



NEXT Foundation & Foundation North:

The New Zealand Early Years 'Ecosystem'

July 2015

Introduction

The ‘ecosystem’ of early years interventions in New Zealand can be described as a continuum of statutory systems, government services, NGO programmes and community initiatives. As a whole, the ecosystem is supported by and responsive to legislation and policy, social trends and a range of other environmental influences. These influences have combined to shape New Zealand’s standing in the OECD context, which can be described as a developed country that could be doing more to ensure children in their early years are safe and well nurtured. In order for the early years’ ecosystem to operate well, and in order for the associated social service systems to function effectively, it must also be responsive to the changing and emerging needs of children and families, and recognise and reflect community and cultural aspirations.¹

Early years experiences - from conception to 5 years old - lay the foundations for a child’s future health and wellbeing. The ecosystem of early years interventions that support this foundational development recognises the need to support parents, to encourage healthy child development, to facilitate access to learning, to mitigate potential risks to wellbeing, and to intervene when harm occurs.

This system, and the stakeholders within it, covers a spectrum of services that range from ‘universal services’ (such as health care and early childhood education), to prevention, early intervention for vulnerable children, high risk mitigation for children with multiple and complex needs, and crisis response for children with acute needs. In New Zealand, as in most other countries, philanthropy plays different roles right across the spectrum, although the majority of interventions and programmes in community settings occur in the ‘universal’ and ‘vulnerable’ sections of figure 1.

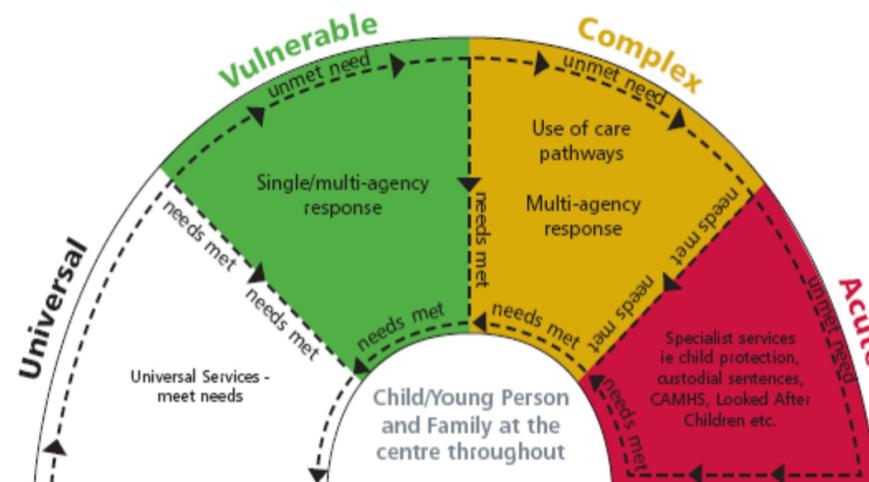


Figure 1: Early Help Practice Process (Source: Shropshire Council²)

Mapping principles

The following ecosystem map has been prepared for NEXT Foundation and Foundation North, who share an interest in effective philanthropic investment in the early years. The ecosystem does not represent a complete stocktake of services, but rather a summary of interventions being provided that demonstrate evidence of success or promise as emerging investment opportunities for philanthropic funders to consider. Philanthropy has a unique opportunity to try new ways of addressing complex problems by funding social innovation and emerging new practices. Funding emergent strategy in this way can ‘give rise to constantly evolving solutions that are uniquely suited to the time, place, and participants involved...It helps funders to be more relevant and effective by adapting their activities to ever-changing circumstances.’³

In line with current literature written about the principles of effective early years practice, and the principles by which CSI approaches the work it does, a strengths-based filter has been applied to the mapping process, and particularly to the identification of emergent opportunities for investment that are:

- Reflective of community and cultural aspirations, responsive to community need and evidence-based.
- Informed by evaluation and learning, particularly when focusing on innovative and emergent practices.
- Strengths-based - building child, parent and family strengths so that they are able to thrive, achieve, belong and participate, regardless of other risk factors.

