



The New Zealand Psychological Society

Te Rōpū Mātai Hinengaro o Aotearoa

Submission to the Social Services and Community Committee

on the

Child Poverty Reduction Bill

Prepared by the

**New Zealand Psychological Society
Te Rōpū Mātai Hinengaro o Aotearoa**

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1. Acknowledgement

- 1.1 The New Zealand Psychological Society (NZPsS) welcomes the opportunity to comment on the Child Poverty Reduction Bill.

2. Introduction

- 2.1 The NZPsS is the national, professional association that serves psychologists from all areas of psychological practice in New Zealand. Our collective aim is to improve individual and community wellbeing by disseminating and advancing rigorous practice of psychology.
- 2.2 The NZPsS has over 1200 members working in a wide range of health, education, justice, corrections, children and young people's services, academic and NGO settings. We also have over 600 post graduate psychology student members.
- 2.3 The NZPsS has a longstanding commitment to supporting the reduction of child poverty and inequality in Aotearoa/New Zealand.¹
- 2.4 The NZPsS in conjunction with the Child Poverty Action Group, prepared a literature review on the relationship between childhood poverty mental health in 2017.² Poverty was established unequivocally as a major cause of mental health difficulties for young people and their whānau. Short-term and long-term poverty has a devastating impact on people being able to help themselves. The reduction and preferably the elimination of child poverty is likely to improve the wellbeing of our countries children and young people throughout their lifespan.

3. The purpose of the proposed Bill

- 3.1 The NZPsS supports the intention of this Bill to establish a legislative framework that will make this and successive Governments accountable to reduce poverty and thereby enhance the future wellbeing of children in our country.

4. Proposed measures and targets for poverty

¹ The New Zealand Psychological Society (2012). Submission to The Office of the Children's Commissioner Report on Solutions to Child Poverty in New Zealand. Retrieved from <http://www.psychology.org.nz/wp-content/uploads/2014/04/Submission-on-Child-Poverty-24-September-2012.pdf>

² Gibson, K., Abraham, Q., Asher, I., Black, R., Turner, N., Waitoki, W., & McMillan, N. (2017). Child Poverty and Mental Health: A Literature Review. Retrieved from <http://www.psychology.org.nz/wp-content/uploads/CPAGChildPovertyandMentalHealthreport.pdf>

- 4.1 We agree that child poverty needs to be measured against appropriate criteria.
- 4.2 It will be important for these measures to be periodically reviewed and revised to provide the most precise gauge of child poverty that is practically possible.
- 4.3 Targets and measures in themselves do not prevent poverty. At best, they are proxy indicators to monitor the progress of successful intervention plans. There is an inherent tension between targets and measures that are (i) so imprecise to be meaningless or (ii) so comprehensive to be impractical, unwieldy, complex and expensive to monitor.

It is common for psychologists working in public service and non-governmental organisations to tell us about the burden of such compliance paperwork which prevents them from completing the activities to meet the desired outcomes. There is evidence that unrealistic, narrow target setting over the long periods can lead to burnout and to potentially unsustainable systems of care.³

Organisational psychologists have documented the unintended outcomes of targets in public health systems.⁴ History is littered with examples of well-meaning targets such as for educational achievement and operations in hospitals that have resulted in worse outcomes as a result of the distorting effects of targets. Targets and measures need to be carefully designed with those who work within the system and not an end in themselves.

- 4.4 We welcome the proposed independent and transparent reporting on the state of child poverty. We hope this will promote an honest evaluation on any gains and what we need to improve collectively as a country and reduce the potential for political infighting.
- 4.5 We endorse the ability of the Minister to consult with representatives of iwi, and Māori organisations. Particular attention will need to be given to the needs of Māori due to our responsibilities to Te Tiriti o Waitangi, in the interest of equity given the disproportionate effect of poverty in these communities.

There will need to be well-targeted measures to improve outcomes for Māori that move beyond a deficit lens. We agree with the proposal that the government work with iwi and Māori organisations to develop measures and indicators of Māori well-being that include Māori concepts of poverty and wealth.

³ Westwood, S., Morison, L., Allt, J., & Holmes, N. (2017). Predictors of emotional exhaustion, disengagement and burnout among improving access to psychological therapies (IAPT) practitioners. *Journal of Mental Health*, 26(2), 172-179. doi:10.1080/09638237.2016.1276540

⁴ 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.

This is not intended to devolve all responsibility to Māori but to genuinely work in partnership with those communities. Durie notes " the tendency of government publications to espouse Māori sentiments while providing nothing of substance to give effect to them".⁵ We would predict that strategies that are formulated with Māori and communities are more likely result in engagement and more successful outcomes.

- 4.6 We are aware that there are diverse reasons why children are living in poverty. We hope therefore that this Bill will include measures that go beyond economic measures of poverty. Children who are in families that appear to have an adequate level of "economic fitness" may still experience poverty. A range of health or other issues, may mean their carers/whanau are unable to provide adequately for their children.

5. Government strategy for improving children's wellbeing and oranga tamariki action plan

- 5.1 The NZPsS is delighted to see the Bill go beyond targets and include a requirement for Government to adopt, publish, and review a Government strategy for improving children's wellbeing.

