.uk/publications/eOrd eringDownload/RR792.pdf

⁶ ⁶ Maori experiences of Bipolar Disorder. Waitoki, W., Nikora, L., Levy, M., & Harris, P. (2014). <u>http://researchcommons.waikato.ac.nz/handle/10289/9820</u>

5. Symptoms and Causes

- **5.1.** The NZPsS recognises there is a hierarchy of needs where physiological and physical safety needs must be considered alongside psychological needs. For example, food and housing are essential to health and psychological wellbeing.⁷
- **5.2.** Research has indicated that children from as young as seven who live in economically deprived environments are on course for a life of academic, social and emotional failure.⁸ Poverty has been identified as a significant causal factor for poor mental health and wellbeing.⁹
- **5.3.** A recent UN report has documented our failure in Aotearoa/New Zealand to care for those most disadvantaged in our communities and the need for a systematic plan to alleviate poverty.¹⁰Addressing inequity in our country is an essential part of preventing young people coming to the attention of government services.
- **5.4.** The NZPsS hopes children, young people, their carers and the support services they need will be adequately resourced to prevent the cause of the problem rather than being the "ambulance at the bottom of the cliff" and arriving too late.
- **5.5.** A high level of resourcing might be required initially to provide intensive wrap around services and services that are culturally responsive to enable communities to thrive and to be self-sustaining. However, long-term this is likely to be a better use of resources and a better outcome for our country.¹¹
- **5.6.** We agree there needs to be a radical and significant change in the way we support children and young people and keep them safe. This includes supporting communities to overcome generational poverty and neglect so that they are safe places for children be raised and nurtured.

⁷ Maslow, A.H. (1943) 'A Theory of Human Motivation' Psychological Review, 50, pp 370 -96. ⁸ Save the Children, 2013

⁹ Fell, B., & Hewstone, M. (2015). Psychological perspectives on poverty. (June). Retrieved from <u>http://www.jrf.org.uk/sites/files/jrf/psychological-perspectives-poverty-full_0.pdf</u>

¹⁰ Committee on the Rights of the Child. (2016). Concluding observations on the fifth periodic report of New Zealand(21 October). Retrieved from

http://docstore.ohchr.org/SelfServices/FilesHandler.ashx?enc=6QkG1d%2fPPRiCAqhKb7yhsrXsJ3pRx9xOCak0E d1mLEkIUHtKTSHNWA9ddXmo8oiUgGuB9JUoxS6ES4ymmXawE3W7Z52o%2b4tn33VBe09mSo1PELAebMOgBS 4BCR%2fv23Ao

¹¹ Boston, J. (2014). Child Poverty in New Zealand: Why it matters and how it can be reduced. Educational Philosophy and Theory, 46(9), 962-988. doi:10.1080/00131857.2014.931002

6. The Investment Approach

- **6.1.** The NZPsS has concerns about the rationale for the social investment approach as the new operating model for the delivery of long-term outcomes for children and young people, their whānau and local communities.
- **6.2.** We know of no formal evidence either in this country or elsewhere that the social investment approach has been a more effective system to provide care than the alternatives. Current documents outlining commissioning models provide descriptive information but no independent research evaluation data.¹²
- **6.3.** Contestable funding and private contracting appears to have delivered a poor quality service at high cost to our prisons¹³ ¹⁴ and elderly care¹⁵ both in this country and overseas.
- **6.4.** Operating models that are driven by payment for targets have been documented to fail in public systems.¹⁶ Problems include:
 - 6.4.1. Those located in multiple communities; with complex and diverse needs are avoided for easier, softer targets to meet the required profit margins.
 - 6.4.2. Competitive commissioning will provide perverse incentives for diagnosis and the allocation of additional resources rather than devising successful preventive local and inclusive solutions.
 - 6.4.3. Narrow or inappropriate selection criteria potentially exclude large groups in need of support and an expanding, costly bureaucracy to monitor these targets.¹⁷

¹² Ministry of Health (2016) Commissioning Framework for Mental Health and Addiction: A New Zealand guide. Wellington: Ministry of Health. (see appendix D).

¹³ Stanley, E. (2011). Human Rights and Prisons: a review to the Human Rights Commission. Retrieved from <u>https://www.hrc.co.nz/files/5214/2550/8357/Stanley_2011_-_Human_Rights_and_Prisons.pdf</u>

¹⁴ Pennington, P. (2016, 12 October). Corrections stands by performance measures despite Mt Eden case. RNZ. Retrieved from <u>http://www.radionz.co.nz/news/national/315440/corrections-stands-by-performance-measures-despite-mt-eden-case</u>

¹⁵ Human Rights Commission. (2012). Caring Counts: Report of the Inquiry into the Aged Care Workforce. Retrieved from <u>https://www.hrc.co.nz/files/3114/2360/8581/Caring-counts.docx</u>

¹⁶ Seddon, J. (2008). An Irrational Belief in Targets Systems Thinking in the Public Sector: the failure of the reform regime...and a manifesto for a better way (pp. 96-107). Axminster: Triarchy Press.