Prevention & early intervention focus

There is a growing body of evidence that shows long-term return on investment is greater from activities that promote children’s safety and nurture before problems occur, as opposed to solving problems once they have already occurred. This is a problem for our public sector agencies, which are increasingly under pressure to provide agency responses to problems that are complex, costly – and often intractable.

The Ministry of Social Development’s new *Community Investment Strategy*, for example, outlines that spending on outcomes for vulnerable children will primarily be channelled into statutory crisis intervention (\$59m per annum) and intensive support for the highest-risk children (\$65.5m per annum), whilst only 2% of funding will be invested into prevention services.⁴ This relative underinvestment in prevention programmes represents a significant opportunity for philanthropy to play an important role in early years ecosystem, investing in the ‘universal’ and ‘vulnerable’ sections of the diagram above.

We know that early intervention works. As discussed, evidence shows us that the highest gains from investment in human capital can be found from pre-natal interventions with parents and from investment in babies and children aged 0–3 years⁵. Further evidence shows that protective factors are mutually reinforcing, meaning preventative interventions that build resilience can be effective at balancing risk factors.⁶ In response to this evidence, the ecosystem components presented below should be read with a focus on the prevention and early intervention spaces, where current public spending gaps are greatest and where there is

most opportunity for social return on investment through community engagement. These early years intervention spaces are also the domains where community agencies operate and local solutions to local problems are mostly likely to be found.

The Early Years Ecosystem

The following table is a summary of the early years ecosystem. It looks at:

1. **Universal services** where all children are supported to thrive, achieve, belong and participate.
2. **Risk prevention services** where children may be susceptible to falling behind if the balance of risk and protection is tipped.
3. **Early intervention services** where children have unmet needs and therefore experience an elevated level of risk.
4. **Intensive support services** where children are a high risk and have multiple and complex needs.
5. **Statutory crisis response services for child protection** where children with acute needs have experienced abuse or neglect.

For each aspect of the early years ecosystem, the table considers:

- **Principles and characteristics of intervention** that are typically seen in New Zealand.
- **Key services and providers** that operate in the ecosystem and provide support to children and families. These are examples of practice rather than an exhaustive list.
- **Gaps in provision or practice models**, which have been identified through policy, literature or community research.
- **Promising practice** – where new or existing programmes and services are demonstrating clear evidence and/or positive early results. This list is not exhaustive, but a good starting point for exploring NEXT Foundation and Foundation North's shared interest in building effective early years philanthropic strategy.

