

# Community consultation *hui report*

February 2015



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# 1. Executive summary

The executive summary sets out the common themes and ideas that emerged across the hui. The individual summaries included in each hui report highlight the feedback that was specific to that community.

## Vision

### First 1,000 days

#### Participants agreed that children would be:

- loved and valued
- healthy and vibrant
- strongly attached to their caregivers
- living in safe, affordable, warm housing
- well-fed with good nutrition, and physically active
- accessing affordable, high quality early childhood education (ECE) and ready for school
- easily accessing health services, including Well Child/Tamariki Ora, early intervention and treatment services.

### Youth

#### Participants agreed that youth would be:

- forming strong and valued connections/relationships with family/whānau and the community
- living in a stable family environment
- developing a strong sense of identity and belonging, including cultural identity and whanaungatanga
- confident, resilient and good at conflict resolution
- actively involved in decisions (at all levels) that affect them
- able to take up a wide range of ongoing opportunities to learn (not just through formal education), e.g. “How to own your own farm rather than just be a worker”, and to take on leadership roles
- ready for, and then engaged in, either education and/or employment
- visionary and aspirational for their futures, with purpose and direction, and supported to follow their dreams and reach their potential.

## Parents, families and homes

#### Parents, families and their homes are central to the wellbeing of children and youth. Participants agreed that parents and families would be:

- characterised by a spirit of hopefulness
- living in stable relationships
- living in safe, affordable and warm housing, with some self-sufficiency, e.g. fruit and veges in the garden where possible
- employed, financially stable and able to afford the basic necessities (Note that the need for a “Living Wage” was strongly endorsed as a pre-requisite at all of the hui)
- confident with parenting and relationship skills
- able to spend time with their children, e.g. by taking advantage of paid parental leave
- receiving strong support as new parents
- not isolated, i.e. well connected to other families/whānau and their communities, including through hapu and iwi
- accessing the services they need (e.g. health, social support, housing, etc) with minimal barriers (e.g. transport, cost)
- free of addiction (drug and alcohol) and violence
- reaching their potential as a family and then able to contribute to communities.

## Indicators

There was wide agreement that measuring the extent to which the vision is being achieved is critical, and would need to be directly resourced.

The general feedback was that success would be demonstrated by decreases in negative indicators, and increases in positive indicators across a range of outcomes. Similarly, utilisation of preventive services such as Well Child/Tamariki Ora would increase, and treatment or interventions, such as hospital admissions and CYF referrals, would decrease.

It was acknowledged that in addition to this standard approach, it is also important to “measure what we treasure”. This could involve additional indicators linked to the vision such as the number of youth in leadership roles, and other qualitative assessment based on feedback from communities.

One positive target indicator that could be included was that every child or young person should have five positive adults “looking out for them”.

The need for more programme evaluation was signalled.

## Issues and solutions

Following articulation of a vision for their communities, the hui participants were asked to outline the issues and challenges faced, potential solutions and their vision for services. Below is a summary of the common themes that emerged from these discussions.

### Communities

There were many comments that community involvement is “astounding”, and that organisations are very lucky with the support they get from volunteers.

The important role of communities in “optimising the potential” of children and youth was consistently acknowledged. Participants articulated the importance of strong, supportive neighbourhoods. They saw the need to strengthen the focus on building strong families who would then be able to contribute positively to other families, and in turn healthy villages and communities.

The role of whānau, hapu and iwi in this process was strongly emphasised.

In relation to youth, participants stated the importance of communities being inclusive, without attitudes or language that excluded or alienated youth.

### Collaboration

This was a strong and consistent theme. At every hui, the passion and commitment of their people was highlighted. Several participants commented that, “We are finally realising it takes a community to raise a child.” Generally, participants were very positive about improvements in collaboration, but felt this could be even better.

The need for better collaboration at the government level was stressed, particularly in relation to funding processes.

One idea was to provide services and communities with training about how to collaborate more effectively. Every community identified the need for a version of a “community hub”. This meant one site where services could be co-located, with consolidated administration, financial management and reporting services wherever possible. Facilities and costs could also be shared. They felt strongly that this would strengthen collaboration, understanding and awareness of other services, communication between services, and overall capability and capacity. It would also strengthen service integration and a more holistic approach, similar to the Whānau Ora model.

The positive contributions of iwi were acknowledged in many cases, with a desire for this collaboration to be continually strengthened.

The difficulties associated with changes in government were also noted, with a desire to see better collaboration across political parties to reduce negative impacts on services when change occurs.

### Planning

Communities were consistent in their feedback that they wanted to see more community-led rather than government-led planning. Where government was leading a planning process, they wanted to see more opportunities for communities to participate.

Similarly, all communities saw the need for a district plan focused on the two population groups that would reflect their community’s knowledge, needs and preferences. They emphasised the value of working towards shared goals in a more cohesive and coordinated way. There was a suggestion that a model like the “theory of change” could be applied to better identify gaps.

Another suggestion was to form a “peak body” representing services and organisations to lobby central government on behalf of the community.

## Funding and contracting

Generally, more funding is required, including for organisations whose longevity is at risk without government funding.

Many concerns were raised about funding and contracting processes, with generally too much “red tape and bureaucracy”.

It was acknowledged that insufficient funding introduces competition and undermines collaboration. Participants wanted to see more community-led processes where they establish their own criteria (rather than criteria imposed by government agencies), with more opportunities to work together and to respond collectively to RFPs.

Short contract timeframes were also identified as a problem, leaving services without enough time to achieve positive and sustainable outcomes for their clients.

They also cited difficulties with onerous and duplicated administration and reporting requirements, and the associated compliance costs. They identified that administration and reporting processes could be streamlined through a shared service arrangement, noted above.

Overall, they wanted to see funding processes that were more community-led, and centred on achieving equitable outcomes for children and youth. In addition, contracts needed to recognise that some people need a lot more support than others to achieve the same outcomes.

## Services

Most of the feedback about current services for children and youth was very positive. All communities stressed the need to retain what they currently have—as long as the service is connected, accountable and demonstrably effective.

### Key areas where more services were needed included:

- greater investment overall in the early years, with a focus on prevention and early intervention
- safe, affordable, warm housing, including emergency housing. This would address the current situation where unstable housing arrangements lead to transience, disrupted education, lack of continuity and engagement with services, diminished sense of belonging and fragmented communities
- parenting skills programmes, particularly for expectant/new parents, with a focus on key issues such as attachment and brain development
- programmes that enable parents to support each other
- support for young pregnant mums
- incentives (e.g. payments) for positive parental behaviours
- information for communities about what services are available and how to access them
- more localised approaches, i.e. delivery in small communities and homes
- wrap-around support where required
- engagement of positive role models (including kaumātua and mentoring)
- initiatives that focus on “growing healthy men”, particularly during key transition phases such as from intermediate to high school, where it is critical to maintain motivation in school
- for youth: more accessible youth programmes; learning, leadership and “experience” opportunities; and activities such as events that are alcohol and drug free.

## Accessibility

Costs and transport (particularly for youth) were identified as barriers, so services need to be cheaper or free, with extra transport assistance when required.

Access should be “to services through any services” and with smooth referral processes.

Access criteria should be reviewed, particularly where low income families can be disadvantaged. One example cited was that the OSCAR (after-school programme) subsidy is only offered for single parents, or when both parents are working.

## Service integration

As noted above, participants saw more integration of services as central to better collaboration. This would involve better information sharing, communication, screening and needs assessment processes, and referral between services. Overall this would enable delivery of more efficient and effective programmes.

The “Harakeke” integration model was proposed as one that weaves together families and homes, communities, services, and the environment.

## Service approach and quality

There were calls for more holistic and strengths-based approaches (such as Whānau Ora) focused on promoting wellbeing, rather than on illness or deficits.

Similarly, participants wanted to see greater emphasis on prevention and early intervention for both age groups. In relation to youth, one Taupo stakeholder observed that, “It’s easy to predict who’s going to end up in trouble, so what do we do about it?”

It was noted that clients can be treated disrespectfully and judgmentally when presenting to services, including those delivered by government agencies. This can stem from negative perceptions and attitudes about youth. This creates stigma, and can mean that services are not fully accessed or utilised, so that ultimately children and youth miss out. Participants also highlighted the need to deliver the appropriate level of services because some people need a lot more than others to achieve the same outcome. Services should continue until the needs are addressed, and at that point, there should be either referral on to ensure continuity, or an exit plan.

The need to work harder to achieve positive outcomes for youth was identified. This meant not abandoning or giving up on them when they struggle. One example was to improve truancy, suspension and exclusion processes, to keep them engaged in school.

There were also consistent calls for the inclusion of more traditional Māori knowledge in service delivery, e.g. through the wānanga.

