



Save the Children New Zealand

CHILD PROTECTION SITUATIONAL ANALYSIS

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Executive Summary

The purpose of this situational analysis is to assess the effectiveness of the care and protection system in meeting the needs of children under five in Aotearoa New Zealand.

This situational analysis consists of a three-part literature review, which brings together evidence from overseas and here in Aotearoa New Zealand, within mātauranga Māori and through surveys of children, and interviews with thirty-five professionals that traverse the care and protection system. A strong consensus emerged between the views of interviewees working across the care and protection system and the literature review.

Aotearoa New Zealand has much work to do in order to improve the care, protection, and wellbeing of children under five. Rates of family violence, sexual violence, neglect, and poverty remain unacceptably high. Inequity remains a pervasive and persistent issue with tamariki Māori, Pasifika children, children in care and children with disabilities shouldering the burden of poor outcomes.

The first five years of a child's life is a critical time of development, which has a lifelong impact on their health and wellbeing. It is also a time of inherent vulnerability with children highly dependent on their caregivers, and with limited ability and opportunity to express their needs, feelings and wishes. This is compounded by the fact that children under five are frequently not prioritised in Aotearoa New Zealand, resulting in them often being invisible within the care and protection system.

This situational analysis identifies the following as key issues impacting the care, protection, and wellbeing of children under five:

- A failure to address the structural drivers of poor outcomes
- Children's lack of visibility and voice during a time of vulnerability
- Lack of support for parents, families and whānau
- A system that is failing to adequately protect and care for children.

Numerous gaps in the current care and protection system that significantly impact children under five years were found. Gaps are evident at every level - system, institution and agency, service and programme, and within the workforce.

Importantly, a number of strengths in the current care and protection system were also identified. These include widespread:

- Recognition of early childhood as a foundational time
- Understanding of the needs of children under five
- Acknowledgement of the importance of Te Tiriti o Waitangi

- Embracing of te ao Māori
- Commitment to ensuring children's voices are heard
- Consensus for how the system should shift and emerging pockets of promising practice
- Infrastructure to create positive change.

This situational analysis found widespread agreement on the solutions required to ensure the care, protection, and wellbeing of children under five in Aotearoa New Zealand. These encompass both immediate actions and longer-term transformational measures:

- **Support parents, family and whānau:** Prioritise maternal mental health, address inequity and toxic stress within families and whānau, and nurture natural support systems.
- **Structural change:** Uphold Te Tiriti o Waitangi and embrace decolonisation and indigenisation.
- **Systems Change for children under five:** Create a system that centres children's needs and wishes, recognises the important role of family and whānau and focuses on place-based and community-led solutions.
- **Cultural Change:** Foster a sense of shared responsibility to care for all children and normalise help-seeking while promoting 'helpful' help-giving. Shift to a "duty to care approach" culture within the care and protection system.

Lastly, Save the Children New Zealand was recognised as having an important role in supporting positive change for children under five. Interviewees identified three important areas of focus for Save the Children New Zealand:

- **A Local Focus: Being of and for Aotearoa** - Interviewees stressed the need for Save the Children New Zealand to elevate its domestic profile and work for children, families, and whānau within Aotearoa New Zealand. Understanding Te Tiriti o Waitangi obligations and embracing Tangata Tiriti responsibilities are noted as vital steps towards becoming genuinely of and for Aotearoa.
- **Advocacy: Creating change for children under five** - Interviewees agreed a key role for Save the Children New Zealand, given their profile and independent position, is advocacy. Interviewees identified several priority areas for advocacy including championing children under five, supporting the transfer of power and resources to Māori and holding the government accountable.

- **Demonstrating sector leadership** - Interviewees strongly encouraged Save the Children New Zealand to take on a leadership role within the sector. By holding a strong focus on systems change, monitoring government actions, and building a coalition for children under five, Save the Children New Zealand can demonstrate sector leadership.

Introduction

The purpose of this situational analysis is to assess the effectiveness of the care and protection system in meeting the needs of children under five in Aotearoa New Zealand.

Aotearoa New Zealand has much work to do in order to improve the care, protection, and wellbeing of young children. Rates of family violence, sexual violence, neglect, and poverty remain unacceptably high. Inequity remains a pervasive and persistent issue with tamariki Māori, Pasifika children, children in care and children with disabilities shouldering the burden of poor outcomes.

The first 5 years of a child's life is a critical time of development, which has a lifelong impact on their health and wellbeing. It is also a time of inherent vulnerability with children highly dependent on their caregivers, and with limited ability and opportunity to express their needs, feelings and wishes. This is compounded by the fact that young children are frequently not prioritised in Aotearoa New Zealand, resulting in them often being invisible within the care and protection systems.

While the drivers of poor wellbeing for children are deeply entrenched in Aotearoa New Zealand's existing structures and systems, and embedded in culture, this situational analysis has identified a number of solutions. These solutions have the potential to immediately improve the care, protection and wellbeing of young children and hold the promise of creating transformational change.

Save the Children New Zealand has a valuable contribution to make within Aotearoa New Zealand and the opportunity to make a meaningful difference in the lives of children under five.

Background

Save the Children New Zealand (SCNZ) has commissioned a Pacific regional child protection situational analysis.

This study complements the recent UNICEF 2021 Situation Analysis of Children in the Pacific by diving deeper into child protection. Findings from this report will feed into a broader child protection situational analysis across five other Pacific countries.

This report has been designed to be read in conjunction with a three-part literature review:

- Part One: The wellbeing of children and young people in Aotearoa New Zealand
- Part Two: How are the children and young people of Aotearoa New Zealand doing and what are the drivers impacting their wellbeing?
- Part Three: Creating transformational change - what would significantly improve the wellbeing of children and young people in Aotearoa New Zealand?

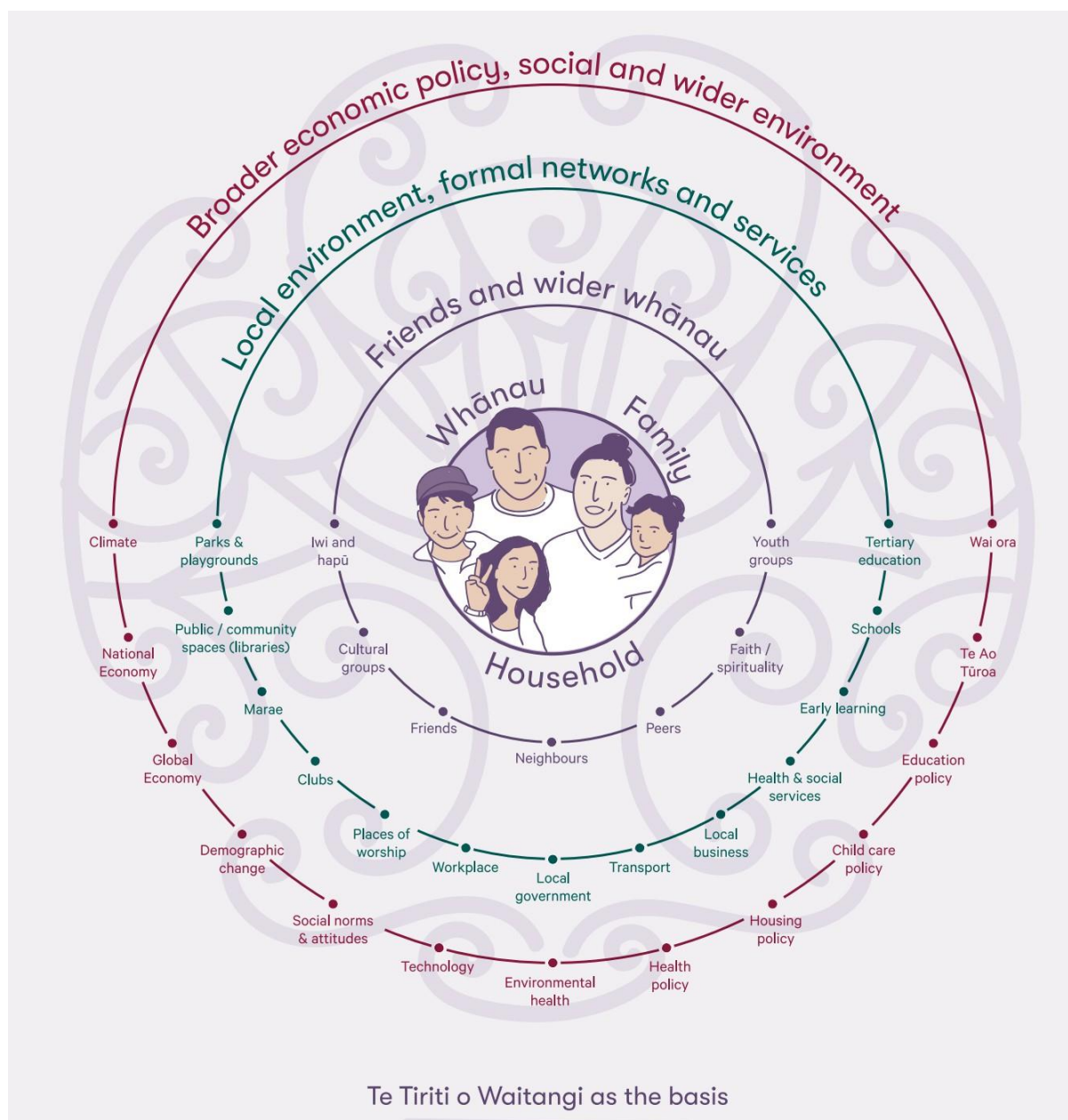
Findings from the literature review and interviews with thirty-five professionals, working across the care and protection system, form the basis of this situational analysis.