1. Universal services – reach and accessibility

Typical principles and characteristics of intervention	Key services and providers	Gaps and/or work in progress	Promising practice/ opportunities for philanthropy
<p>Who is reached?</p> <p>All children and families</p> <p>How are they reached?</p> <p>Many of the children and families accessing universal services will experience some risk factors; however, they access these services universally without specific targeting or entry-point by risk factor</p> <p>Key principles of intervention</p> <p>Equitable access to universal health, education and welfare entitlements</p> <p>Additional interventions help to improve the <i>reach and accessibility</i> of universal services to ensure that the families do not experience barriers to access, which may include:</p> <ul style="list-style-type: none"> • Language or other cultural barriers • Access e.g. lack of proximity or transport • Lack of awareness about service availability or entitlements • Service gaps 	<p>Who provides services?</p> <p>Government agencies (universal services) e.g. health, education, housing, benefits</p> <p>NGOs (mostly government funded; some philanthropic funding may be used to support innovation, initiative development, better reach/access)</p> <p>Private sector (funded by a mix of government contracts and additional fees-for-service)</p> <p>What key services/interventions are provided?</p> <p>Universal primary health care services (now free for under-13s)</p> <p>Home-visit maternity support and <i>Well Child/Tamaki Ora</i> services e.g. midwives, Plunket nurses (available to all pregnant women and newborn babies)</p> <p>Early childhood education (20hrs free for 3-5 year olds)</p> <p>Welfare entitlements and subsidies based on family circumstances (e.g. means-tested WINZ childcare subsidy for under-2s)</p> <p>Services for children with disabilities</p> <p>Strategies and services to increase access to universal services, examples of which include:</p> <ul style="list-style-type: none"> • The <i>ECE Participation Programme</i> (Ministry of Education) • <i>B4 School Checks</i> (Ministry of Health) • Community transport programmes • Immunisation programmes • NGO beneficiary advocacy services • Translation and interpretation services • National tele-health and helplines • Authoritative online information and engagement systems e.g. Government's Real Me login 	<p>Issues/gaps</p> <p>Free early childcare education is capped at 20-hrs for 3-5 year olds</p> <p>Key barriers to access still need to be addressed, including:</p> <ul style="list-style-type: none"> • Availability of free ECE places in communities of higher deprivation • Cultural competency of health services for Māori, Pasifika, migrants and refugees • High quality services that also work with parents and families <p>Consistent Professional development and training of the children's workforce</p> <p>Support for children who have parents or caregivers with complex health problems, low educational achievement and social needs</p> <p>Work in progress</p> <p>Public service outcomes are targeting improvements, including:</p> <ul style="list-style-type: none"> • A 95% immunisation rate for children 8-months old by December 2014 (currently 93%) • A reduction in rheumatic fever hospitalisation rates by two-thirds in the next five years • 98% of children starting school having had some early childhood education by 2016 (currently 96%) • Increased professional development and training of staff • Reducing teen pregnancy and supporting young mothers to continue their education • Parenting programmes 	<p>What promising/proven practice should be considered?</p> <p>Good nutrition during the first 1,000 days is critical to brain development and education through home visits can be effective, particularly for first time mothers</p> <p>Lengthy early childhood education exposure (1 year +) as early as possible (before 3 years old)</p> <p>Facilitating a 'love of learning' is effective for social and emotional development and long-term educational success</p> <p>What models of intervention could be considered?</p> <p><i>Papatoetoe Kindergarten</i> is an example of a universal service responding to the particular access-needs of its community. They provide additional philanthropy-funded language support staff to increase the centre's cultural competency and engage migrant families with ESOL needs</p> <p><i>Culturally and Linguistically Diverse (CALD)</i> programmes have been designed by Waitamata DHB and have proven effective at improving the cultural responsiveness of primary health services. The programme includes translation and interpretation services and cultural competency training for health professionals. The model has potential for replication and transposition into other universal services</p> <p>The <i>Far North Parent Mentoring</i> cluster works with a group of 13 Northland schools to deliver a new form of pre-school education in isolated rural communities with service gaps, by taking learning into the home and bringing pre-school learners into school; creating a new system of access and support</p>