## Workforce

Services reported difficulties in recruiting experienced staff because people leave for bigger centres. When someone is recruited, they often need to be trained before they can be effective, which imposes extra costs and delays.

There were concerns that the current workforce is undervalued and over-worked. This brings risks of burn-out and high turnover, which impacts on service quality. There is a constant need to upskill and train (particularly locally) to build service capacity and capability. Staff also need to be valued and supported in an ongoing way.

Specific training is required to address some of the issues identified, such as interpersonal skills to reduce the risk of stigmatising and isolating clients, and to increase client empowerment.

The need for more specialist youth workers was also a key theme.



## 2. Introduction

**This report documents the feedback from four hui held in the Bay of Plenty in September 2014. The hui were jointly convened by BayTrust and the Ministry of Social Development (MSD) and held in Rotorua, Taupo, Tauranga and Whakatane.**

The purpose of the hui was to consult with stakeholders about funding priorities for BayTrust in relation to the “first 1,000 days” of a child’s life and “youth engagement”.

Invitations were sent out to a broad range of people and organisations working in the social services, and related sectors, such as health, early childhood education (ECE), local government, and sport and recreation. The attendees represented a cross-section of government agencies, NGOs and community organisations.





# 3. Methodology

The hui commenced with representatives of BayTrust and the Ministry of Social Development setting the scene.

They outlined the role of BayTrust, the partnership with MSD, and the purpose of the hui.

Members of the team from the Centre for Social Impact were introduced, and the process was then handed over to the facilitator Kataraina Pipi. The day's work commenced after a karakia from the local kaumātua or one of the participants.

**The process was as follows:**

### **1. Introductions**

All participants introduced themselves and their organisation, and identified one thing that they felt was working well in their community.

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### **2. Vision: What will success look like in five years?**

Working in groups, and invited to draw pictures or write notes, participants described their vision for the two population groups – “first 1,000 days” and “youth engagement”. They were also asked to identify indicators for success and how this could be measured. Group membership usually comprised of people working with these populations. All of the small groups reported back to the larger group.

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### **3. What is the vision for services and organisations in the future?**

Continuing to work in their groups, participants were asked to describe how services and organisations would look in the future to deliver the vision that they had just described. In the bigger groups, they were asked to identify what they would “keep, change, chuck or start”. This provided more clarity for the discussion. Again, the groups reported back.

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### **4. What are the issues and challenges impacting on success, and what are the solutions?**

In most hui, this exercise started with a group discussion and documenting ideas on large sheets of paper. These were then posted on the walls in the room and everyone was given time to walk around and add anything further. In the larger groups, these were organised into themes: the two population groups (“first 1,000 days” and “youth engagement”) and other central themes that had emerged during the earlier discussions. These included parenting and health. Often this reflected the sectors that were represented in the hui.

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### **5. Priorities for investment**

Again, working in their groups, the participants were asked to identify a list of priorities for investment by BayTrust, based on the previous discussion. Each group reported back and a consolidated list of priorities was formulated – one list for the “first 1,000 days” and another for “youth engagement”. Everyone received an envelope of “money” and they were asked to allocate their money to the priorities as if they were a funder. The groups reported back on the process and criteria they had applied to “spend” their money.

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### **6. Conclusion**

The hui were concluded with a karakia. The consultation team then undertook a debrief focusing on what had worked well, and what could be improved for the next hui. Note that while all hui covered the key questions, the process evolved, and there were some small variations to allow for the size and nature of the groups, and the venue.

Note that some participants who were unable to attend submitted written responses. This feedback is reflected in the hui reports, but was not included in the discussion at the hui. Accordingly, unless the solutions were raised during the hui, this feedback was unable to be reflected in the priorities for investment.

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# 4. Rotorua *consultation hui*





## Discussion

### What is working well?

#### The Rotorua hui participants identified the following:

People, people, people – especially the passion, commitment, drive, and desire for children to get ahead

Collaboration – everything is done through the community, and utilises the skills of people in the community. Some examples of inter-sectoral collaboration, e.g. “Blue Light” in Murupara, involves working with police; RDC has significantly changed the way it operates to increase role of partnerships

Positive role modelling

Positive developments in early childhood education (ECE)

Tipu Ora has a focus on “first 1,000 days”

Longer planning horizon, e.g. Plunket working with 20-year timeframe

Some examples of services achieving positive outcomes for children, e.g. a vision screening project led to the provision of glasses for children who were then able to read, which brought improvements in behaviour

Positive developments in youth participation, e.g. RDC is reviewing and redeveloping the youth strategy and plans to consult with 80% of youth; the DHB is engaging youth as volunteers with emergency services

Increasing focus on by-youth-for-youth, e.g. members of Canteen 2013 youth committee are training this year’s members

Some examples of services achieving positive outcomes for youth, e.g. two years ago, struggled for adequate participation of young mums in teen parenting programme, and now the course is always full and educational achievements are improving

Many pilots and projects are underway or planned, e.g. the Ngati Te Roro o te Rangi Trust is planning to build a community centre and will engage rangatahi to undertake the building, with supervision, over two years. The centre will then provide a range of educational opportunities including cooking, forestry, horticulture and agriculture classes. The focus is on providing opportunities to gain qualifications so that youth are highly employable

Iwi engagement and resources that they bring. Iwi are increasingly taking control of their future, with more by-iwi-for-iwi initiatives.

## What would success look like in five years?

### First 1,000 days

#### Infants would be:

- healthy and vibrant
- smokefree, safe, in warm housing, with good nutrition
- meeting developmental milestones and school ready
- experiencing strong attachments
- all valued and wanted.

#### Parents would be:

- confident with parenting and relationship skills
- would feel that they are well supported (new parents in particular)
- getting a living wage, with financial stability
- able to identify and attend services they need
- resilient.

#### Community would be:

- the optimal environment to maximise potential of children
- made up of strong, supportive neighbourhoods
- served by connected services with no gaps/duplications
- children top of news agenda
- when a family reaches its potential, in turn, it can support the community and wider environment.

#### Indicators:

- “measure what we treasure”
- quantitative and qualitative measures
- data from health, education and other sectors
- indicators include physical health, social networks, language, parental perceptions
- other suggestions include number of positive media stories about children
- measuring and monitoring needs resourcing and expertise
- note that indicators will also be informed by literature review.

## Youth

### Youth would be:

- all engaged in learning, not necessarily formal education
- qualified and skilled so that they are sought by employers
- supported into adulthood, and able to achieve their potential
- seeing social services there to promote positive youth development rather than responding to issues
- involved in decisions that affect them, and services are youth driven
- able to see their own future and believe that anything is possible
- connected to communities, have a sense of belonging and that their contributions to their home life are valued
- feeling a strong sense of self and self-worth
- living in a home with security, food, and shelter.

### Indicators:

- significant improvements on negative indicators in key sectors, e.g. education, health, justice
- qualitative – youth hold leadership roles, a change which becomes normalised
- Māori have more leadership positions, and stand alongside all of the community.



## *What is the vision for services and organisations in the future?*

### First 1,000 days

Explore different ways of contracting for services, e.g. the “intention economy” used in the private sector where businesses respond to consumer needs. In this case, services are determined by whānau, and delivered on their terms

Harakeke framework – weaving together families, home, communities, services, environment

Services are inter-connected, and support the family, but sit in behind or below the family

There is recognition that some need more than others to achieve the same potential

Feedback loop to improve quality of services

Services can concentrate resources on capacity development and service delivery rather than infrastructure and compliance.

## Youth

A key goal is to maintain current services

Youth participating in planning processes, e.g. with RDC (target of over 50% representation in governance), and more youth-led services

More collaboration across all services, and focused on the same kaupapa and goals, so that all agencies are working together to support youth

### Fundamental shift in approach to funding:

- funders listen and are more responsive to organisations, rather than making organisations fit their criteria
- resources to meet the demands of the community over a longer timeframe if that’s what’s required - current timeframes too short
- allow for longer timeframes so that the impact on the important outcomes are evident
- allow for capacity development, such as training to deliver effective services

Youth should be able to exit/return to services as they need to.

## ***What are the issues and challenges impacting on success?***

### **First 1,000 days and youth**

- drugs and alcohol

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- unemployment

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- negative role models

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- normalised violence

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- knowledge deficits, e.g. parenting skills, attachment/bonding

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- gangs—this is a big issue

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- 54% of the Māori population is aged 15 years or under

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- youth offending and crime

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- institutional racism, pre-conceptions about Māori in agencies

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- negative perceptions of youth, e.g. “hanging out” in the CBD (note that this is linked to poor engagement in education and truancy, with insufficient truancy officers).