This situational analysis seeks to understand within Aotearoa New Zealand:

- The key child protection issues facing children under five
- The gaps and strengths within the current child protection system
- The solutions to improving the care, protection, and wellbeing of children under five
- The role of Save the Children New Zealand.

For the purposes of this situational analysis the care and protection system refers to the ecosystem that surrounds children under five, and their families and whānau, and which impacts their care, protection, and wellbeing.

Figure One: Ecosystem as based on the Child and Youth Wellbeing Strategy



[Hagen et al., 2021, p.6](#)

Methodology

1. Research Objective

The research is designed to assess the effectiveness of the care and protection system in meeting the needs of children under five in Aotearoa New Zealand. It aims to provide insight into how Aotearoa New Zealand might significantly improve outcomes for children under five and, with time, create transformational change.

2. Research Design

2.1 Literature Review

A comprehensive three-part literature review was completed by identifying and analysing relevant academic papers, reports and publications related to the care, protection, and wellbeing of children under five in Aotearoa New Zealand. Key areas of focus included:

- Current statistics relating to the care, protection, and wellbeing of children under five
- The identification and analysis of risk factors faced by children under five
- The exploration of protective factors that contribute to positive outcomes for children under five
- Reports focused on the child protection system by government agencies, non-governmental organisations, and experts
- A review of promising practice and innovative approaches that have the potential to improve or transform outcomes for children under five.

The literature review draws extensively on existing research undertaken by Point, and other agencies, which included the voices of children and whānau. The report privileges kaupapa Māori research and mātauranga Māori.

2.2 Interviews

Following the literature review, semi-structured interviews were conducted with 35 professionals across the care and protection system including within health, justice, education, Oranga Tamariki, community support services, the disability sector, government monitoring agencies, system design, academia, and advocacy groups.

These professionals were selected based on their expertise and experience in advocating for, and responding to the needs, of children under five. The interviews aimed to explore the following key areas:

- Their perceptions and experiences of the strengths and weaknesses of the current care and protection system with regards to children under five
- Identification of care and protection challenges for this specific age group
- Insights into the gaps in the system and potential areas for improvement

- Perspectives on the applicability and feasibility of current recommendations and promising practices in the Aotearoa New Zealand context
- Recommendations for systems, policy and practice changes that could transform outcomes for children under five.

3. Data Analysis

The data collected from the literature review and interviews was analysed using a thematic analysis approach. The themes that emerged from the literature review, as well as the patterns and recurring topics identified in the interviews, were systematically examined. This analysis allowed for a comprehensive understanding of the current state of the care and protection system, its effectiveness in meeting the needs of children under five and solutions to improving the care, protection, and wellbeing of children under five in Aotearoa New Zealand.

4. Ethical Considerations

During the research process, ethical considerations were of utmost importance. Informed consent was obtained from all interview participants, ensuring their anonymity and confidentiality. The research complies with all applicable data protection and privacy regulations. No potential conflicts of interest were disclosed.

5. Limitations

The findings are subject to the available data in the literature and the perspectives provided by the interviewed professionals. The research may not fully capture the experiences of all individuals involved in the care and protection system. Nonetheless, efforts were made to mitigate these limitations by selecting a broad range of interviewees who have worked in or experienced different areas of care and protection or who may have different views.

6. Reporting

This report provides a summary of the literature review findings, the key insights from the interviews and the analysis of data.

What are the key care and protection issues facing children under five?

There are a number of significant challenges to the care and protection of children under five.

A failure to address the structural drivers of poor outcomes: **Poor outcomes for children under five are deeply intertwined with colonisation and intergenerational trauma, racism and discrimination, and poverty and inequity. These drivers severely impact the wellbeing of tamariki Māori, and Pasifika and disabled children.**

Children's lack of visibility and voice during a time of vulnerability: **Children under five are often overlooked and voiceless during a highly vulnerable period of development. The lack of attention and focus on their needs hinders their care, protection, and wellbeing.**

Lack of support for parents, families and whānau: **Providing support to parents, families and whānau is critically important if children are to flourish. Toxic levels of stress, inadequate recognition and support for maternal mental health, and a lack of information and assistance for families with disabled children were identified as significant challenges.**

A system that is failing to adequately protect and care for children: **The current care and protection system inadequately safeguards children under five, leading to serious and sometimes fatal consequences. The failure of the system to intervene puts children at risk, while removing them from their parents, family, and whānau also has severe impacts. Concerns were also expressed about the ongoing harm caused to the safety, wellbeing, and healthy development of children in care, particularly to very young children.**

What are the key care and protection issues facing children under five?

A failure to address the structural drivers of poor outcomes

Colonisation and intergenerational trauma, racism and discrimination, poverty and inequity are interlinked drivers that significantly impact the wellbeing of children under five, and seriously undermine the wellbeing of tamariki Māori, Pasifika and disabled children. There is an urgent need to address the structural drivers that underpin the care, protection, and wellbeing of young children.

Colonisation and Intergenerational Trauma

Colonisation and intergenerational trauma continues to have a deep impact on the wellbeing of tamariki Māori and their whānau ([Mental Health and Wellbeing Commission, 2021](#)). The interviewees believe acknowledging this is critical.

“We have to recognise that at the time of conception, our wāhine and men come with trauma. It is already there, and you can’t put the trauma of colonisation to one side, it is part of that journey.”

There was also agreement amongst interviewees and in the literature, that this historical trauma continues to reverberate through generations, and significantly impact the care, protection, and wellbeing of tamariki Māori. ([Reid and Robson, 2007; Durie, 2012 as cited in Moewaka Barnes & McCreanor, 2019, p.19](#)).

“Children come to the attention of Care and Protection services because of complex issues within families and whānau. They include parent mental health, disability, addictions, and violence, which commonly have a background in intergenerational and personal trauma and of course colonisation and institutional racism impacts on that and on whānau, hapū and iwi going back generations.”

Racism and Discrimination

Racism and discrimination were highlighted as a pervasive influence on children under five by a range of interviewees.

“Pēpi Māori and their whānau are experiencing racism and discrimination.”

Structural barriers, created by racism and discrimination, severely impact Māori and other marginalised groups' access to the supports they need, as well as their experience of services across the care and protection system. Whānau Māori, disabled parents, and other marginalised communities, for example, have a long history of experiencing disproportionate child removals due to systemic racism and judgements about their capacity to parent. Seeking support could put them on a trajectory to having their children removed.

“Because she was a disabled person, she thought, and had the fear, that if she was trying to access support that the system would look at her as being unable to parent, and then that would put her at risk of having her child removed.”

Poverty and Inequity

Poverty and inequity are key drivers of poor child outcomes. Extensive evidence demonstrates the negative impact of poverty on multiple aspects of child wellbeing ([Ministry of Social Development, 2018](#)). The interviewees described the profound impact it has on the ability of families and whānau to provide a good life for their children.

“So, when the government leaves families with insufficient money to live on, parents can't nurture their kids properly. When they have to work three jobs, they can't nurture their kids properly.”

While interviewees acknowledged many families and whānau living in poverty parent well, it is a key risk factor in the maltreatment and/or neglect of children. The compounding impact of living with multiple forms of disadvantage, stress and inequity was noted as severely undermining the care, protection, and wellbeing of children.

“When I think about children who experience sexual violence, it intersects with the other vulnerabilities in our country like housing, poverty, regular food, and stability and all of those things. Safety is not your first priority. Survival is your first priority and some of those things hamper safety.”

Children lack visibility and a voice during a time of vulnerability

Children under five, and in particular the very young, are highly vulnerable as they do not have a voice and lack visibility. They are entirely dependent on adults for their care and protection, and they lack the ability to advocate for themselves or communicate their needs or

experiences effectively. As a result, they are at a higher risk of neglect, abuse, and other adverse experiences, and these can go undetected.

Children under five are often voiceless and invisible to the very systems that could help better support them.

Children under five need to have a care and protection system that is highly responsive and strongly focused on their wellbeing. The interviewees, however, believe that children under five in Aotearoa New Zealand tend not to be seen, valued, or prioritised in law, or by policymakers, service providers, or the public.

“We actually have to see them to start with. I am not sure if we are particularly good at seeing them to be honest. Do you see me, do you hear me? Do you support the people that do hear me and see me? Very rarely do these young children get identified and supported in a way that helps them grow and develop.”

Despite the evidence of vulnerability and harm, interviewees argue there is a failure to invest in supports for young children, which could help better care for and protect them. This lack of visibility, focus and investment¹ is significantly impacting the care and protection of children under five.

“The vast majority of harm, child poverty, violence, neglect, and abuse to children occurs in the first three years of life and yet the vast majority of our investment comes later. Our ability to see the cost of failing to invest in the first three years and turn that into an argument to invest where the greatest return of investment is, is remarkably limited.”

The first five years: a time of critical development and inherent vulnerability

The early years is a critical period of development that has a lifelong influence on children’s health, development, and wellbeing. It is also identified as a time of inherent vulnerability, with children highly dependent on their caregivers and with limited ability or opportunity to express their needs, feelings, or concerns. It is also a time when families and whānau can face a wide range of stressors, such as poor housing and financial stress, that seriously impact wellbeing.

“Zero to five is when the most important physical, mental, emotional, and spiritual development is happening for our little people. And it’s also a time when parents can be under a lot of pressure. And you know what’s happening for children - their home environments, in

¹ The most recent readily available data (2009) found that Aotearoa New Zealand has the poorest child outcome indicator in the OECD and also among the lowest levels of public spending per child ([Every Child Counts, 2011](#)).

fact, their entire ecology, will be impacting on their experience of life and also their ability to grow and develop and trust people.”