2. Active risk prevention

Typical principles and characteristics of intervention	Key services and providers	Gaps and/or work in progress	Promising practice/opportunities for philanthropy
<p>Who is reached?</p> <p>Children and families who may be susceptible to ‘falling behind’ due to an imbalance of their experienced risk and the presence of mitigating protective/resiliency factors</p> <p>How are they reached?</p> <p>Through targeted ‘extra’ services provided as part of universal services</p> <p>Via ‘entry points’ created within universal services to reach and then pathway children and families with risk susceptibility into additional support services with a prevention-focus</p> <p>Directly through NGO organisations and their existing relationship/engagement with families and community</p> <p>Key principles of intervention</p> <p>Interventions help to improve the <i>effectiveness</i> of universal services by innovating with delivery modes in an effort to achieve risk-prevention outcomes for more vulnerable children/families</p> <p>Help build key resiliencies for children and parents, such as:</p> <ul style="list-style-type: none"> • Secure attachment to a responsive parent/caregiver • Connections with extended family • Healthy, non-violent relationships between parents and with children • Family financial literacy and security • Positive view of self (confidence, self-efficacy etc.) • Cultural identity and connectedness • Community connectedness and networks of support that are able to be sustained • Positive parenting strategies and understanding of children’s development <ul style="list-style-type: none"> • Parental engagement with child’s learning • Health literacy 	<p>Who provides services?</p> <p>Schools and ECE centres (using Ministry budget and/or by accessing additional philanthropic funding)</p> <p>Government agencies, typically operating with a social work focus</p> <p>NGOs and community groups (funded through a mixture of government contracts and philanthropic funding)</p> <p>What key services/interventions are provided?</p> <p>Programmes that enhance the effectiveness of universal education services by improving educational outcomes for children at-risk; and often by providing support structures for parent-led learning reinforcement at home. Examples within early education are less common, but school-based models include:</p> <ul style="list-style-type: none"> • <i>Manaiakalani</i> - digital learning pedagogy and whānau engagement strategy (cluster of Tamaki schools) • <i>Mutukaroa</i> - home-school learning partnerships (Sylvia Park School) • <i>Partnership Schools/Kura Hourua</i> – charter schools <p>Positive parenting programmes such as:</p> <ul style="list-style-type: none"> • <i>SKIP Programmes</i> (MSD funded) – community-based parenting strategies and information • <i>Parenting Toolbox</i> (Parenting Place and other local providers) • <i>Mana Ririki</i> (kaupapa Māori parenting programme) • <i>SPACE</i> parenting programme (newborn focus) <p>Facilitated play that supports learning in non-ECE environments, including:</p> <ul style="list-style-type: none"> • <i>NZ Playcentre</i> 	<p>Issues/gaps</p> <p>Successful school-based programmes of lifting educational achievement and enhancing parent engagement with learning have not be replicated widely within the early childhood education system</p> <p>A lack of resourcing, organisational capacity and capability amongst may NGO providers means that services are often:</p> <ul style="list-style-type: none"> • Under-evaluated • Unsustainable • Funding-led rather than outcomes or evidence-led, which can compromise impact • Lack coordination and so miss opportunities for greater collective impact • Reliant on volunteers or untrained staff, which can be less effective <p>Access to community resources and facilities is inconsistent across different New Zealand communities</p> <p>Providing resources and facilities can be ineffective without facilitating access by families that need support</p> <p>Work in progress</p> <p>Services are often funded with a short-term focus (i.e. year-to-year agreements and/or are results-dependent contracts). This can compromise strengths-based approaches, giving insufficient time to build community capacity and sustainability. Some funders are moving to address this through high engagement, multi-year investment</p> <p>The value of prevention services are widely recognised, but investment remains very low compared to intensive and crisis response services</p>	<p>What promising/proven practice should be considered?</p> <p>Building the capabilities of the adults in a child’s life</p> <p>Focusing on early intervention for the greatest impact – reaching young (first-time) parents and children pre-birth to 2 years</p> <p>Strengths-based approaches that respond to community and cultural aspirations where possible, building the long-term capacity of the child, parent, family and support network/community</p> <p>Co-location of universal services with other forms of support service; particularly those which families might not otherwise have access to due to a lack of awareness, ‘entry point’ or transport</p> <p>Two-generation approaches where the needs of children and parents are considered jointly, resulting in outcomes for both and the potential for generational shift</p> <p>Engagement and retention of parents in programmes is critical, and can be achieved by:</p> <ul style="list-style-type: none"> • Supporting programme access through childcare or transport assistance; or incentives such as free meals.⁷ • The cultural appropriateness of programme delivery and the cultural competency of staff. • Effectiveness for Māori through a whānau-centred approach. • Suitably trained and qualified staff, rather than lay persons or volunteers, with limited case loads (particularly for home-visit programmes). • Delivering an ‘appropriate dose’ and considering onward referrals.