¹⁷ Dale, C (2016, 15 September) Breaking down the 'social investment' approach

http://www.cpag.org.nz/breaking-down-the-social-investment-approach/

7. Treaty Obligations

7.1. The NZPsS recognises that there will be times when young people will need to be removed temporarily or permanently from their immediate living situation. However, the Society is concerned like many others who represent Māoridom that this Bill does not meet Te Tiriti o Waitangi obligations.¹⁸ ¹⁹

Issues include:

- **7.2.** The absence of Tangata Whenua's voice in decision making about their children being removed from their communities.
- **7.3.** The poor record of the State to care for young people placing them at risk of further abuse.²⁰
- **7.4.** The reduced threshold for removing young people from their whānau which might lead to an increasing unnecessary demand for placements and avoiding the complex work required in supporting and keeping a young person safe within their own community.
- **7.5.** Removing young people from their immediate and wider whānau might reduce the quality of the assessment and examining the needs of the young person within their communities. ²¹ Young people cannot be understood without reference to their whānau, hapū and iwi.

8. Data Sharing

- **8.1.** The NZPsS supports the collection of data for research to ensure continuous quality improvement of services to clients.
- **8.2.** Psychologists are registered with the New Zealand Psychologists Board under the Health Practitioners Competence Assurance Act and are required to abide by our Code

https://s3.amazonaws.com/s3.documentcloud.org/documents/2299151/final-report-of-clas-2015.pdf

¹⁸ Māori Women's' Network. (2016, 9 October). Hands Off Our Tamariki: An Open Letter. Retrieved from <u>https://tewhareporahou.wordpress.com/2016/10/09/hands-off-our-tamariki-an-open-letter/</u>

¹⁹ Adds, A.-O. (2017, 8 February). If we can fight for our land, we can fight for our tamariki - Dame Tariana Turia. Māori Television. Retrieved from <u>http://www.maoritelevision.com/news/regional/if-we-can-fight-our-land-we-can-fight-our-tamariki-dame-tariana-turia</u>

²⁰ Confidential Listening and Assistance Service. (2015). Some Memories Never Fade: Final report of the Confidential Listening and Assistance Service. Retrieved from

²¹ Macfarlane, A., Macfarlane, S., & Gillon, G. (2014). Inclusion, Disability and Culture. In R. Wills, M. Morton, M. McLean, M. Stevenson & R. Slee (Eds.), Tales From School. Learning Disability and State Education after Administrative Reform (pp. 255-270). Rotterdam, The Netherlands: Sense Publishers.

of Ethics.²² Section 1.6. requires us to "recognise and promote persons' and peoples' rights to privacy".

- **8.3.** We are concerned that there does not seem to be specific limits to the use of the collated personal information and how long this information will be retained. We request that this part of the Bill on data collection is delayed until the Privacy Commissioner has been able to complete an investigation into the ethical risks to some of our most vulnerable citizens.²³
- **8.4.** Case-specific details such as age, gender, initial intervention, geographic area does not allow a simple outcome evaluation without a careful analysis of what is analysed, how it is analysed and what questions are being answered. Our members would like more information about how these data sets will be used to benefit our clients.

9. Conclusion

The New Zealand Psychological Society supports a radical and significant change to the way we support young people and keep them safe.

However, we cannot see how a sustainable and long term change can take place by (i) treating children in isolation from their whānau communities and the challenges that they face (ii) ignoring our Treaty obligations (iii) failing to address poverty and resourcing communities directly (iv) providing the necessary support services, including access to psychological support where necessary (v) ignoring the privacy, ethical and practical concerns with releasing client data (vi) and the inherent documented risks of a social investment approach without evidence of efficacy.

Psychologists can assist and enable the radical redesign of systems that support young people by:

- Being available to young people, whānau and other agencies to apply the knowledge and skills of psychology
- Deliver and co-ordinate preventative and reactive programmes to keep communities safe e.g. Parent Child Interactions Training, Whānau Ora, Incredible Years, Triple P, Intensive Wrap-around Services
- Being available to policy makers to advise on the design of successful systemic and community-based interventions that are specific to Aotearoa/New Zealand
- Using our skills as researchers to evaluate intervention programmes with rigorous designs

 ²² Code of Ethics Review Group. (2012). Code of Ethics for Psychologists Working in Aotearoa/New Zealand: NZ Psychological Society, NZ College of Clinical Psychologists and NZ Psychologists Board. p.7
²³ NZFVC 2017 Privacy Commissioner surveying NGOs on requirement for individual client level data

Contact details

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