Lack of support for parents, families and whānau

A lack of support for parents, families and whānau is severely impacting the care and protection of children under five. Amongst the most important influences on the wellbeing of children under five years are the psychosocial and physical environments provided by parents, caregivers, families and whānau.

Toxic stress inhibits parents, families and whānau ability to care for children. Interviewees describe how many families and whānau are living with high levels of stress, which are impacting their children. The cumulative weight of stressors are often at their highest in the early years (Woodley, 2016). A toxic stress response can occur in children facing strong, frequent, or prolonged adversity, such as abuse, neglect, exposure to violence, or family hardships, without sufficient adult support. This ongoing activation of the stress response can have devastating and lifelong impacts on children, extending into adulthood.

Interviewees spoke of services and agencies failing to provide families and whānau with the supports they need to reduce the weight of stressors, and in some cases adding to stress by making them “jump through hoops” to access services that “do not meet their needs.”

“A family may be struggling with multiple stresses - poverty, mental health, addictions, and insecure housing. They may be struggling to cope and to parent well and safely, and the response is generally to assess them and while they recognise there might be those environmental sorts of stressors, they don't really respond to them. It just increases the stress on the family and it's not actually “helpful” help.”

Lack of recognition and support for maternal mental health and wellbeing

Interviewees pointed out the strong correlation between maternal wellbeing and positive outcomes for children. Despite this, maternal mental health is poorly understood in Aotearoa New Zealand and publicly-funded services are insufficient to meet women's needs ([Walker, 2022](#)).

“Joining the dots, the mum probably had postnatal depression. And it was never diagnosed. It was never picked up, and part of the reason that the children were taken into care was because she wasn't getting out of bed.”

Lack of information and support for parents, family and whānau of disabled children

The lack of financial resources and the absence of affordable supports and services are key risk factors in the wellbeing of disabled children and their carers ([Donald Beasley Institute, 2022](#)).

Interviewees from the disability sector highlighted insufficient information and support for parents, families and whānau as key issues impacting the wellbeing of disabled children. A lack of information was noted as leading to delays in identifying the needs of disabled children. Moreover, the presence of high thresholds and limited services create significant barriers for parents, families and whānau in accessing the necessary help and support for their young children ([Ministry of Health, 2019](#); [Child Poverty Action Group, 2015](#)).

“I think it's very tricky for some parents to recognise what's happening and then it's even trickier for them to find help because they don't necessarily know where to access it or how to engage with it.”

A system that is failing to adequately protect and care for children

The failure of the system to intervene puts children at risk, while removing children from their parents, family and whānau also has severe impacts. The current care and protection system inadequately safeguards and cares for children, leading to serious and sometimes fatal consequences.

The current system is too often failing to protect children

There have been a multitude of reports and reviews that document how the system is failing to protect children. Interviewees highlighted the dire consequences of the system continuing to fail to intervene and protect children, but also noted the lack of support available to keep children safely within the care of parents, family and whānau and the severe impact of taking children into state care. The removal of tamariki Māori is “an act of state violence” that has profoundly harmed whānau, hapū and iwi.

“She reached out for support. She didn't receive any until they were standing in the doorway while she was in labour. What are we saying to that mokopuna about how we see their mum and their whānau and them when we're taking action in that way?”

“It's still a broken system. It's still not right. It's still punitive and it's still damaging for children, the exact people we're trying to protect, make safe and care for.”

The removal of children, while impacting children of all ages, was identified as being particularly significant for children under five, during this period of critical development.

“There are huge risks of all types for children going into foster care and especially when the children are very young. The attachments are severed, and it usually causes parents to spiral downwards, so they're less likely to be able to get their children back.”

Children continue to be harmed while in State care

Abuse in care in Aotearoa New Zealand is a serious, long standing, and as the current Oranga Tamariki data attests², ongoing problem ([Royal Commission of Inquiry, 2020](#)). Surveys of children in care have also found that they fare worse in every area of wellbeing when compared to children who were not in care ([Office of the Children's Commissioner & Oranga Tamariki, 2019](#)).

In addition to referencing the rates of abuse in state care, the interviewees described the detrimental impact of frequent placement changes on children's attachment. For children under five, secure attachment with a caregiver was noted as crucial for healthy development and wellbeing, making this issue particularly critical.

“We're reharmed them. We're not even not doing anything. I think we're causing additional harm. We're revictimising them. The system revictimises them - there's no funding and no resources around supporting them.”

“Movement between homes for any child is like the number one issue. How are they ever supposed to feel secure if they have not had a good attachment? If they have had a rough year in that first year with attachment and then every single year of their life, they still haven't had an example of a secure attachment that sets up their pathway for how they build relationships throughout their entire life.”

² Oranga Tamariki data from July 2021 to June 2022 revealed that 453 children in care (7%) experienced 711 recorded incidents of harm. Tamariki and rangatahi Māori (73%) and girls (48%) were over-represented in these figures. Among those affected, 9% were children under 5 years, although this is likely underestimated due to reporting and recording limitations ([Oranga Tamariki, 2023; Oranga Tamariki Evidence Centre, 2017](#)).

What are the gaps in the current care and protection system?

Interviewees identified numerous gaps in the current care and protection system that significantly impact children under five years. Gaps are evident at every level - system, institution and agency, service and programme, and within the workforce. These include:

At the systems level: Failure to uphold Te Tiriti o Waitangi, a care and protection system that is not adequately responsive to the needs of young children, a justice system approach that fails to meet their needs, a lack of understanding and investment in primary prevention initiatives, the absence of focus and investment in early intervention and long-term healing, and gaps in data and information.

At the institutional and agency level: Significant silos between organisations and transactional interactions with children, families and whānau.

At the service and programme level: Significant gaps exist in tailored services and programmes for children under five, including prevention, early intervention, treatment, and for tamariki Māori, Pasifika children, children from migrant and refugee backgrounds and those with disabilities.

At the workforce level: A lack of a specialist workforce for children and a failure to recognise the skill and demands on frontline workers, coupled with high caseloads, severely compromises workforce capability and capacity.

These findings highlight the urgent need for comprehensive reforms to address these critical gaps in the care and protection system for all children, but particularly for those under five in Aotearoa New Zealand.

What are the gaps in the current care and protection system?

Gaps at a systems level

Interviewees across the care and protection system identified significant systemic issues that seriously undermine the care, protection, and wellbeing of children under five. The system is not upholding Te Tiriti o Waitangi and treats children as if they are independent from their family and whānau. The justice system is not working well, there is a poor understanding of prevention, a lack of investment in the early years, and issues with data and monitoring make it difficult to make informed decisions.

A system that does not uphold Te Tiriti o Waitangi

There was a strong consensus amongst interviewees that the failure of the Crown to uphold Te Tiriti o Waitangi has created a care and protection system that profoundly impacts the wellbeing of tamariki Māori and their whānau, hapū and iwi.

“From a Treaty perspective, Oranga Tamaki thinks it’s upholding the Treaty but the legislation governing it does not, it falls significantly short of actually sharing power with Māori and actually reflecting what the Treaty says. It’s quite a watered-down version of what a Treaty relationship would actually entail because all of the power at every part of the system still lies with the Crown and lies with the state.”

The failure to uphold Te Tiriti can be seen in the shortage of kaupapa Māori services and ongoing issues of limited capacity. This is indicative of the undervaluing of mātauranga Māori and underinvestment in kaupapa Māori approaches ([Barrett et al., 2022](#)).

“If we look at some of the programmes and funding mechanisms around pregnant mums and babies, it is one way. It is an individualistic approach to it. Iwi are trying to do it differently, but they are not getting much funding, they are often having to use their Treaty settlement.”

A system that is not responsive to the needs of children under five years

The tendency of the system to view children as independent from their families and whānau has been highly detrimental to their care, protection, and wellbeing. In addition to being incongruent with te ao Māori, Pasifika and other collectivist cultures’

worldviews, the lack of a whānau-centred focus was also identified as a key driver of disabled children entering care ([Donald Beasley Institute, 2022](#)).

The interviewees observed that despite the importance of caring for the child in the context of the wellbeing of their family and whānau, many services and supports only focus on the child.

“A lot of that starts from a very young age, equipping and working with the family and whānau to make sure that everybody is okay, that everybody is supported and that everybody's needs are being met whilst simultaneously making sure that we are meeting the needs of the child in question. We're not funded to make sure that everyone else is okay, but we have to make sure that everybody else is okay to make sure this child is okay.”

“In my view we have designed a system that requires people to respond to the system. We haven't designed a person response. This essentially means that those people that are less capable of accessing support will miss out.”

A justice system that does not work for children

The justice system plays a critical role in the care and protection of children.

Interviewees working in, and with, the justice system, expressed deep concerns about its effectiveness and impact on children. There is clear agreement that the current justice system is not adequately protecting children and in many instances is contributing to ongoing harm. A justice system that works for children has been identified as a key area of focus by Te Aorerekura - the National Strategy to Eliminate Family Violence and Sexual Violence ([Te Puna Aonui, 2022](#)).

“A lot of women don't even bother going through the family court to get protection or parenting orders because they don't see that as viable in terms of keeping their kids safe. They know that the most likely outcome is that they will end up sharing care. Then they won't be there when their partner is parenting their children. Without them there, that puts the kids at greater risk.”

“We have just had that inquiry into abuse in State care. The next generation's inquiry will be in the Family Court and the way it has put so many children that have been abused back in either the custody or with access to the person that hurt them, without the resolution processes or treatment processes in place.”

The Family Court's protection of children and the justice system's response to children who have experienced sexual violence were noted as areas of particular concern, with examples of very young children being isolated in a room while waiting to give

evidence without food and being extensively cross-examined on evidence given during their preschool years.³

“This six-year-old had two tears running down her face the entire time for the hour and a half that she was cross examined.”