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### **Services and organisations**

- funding—there’s not enough, so competition is strong and this reduces collaboration

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- inconsistencies across national/regional and local levels which create confusion

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- “project clutter”—lots of great ideas, but not aligned with central purpose

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- difficulties recruiting experienced staff because people leave for bigger centres, and when someone is recruited, they need to be trained before they can be effective

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- fundraising is particularly difficult in lower socioeconomic or remote areas where there is less discretionary income, and fewer fundraising options

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- lack of transparency, knowledge, and awareness of other services

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- utilising a “theory of change”, could then see gaps and overlaps in services

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- administration and compliance costs are onerous—including meeting funder requirements, financial management, data collection, professional registrations and other requirements—and impact on the ability to deliver services

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- contract timeframes are problematic, e.g. services are tailored to produce quick results required by funders, and often end up not targeting the area of greatest need

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- difficulties accessing services when they are more centralised

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- funding services “out of aroha” because they are under-funded but want to respond to the community need

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- key resources are not always shared, e.g. vans

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- there is a lot of activity at the moment, e.g. lots of new trials, but the challenge is for the community to make sure they make a difference.

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## What are the solutions to these issues?

### Strategy

- develop an Education Strategy as a central foundation, including/as well as an Employment and Training Strategy
- identify and support community champions
- more localised rather than centralised approach, neighbourhood based, e.g. social workers in schools
- replace individualism with collectivism
- strengthen relationships and increase district-wide collaboration, so that resources (such as vans for transport) can be shared.

### Funding

- refocus models so that they are based on achieving equity, i.e. recognise that some whānau require a lot more support than others to achieve the same outcomes
- social enterprise so less dependent on funding
- more funding is required, and allocation of funding requires more input from communities to determine priorities
- consolidation of administration, financial management and reporting services to improve efficiency and capacity to focus on improved service delivery, e.g. establish a shared service centre.

### Information and evidence

- use “big data” to inform funding (such as funding for DHBs), but ensure that the data reflects the reality of this community
- identify the right data, and data collection systems, and recognise that this is broader than statistics
- important to have evaluation data about what is/isn't working
- share information through community champions.

## Priorities for investment

The priorities were identified and ranked as follows:

1. More research and evaluation to determine what works
2. Transport for youth, including support to obtain licenses, access to support services, education about safe driving
3. Collaboration between services for youth—this is talked about but not driven and needs investment
4. Education, with a focus on keeping children engaged in school; need a strategy with a shared vision so that all organisations are “on the same page”, and with multiple strands woven into one programme
5. Wānanga—traditional practices, identity, language and culture
6. Nutrition, health and wellbeing
7. Social enterprise model to increase self-determination, agreed agenda
8. Boys, growing healthy men.

### Process for prioritising

One team took a collaborative approach and considered where the money could make the biggest impact, the needs of clients and how research could improve the effectiveness of funding. The other team pooled their money and then divided equally. This discussion led to comments about funding models and the value of funders working collaboratively.





# 5. Taupo *consultation* *hui*



**The Taupo community consultation hui with BayTrust and MSD was held on 12 September 2014 and attended by 25 participants, including people from Turangi and other nearby towns. Throughout the hui, they worked in four groups—one focused on the “first 1,000 days”, and the others on “youth engagement”.**



## Summary

Participants stated that there is good collaboration and support across services in the Taupo district. This was evident from the attendance and interactions at the hui.

There is a strong focus on youth in this district, with good engagement. For example, the school guidance counsellor reporting feeling well connected and supported. This is achieving positive outcomes—youth are work-ready, getting good jobs, and valued by employers.

Services for youth were generally viewed very positively. They were considered to be well established, and the presence of long-standing personnel was viewed as a distinct advantage. The Anamata Café for Youth Health, the Taupo Family Centre and the Bluelight programme were cited as examples. A comprehensive list of services that offer support to children and parents was noted.

Further, the new requirement for youth collecting their benefits to report to the Youth Service had provided another opportunity to strengthen engagement.

Contrary to this however, participants highlighted the unhelpful negative attitudes of some services towards youth, and their desire to see this shift to a more supportive approach.

This community noted their concerns about organisations that were described as unaccountable and disconnected, and who demonstrated limited results. For example, the police reported that in Turangi, 76 agencies identified that they worked with youth, but only six of those agencies were known to police. They supported “chucking” services that were not accountable, and/or couldn’t demonstrate effectiveness.

The misaligned geographical boundaries in the Taupo district were highlighted as a key concern. Participants felt that re-alignment of departmental boundaries would simplify relationships, reduce transactional costs, and increase accountability and efficiency.

Intermittent attendance at ECE was also highlighted as a specific concern in Taupo. It was also noted that older children are staying home from school to provide childcare when parents are working, and that a wider array of affordable after-school care and holiday programmes would address this.

Participants also raised the issue that the same criteria to access social housing apply in Taupo as in Auckland. They felt this was inappropriate and exacerbated the housing problems some families face.

Concerns about services not always responding to the needs of ethnically diverse communities were also raised, including insufficient services for immigrants in Taupo.

Taupo was the only community to raise issues related to obesity, the number of liquor outlets and their opening hours.

This was the only community where it was suggested that the whole sector needs to be reinvented with a fresh start and a radical approach because “what we’re doing isn’t working”.

As with other communities, collaboration was a key theme. Taupo suggested that Waiora House could be re-evaluated with a view to developing this further as a community hub. They wanted to establish a district-wide collective (like a peak body) that could engage and advocate to central government with a strong, collective voice. They also suggested learning how to work together with a facilitated learning process. While iwi relationships were positive, the opportunity to align with the recent strategic paper from Tuwharetoa was highlighted.

There were also some views that the private sector and employers generally could contribute more as citizens by proactively employing more youth (such as apprentices) and supporting them “when they stumble”. The tourism industry was singled out as one where better collaboration could help to increase employment opportunities for youth.

More information sharing between CYF and agencies working with children was called for. This could involve working with agencies regarding interpretation and application of the Privacy Act.

Other proposed solutions included changing school hours to 11am – 5pm as a strategy for increasing engagement with education.

The unique Taupo priorities included community education and awareness raising on early brain development, provision of more emergency (safe) housing, and workforce development.

## Discussion

### What is working well?

#### The Taupo hui participants identified the following:

BayTrust funding is already supporting a number of positive initiatives, e.g. Bluelight programmes in Turangi

Bluelight is having a positive effect – youth are getting a lot out of it, and the relationship between police and youth is improving

Generally services are considered to be “great” – they are non-judgmental and well attended, e.g. Anamata Café, and Taupo Family Centre

Networks of care for children and parents who engage in services are available, e.g. Plunket, Parents Centre, music and activity groups, Library Storytimes, Parents as First Teachers (PAFT), Family Start, Strengthening Families, HIPPY

Collaboration and support across services is positive, e.g. the college guidance counsellor reported feeling very supported by other services for youth

Services are seeking input from youth, e.g. Anamata Café for Youth Health

Other services identified the Anamata Café as a place where they know they can connect with youth

There has been an increase in neighbours reporting violence

Some services, e.g. Family Start, have staff who have been there for a long time

Positive mentoring occurring

When youth present to the Youth Service to collect their benefits, this provides an opportunity to engage more closely than previously occurred with the WINZ office

Youth who graduate from programmes are getting good jobs. In general, youth contribute a lot to employment in the area – they are “work ready” and valued by employers.

## What would success look like in five years?

### First 1,000 days

#### Infants would be:

- loved and safe, living in healthy homes, with enough warm clothing, shoes, blankets, food, and exercise
- getting their health needs met promptly, i.e. hearing, vision, respiratory, physical growth and development
- confident and capable, with positive self-worth
- access to affordable, quality day care (before ECE)
- attending quality ECE for at least two years, ready for school, and then supported as they enter primary school, with interest in learning
- part of a family, whānau or marae
- well attached/bonded to their main caregiver
- infants with special needs would receive the support to fulfil their potential.

#### Parents would be:

- skilled and confident as parents, with support networks
- in stable relationships
- employed and able to afford quality day care
- able to take advantage of extended paid parental leave that encourages fathers to be more engaged, e.g. the Danish model
- knowledgeable about infant brain development, as would others in the sector, e.g. policy makers
- able to engage in the community, and vice versa
- encouraging reading with books in homes.

#### Indicators:

- reduced demand for services, including primary and secondary health care (i.e. fewer hospital admissions) and CYF would no longer be required
- increased demand for Well Child/Tamariki Ora services
- higher school attendance
- reaching the target of offering support or reaching 90% of families in the first five years
- every child has a holiday and Christmas.