Typical principles and characteristics of intervention	Key services and providers	Gaps and/or work in progress	Promising practice/opportunities for philanthropy
	<ul style="list-style-type: none"> • Church and community playgroups • Home-based childcare <p>Free or low-cost access to resources and facilities that support play, positive parenting, early learning and healthy lifestyles, such as:</p> <ul style="list-style-type: none"> • Public libraries • Community toy libraries • Parent resource centres (e.g. <i>The Parenting Place</i>) • Free community sports and recreation facilities • Community gardens <p>Health promotion programmes that support parents (and young people, as future parents) to make positive lifestyle choices in support of healthy child development, including:</p> <ul style="list-style-type: none"> • Curriculum and NGO programmes that raise awareness of risk-taking behaviours (drugs, alcohol, violence) pre-parenthood • Brain development education programmes (<i>Brainwave Trust</i>) • Violence prevention and bullying awareness campaigns (such as <i>Te Punanga Haumarua</i> – MSD’s bullying prevention fund) • Health promotion campaigns which may include smoking cessation, breastfeeding promotion and nutrition/kai ora 		<p>What models of intervention could be considered?</p> <p>Barnardos’ <i>Te Korowai Mokopuna</i> is a pilot model of integrated family services based around the co-location or “universal services +” concept. Barnardos placed social workers into two of their early learning centres in Clendon and Mangere, engaging with families through a neutral entry point, building trust and providing wrap-around support from there</p> <p>Although focused at school-aged children, the <i>Manaiakalani Education Programme</i> (a digital learning pedagogy rolled-out across a cluster of schools in Tamaki) has proven results:</p> <ul style="list-style-type: none"> • Raising educational achievements above local averages • Engaging parents in the school community • Supporting parents to engage with their children’s learning, creating learning-friendly home environments <p><i>Brainwave Trust</i> delivers school-based programmes educating young people about children’s brain development and ways to support a child’s healthy growth and emotional development. Many of these young people are siblings to young children and use their knowledge to be advocates within the home. However, the main focus is on creating knowledgeable young people who will go on to become nurturing parents.</p>