A lack of understanding and investment in prevention

For decades Aotearoa New Zealand has underinvested in the primary prevention⁴ of family and sexual violence. In 2018/19, less than 1.9% of allocated budget by agencies was directed at primary prevention initiatives ([The Joint Venture of the Social Wellbeing Board, 2020](#)). Interviewees working in this area of the system, said there was a lack of understanding of prevention, including the critical role of protective factors.

“In the prevention space our leaders still can’t visualise what prevention is. They don’t really know what it is. We are working with Tākai, ACC and MSD on trying to narrow down into this agreed set of protective factors where if we say we focus on building up these then we will prevent family violence, sexual violence and protect children.”

Lack of focus and investment in early intervention and long-term healing

There is a failure to focus and invest in early intervention. Interviewees point out this lack of investment is overwhelming the care and protection system; severely limiting both its capacity to respond and its capability to do so in a best practice way ([Lambie, 2018](#)). The scale of this can be seen in the number of reports of concerns to Oranga Tamariki. In the 12 months to 31 December 2022, Oranga Tamariki received 67,400 reports of concerns and as a result carried out 36,400 assessments or investigations ([Oranga Tamariki, 2023](#)).

“We have to be responsive to the small stuff really early on and let’s resource the system so that it is able to respond to that small stuff. At the moment we have a system that thresholds virtually everybody. You have got to be serious enough, you have to be harmed enough, you have to be mentally unwell enough. You have to have hit a crisis before we will respond.”

Interviewees also noted that there is a failure to invest in long-term healing. Healing, particularly from trauma, can take time. Supports that are put in place, can also be accompanied by threats to uplift children, compromising their efficacy.

³ A 2021 report released by the Chief Victims Advisor to Government explored cross-examination practices of children who had experienced sexual violence. The study documented pervasive misconceptions about sexual violence, the perpetuating of victim blaming narratives, leading and accusatory cross-examination by defence counsels, which together resulted in heightened distress for child complainants ([Randell, 2021](#)).

⁴ “Primary prevention aims to stop violence before it occurs, for example by promoting respectful, non-violent relationships and changing the social and cultural norms that support violence. It is sometimes called working “upstream” of violence.” ([New Zealand Family Violence Clearinghouse, 2019](#))

“It is investing in the stuff that enables you to go and be where you need to be to heal and the time because so often in the system, we put a timescale on it. We say, you know, if you’re not off drugs by X, or if you have not completed your parenting program by Y, we’ll take your children. None of that can be healing because it comes with an ultimatum.”

There remain ongoing gaps in data and information

Interviewees believe that persistent data and information gaps impede those working across the system, limiting their capacity to make informed decisions or offer effective support to families and whānau. A lack of information on children with disabilities, for example, render many invisible within the care and protection system.

“Oranga Tamariki still don’t know how many disabled kids they have in the system. It is really tricky to get an accurate picture of how we are and aren’t meeting the needs of disabled children, especially little ones, because they don’t know how many there are.”

For issues such as child exploitation, a lack of information has resulted in this issue being poorly understood and as a result not being adequately or effectively addressed.

“We don’t have any numbers and until we have some statistics around it, we’re not going to be doing those other things that we need to be doing to make the biggest difference.”

It is not just about monitoring statistics. In 2019, a watershed moment for the care and protection system in Aotearoa New Zealand resulted in the steep decline in the uplift of babies, in particular pēpi Māori, into state care ([Keddell et al., 2022](#)). One expert used this event to highlight a crucial gap in how the system monitors and assesses the impact of practice change. The reduction in uplifts may not necessarily equate to better support of families and whānau.

“It’s miraculous we’re not bringing children into care anymore but are those children and those families getting help, support and being worked with in ways that are going to change their circumstances? The statistics don’t necessarily show the picture of service, they show how the policy parameters have been shifted. If you are going to delegate responsibility in that way, you need to provide the funding to do it. It is still difficult but asking NGO service providers is often a way of getting a handle on that.”

Gaps at an Institutional and Agency level

A number of critical gaps at an institutional and agency level were identified, including agencies operating in silos, when the needs of

families and whānau are complex, and providing support in a transactional “tick box” way, rather than relational.

Institutions and agencies operate in silos

There is an urgent need for institutions, agencies, and others to shift to an integrated and holistic approach to child protection. The interviewees contrasted the substantial silos evident across the care and protection system with the complex and interlinked needs and issues of children, families and whānau.

“The easiest ones to pick out are Oranga Tamariki and Kainga Ora - so you have housing on one end and child wellbeing on the other yet both of them are massively intertwined. If you have housing instability that creates tension within the house.”

Interviewees believe the current siloed approach creates a lack of accountability and discourages collective action.

“It gets in the way of looking at what children need to be safe. It also allows people and government officials to kind of push it off between departments as to who's really meant to be responsible for this, because they just put a different term around something and then kind of frame that as someone else's problem.”

Transactional interactions with children, families and whānau

Interviewees also identified the failure of agencies and institutions to value and invest in building relationships with children, families and whānau as a critical gap. There was a strong consensus that the current transactional nature of interactions seriously undermines the care, protection, and wellbeing of children.⁵

“Empowering, developing and supporting the practise of whānau centred social work within Oranga Tamariki is something that's still kind of neglected. Instead, it is have you done “this kind of limited area of work” really efficiently? And have you done all the recording? This is often prioritised over have you got a decent relationship with this family? What's really going on? How are they talking to you? Are you talking to them? And are you spending time with them? So, often in changes to policy settings, practise wisdom is lost.”

“It is your responsibility mum and dad, you do it. We are just here to do the assessments and tick the boxes... in regard to really understanding what it means to awhi whānau and awhi children, it is like no I don't think we do that all.”

⁵ The case studies in the solutions section of this report provide detailed examples of relational practice.

A lack of time invested in establishing and maintaining relationships, between social workers and tamariki, caregivers and whānau, or between agencies, has also been identified as a factor impacting the safety and wellbeing of children in care ([Independent Children's Monitor, 2023, p. 9](#)).

Gaps at a service level

Interviewees identified significant gaps in services for children under five, from prevention to identification of needs, intervention, and healing.

Lack of services for children under five

The gap in tailored services for children under five is vast, spanning the continuum from prevention, early intervention, support, treatment, longer term healing and in specialist areas such as sexual violence. Te Puna Aonui recently released a [document of service gaps](#), which includes a focus on children that tangata whenua, communities, specialist sectors and government have identified.

Interviewees identified two areas of particular concern. One relates to the assessment and support for children who witness violence, including child survivors of homicide.

“Very rarely do these children get identified and supported in a way that helps them grow and develop as a relatively normal person.... If you have got a child that has been exposed to violence and homicide, that child should be wrapped around and held really tightly.”

“There are almost no services for children that focus on children's experiences of family violence, and the risks that it creates to children's lives.”

Interviewees from the disability sector identified a substantial service gap for children who are showing signs they need additional support, but who are unable to access services until they are formally diagnosed. This significantly impacts the wellbeing of the child and their family and whānau as carers.

“Things like neurodivergence and autism spectrum disorders start to become really apparent around the age of 2 and 3 years old. It's very hard to get a diagnosis until a child is about 6 years old. A lot of the supports that are available, you can't access them until you have a diagnosis, so there's kind of like a three-year gap where the system has essentially thrown up its hands and gone, oh well, good luck on your own, see you in three years when your child turns 6 years of age. That gap is really important when you are looking at lifelong trajectory because that's the gap that children start actually remembering. It is the stuff that really starts forming a little person's brain but we're not helping in that gap.”

Gaps at a workforce level

Interviewees identified workforce capability and capacity as two critical gaps impacting young children.

Lack of workforce capability

The lack of a specialist workforce for children under five was highlighted by interviewees as a significant gap across the care and protection system. The lack of adequate specialist training available to frontline workers was noted as a key driver of the current workforce capability issues. There is an urgent need to train those working with young children to address their specific needs (including in relation to their physical, emotional and cognitive development), in an age-appropriate way ([Te Puna Aonui, 2021](#)).

“Frontline professionals have not had that training. What is abuse and neglect? How do you recognise it? How do you respond? And it came from there. The first time we did (training) we had 150 frontline workers - Doctors, Nurses, Teachers. The second time we had a coach load of Oranga Tamariki Social Workers.”

“We don't train enough and how we train people is inadequate. Overseas, they have clinical social work training, so they're trained as clinicians, therapists and we are way behind the eight ball, decades, decades, and decades. We need to produce social workers that are therapists or clinicians, currently they're brokers of services.”

Lack of workforce capacity

The lack of recognition of the skill and demands on frontline workers, coupled with high caseloads, was identified by interviewees as significantly impacting the services they could deliver. Unrealistic workloads are also contributing to staff turnover and shortages ([Independent Children's Monitor, 2023](#)).

“It is about cultural understanding, communicating across class barriers, speaking to people in ways they understand, listening to people and engaging with people who don't really want to be engaged with. That is the whole kind of skill set that goes with state social work, that is often a really hidden skill set that people don't really acknowledge or recognise. Developing trust, being honest, providing services that are actually meaningful to whānau that work for them, getting the right people involved with the consent of family. You know those kinds of real services that make a difference can be done but before you do that, you have to develop some sense of trust and respect in what is often a hostile environment and that is really hard work.”

What are the strengths in the current care and protection system?

The current care and protection system exhibits several strengths that lay a strong foundation for improving outcomes for children under five.