### Youth

#### Youth would be:

- loved and nurtured, with healthy relationships
- good at conflict resolution
- living in safe, healthy, affordable housing
- nutrition – affordable, healthy
- free from drug/ alcohol (addiction) and violence
- experiencing learning opportunities that are appropriate for their lifestyle, including opportunities to take risks, or make mistakes and learn from them
- resilient and confident with good communication skills
- dreaming of big goals, with purpose and direction, and possessing the self-worth and self-belief to follow through
- celebrating success
- ready for employment, with training and employment opportunities
- participating positively in society
- pregnant young women would be supported.

#### Indicators:

- self-determined happiness
- positive relationships, e.g. do they have five positive adults in their life?
- lower rates of obesity
- planned pregnancies and decreasing termination rate
- reduced use of services such as police, Women's Refuge and Work & Income benefits
- government funding and resourcing would be available.

## What is the vision for services and organisations in the future?

Participants were asked what they would “keep, change, chuck or start”.

### First 1,000 days

#### Keep

**All existing services and agencies that are:**

- accountable, professional and relevant
- evidence-based, and successful programmes.

Community level initiatives, including engaging with families in their homes.

#### Chuck

Everything, and start afresh because “what we’re doing isn’t working”. The sector needs to be reinvented. A radical approach is needed to make a difference.

#### Change

Much bigger investment in the early years to get the best results—this would produce “magnificent change”.

More information sharing between CYF and agencies working with children—this could involve working with agencies regarding interpretation and application of the Privacy Act.

#### New

A wrap-around, holistic service for children that covers education, behaviour management, etc that is available to a lot of people, and not just targeted to those with the highest needs.

## Youth

### Keep

Nothing listed.

### Chuck

Organisations that are unaccountable, disconnected from other services and show limited results. For example, the police reported that in Turangi, 76 agencies identified that they worked with youth, but only six of those agencies were known to police.

### Change

Greater emphasis on prevention rather than early intervention. This would include more support for targeted youth: “It’s easy to predict who’s going to end up in trouble, so what do we do about it?”

### New

#### Education:

Change school hours to 11am – 5pm. This would increase student engagement because it would align better with the body clocks of youth. Also, some parents don’t get up in time to get their children to school. This could be trialled in Turangi.

Improve suspension and exclusion processes to strengthen engagement with schools – current processes impact negatively on youth and the wider community.

#### Programmes – more:

- outreach services, across the district, and available to everyone
- free activities for youth
- services in Turangi
- school holiday programmes
- initiatives that increase confidence and motivation to gain further education or to move into employment
- for young boys/men, particularly in relation to support during the transition from intermediate to high school, to sustain motivation in school. Tane Ora is a good example, but need more input from kaumātua, and to have wider impact.

**Work with the tourism industry to promote opportunities for youth.**

## General

### Keep

All existing agencies and services, particularly those that are evidence-based, accountable and effective.

Collaboration.

### Chuck

Competition between agencies, and the “silo mentality” – this can destroy agencies.

Services that are not accountable, and can’t demonstrate effectiveness.

Policies that restrict new ideas and the “red tape”.

### Change

Better collaboration across political parties so that programmes endure for long enough to make a difference.

Re-align departmental boundaries to simplify relationships, accountability, etc in order to increase efficiency. For example, sometimes Taupo is included in Central, Bay of Plenty, or Waikato etc.

A more inclusive approach from the Council, beyond “just those who are sports minded”.

Actively support over-worked and unsupported work force.

Better values across all sectors, including businesses, family values as a priority, e.g. organisations have to work cross-culturally with Treaty of Waitangi, could do the same thing with family values.

### New

Community hub with access for everyone.

## What are the issues and challenges impacting on success?

### First 1,000 days and youth

Home environments and the challenges that parents/families face, often resulting in children growing up in emotionally stressed environments

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Family violence

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Poor health for children, particularly ears, respiratory, skin infections

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Alcohol and drug issues for parents, including drinking during pregnancy

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Poverty of spirit, total sense of hopelessness

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Unstable housing, resulting in transience (i.e. families frequently relocating between communities), loss of trust, no sense of belonging, and lack of coherence in communities

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Lack of role models, especially male

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A lot of negative attitudes towards youth, and a lot of pressure on them. Services (e.g. WINZ) need to nurture, support, mentor and coach, rather than hassle. This is particularly true when a young person struggles or “falls off the wagon”, for example when they can’t hold down a job and end up back on the benefit

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Families with complex problems don’t want to deal with lots of people

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Education – intermittent attendance at ECE

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Families don’t have enough money for basic necessities such as food, school-related items such as uniforms and stationery, because of the high costs of things like rent and power

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Older children are staying home from school to provide childcare when parents are working.

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## Services and organisations

Short contracts, limited funding models, changes in funding, changes in managers, and not enough funding impact negatively on both the longevity of services, and the impact they can make

Funding for PAFT (Parents as First Teachers) has not been adjusted since 2002—the result is that services are restricted to urban Taupo, and rural families miss out

Collective engagement and advocacy with government in relation to funding is not done collaboratively—managers “continually write to government, but they encounter a brick wall”

Insufficient support for staff within organisations and risk of “burn out”

High staff turnover reduces the credibility of the services, and trust/relationships within services, as well as between services and their clients

Lack of stable housing increases transience and makes it difficult for services to be effective and efficient; “You just start working with a family and then they move”

Health services: children’s ongoing (chronic) issues are not properly addressed until there’s a crisis

Too much emphasis on intervention (i.e. after a problem has been identified) rather than prevention

Gate-keeping in some organisations, e.g. social houses may be available but it is too hard for families to meet the criteria, so families are put off and continue living in terrible conditions. Currently criteria are the same in Taupo and Auckland. Access criteria need to reflect the needs of the community, and should be managed locally. (Note that a Work & Income representative indicated a lack of knowledge about the availability of housing and undertook to follow up.)

Clients are treated disrespectfully and judgmentally when presenting to services, and stigmatised. This can result in families not fully accessing what is available, and ultimately children miss out

Services don’t always respond to the needs of ethnically diverse communities, e.g. cultural differences can alienate some people who “want to see people in services that look like them”. There are insufficient services for immigrants in Taupo.

## What are the solutions to these issues?

### First 1,000 days

- keep children safe
- provide opportunities/experiences for all children, e.g. holidays, life skills
- informed parents who understand their children’s needs
- community education about early brain development for (prospective) parents. This education could also include alcohol and drugs, contraception etc, so everyone understands the issues and consequences
- ECE: increase consistent attendance by educating parents about the value, identifying barriers, and providing transport.

### Youth

- emergency housing
- teen parenting programmes (the current programme is very limited)
- more/proactive programmes to support positive youth engagement
- align geographic boundaries
- adopt the “Leeds child friendly city” model
- collaboration and better relationships:
  - develop a shared vision, long term strategy, shared values and a “catch phrase” for the community
  - establish community links office with key agencies all in the same building, and share facilities, administration and other costs (e.g. event insurance) wherever possible, to strengthen collaboration. This could be similar to Whakatane where the local iwi has been instrumental. In Whakatane, “You know you can go to one place and you’ll get a solution”, whereas in Turangi, “It’s a smorgasbord, a battle to find out who does what. You get bounced around. It’s not easy to ask for help, but it’s easy to give up.” Waiora House is similar to the Whakatane situation, and could provide an opportunity to facilitate better collaboration. This could be re-evaluated

- establish a district-wide collective (like a peak body) that could engage and advocate to central government with a strong, collective voice
- more and better community consultation by central government in relation to funding and service development
- learn how to work together—this could involve a facilitated process to learn and practice collaboration
- strengthen relationships with iwi, e.g. look for opportunities to align with the Tuwharetoa strategic paper. Note that this could also provide a funding stream for beneficiaries
- strengthen relationships with local youth employment initiatives, neighbourhood focus
- strengthen integration across services, similar to the Whānau Ora model with a holistic approach, to increase understanding of other services, facilitate appropriate referrals, improve client transfers, and streamline delivery, and including better screening and needs assessment.

## Funding

- more is required to strengthen current services that are struggling, e.g. PAFT, Family Start, Plunket, home visiting health services, etc, before new services are considered
- the funding model should enable “wrap-around” support for families to address children’s educational, social and health needs
- support (and acknowledge) voluntary community services who play important roles.

## Workforce development

- services - train more people locally, and then invest through quality training and succession planning
- training in “people skills” and customer service so that services are not stigmatising
- private sector and employers generally could contribute more as citizens, e.g. they could employ more youth (such as apprentices) and support them when they stumble.

## Parenting skills

- literacy
- more courses, targeted at hard-to-reach parents
- including growing vegetables and meal preparation
- for those on benefits, include compulsory attendance at programmes which promote parenting skills, and reward completion of qualifications.

## Housing

- warm, dry, clean homes
- more affordable housing.