- 5.2 We support the Governments aspiration for more 'joined up' working between government agencies and those who are significant in reducing child poverty. The NZPsS notes that there have been many attempts both in our country and overseas to increase collaborative practices that have been unsuccessful.⁶⁷ We hope that we will learn from previous attempts to increase the incentives and reduce the barriers to collaborative working. These include structural barriers with different ways of framing the problem, increasing space and time together, increasing social capital and trust, shared budgets and a shared responsibility for achieving an outcome/s.

- 5.3 Psychologists are well placed to work across different agencies that work to support children's well being such as the Ministry of Health and the Ministry of Education.

- 5.4 We hope this Bill will contribute to the addressing the causes of mental health difficulties and responses to distress rather than treating the symptoms.

⁵ Cited Cooper, E., Rickard, S., & Waitoki, W. (2011). Maori, Psychology and the Law: Considerations for Bicultural Practice. In F. Seymour, S. Blackwell & J. Thorburn (Eds.), *Psychology and the Law in Aotearoa New Zealand* (pp. 35-61). Wellington, New Zealand: New Zealand Psychological Society, p 36

⁶ Carey, G., Crammond, B., & Riley, T. (2014). Top-Down Approaches to Joined-Up Government: Examining the Unintended Consequences of Weak Implementation. *International Journal of Public Administration*, 38(3), 167-178. doi: 10.1080/01900692.2014.903276

⁷ Eppel, E. (2013). Collaborative Governance: Framing New Zealand Practice. IGPS working Paper. Retrieved from <http://igps.victoria.ac.nz/publications/files/07705653e38.pdf>

5.5 However, we note that, findings from the Christchurch and Dunedin longitudinal studies would support the view that children growing up in the most disadvantaged households are likely to be facing multiple problems in later life e.g. conduct/oppositional disorder, police contact reoffending, cannabis use, alcohol abuse, substance abuse, mood disorder, suicide ideation, low self-esteem, early sexual activity.⁸ Psychologists are often called to attempt to remediate in situations where young people have been seen to transgress the rules or tikanga of their communities for example in the courts, young offenders and Oranga Tamariki.

We hope that there will be adequate resourcing for psychologists, social support agencies to ensure that structural barriers that might maintain intergenerational poverty. For example, educational psychologists are able to support children at risk of losing their school placement with the consequence of reduced opportunities in later life. Psychologists take a life span approach for clients who are increasingly faced with disruptions to development life points that affect infants, children, youth and adults. These issues are a direct result of cycles of poverty, disadvantage, and the systems that maintain, or create unhelpful narratives of blame.

5.6 We support the use of the term “at-risk” rather than “vulnerable” children. We hope this will shift the attention to addressing the risk factors within the environment rather than locating the difficulties solely within the child.

5.7 Part 2 clause 3(1) p31 we would like to see an addition to the “taking measures aimed at...” which is; “strengthening positive connections with their peer group”. This acknowledges the significance of a child’s peers in their psychological development and wellbeing.

6. Conclusion

6.1 All young people and their whānau need to have a home, food, clothing, access to a good education with carers who are not worrying about the basics to live. This in turn will reduce mental health difficulties and responses to distress that is likely to create happy and successful citizens.

⁸ Fergusson, D. M., Horwood, L. J., & Lynskey, M. (1994). The childhoods of multiple problem adolescents: a 15-year longitudinal study. *Journal of Child Psychology*, 35(6), 1123–1140

The New Zealand Psychological Society supports the Government's commitment to address child poverty in a systematic, comprehensive and long term manner. We hope this will have cross-party support.

- 6.2 The NZPS recommends that interim plans to address poverty does not wait for this legislation. The Children's Commissioner's Expert Advisory Group (2012) offers a starting point with 78 recommendations that have been prioritised by professionals.⁹
- 6.3 Most psychologists acknowledge that many of our children cope with a remarkable amount of adversity but are still not indestructible.

Evidence strongly suggests...that resilience is common and typically arises from the operation of basic protections. There are exceptional cases, where children overcome heavy odds because of extraordinary talents, luck, or resources, but most of the time, the children who make it have ordinary human resources and protective factors in their lives. Resilience emerges from commonplace adaptive systems for human development, such as a healthy human brain in good working order; close relationships with competent and caring adults; committed families; effective schools and communities; opportunities to succeed; and beliefs in the self, nurtured by positive interactions with the world.¹⁰

- 6.4 We hope that this legislation is the starting point for a discussion for a wider discussion about inequality and the wellbeing of our citizens.¹¹ Our country is wealthy enough to consider how distribute this wealth so our children are not just 'surviving but thriving'.¹²

Reducing inequality for our children depends on all children being able to access and benefit from quality universal public services, such as health, education and social services. This will be good for the mana and wellbeing of everyone in our country.

- 6.5 Psychologists are well placed to support the Government to design measures and targets. We can also advise on some of the successful strategies and pitfalls when seeking to change complex social systems.

⁹ Expert Advisory Group on Solutions to Child Poverty. (2012). Solutions to child poverty in New Zealand: Evidence for action. Office of the Children's Commissioner, Wellington.

¹⁰ Masten, A (2014). Ordinary Magic: Resilience in Development. New York: The Guilford Press. p.7-8

¹¹ Wilkinson, R. G., & Pickett, K. (2010). The spirit level: Why equality is better for everyone. London: Penguin Books.

¹² Rashbrooke, M. (2015). Wealth in New Zealand. Auckland, NZ: Bridget Williams Books.