Recognition of the importance of early childhood: **There is widespread agreement about the significance of the first five years in children's development for their lifelong health and wellbeing. The focus on this critical period is seen as an opportunity for intergenerational change.**

Understanding of children's needs: **There is a clear understanding that children under five want to be with their family and whānau, and that they thrive when their families have the support and resources necessary to provide them with quality care.**

Emphasis on upholding Te Tiriti o Waitangi: **There is now general acceptance that significant disparities between tamariki Māori and non-Māori are a result of not upholding Te Tiriti o Waitangi. Upholding Te Tiriti is seen as having the potential to transform the care and protection system.**

Embed te ao Māori: **Kaupapa Māori services and mātauranga Māori are recognised as a key strength within the care and protection system, offering a pathway to improve outcomes for all children under five.**

Ensuring children's voices: **Advocacy efforts have resulted in a growing recognition of the importance of children's involvement in policy and programme development. Formal mechanisms are being established to amplify children's voices and include them in decision-making processes.**

Growing consensus and promising practices: **There is an increasing realisation that complex issues cannot be resolved with individualised services alone. Whānau-centred and community-led approaches are gaining traction, focusing**

on the needs, histories, and aspirations of children, families, whānau and communities.

Infrastructure and support: The care and protection system has existing infrastructure, such as legislative frameworks, strategies, action plans and monitoring mechanisms that, if properly utilised, can significantly improve the care and protection of children under five. Good working relationships across the system enable professionals to work collaboratively and deliver positive outcomes.

A strong alignment was found between these identified strengths and the literature review. Together these strengths provide a strong basis to effect significant improvements in the care, protection and wellbeing of young children and their families and whānau.

What are the strengths in the current care and protection system?

The current care and protection system exhibits several strengths that lay a strong foundation for improving outcomes for children under five.

Recognition of the importance of early childhood

There is a strong consensus about the importance of the first five years to a child's development and the lifelong influence this time has on their health and wellbeing.

“There is really good evidence for why we should all be focusing on 0 - 5-year-olds. If we can prevent children being exposed to violence, then we are going to have so many outcomes for those people and the next generation. If we are talking about intergenerational change then that is the place to focus on the 0 - 5 age group.”

“When you look at the evidence around early childhood experiences it has huge implications for the rest of a person's life especially in a disability setting.”

Understanding of children's needs

Interviewees were unanimous that family and whānau are fundamental to the wellbeing of children. There was clear agreement that the best opportunity to ensure the care, protection and wellbeing of children under five is to support their parents, family and whānau ([The Southern Initiative, 2023](#)).

“We need to figure out a way for how we can keep a child within their family unit safely because the evidence shows us that children do better kept in their family unit, and wider whānau.”

“Disposable income makes a massive difference on how equipped parents are to parent, because that sort of thing removes a whole lot of the mental burden. The more resources to restore that material social equilibrium, the better off children are.”

Emphasis on upholding Te Tiriti o Waitangi

There is now general acceptance, across the system, that the significant disparities between tamariki Māori and non-Māori are the result of the failure to uphold Te Tiriti o Waitangi.

The [Waitangi Tribunal claim](#), the [Whānau Ora Commissioning Agency Review](#) and [The Office of the Children's Commissioner Inquiry](#) provide a detailed overview of the devastating impact of Te Tiriti breaches on the care, protection and wellbeing of tamariki Māori, whānau, hapū and iwi. Critically, each of these reports independently arrives at the same imperative: the urgent need to uphold Te Tiriti.

Several interviewees identified Te Tiriti as providing the framework to transform the care and protection system, and outcomes for children under five, particularly tamariki Māori.

"I believe Te Tiriti o Waitangi is the framework to use. It talks about whanaungatanga, it talks about manaakitanga, and it talks about rangatiratanga and those are all relational principles whereas the system is set up for outcomes. Children are not outcomes. We have to start looking at children as relational and relational is about engaging with."

"There has been this idea of transformational change in the child protection system in Aotearoa. The power of iwi and the recognition of Te Tiriti."

Embed te ao Māori

There is a large and growing evidence base that shows the effectiveness of kaupapa Māori approaches and how the reclaiming of mātauranga is fundamental to Māori healing and wellbeing.

Interviewees identified mātauranga Māori and kaupapa Māori approaches as key strengths within the care and protection system and as holding the promise for how Aotearoa New Zealand can transform outcomes for all children.

"If we take a te ao Māori lens, the kupu tamariki comes from the understanding of tama-te-rā Ariki, so child of the divine light and of great chiefly status. So tama-te-rā divine light, child of the light and ariki, great chiefly status. It demonstrates, shows, and reinforces that message that tamariki are already divine, they're already beautiful and special."

"Whānau ora looks at the whole family and what is going on. They provide services for everybody, so that everybody's wellness is actually on a journey together. When you separate a child from his family and provide individualised services, you disconnect them already from the connection with whānau. That has to change."

Ensure children's voices are heard

Interviewees believe that strong advocacy has resulted in a growing acknowledgement of the importance and benefits of children being involved in policy and programme

development. Several interviewees shared examples of formal mechanisms being created across the care and protection system to ensure that predominantly older children and rangatahi have the opportunity to be heard and involved in a meaningful way.

“Child's right based advocacy. We are disrupting the system or rattling the cage by actually going the rights of young people exist.”

“We've got a new expert advisory group for children and young people, and that is made up of some adults who are experts in child participation and some rangatahi. And they're working with us to design how we bring children's voices into the system in new ways and how we create a next action plan that will respond better to children.”

This aligns with Aotearoa New Zealand's obligations as set out in Article 12 of the United Nations Convention on the Rights of the Child (UNCRC).⁶ Organisations such as [VOYCE - Whakarongo Mai](#), who focus on amplifying the voices of children in care, and [Mai World](#), located within the Office of the Children's Commissioner, are modelling good practice engagement with tamariki.

Growing consensus and promising practice

There is an increasing understanding and consensus, across the system, that complex issues will not be solved through programmes for individuals and without addressing the structural drivers that underpin the care, protection, and wellbeing of children.

“I think that people are starting to realise that individualised small amounts of services are not helping anybody, and in fact it is making it worse. We are all trying to support or provide services to the same people but from different lenses or different views of the problem. There is a general agreement that we should be taking a wellbeing approach and a general agreement that we need to see people as holistic beings with all their needs, histories, stories, and aspirations.”

The interviewees identified many examples of promising practice that are emerging and making tangible differences to the wellbeing of children, their families and whānau. These, for the most part, were whānau focused and/or community-led initiatives with a strong focus on place.

“Some of those rich cultural community family-based approaches are really like surfacing now because of the need that they see. And so, it's an exciting space.”

⁶ This article states that all children have the right to have their views heard and for these to be taken seriously ([United Nations, 1989](#)).

“I’ve been involved in a local place-based initiative called the South Auckland Social Wellbeing board, which has thirteen government agencies around the table, including Oranga Tamariki. How do we get all that resource - that could be money, contracts, skill sets, people and workforce, physical environments - closer to what whānau say matters the most to them? What does that mean in terms of intergenerational change? What does that mean in terms of parents who want to be awesome parents and just have no hope of being able to succeed in that because we’re not bringing resources to whānau in ways that whānau say matters to them.”

The literature review found considerable evidence for the benefits of both whānau-centred and community-led approaches to improving the care, protection, and wellbeing of children.

Infrastructure and support

Interviewees believe the existing infrastructure across the care and protection system is a key strength and that, if properly utilised, can significantly improve the care and protection of children. Interviewees identified strategies like [Te Aorerekura](#), entities such as [Te Puna Aonui](#) and [Aroturuki Tamariki | Independent Children’s Monitor](#), [Te Tokotoru](#) framework, the [Oranga Tamariki Action Plan](#), initiatives such as [The Early Years Implementation Learning Platform](#) and universal programmes like [Well Child Tamariki Ora](#) as valuable assets.

“It is a prototype of public sector working so it is trying to help overcome the silos and the vertical accountabilities by creating horizontal interconnections and responsibilities. The unique thing about Te Puna Aonui is that ten chief executives have to operate as one.”

“There is no other country in the world that has a universal Well Child offering. We’ve got this amazing captive audience where we can systematically, universally support whānau and I think that’s incredibly unique and special.”

They also pointed out that data and regular independent monitoring of the safety, care and wellbeing of children was increasingly available, along with mechanisms to regulate and monitor areas of practice, such as social work.

“The Government has plans, legislation, targets, and mandatory annual reporting for child poverty rates so that’s almost unique in the OECD. Treasury has a wellbeing framework. Government is required to have a plan to address and narrow inequities and that’s in legislation so independent of who is in government, the government is required to have a plan for that and to publicly report on progress against those plans. That is unique in the OECD. We’ve got a monitoring framework that should be the envy of other countries.”

The interviewees also believe there are bright spots in collaboration emerging. While some are formal collaborations, others are managing to work around the system in order to get good outcomes.

“Where partnerships happen and where good collaborative stuff happens, which it does, it comes down to individuals on the ground working together. It’s not because of the architecture of the system. It’s sometimes in spite of it because the law doesn’t in any area, relinquish any power from the state to Māori.”

What are the solutions to improving the care, protection, and wellbeing of children under five?

Interviewees outlined a number of solutions. These encompass both immediate actions and longer-term transformative measures.

Support parents, families and whānau: Prioritising maternal mental health, addressing inequity and toxic stress within families and whānau, and nurturing natural support systems were identified by interviewees as key solutions to urgently improving outcomes for young children.

Structural change: Interviewees stressed the need for substantial structural changes to tackle the root causes of care and protection issues. Upholding Te Tiriti o Waitangi and embracing decolonisation and indigenisation were seen as crucial to creating transformative change.

Systems Change: To create a system that protects and cares for children effectively, interviewees advised the system must shift to centre children's needs and wishes and recognise the important role of family and whānau. Place-based and community-led solutions hold the promise for transforming outcomes.