## Economic management

- employment opportunities
- living wage
- provision of budgeting advice with a “walk alongside” approach
- financial incentives (i.e. payments) for positive parental behaviours
- reduce the number of liquor outlets and their hours
- invest in computers in homes.

## Health services

- access to cheaper after-hours care
- low cost medication
- restoration of home visiting services
- mental health – more counselling, better treatment for parents with alcohol and drug (addiction) problems, and establish local maternal mental health service
- improve first response skills in mental or physical health crisis
- ensure all mothers have access to breast feeding support.

## Priorities for investment

**The priorities were identified and ranked as follows:**

1. Education and awareness on brain development
2. Better programmes for youth
3. Emergency (safe) housing
4. Collaboration and coordination, including shared vision and strategic plan, and a community office with shared facilities and services
5. Workforce development.



## Process for prioritising

The teams worked collaboratively and prioritised those initiatives that would establish foundations, and have the biggest impact in the long term. They excluded solutions that they agreed with, but which could occur without additional funding, such as better relationships with iwi.



## Feedback on the hui

**In concluding the hui, participants gave the following feedback:**

*They had expected this to be about how to apply for funding*

*They liked the process which required them to think and talk and engage, rather than “being lectured at”*

*Good collaboration was affirmed and also enables networks to be extended*

*Offered a way to learn about services and to identify new opportunities*

*Affirmed a high level of commitment and passion*

*Presented a challenge to follow a different way of thinking*

*This had been really good, with thanks to the BayTrust and MSD for hosting and consulting.*



# 6. Tauranga *consultation hui*



The Tauranga hui on 18 September 2014 was attended by 45 participants from Tauranga and nearby towns such as Katikati and Te Puke. Throughout the hui, participants worked in eight groups, with half focused on the “first 1,000 days”, and the other on “youth engagement”.



## Summary

In general, participants reported a lot of positives and “good stuff happening” in the Tauranga community. There is a good (and growing) range of services which are well utilised.

Collaboration is getting better and is translating into action, with very constructive inter-agency work around issues like family violence, and bullying. Agencies are acting on the notion that “it takes a community to raise a child”. This is also evidenced by the child and youth health strategy developed jointly by the DHB, and Ministries of Social Development, and Education.

There was appreciation for community centres such as those in Katikati and Merivale because they “provide anchors” for their communities.

Early childhood services are getting good results, e.g. coverage for Before School Checks is 90%, immunisation 89%, and Well Child/Tamariki Ora programmes is 91% and aiming for 100%.

The importance of focusing on improving outcomes for boys emerged as a key theme in this hui, with the need for strong relationships between fathers and sons, and opportunities to bond with other males, including through mentoring.

Similarly, the need to develop good parenting skills was highlighted. Participants noted that parents typically repeat what they experienced as children. They also noted that when families are very stressed, youth leave early before they’ve had sufficient opportunity to develop life skills, including parenting skills.

In the discussions about solutions, there was a strong emphasis on achieving equity of outcomes.

One of the solutions was to conduct a stocktake of services in each community to identify gaps and overlaps.

Perhaps reflecting the demographics of the district, this hui also focused on the isolation of elderly people, noting that they have a lot to offer younger people. They felt that if this sector of the community was valued more highly, there would be opportunities to foster inter-generational education and support.

Participants also wanted to see stronger relationships and linkages between schools and businesses. This would help youth to know what’s possible and inspire them to set ambitious goals.

Workforce development emerged as a central theme in all the hui. In Tauranga, the BoP Polytech was identified as an institution that could offer opportunities to strengthen the youth worker workforce. The unique Tauranga priorities included (1) for the “first 1,000 days”, parenting education and support, housing insulation, community gardens, and increased home visits; and (2) for youth, a central youth hub.

## Discussion

### What is working well?

#### The Tauranga hui participants identified the following:

Generally a lot of positives and “good stuff happening”

Collaboration is generally getting better, for example:

- awareness of the challenges is high and there is a strong desire to work together
- key agencies are working well together
- inter-agency case management meetings are well attended
- “collaboration is translating into doing... as evident in attendance today”

Strong leadership and establishment of social infrastructure through Smart Growth

Agencies acting on “takes a community to raise a child”

Community involvement is “astounding”, very lucky with volunteers

Families are starting to support each other and build communities together

Five-year child and youth health and wellbeing strategy with the DHB, MSD and MOE

Child and youth clinic at Tauranga Hospital

School holiday programmes are good.

### First 1,000 days

#### Services/interventions for the “first 1,000 days”:

- Sport BoP collaboration across ECE, with greater understanding of early experiences and outcomes later in life
- Homes of Hope for traumatised children is becoming more stable, and getting positive outcomes, e.g. keeping siblings together. Preventive initiatives that are emerging are very positive
- Before School Checks going well (90%)
- immunisation (89%)
- Well Child/Tamariki Ora programmes—seeing 91% and aiming for 100%
- dental enrolment of pre-school children has increased significantly, particularly Māori children. Collaboration across agencies to promote this has been effective
- ECEs are requesting science resources
- Plunket centres are providing safe places to go, and responsive to feedback, e.g. provision of free magazine for parents of all new babies including information about what is available
- working hard on early intervention, with a focus on early brain development
- agencies work closely together with police on family violence, e.g. Plunket nurse is placed with the child’s team in Rotorua
- promoting ECE engagement.

#### Services/interventions for parents/families:

- Tu toku mai – community parenting programme
- lots of people presenting to Relationships Aotearoa for therapy with greater acceptance of family therapy as a solution
- Strengthening Families is a family driven process—collaborate a lot and work out solutions together
- antenatal classes are well attended
- parents seek support and support each other
- there is a wide range of parent education courses
- young parents are staying together
- mental health services are supporting children with parents who have a mental health problem or addiction.

## Youth

### Services/interventions for youth:

- increasing community interest in youth
- youth services network working well
- health promotion is taking a “layered approach to bullying” with engagement of the whole community wanting to stop bullying at all levels, everyone is supporting
- Sport BoP youth engagement programme is achieving good outcomes—leadership, belonging, responsibility, returning to education, getting into employment
- seeing confidence in youth from church involvement
- people are seeing the value of family planning education for youth—they recognise that the more they talk about it, the less likely they are to get into trouble
- connecting better with youth who are more vulnerable, e.g. through alternative education
- huge increase in education options for youth defined as NEETs (Not in Education, Employment or Training), for NCEA, family planning, parenting, etc, and achieving education successes
- support for pregnant young mums by working with families and mentoring.

### Specific communities:

- Katikati: Māori wardens youth project going well, and starting to get respect
- Te Puke: all of the schools are proactively working together to train teachers and administrators in truancy
- Merivale: a community that believes in itself, has a new free youth space.

## General

High uptake on evening training such as family violence (had to close registrations).

Bop Sexual Support Service has been going for three years, provides assistance for sexual assault victims and is a huge plus for this area, and getting better outcomes, “not just rearranging the deck chairs on the Titanic”.

Big focus on Whānau Ora.

Council is increasing its knowledge of community development.

## What would success look like in five years?

### First 1,000 days

#### Infants would be:

- living in warm, dry, safe, affordable houses, and self-sufficient with lots of fruit and veges in the garden (at home or in the community)
- living in families with mum and dad together (which reduces pressures like poverty), and able to meet the basic needs of the family
- in a family where at least one parent was employed with good wages, and where the other parent could spend time at home with the children
- well attached and bonded to their parents, who would have good parenting skills
- healthy – well nourished (including breast fed), immunised, good dental health
- accessing quality education and learning
- confident, secure, happy.

#### Parents would be:

- accessing information and support in relation to:
  - housing
  - parenting skills, including antenatal care and breastfeeding, and other key themes like attachment and empathy
  - social skills
  - illness prevention and healthcare, including immunisation
  - emotional and relationship needs, including anger management, crisis management
  - nutrition and ensuring children are well nourished (“ban sugar”)
  - budgeting
  - smokefree
  - safe sleeping for babies
- able to access education and employment opportunities
- earning at least a living wage
- strongly linked to their community

- new parents would be well supported and aware that their parenting is valued

- foster parents would receive increased support.

#### **Families would be:**

- supported with wrap-around services for those who are vulnerable
- connected to strong communities
- able to access cheaper health services, especially treatment for preventable illnesses
- able to access free lunches, community dinners, etc if required
- “baby ready” before birth.