3. Early intervention

Typical principles and characteristics of intervention	Key services and providers	Gaps and/or work in progress	Promising practice/opportunities for philanthropy
<p>Who is reached?</p> <p>Children and families at high risk due to the presence of multiple risk factors, including:</p> <ul style="list-style-type: none"> • Sole-parent households • Low-income families • Teenage parents • Families with housing insecurity • Households with few or no qualifications • Families living in high deprivation communities <p>How are they reached?</p> <p>Typically through referral from a universal service, government agency or community provider that has identified an elevated need/risk for a child/family</p> <p>Self-referral by parents struggling to cope with one or more issues and at self-identified 'risk'</p> <p>Key principles of intervention</p> <p>Many providers offer services with a particular focus e.g. parenting support, financial literacy and budgeting, employment pathways, housing or education</p> <p>Although one particular issue may have prompted the family to access a service initially, there are many programmes that provide social work-based interventions that are considered to be "holistic" or "wrap-around"; recognising that children/parents may be experiencing a number of interconnected issues</p> <p>Typically, holistic support services are provided by community-based NGOs that have expanded their services from a core focus to address other issues common amongst their clients</p>	<p>Who provides services?</p> <p>Government agencies, typically operating with a social work focus (often with specific contract targets)</p> <p>NGOs and community groups (funded through a mixture of government contracts and philanthropic funding)</p> <p>Partnerships between agencies, NGOs and other providers e.g. tertiary institutions</p> <p>What key services/interventions are provided?</p> <p><i>Strengthening Families</i> is a whole-of-government programme that supports parents who require access to more than one service. The programme helps families to navigate and access multiple support services e.g. budgeting, housing, social work, counselling, addiction support, family violence support</p> <p><i>Teen Parent Schools</i> provide young mothers with childcare, access to health and other services through a <i>Teen Parent Intensive Case Worker</i> (MSD) and an opportunity to complete their secondary education - developing skills and knowledge they need to support their children (who are typically at higher-risk)</p> <p>Parenting support programmes for families at greater-risk, which include:</p> <ul style="list-style-type: none"> • <i>Incredible Years</i> and <i>Triple P</i> – supporting parenting strategies for parents of children with behavioural and emotional issues • Programmes that support grandparents raising children <p>NGO family literacy programmes designed to support parent-led early learning for low-income/high decile/low qualification families (<i>HIPPY</i>, <i>Parents as First Teachers</i>, <i>Books for Babies</i>)</p>	<p>Issues/gaps</p> <p>Providers are often working with the same families without coordination</p> <p>Families may be engaged with a number of different service providers simultaneously, placing additional stress on the family and causing them to disengage</p> <p>A lack of resourcing, organisational capacity and capability amongst may NGO providers means that services are often:</p> <ul style="list-style-type: none"> • Under-evaluated • Unsustainable • Funding-led rather than outcomes or evidence-led, which can compromise impact • Lack coordination and so miss opportunities for greater collective impact • Reliant on volunteers or untrained staff, which can be less effective <p>Work in progress</p> <p>Effective solutions can be difficult to fund as they often respond to complex issues that span government funding silos e.g. two-generation education programmes that might require Ministry of Education, Ministry of Social Development and Tertiary Education Commission funding</p> <p><i>Children's Action Plan</i> and <i>Children's Teams</i> (in Rotorua, Whangarei, Marlborough, Otaki/Horowhenua, Hamilton; proposed to have ten teams in place in DHB regions (including South Auckland) by 2017)</p>	<p>What promising/proven practice should be considered?</p> <p>Two-generation approaches where the needs of children and parents are considered jointly, resulting in outcomes for both and the interruption of generational issues</p> <p>Community-based interventions developed from the ground-up in collaboration with service users, which have the ability to engage hard-to-reach families and provide ongoing networks of support as a family's needs change</p> <p>Supported referrals and integrated service pathways to ensure multiple needs are addressed and families don't 'fall through the gaps' as they pass from service to service</p> <p>Family-to-family mentoring programmes that build self-sufficiency and long-term support networks</p> <p>Multi-sector collaboration to build effective, evidence-based programmes of intervention e.g. science, practitioner, philanthropy and government partnerships</p> <p>What models of intervention could be considered?</p> <p>The <i>Papakura Kidz</i> programme (Middlemore Foundation and partners) has taken a place-based approach to preventing the negative impact of poverty-related risk, addressing:</p> <ul style="list-style-type: none"> • Health risks through school clinics and home insulation programmes • Educational achievement through replication of the <i>Manaiakalani</i> model • Domestic violence risk through utilisation of <i>Whanau Ora</i> practitioners <p>The <i>Safari Multi-cultural Playgroup</i> is a specialist early learning centre for migrant/refugee children. Whilst the children are looked after in a safe and engaging learning</p>

Typical principles and characteristics of intervention	Key services and providers	Gaps and/or work in progress	Promising practice/ opportunities for philanthropy
	<p>Two-generation 2.0 programmes that provide pre-school education for children (or support parent-led learning for children), whilst facilitating parent education and employment pathways (<i>Whānau Ara Mua</i>)</p> <p>Family Service Centres and Community Hubs provide a wide range co-located services to families at high-risk, in communities of high-risk (e.g. <i>Great Potentials</i> in Papakura, <i>Nurturing the Future</i> in Greymouth, <i>Family Works</i> across several locations)</p> <p><i>Whānau Ora</i> providers help families to navigate a range of support services including health, education and other social services</p> <p>Programmes that support settlement and participation for migrant and refugee children/parents, ensuring that any risk factors are managed - such as participation in early learning and family violence early intervention</p>		<p>environment, mothers are supported to learn English and build their social connections. The playgroup has two sites – Massey and Mt Roskill – with a third site launching in Mangere. Funded initially by grants from ASB Community Trust, Perpetual Guardian, Hugh Green Foundation and the Todd Foundation, the project has potential to replicated across more major centres with migrant communities.</p> <p>The <i>Manurewa Parenting Hub</i> is located at Manurewa South School and provides a range of programmes to support parents – including parenting courses, <i>Strengthening Families</i> services and health programmes</p>