Cultural Change: Interviewees believe fostering a sense of shared responsibility to care for all children is important, along with normalising help-seeking while promoting 'helpful' help-giving. The need for a significant cultural change moving from a "duty of care" to a "duty to care" approach within the care and protection system was also highlighted.

There is a significant body of Aotearoa New Zealand based work to support these solutions. An overview is documented in part three of the literature review.

Together these solutions provide a comprehensive plan for immediate improvement and a pathway for transformational change in the care, protection, and wellbeing of children under five in Aotearoa New Zealand.

Solutions to improving the care, protection and wellbeing of children under five

Providing support to parents, families and whānau, upholding te Tiriti and focusing on systems and cultural changes are likely to lead to flourishing children under five. While there are many bright spots across Aotearoa New Zealand where these changes are already happening, some case studies have been included as examples.

Support parents, families and whānau

The key to ensuring the care, protection and wellbeing of children under five lies in supporting their parents, families and whānau.

“If we want to help those under-fives, we also need to be helping their families and there's no real way around that.”

Interviewees highlighted three fundamental solutions for how Aotearoa New Zealand can better support parents, families and whānau in order to improve the care, protection, and wellbeing of children.

1. A focus from conception on the wellbeing of mothers
2. Address inequity and toxic stress
3. Value and nourish natural supports

Following a roundtable on perinatal and maternal mental health, the [Ahurutia Te Rito I It takes a village](#) project released the following infographic illustrating what is needed in order to make progress.

1. A focus from conception on the wellbeing of mothers
Maternal mental health and wellbeing have been identified as a critically important, yet under-recognised, issues in Aotearoa New Zealand. Early identification, fast access to affordable, culturally appropriate therapeutic support and the strengthening of natural support systems were noted as critical areas of action ([Walker, 2022](#)).

“We have this amazing opportunity to be able to share knowledge around this, to explore worries, to identify what strengths exist within the whānau and reinforce those as being super important and to be able to offer intervention as required.”

Interviewees stressed that inequity and toxic levels of stress must be addressed so parents, families, whānau and communities have the capacity and capability to care for

children. Poverty and housing were noted as two key contributors to toxic stress and also areas where substantial inequities exist.

“It is about investment in policies that lift the income of the poorest 20% of people in our society. There is a lot of ignorance amongst the wider population about what it's like trying to live without enough. If you raised benefit levels by \$100 a week for families that would make a huge difference. There is bigger picture stuff around housing, which is important. There's lots of housing insecurity, and the various dimensions of homelessness, and that impacts on kids.”

“The brain science tells us that you have to destress and remove stressors so that change can start happening.”

Removing any stress factors can help to reduce the cumulative weight of stress on families and whānau, and improve both child and family wellbeing (Woodley, 2016).

3. Value and nourish natural supports

Research suggests the single most important factor for children under five to thrive is stable and responsive relationships ([The Southern Initiative & The Auckland Co-Design Lab, 2017](#)). Interviewees highlighted the importance of supporting nurturing relationships, between children and their parents, family and whānau, to ensuring the care, protection, and wellbeing of children under five.

“Te Aorerekura says we need to be teaching kids how to manage their feelings. Sure, that's a good idea but actually, kids learn how to manage them by being properly nurtured when they're tiny. You don't learn it top down at school, how to manage your feelings. You learn it by having your feelings regulated by that bond with a parent or close adult caregiver. That's what counts.”

“For most whānau these are things that innately come very naturally. I suppose it's giving that permission or offering that evidence to support that natural parenting attachment style, that natural bonding serve and return. Those things that often come really naturally, but actually reinforcing that as - this isn't just a nice to do, you're not just wasting time and you should be getting your washing done, this is the most important thing that you can do to help grown your baby's brain.”

Several interviewees also talked about the need for children, parents, families and whānau to have “a village” of support.

“My take as a Pacific practitioner, is that the village brought with them their own ways of baby rearing. So, Grandma was beautiful in her way, she sang, and Mum did her thing, Uncle did his thing but now we don't get that collective baby rearing.”

“It's this vision of having one thousand supporters around whānau. That call to action is a really different place to start from. The informal supporters and the village around a child, I feel like the focus has to be on that. You have got to be influencing all of the places where people live their lives.”

Activating natural forms of support for parents, families and whānau can help to build this village.

Structural change: Uphold Te Tiriti, Indigenise | Decolonise

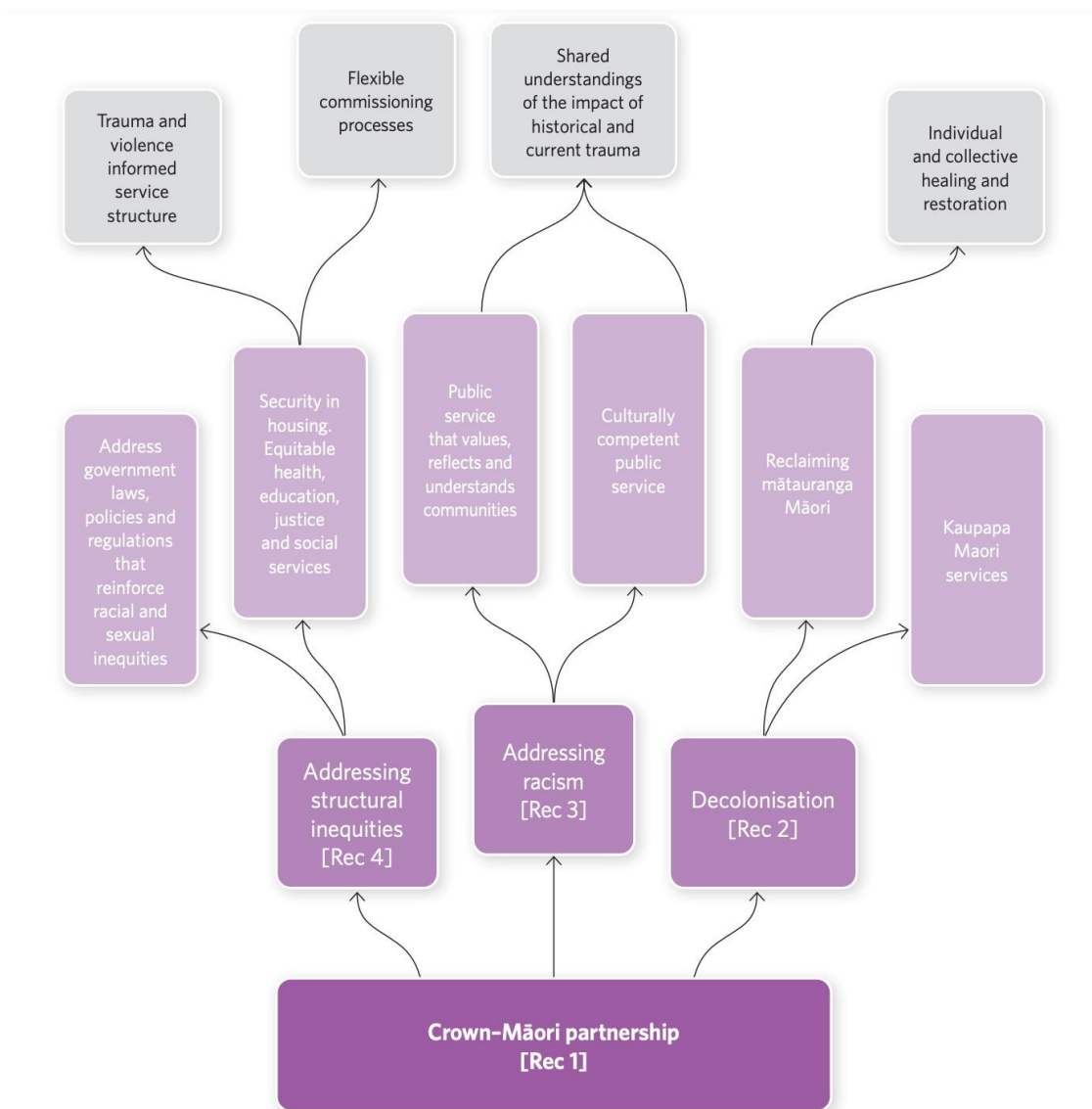
Interviewees identified the need for substantial structural change in order to address the drivers of care and protection issues for children under five.

“The origins have roots in personal intergenerational trauma, colonisation and racism, so the solutions obviously rely on reversing those long-term underlying causes.”

Two critical areas for structural change were identified through the interview process:

- Uphold Te Tiriti o Waitangi
- Decolonise | Indigenise

The [Family Violence Death Review Committee \(2020\)](#) uses a complexity approach to identify structural changes required to address family violence. The Crown-Māori partnership (as created by Te Tiriti) and decolonisation were two key areas of recommendations.



[Family Violence Death Review Committee, 2020, p.88](#)

Uphold Te Tiriti o Waitangi

The need to uphold Te Tiriti and Māori rights to tino rangatiratanga is fundamental to transforming outcomes for tamariki Māori, whānau, hapū and iwi. Māori health and wellbeing are intrinsically linked to self-determination. This places 'tino rangatiratanga' and upholding Te Tiriti as critical principles of healing for Māori from the ongoing trauma of colonisation ([Pihama et al., 2019](#)).

“Put tino rangatiratanga into the law. Tino rangatiratanga is the cornerstone of the Treaty relationship and it's not there at all. It's not mentioned once in the legislation, despite the legislation being updated to ostensibly reflect Treaty obligations. It reflects a version of those

obligations where it says it's all about partnerships, but without tino rangatiratanga, there is no power sharing.”

Upholding Te Tiriti will require a significant shift in power, control, and resourcing to iwi Māori. Several interviewees noted that a reluctance to relinquish power was evident across the care and protection system.