## **Indicators:**

### **Reductions/increases across a range of negative/positive indicators, for example:**

- community links and cohesiveness – “every child would have five sets of eyes on them”
- safe environments – home and community
- less child abuse, family violence, sexual assault
- strong, cohesive, “together” families
- housing, including meeting quality standards such as a “warrant of fitness” and insulation
- health, e.g. immunisation, dental enrolment and oral health indicators, nutrition, referrals to Child and Adolescent Mental Health Services (CAMHS)
- attachment
- engagement with quality education (ECE), including referrals to GSE (special education)
- nutrition – “no child is hungry” at home or at school
- confidence (children and parents)
- use of car restraints
- there would be equity of outcomes across the key positive indicators
- CYF offices would close.

## **Youth**

### **Youth would be:**

- not judged, but acknowledged, accepted, appreciated and respected
- able to take up leadership opportunities
- planning and determining their own futures (a life purpose) with clear pathways
- achieving their goals
- living in a youth friendly community with an environment that enables them to fulfil their dreams
- living in safe, affordable housing, with access to emergency housing when required
- living in violence-free homes
- resilient (good mental health), confident and physically healthy
- demonstrating a strong sense of belonging and identity, or whanaungatanga and whakapapa, including cultural, sexual orientation, ability/giftedness, etc
- participating in the community, and valuing and valued by, the community
- learning: through formal and “360 degree” education/training, and the community learning from them
- supported to engage at school (every school), including those at risk, rather than being “put in the too hard basket” or schools denying they have “problems like that”, with better collaboration with social support services
- experiencing engaging and exciting science education at all levels, leading to well informed youth that can make good decisions and contribute to their communities
- employed meaningfully
- able to access transport to enable them to take part in education, employment etc
- having broad experiences like travel, hobbies and other interests, with opportunities provided for at-risk youth
- usefully occupied: “Idle minds engaged and idle hands busy”
- well informed and making good choices about relationships, health etc
- able to access support and guidance (services) when required through any service, including support for their families, and if required, food at school so they can learn.

**There would be a focus on boys:**

- strong relationships between fathers and sons
- opportunities to bond with other males
- “mentored by good gentlemen and taught how to be resilient, love and nurture their families”
- learning communication skills
- learning survival skills.

**Indicators:****Reduction in negative indicators such as:**

- crime
- early pregnancy
- bullying
- poverty
- drug and alcohol use
- suicide
- truancy.

**Other indicators include:**

- education – results-based accountability and feedback from school
- life skills.



## ***What is the vision for services and organisations in the future?***

Participants were asked what they would “keep, change, chuck or start”.

**First 1,000 days*****Keep***

Parental education

B4 school checks

Breastfeeding support

Budgeting advice

Free oral health services

Housing NZ homes

Plunket services

Safe sleeping awareness

Play groups

Early interventions

Community interaction and neighbour support

Collaboration between service providers with common goals

Community gardens

Enthusiasm, passion

Community centres which provide “anchors”, e.g. Katikati, Merivale.

## Chuck

Competitive funding model

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Bureaucracy

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Reduce duplication

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Sugar, drugs, alcohol, easy access to fast foods

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Barriers to services

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Isolation of elderly people—they have a lot to offer to younger people

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Disempowering people—it makes people feel more vulnerable

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Holding grudges, despondency, apathy, sense of entitlement

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Families struggling to cope.

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## Change

Ministry funding system—need more collaborative processes and applications

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Focus on the client, rather than the system (i.e. the opposite of bureaucracy), particularly focus more on outcomes for children

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More sustainable funding streams, i.e. beyond one year in duration

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Don't cease funding and leave good programmes “high and dry”

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Refocus on the concept of a village, and neighbours supporting each other

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Policies on alcohol and fast food outlets (decrease)

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Increase parental leave

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Place more value on the older sector of community, e.g. increase inter-generational education

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Support new parents and increase emphasis on educating parents so that families feel empowered and autonomous

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Pay a fair, living wage so that the basics are affordable

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Increase emphasis on gratitude and valuing what we have, e.g. relationships

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Value what we do have, and those that work at the coalface more, “care for those that care for others”

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Add fluoride to all water supplies.

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## New

System reform

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More funding

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Funding model—follows the child, with equal emphasis on social wellbeing measures

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Carry out a stocktake of services in each community to identify gaps and overlaps

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Tap into all the ideas in the community, rather than government-led

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More housing

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Services with a more holistic, and strengths-based approach, including a focus on basic life skills

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Joint child and youth outcomes from all services

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Mentoring for parents from conception

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More informal opportunities for listening ears to reduce isolation.

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## Youth

### Keep

Alcohol and drug free events such as Summerfest

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Confidential services

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Networking and collaboration

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Free Family Planning service for under 22 years

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Community and church youth groups

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Sport BoP, other arts, etc

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Community-led services that are family oriented

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Family violence education

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Free services for youth at risk

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Attendance at youth development meeting (this has been increasing).

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### Chuck

Short term focus of contracts

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Duplicating overheads, e.g. a dedicated youth facility/service

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Pilots—“too much talk, not enough action”.

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## *Change*

Red tape with funding applications

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Reporting requirements

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Negative attitudes towards youth—e.g. MSD, and as experienced in small communities

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Better access to youth health services after school

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Education—greater focus on life skills

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Re-teach communities how to be self-sufficient

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Generation Y valuing possessions rather than services.

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## *New*

More community-based initiatives

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Community centres/hub—more focused on youth, and a regular, easily accessible NGO liaison point, without too much outside interference. Could also provide a “virtual hub”

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Access to every service through any service

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Training more youth workers

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Relationships/linkages between schools and businesses—would provide an opportunity to dream and learn what’s out there

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Wellness/hauora (rather than sickness) focused services.

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## What are the issues and challenges impacting on success?

### Issues

### Solutions

#### First 1,000 days: Programmes & services

Salaries are often not included, so programmes can't be delivered

Include salaries

OSCAR subsidy is only offered when both parents are working, or single parent. In other circumstances, contracts stipulate that users must be charged. This means children in poverty don't have equal opportunities to learn, engage, and participate

Provide subsidy to all children

Children are not sufficiently active

All sports in schools should be free

Parents don't understand oral health issues and status of their children

All children attending a dental service must be accompanied by an adult

Parents (often single) bring up children in isolation

Play groups, and mentoring from mature parents

Cost of access to academic programmes (science) can be prohibitive

Fund science programmes in low income communities

Not enough focus on prevention of problems in early teens

More targeted approach to prevention and education on social issues

Services with no government contracts are fully reliant on community funding, and may not be sustainable

Community funders should take this into account when considering applications from those that do/don't have government funding

Foetal alcohol syndrome

Focus on reducing, including provision of respite care through foster parents for stressed whānau

## What are the issues and challenges impacting on success?

Issues	Solutions
<b>Parenting</b>	
Needs greater emphasis as it's central to children's outcomes	Increase awareness of funders and other stakeholders about the importance of parenting, and identify how they could provide greater support
New parents need more support – all are potentially vulnerable	Improve ability to recognise vulnerability, which may be expressed in different ways
Lack of life skills, poor behaviour management and lack of respect: “We parent as we have been parented”	Start teaching these skills from ECE, and in other fora, e.g. through Incredible Years
Lack of positive role models and peer support	Place more value on the previous generation and identify people who are willing to share advice
Parents are confused about what they can/can't do legally, and in terms of their role and responsibilities	Education regarding rights, responsibilities
Changing and new relationships for parents, and formation of different and complex families	Identify positive role models, and normalise different family models
Stress in families results in youth leaving home very early before they've developed the maturity and resilience to thrive	More funding to support parents to spend time parenting – this will reduce stress, increase family stability, and produce better outcomes
Lack of affordable, healthy housing	Increase supply and revise access criteria

## What are the issues and challenges impacting on success?

Issues	Solutions
<b>Youth: Programmes &amp; services</b>	
Youth participation – they aren’t heard enough, and there aren’t enough conversations between agencies/decision-makers and youth	Listen/engage more. Provide platforms and share networks
Finding youth who are most at risk, and supporting those who don’t easily fit with one service	Better connections between services/networks and more collaboration so that “every door is the right door”
Lack of affordable housing	More funding, and lower the tenancy application age to 16 years
Workforce – youth workers and leaders	Increase funding and scholarships for youth worker training through BoP Polytech and other institutions
Understanding youth and their issues, including brain development	Initiatives to increase understanding in the community
Lack of /parenting life skills learnt at home (often because parents are working and/or absent), and not enough focus on teaching these skills so that youth are resilient, inspired and enthused	Teach youth that we all have a purpose, a place, and a legacy we can leave, as well as basic skills parenting/life such as hygiene, cooking, cleaning, budgeting, etc
Access to free services – problems with youth not attending	Services to provide more support to ensure youth attend
Insufficient youth mentoring services	Increase provision through key agencies. Plenty of youth want this, but need to increase efforts to attract mentors
Cost of after-school/holiday programmes (e.g. House of Science) is prohibitive	Targeted funding for programmes in low income communities, including for those whose parents are unemployed or unwell
Isolation – youth “home alone”	Value parents being home after school hours
Youth struggling with their (sometimes multiple) ethnic and cultural identities	Help youth to affirm their identities by providing workshops (or other fora) in secondary/tertiary education settings to help with cross-cultural communication and understanding
Dropping out of school	Better access to NCEA tuition and exams when out of school