4. Intensive support

Typical principles and characteristics of intervention	Key services and providers	Gaps and/or work in progress	Promising practice/opportunities for philanthropy
<p>Who is reached?</p> <p>Children who have multiple and complex needs, but where these needs are not yet acute enough for a State crisis response to be necessary</p> <p>How are they reached?</p> <p>A number of systems are in place to identify families at most risk, including:</p> <ul style="list-style-type: none"> • Self-referral to an agency/NGO by a family with severe need • Post-crisis referral for on-going support • Child, Youth and Family referrals where a situation has not yet become acute enough for State crisis response <p>Advice gateways for families experiencing issues to self-identify, including:</p> <ul style="list-style-type: none"> • www.areyouok.org.nz (family violence) • www.depression.org.nz (mental health) • <i>Kidsline</i> and <i>0800 WHAT'S UP</i> (children's telephone/txt/online counselling) • <i>Victim Support</i> • A free <i>Family Violence Crisis Response Line</i> provided by MSD <p>Key principles of intervention</p> <p>Interventions are intensive, usually involving one-to-one support for families over a sustained period of time as the higher-needs take time to address</p> <p>Services are often delivered in the home environment to achieve the suitable level of trust, establish issues clearly and plan action that is relevant and sustainable</p> <p>Interventions may meet an initial urgent need, such as transitioning a family out of a violent home, followed up by on-going support</p> <p>Interventions usually target vulnerable children alongside a vulnerable parent</p>	<p>Who provides services?</p> <p>Child, Youth and Family lead alongside other government agencies</p> <p>NGO organisations (predominantly through government funding with additional philanthropic funding to increase reach and intensity of support)</p> <p>What key services/interventions are provided?</p> <p><i>Family Start</i> provides home visits to support parents from pregnancy through to 1 year. Weekly visits from a worker provide health advice, parenting support and connection to other support services</p> <p>A wide variety of support services are offered to children/families by NGOs to address partner violence, including:</p> <ul style="list-style-type: none"> • Women's refuges and transitional housing to support women and children to leave violent homes • Support services for children that have witnessed domestic violence (<i>Shine, Barnardos</i>) • Counselling and support programmes with a cultural violence prevention focus (<i>Shakti</i>) • <i>Family Dispute Resolution</i> <p><i>In-home Parent Mentors</i> (Barnardos) live-in with families for 2-weeks to provide support and facilitate a more stable family environment</p> <p><i>24-hr Respite Care</i> provides safe care for children whilst parents manage crisis problems</p> <p>Support programmes for families and children of prisoners (<i>Pillars, PARS</i>) who face on-going challenges</p>	<p>Issues/gaps</p> <p>Providers are often working with the same families without coordination</p> <p>Families may be engaged with a number of different service providers simultaneously, placing additional stress on the family and causing them to disengage</p> <p>A lack of resourcing, organisational capacity and capability amongst may NGO providers means that services are often:</p> <ul style="list-style-type: none"> • Under-evaluated • Unsustainable • Funding-led rather than outcomes or evidence-led, which can compromise impact • Lack coordination and so miss opportunities for greater collective impact • Reliant on volunteers or untrained staff, which can be less effective <p>NGOs are 'over-servicing' government funding contracts to meet community need (most have a 'will not turn away' policy), stretching their resources too thin</p> <p>Work in progress</p> <p>A need for better cross-agency communication and inter-agency responsiveness – the new <i>Children's Action Plan</i> has been designed in response to this need</p> <p>Greater professional training to ensure that the children's workforce is safe and competent</p>	<p>What promising/proven practice should be considered?</p> <p>Home-visit parenting programmes aimed at younger, first-time parents and include integrated support components – e.g. health services or networking with other parents</p> <p>What models of intervention could be considered?</p> <p><i>Nurse-Family Partnerships</i> is a programme of home-visits to low-income, first-time mothers of new-borns. It has been shown to achieve positive outcomes for parents and children, including: improved pre-natal health; increased intervals between births; increased maternal employment and improved school readiness for children</p>