“There's still a long way to go to make that a reality, and that involves some really significant shifts for Pākehā New Zealand and for the traditional child protection system.”

Decolonise | Indigenise

Mātauranga Māori was also identified by interviewees as a key strength within the system. Embedding mātauranga Māori by decolonising and indigenising the care and protection system was identified as critical to creating transformation change for children.

While decolonisation is about dismantling colonial power and racism, indigenisation starts with Māori aspirations ([Ira Aotearoa, 2023](#)) and focuses on what is possible through tino rangatiratanga ([Hoskins & Jones, 2022](#)) - a care and protection system for tamariki and their whānau grounded in tikanga Māori and te ao Māori values.

“Decolonisation of the Child Protection system is the only way to solve the issue really from a Māori perspective for Māori children and families. And so that's kind of taking power away from the State and returning it to Māori communities.”

“Māori ways of doing advocacy, it's negating the need for Oranga Tamariki to be overtly involved, rather their role is to pay for the flights, to pay for the food. And we'll make everything else happen. We're trying to reindigenise, reconnect this mokopuna back to their whānau.”

Several interviewees highlighted the need to recognise both the complexity of this challenge and that healing the trauma caused by colonisation will take generations. Structural change was noted as requiring long-term vision with significant political will and ongoing cross-party support and resourcing.

“I am very committed to the idea of for-Māori-by-Māori services, but it's not just all about culture and people will look after their own and everything will be fine. It's a bit more complicated than that because you have got a whole history of colonisation, oppression and economic inequality and a whole lot of tangled up issues that are going to take a few generations to untangle. That doesn't mean the idea isn't a good idea. It just means we can't treat it as something easy to do because it is not.”

Case Study: Tūpuna Parenting

[Tūpuna parenting](#) is a movement focused on decolonising and reclaiming traditional Māori ways of parenting. Tūpuna Parenting is grounded in mātauranga Māori using mātauranga-a-whānau (whānau knowledge), pūrākau (oral histories), waiata oriori (lullabies) and whakataukī (proverbs).

Tūpuna Parenting has two pou - pēpi are born tapu and pēpi are born with mana. Together these provide the foundations for Māori parenting - acknowledging the mana of children by respecting their needs and ensuring they have a voice within whānau.

A key part of the movement is the Ngākau Aroha parenting programme, which has been designed to teach the Tūpuna Parenting mātauranga to kaimahi supporting whānau Māori. Ngākau Aroha is focused on reclaiming whakapapa, breaking stereotypes, and inspiring change ([Tūpuna Parenting, 2023](#)).

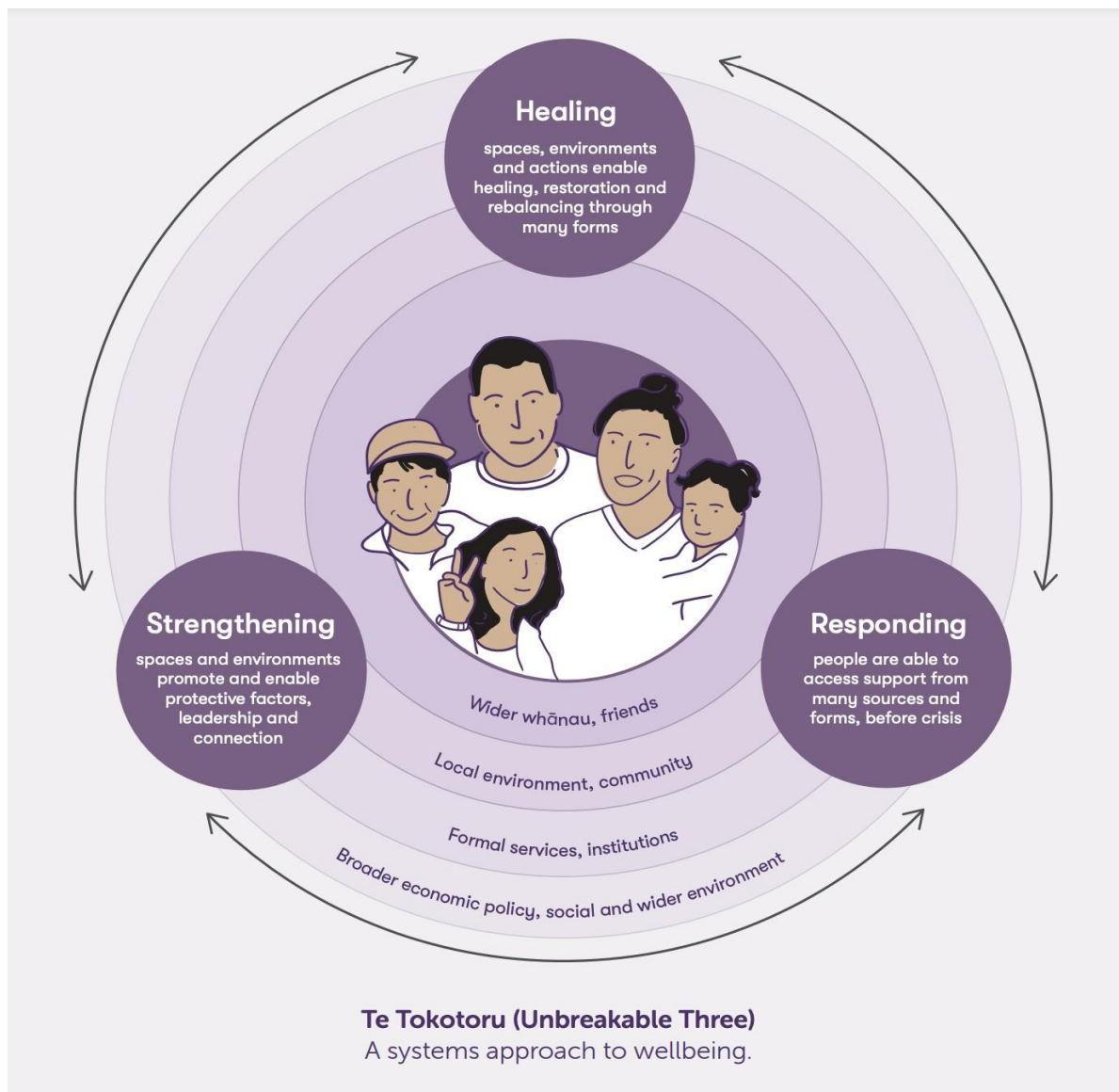
I'm not trying to unpick your cultural bias. I'm actually just trying to reteach you history to undo a stereotype that you may not even think you hold. To normalise that Māori tūpuna didn't smack, they didn't yell at their kids in anger, didn't insult them because they didn't want to damage their tapu or diminish their mana that they were born with."

Systems Change for children under five

Interviewees highlighted the urgent need for a strong focus on systems change. Three key areas of systems change were identified through the interview process:

1. A system that upholds and protects the mana of children
2. A system that centres the wishes and needs of children
3. A focus on place-based and community-led solutions

[Te Tokotoru](#), a guide to support a systems approach to wellbeing, identifies three interconnected dimensions - healing, strengthening, and responding - that need to be active at the same time to create the conditions of wellbeing for people, whānau and communities.



[Hagen et al., 2021, p.3](#)

Case Study: Te Tokotoru and Wellbeing in the first 1000 days

The following table uses Te Tokotoru as a lens to consider how policy and services could be used to support the wellbeing of children in the first 1000 days.

	Strengthening	Healing	Responding
Policy & wider Environment	Further embedding of mātauranga, and models of wellbeing that build on cultural constructs within policy frameworks. Policies that support parents and whānau to build positive early attachment (e.g., paid parental leave and parental leave for Dads)	Strategy and policy that prioritise tangata whenua leadership and opportunities for sharing power with whānau. Policies and interventions that focus on healing and supporting whānau as part of child development, e.g., whānau support pre-post birth, taking an intergenerational lens	Resources, efforts, system capabilities and indicators are re-orientated to what whānau tell us will make the difference, for example positive relationships and building social capital. Policies that strengthen community and whānau-led responses including culturally grounded and natural responses.
Formal services	Engagement starts with aspiration and building capacity, parents are recognised as having natural capacity. Opportunities for social connection are prioritised. Recognition that pregnancy and birth is a time whānau are motivated towards change.	Social and health sites are safe places for interaction and actively promote positive identity and cultural connection, they are not a point of re-traumatising, reducing parental stress is prioritised. Indicators are localised—shifted to what matters, developed with families.	Whānau-led responses are supported on par with specialist services. Customary parenting practices are visible, acknowledged and supported. Engagement with services is possible when families recognise they need it, criteria isn't the barrier to support.

[Hagen et al., 2021, p.8](#)

A system that upholds and protects the mana of children

Interviewees highlighted the importance of children having a voice and the need to engage parents, family and whānau to ensure the voice of children under five is heard. This strongly aligns with te ao Māori.

“One big shift would be for us to truly recognise our responsibility to see children as part of the conversation and not just a recipient of it. It might seem like a small thing but when you're recognising little Tamati sitting here as well as grandpa, it does shift the way you work and practise.”

“There's no getting around that those children's parents are the ones who actually understand their voices, their views, and their needs. It's their grandparents and their aunts and uncles and families and their teachers and all the people around them. But it's adults who understand the voices of those under-fives the best. I don't know if there is a way to hear the voices of under-fives well, without hearing the voices of their families.”

Creating a care and protection system that upholds and protects the mana of children under five aligns with both Article 12⁷ and Article 5⁸ of the United Nations Convention on the Rights of the Child. While Article 12 enshrines the fundamental right of children to have a voice, Article 5 recognises the crucial role of family and whānau for children under five. The interaction between these two articles demonstrates how Aotearoa New Zealand can uphold and protect the mana of children.