## What are the issues and challenges impacting on success?

Issues	Solutions
<b>Health</b>	
Access to services, including high costs and short consultations	Better use of technology, e.g. skype consultations. Different funding/contracting systems in primary care
Value for money and accountability of primary care services	Employ GPs directly, and require financial disclosure regarding use of public funds
Access to multiple services for complex health needs when services are funded separately	Funders to seek/consider collaborative applications
Health literacy at all ages, including knowledge of the determinants of health	Increase access to and quality of science and health education at all ages
Family violence	Keep the “It’s not ok” campaign Train all health professionals to be able to identify, offer support and referral to effective intervention services Need an integrated specialist service, and to work together
Costs of long term, undisclosed sexual assault/abuse	Training for health professionals and screening
Identify long term, mental health related costs	
Poor oral health	Fluoridation of all water supplies
Low breast feeding rates to six months/one year	More financial support for groups such as La Leche League
<b>Other</b>	
Lack of recognition of all roles, needs and rights in a family	Encourage all family/whānau members, across all generations to be involved in children’s lives
People not knowing their neighbours	Support community meals and events, such as Neighbourhood Support Groups, Neighbours Day, etc.

## Priorities for investment

The priorities were identified and ranked as follows:

### First 1,000 days

1. Parental education, mentoring and support:

- a. focused on families/whānau being ready before birth
- b. including attachment
- c. facilitating early identification and access to support
- d. connections with child care and parent groups

2. Early services hub, for consolidated, collaborative services for families

3. House insulation

4. Community gardens

5. Long term initiatives

6. Increased home visits.

Other areas which were discussed, but not prioritised, included transportation to access services, childcare drop in, and reducing foetal alcohol syndrome.

### Youth

1. Central youth hub, to support centralised communication and collaboration with:

- a. well trained youth workers, doctors, social workers
- b. integrated with other agencies
- c. free wifi, art space, social networking and other facilities
- d. seminars etc, and transport to attend.

2. Holistic whānau ora approach, including:

- a. wraparound services to connect with the family
- b. mentoring - multi-cultural, supporting career planning, transitions into employment
- c. a focus on the whole journey
- d. strengths-based.

3. Parenting education.

## Process for prioritising

Each table allocated their money collectively to the priorities of either 1,000 days or youth. They reported trying to pull together the main themes that had emerged during the hui, to align services, and to consider the proposition from different perspectives, i.e. operational costs, infrastructure (e.g. building) requirements, etc. Their criteria also included where they felt they could make the biggest difference, and they stipulated provisos such as expectations of collaboration.

## Feedback on the hui

In concluding the hui, participants gave the following feedback:

*It's been brilliant.*

*Grateful for facilitation and enjoyed the art work.*

*Appreciated being listened to.*

*Enjoyed the prioritisation exercise—the money made it seem real.*



# 7. Whakatane *consultation* *hui*



The Whakatane hui on 19 September 2014 was attended by 28 participants who came from Whakatane and neighbouring towns such as Kawerau. Throughout the hui, they worked in four groups—two focused on the “first 1,000 days”, and the others on “youth engagement”.



## Summary

The Whakatane participants reported a strong sense of community as one of their key strengths. They provided several examples of where collaboration is increasing, including Whānau Ora. While this is still in its infancy, Whānau Ora is developing a shared service delivery model which integrates a range of service providers.

As referenced in other hui, Whakatane has a youth and whānau activity centre which offers a radio station, a café, gym, and education classes.

The participation of children and youth in sport was seen as another strength, with very strong sports clubs and good parental support.

Services were viewed positively, with particular praise for innovative approaches, early intervention, and the provision of face-to-face services in homes. Services were also perceived to be truly inclusive in relation to disability – “there has been a real shift”.

A number of issues were raised in relation to traditional Māori beliefs and practices. These included the desire for better access to traditional Māori parenting knowledge and practices, and the need to be spiritually strong—a sense of wairuatanga, and knowing how to be respectful.

Participants were less positive about national contractors who they felt were not always able to understand or meet the needs of their community. They also identified situations where contracts had ended after a short period, leaving the community “bereft”. The “unethical spending of money” when under pressure to meet a deadline was also mentioned.

Other issues included the lack of specialist youth workers in the district, and a lack of trust in CYF that prevented people notifying potentially at-risk children.

To address the challenges of vulnerable children, they wanted better monitoring with a database beginning before birth.

They also wanted poverty to be a key indicator, and the transformation of services to be described and evaluated.



Referral processes between services were also discussed. It was felt that current methods could be more ethical and personal with face-to-face introductions or handover.

For youth, broader engagement through channels like social media was identified as a way to connect more effectively. And for youth receiving services, an exit strategy would enable a smoother transition and avoid dependency. Whakatane also wanted to see community input into the school curriculum.

The lack of free counselling to address a range of issues was highlighted as a significant gap

The unique Whakatane priorities included financial incentives to attend parenting groups and pre-natal checks, free and accessible counselling, more sporting opportunities and greater use of sports champions as role models.

## Discussion

### What is working well?

**The Whakatane hui participants identified the following:**

Strong sense of community

Collaboration is increasing

- the ability to recognise strengths of organisations
- connecting the dots
- finding ways to implement, e.g. sector trials
- Whānau Ora is developing a shared service delivery model which integrates a range of service providers
- MSD, health and education are working together
- Māori Women's Welfare working across/with many groups, including MSD

Good at recognising and adjusting to the needs of their communities

Rich in passionate people and innovative programmes

Generosity of people who share the same vision, example of generosity to MWWL where a significant donation had been made to the community to support second-chance women learners get back into education

Have a youth and whānau activity centre with a radio station, café, gym, education classes

Participation of children and youth in sport, with very strong sports clubs and good parental support

Finally realising it takes a community to raise a child

Recognising young mums in crisis earlier and putting in interventions to ensure babies are born into safe families

Services are truly inclusive in relation to disability; "There has been a real shift"



**Positive comments about specific services, including:**

- Whānau Ora—still in its infancy. Working with “deficit issues within an aspirational space—you don’t have to talk about the issues to defeat them”

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- “Incredible Years”, funded by the Ministry of Education through NGOs, is doing an invaluable job. NGOs are able to access whānau and communities in a way that wouldn’t have been possible before

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- Pathway 1390 is a new initiative which uses sport and recreation to inspire disengaged youth to build trust in themselves

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- sexuality education for 1,000 students

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- midwives “are fantastic”

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- Parents Centre

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- antenatal services

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- church youth groups

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- unborn baby forums

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- CAB—a lot of services for children and their parents, including assistance to access these services.

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***What would success look like in five years?*****First 1,000 days****Infants would be:**

- nurtured, valued and encouraged

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- living in happy, healthy, safe homes (not overcrowded)

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- learning from an early age

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- well attached

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- fully engaged in health and education services

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- thriving, resilient, independent

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- properly fed.

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**Vulnerable children would be:**

- monitored to enhance their progress using a database pre-natally

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- not lost through the cracks and disappearing

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- receiving interventions (to promote education, social, health, emotional wellbeing) before they become stuck in a cycle of dysfunction

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- receiving daily support if this was indicated.

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**Parents would be:**

- informed about what’s required and well supported

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- engaged in services, not encountering barriers

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- confident to parent

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- giving their children positive attention, i.e. praise

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- reading to their children from an early age.

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**Communities would be stronger through collaboration .****Indicators:**

- measure the transformation, e.g. during service delivery, narrative journey

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- no children at risk

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- less poverty

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- literacy

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- database of vulnerable children and a monitoring system.