5. Crisis response and child protection

Typical principles and characteristics of intervention	Key services and providers	Gaps and/or work in progress	Promising practice/opportunities for philanthropy
<p>Who is reached?</p> <p>Children who have experienced abuse or neglect and require crisis intervention to address acute needs</p> <p>How are they reached?</p> <p>A number of systems are in place to identify and provide first-response to child protection concerns, including:</p> <ul style="list-style-type: none"> • 24/7 National Contact Centre (Child, Youth and Family) which takes referrals from a variety of sources, including NGOs • Hospital Liaison Social Workers (DHBs) for children admitted to health services with concerns • A free Family Violence Crisis Response Line provided by MSD • Police involvement <p>Advice gateways for families experiencing issues to self-identify, including:</p> <ul style="list-style-type: none"> • www.areyouok.org.nz (family violence) • www.depression.org.nz (mental health) • Kidsline and 0800 WHAT'S UP (children's telephone/txt/online counselling) • Victim Support <p>Key principles of intervention</p> <p>Provide opportunities and systems to identify child protection concerns as quickly as possible</p> <p>The response to child protection concerns is led by a cross-agency Children's Teams that include practitioners and professionals from health, education, welfare and social services (both government and NGOs)</p> <p>Children's Teams have been established to provide a multi-disciplinary assessment with more comprehensive information about the child and what support they need</p>	<p>Who provides services?</p> <p>Child, Youth and Family lead alongside the Police and other government agencies</p> <p>NGO organisations (predominantly through government funding)</p> <p>What key services/interventions are provided?</p> <p>Children's Teams are appointed to cases with child protection concerns – the teams have a Lead Practitioner to steer assessment of the child's needs, lead the development of a Child's Action Plan, and lead a response with on-going monitoring</p> <p>Some cases may go to the Family Court, following which a plan is agreed and carried out. On occasion, the Court may issue a variety of Court Orders - including custody orders and support orders.</p> <p>Some children may need to be placed in residential Care and Protection for their safety until the child has somewhere safe to go, or into Foster Care</p> <p>Children in residential Care and Protection undergo Gateway Assessments to ascertain health, education and social service needs</p> <p>Supervised Contact programmes managed by contact centre providers (government and NGO) to enable parents to have contact with child not currently under their care</p> <p>A number of NGOs provide support services post-crisis, including:</p> <ul style="list-style-type: none"> • On-going social work • Counselling, support groups and other mental health services • Transitional housing support 	<p>Issues/gaps</p> <p>On-going post-crisis support</p> <p>Work in progress</p> <p>A need for better cross-agency communication and inter-agency responsiveness – the new Children's Action Plan has been designed in response to this need</p> <p>Greater professional training to ensure that the children's workforce is safe and competent</p> <p>A legal framework (currently being established) to support effective and secure sharing of data</p> <p>All organisations working with children must have a child protection policy in place and paid working must be police vetted – this work is in progress across providers</p>	<p>What promising/proven practice should be considered?</p> <p>Providing integrated post-crisis support and assistance to women and children who have experienced family violence but are no longer in crisis, enabling them to change their circumstances sustainably and self-sufficiently</p> <p>Services wrapped around children should be reviewed and should evolve as their need and situation changes</p> <p>What models of intervention could be considered?</p> <p>Crisis response interventions are typically the role of government-funded agencies and follow legislation and policy - this is not conventionally a space for philanthropy to prioritise investment</p>

Endnotes

¹ www.productivity.govt.nz/sites/default/files/social-services-draft-report-cttc.pdf

² www.shropshire.gov.uk/early-help/

³ www.ssireview.org/up_for_debate/article/strategic_philanthropy

⁴ www.msd.govt.nz/about-msd-and-our-work/work-programmes/community-investment-strategy/index.html

⁵ www.childandfamilypolicy.duke.edu/pdfs/10yranniversary_Heckmanhandout.pdf

⁶ www.msd.govt.nz/documents/about-msd-and-our-work/work-programmes/policy-development/white-paper-vulnerable-children/whitepaper-volume-ii-web.pdf

⁷ www.baytrust.org.nz/wp-content/uploads/2-opportunities-for-first-1000-days.pdf