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## Youth

### Youth would be:

- healthy and thriving

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- connected to their communities which:
  - are inclusive and not using language or stereotypes etc that exclude
  - value youth and give them a sense of belonging and whakapapa
  - hear the voices of youth at all levels
  - share wealth
  - include marae, whānau, hapu, iwi

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- families/whānau don't "come and go" and connections are strong. Connectedness is critical and it starts here with a strong sense of whānau and whakapapa. Youth are part of an "interdependent ecosystem"

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- able to enjoy strong, positive relationships—understanding that they don't always last

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- engaging in education that offers a wide range of ongoing opportunities to learn (which may/may not be school), e.g. how to own your own farm rather than just be a worker

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- attending schools with strong community links, i.e. there is community input into the curriculum

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- learning life skills that prepare them to leave home, so they are well-equipped to move into wider world, and maybe they will return to the community one day

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- resilient, i.e. can cope with change, and empowered

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- dreaming and having aspirations in an environment where success is normal

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- developing pathways for their future career, including a wide range of career options

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- employed with good income

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- connected to global issues

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- spiritually strong, a sense of wairuatanga, and knowing how to be respectful

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- able to access the resources they need including:
  - computers (note this is restricted for rural whānau)
  - networks
  - organisations
  - youth-friendly spaces
  - the tools they need to be successful
  - shared knowledge across generations

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- able to access the services they need including:
  - sexual health
  - services that don't isolate the young person, and integrate with families/whānau so that when the young person returns, they don't revert

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- participating in sport because it helps to engage with others (especially team sport) and youth learn to help each other to get to a common goal

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- taking up opportunities to take risks, e.g. going off to education, and knowing they'll be supported to try something new if they fail

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- gambling, drinking less (and other bad habits), and knowledgeable about risks and potential harms

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- using technology to their advantage, without the issues.

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### Indicators:

- reduced negative indicators such as crime, drug and alcohol abuse

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- less need for intervention programmes

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- community survey could be undertaken about attitudes, perceptions related to youth.

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## What is the vision for services and organisations in the future?

Participants were asked what they would “keep, change, chuck or start”.

### First 1,000 days

#### Keep

Collaboration

Strengths-based approach

Quality providers delivering effective services

Current local solutions

Whānau Ora

Passionate people

Innovation, so can react/respond to the community

Local focus, including access to rural communities

Face-to-face services in homes.

#### Chuck

Stand-alone attitudes, silo thinking

Competitive models, including contracts

Duplication of services

Short term contracting

National contractors

Restrictive policies

Approaches that leave communities “bereft” when they come to an end.

#### Change

Government policies to reflect a stronger community voice

Funding model, level of resourcing (more is needed), and contract duration (need to be longer)

How we share information

More holistic approaches in homes

From crisis intervention to long term/aspirational thinking –a whānau ora approach

Value expertise/staff more (currently turnover is too high)

Accountability—should be outcome focused.

#### New

Child and whānau focused, and more strengths-based

Collaboration across funders, between government and community

District/community plan to reflect community knowledge, needs, preferences

More community driven with local decision making

More community hubs and shared services

More capacity building

More prevention programmes

More crisis assistance

More innovation

Sustainable

Outcomes focus

Expertise in fields of employment

Support employers in business

Effective evaluation.

## Youth

### Keep

Services that go into people's homes where people feel safe

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Passionate staff, who are constantly upskilled

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Services that are family focused and have a holistic view of clients

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Collaboration.

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### Chuck

Competitive contracting processes

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Prescriptive contracts, focused on outputs and "ticking boxes"

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Unethical spending of money, just to meet a deadline (when, with more time, it could be spent more effectively)

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Multiple reporting

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Present referral method

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The tall poppy syndrome.

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### Change

Contracting—could be more efficient, multi-agency contracting, where the collective delivery of the service is encouraged, utilising local services

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Ministries working better together and helping to galvanise communities

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More integrated, multi-year contracts

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Results based accountability reporting, across funding streams

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More outcomes focused.

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### New

Collaborative, cross-ministry contracts

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Broader engagement to enhance what is already happening, including with social media, and not just within work hours

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Exit strategies for youth, i.e. transition out of a support relationship to avoid creating dependency

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Community driven priorities and solutions—they know what is best for them

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Referral processes that are more personal, ethical, face-to-face

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More mentoring at every level (children through to parents and families)

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More engagement of whānau to identify what they want for their youth.

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## ***What are the issues and challenges impacting on success?***

<b>Issues</b>	<b>Solutions</b>
<b>First 1,000 days</b>	
Insufficient funding	More!
Competition between providers to meet targets	More collaboration
“Deficit” focus of services, i.e. focus on problems and negative outcomes	More positive, aspirational focus
Connecting with children who need services	Engage more with schools
Engaging parents who need services	Need to overcome employment and financial constraints
Engaging and empowering families, and increasing parent support for children needing services	More engagement and education
Intensity and duration of services for children needs to be maintained and gradually reduced over a longer period, so that results are more sustainable	Smaller case loads
Lack of trust in CYF—people are reluctant to seek help when they suspect that a child is in danger	CYF needs “a makeover” and to work hard to create trust and a belief that they are there to help

## What are the issues and challenges impacting on success?

Issues	Solutions
<b>Youth</b>	
Fragmented plan for children and youth	Develop a community-driven plan
Volunteer-based programmes for youth could be broader and more effective if they received funding	Collaborative contracting
Cost is a barrier	More funding so services can be free
Short term contracts	Funding should be provided to organisations with specialist expertise in their field or sector
Insufficient engagement and participation of youth	<ol style="list-style-type: none"> <li>1. Increase the input of youth into development and delivery of services that impact on them</li> <li>2. Strengthen the focus on initiatives driven by youth, i.e. support youth to find/deliver their own solutions with providers alongside to ensure they are successful</li> </ol>
Programmes working in silos	Increase integration and focus on linking back to the family/whānau
Support for youth is “piecemeal” – they move in and out of programmes without continuity	Support needs to be ongoing, particularly in relation to transitions (e.g. into further education, employment, etc) and need “navigators” to provide consistency
Not enough specialist youth workers in the district	Need a stronger focus on our approach to engaging and supporting youth, i.e. it should be recognised as a specialist skill, rather than “an add-on” to someone else’s job
Need more facilities and social activities (in supervised, controlled settings) for youth	This is the role of councils and other organisations

## What are the issues and challenges impacting on success?

Issues	Solutions
<b>Parenting</b> Not everyone has: <ul style="list-style-type: none"> <li>• good role models</li> <li>• knowledge about good parenting and support</li> </ul>	Mentoring Accessible and engaging education Foster a “parenting community” to help support parents at different stages as their roles evolve
Distorted values and beliefs about parenting arising from experiences with their own parents	Free counselling to address these beliefs and increase self-esteem
Lack of parenting programmes for young parents	Introduce early, i.e. in school
Relationship breakdown causes huge turmoil within a family and can involve violence—no free counselling is available	Free, easily accessible counselling to deal with relationship problems in the early stages
No access to traditional Māori parenting knowledge and practices	More programmes to inform Māori parents about how to bring their children up in a Māori way
Parenting in isolation has become normalised, especially among single parents	
Lack of knowledge about the importance of attachment	Education during pregnancy about “How to ensure children feel attached from Day 1”



## *What are the issues and challenges impacting on success?*

<b>Issues</b>	<b>Solutions</b>
<b>Health</b>	
Services are too centralised	More mobile services
Location of sexual health services in outpatients is a deterrent	Relocate
Not enough availability and awareness of holistic healing	More traditional healing alternatives, including Rongoa Clinics
Lack of information about services	More information available
Targeting is too late, e.g. Smokefree/Auahi Kore (schools and whānau acknowledge this)	Target younger age groups (10-14 years)
Communication with clinicians is influenced by a hierarchical structure, and clients lack confidence in these discussions	Provide education for both clinicians and clients about how to communicate effectively
Access to services for youth	More youth-specific services
Need more education about healthy eating and activity	Maintain education throughout lifetime, i.e. from school through to elderly

## ***Priorities for investment***

The priorities were identified and ranked as follows:

### **First 1,000 days**

1. Financial incentive to attend parenting groups

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2. Free, easy accessible counselling for “as long as it takes”

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3. Financial incentive to attend pre-natal checks.

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### **Youth**

1. Developing community capability

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2. Community Hub in Whakatane (and all communities, e.g. Opotoki)

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3. Planning tool to enable youth to plan their own futures (e.g. PATH)

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4. More sporting opportunities and role models such as sports champions with a local connection

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5. Whānau engagement in programmes, including information sharing about the young person’s context.

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Other areas which were discussed but not prioritised included holistic assessments to understand capabilities and environments; and multi-agency, integrated contracts with collaborative responses from the community.

## ***Process for prioritising***

All groups, except one, allocated their money collectively across the priorities of 1,000 days or youth. The group that didn’t apply the money collectively was unable to reach agreement together so they divided the money and “went shopping individually”.

Overall, the participants highlighted the importance of a preventive approach and “getting it right” in the first three years to generate long term benefits, and mitigate the need for services later. They also however, recognised that youth need funding and support now. They tried to “stay with the solutions identified during the hui” and considered the different needs of different communities. In particular, they focused on rural communities which have less access to resources. Their priority was to invest in building skills and capability in the community.

Other comments included that “It’s not always about the money, but about working together” adding that this is not always easy, despite the best intentions.

# “It’s been brilliant”

## *Thank you*