A system that centres the wishes and needs of children

Interviewees are clear that the care and protection system needs to be designed with children's wishes and needs at the centre. Even very young children can articulate their desire to be with their family and whānau and for their family and whānau to have what they need in order to provide them with good care. For tamariki Māori, the system must recognise that care and protection means being with whānau, hapū and iwi.

“And as we know, most children don't want to get their parents into trouble, they love their parents, even if they've been abusive to them, and they don't want them to go to jail. They just want the abuse to stop, so we as a team of adults need to work out how to deliver that for the child and only take away their parents in really unsafe situations and then rehabilitate the parents as much as we can, while keeping the child in contact with them in a safe way.”

⁷ Article 12 of the United Nations Convention on the Rights of the Child. This article states that all children have the right to have their views heard and for these to be taken seriously ([United Nations, 1989](#)).

⁸ Article 5 of the UNCRC recognises the responsibilities and rights of parents, extended family and/or community to children in a manner consistent with their evolving capacities ([United Nations, 1989](#)).

“We also need to think about the concept of safety for mokopuna means them not being separated from their whānau, hapu or iwi or their community.”

A system that is highly responsive and focused on effective early intervention Interviewees stated that during this time of critical development and inherent vulnerability, children under five need a care and protection system that is highly responsive and strongly focused on effective early intervention.

“We need to over invest in them. I know that if we had intervened at the time and spent fifty grand, then we would not be spending \$150,000, years from now.”

The literature review strongly supports this. The case study of Mana Whānau (see below) demonstrates that a strong focus on early intervention can keep most children in or on the edge of care, safely with family and whānau. This has the flow on effect of creating capacity in the care and protection system for the small percentage of children, families and whānau (11% in the case of Mana Whānau) that will require further intervention.

Interviewees believe anyone interacting with children must be upskilled to ensure they understand their needs and can respond appropriately. This must be coupled with a highly skilled specialist workforce that can provide children, families and whānau the right care and support.

“We need a really big capability in the workforce, so we know how to focus on children and how to intervene on their behalf.”

“We talk about workforce training around child protection but for me it’s nearly always that heart connection, that sense of taking pressure off and offering a reassuring space to allow the whānau to problem solve together.”

Case Study: Mana Whānau

Mana Whānau is a six-month, intensive (up to 65 hours per week), in-home parenting support programme developed by Lifewise. The programme is designed to keep tamariki who are on the edge of care, or have been removed by Oranga Tamariki, safely living within their own whānau and communities.

The programme is based on a theory of change which contends that reducing toxic stressors can free up the mental bandwidth required for parents to care for their tamariki effectively and, where necessary, build new skills and capabilities.

Mana Whānau is an authentically whānau-led process with the identification of stressors, goals, pathways, priorities, work, and the pace of that work, determined by whānau.

In the two years to July 2020, a total of 44 whānau with 139 tamariki started the programme. Thirty-nine of the 44 whānau (89%) retained or had their tamariki returned; with 130 tamariki (94%) now living safely together with their parents ([Woodley, 2020](#)).

Mana Whānau shows that care and protection can be done differently, safely, and positively impact the wellbeing of children, families and whānau. Mana Whānau demonstrates how a strong focus on early intervention has the flow on effect of creating capacity in the care and protection system. For the small percentage of children, families and whānau that will require further intervention, 11% in the case of Mana Whānau, the system has more capacity to intervene in a way that minimises further trauma and supports safety, care, recovery and healing.

“Imagine if all parents who needed it got the support they needed. I now know I wasn’t a bad parent - my mum probably wasn’t either. We were just parents who needed help. In our family, taking kids off their parents stops here and now. No more. It is going to stop with us.”

A parent from Mana Whānau as cited in [Woodley, 2020, p.2](#)

Place-based and community-led solutions

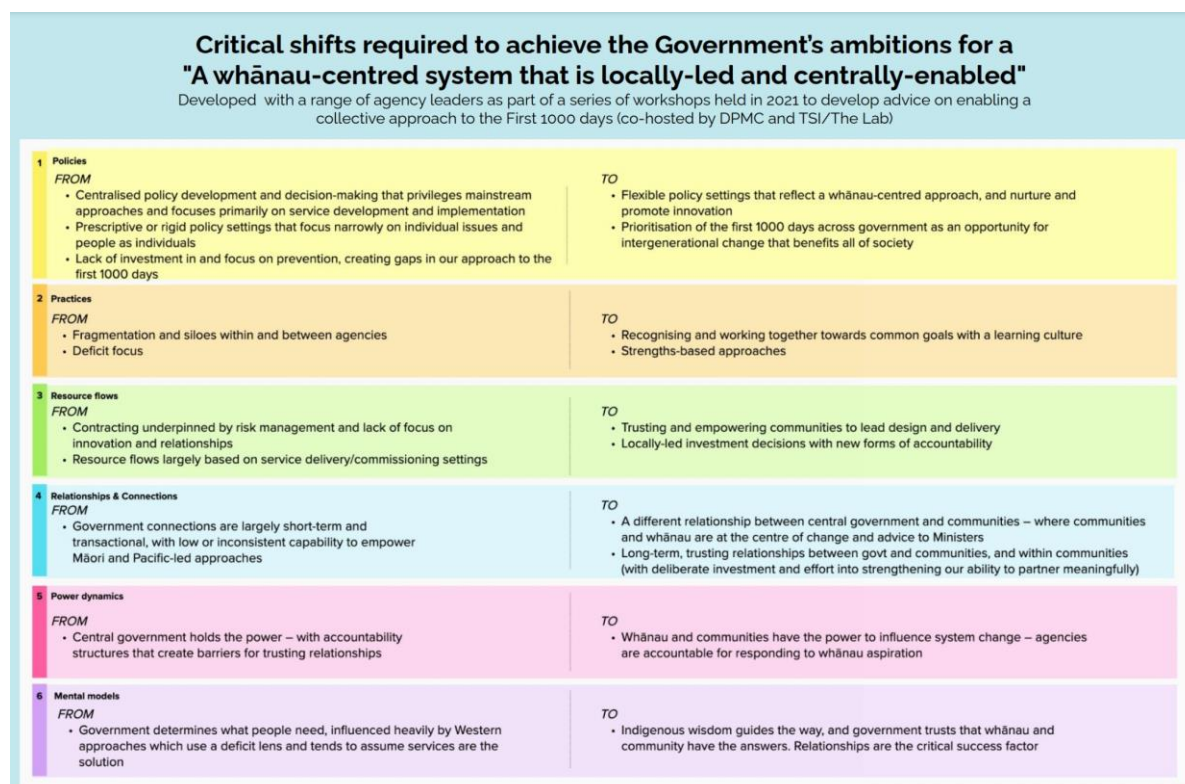
Place-based and community-led solutions were recognised as holding the promise for transforming outcomes with communities seen as well placed to lead.

“Seeing people in there like them and having people that have walked it themselves makes such a difference. The energy and the difference it makes is quite astounding. If you walk into a community organisation that has people there that have also walked that journey and who understand, aren't going to let you get off with anything, but understand where you're coming from and what you have gone through. The trust is established straight away, and the barriers will start to come down quicker.”

Interviewees believe a key way the government can help enable place-based and community-led solutions is through the adoption of flexible, supportive, and high trust contracting.

“Where are these people who you know are the salt of the earth, the ahikā? The people who are not going anywhere, who are the glue of their community. How do we support their growth or ability to lean in? What I love about the whanaungatanga model of funding is that they have intentionally evolved their whole process of grant making so that it can actually work for people like them, not just your NGO's that say I've done a literature review and now I'm going to do this project because the evidence tells me that it's the right thing to do. This is what it looks like to invest into community and into place.”

The following infographic summarises critical system shifts required to best meet the needs of children in the first 1000 days.



[The Southern Initiative & The Auckland Co-Design Lab, 2023, p.7](#)

Cultural Change

Interviewees stressed that transformational change for children under five in Aotearoa New Zealand will also require significant shifts in our culture. Three key shifts identified were:

- A responsibility to care for all children
- Help-seeking and help-giving are normalised and encouraged
- A duty to care approach within the care and protection system.

A responsibility to care for all children

Interviewees believe a critical cultural shift is creating a shared sense of responsibility in Aotearoa New Zealand to care for all children. This would involve a significant shift in the social norms around our sense of community responsibility we all have to each other (Lambie, 2018), and where “each adult had a responsibility to care for all children” ([Jenkins & Harte, 2011, p.23](#)).

“I come back to another Māori lens of care, I really wish that all of our babies knew how much they were loved and loved by someone that loved them unconditionally.”

“People need to know that stuff too, so that they do watch children. As many eyes on children as there can be.”

Help-seeking and help-giving are normalised and encouraged

Normalising and encouraging help-seeking and help-giving was identified by interviewees as another key area of cultural change. The willingness of family, whānau, friends and neighbours to engage with people facing, or creating, relationship and parenting challenges, is a critical barrier that needs to be addressed. Given their vital role, the upskilling and support of family, whānau, friends and community members is identified as a significant opportunity to ensure that all help provided is effective ([Metzger & Woodley, 2010](#)).

“We have a culture that means that it's very difficult for people to ask for help and we need to make it OK for people to ask for help because parenting is bloody hard, life is hard and people need to be able to reach out for help and support when they need it and not be judged for it.”

“Most people don't get to specialist services, they don't make their way to a refuge, a rape crisis centre. They go to their friends, neighbours, colleagues, and church to ask for help. We need to activate those ecologies of support because they are the natural places where people want to get help.”

A “duty to care” approach

The system's prevailing transactional nature when interacting with families and whānau and lack of responsiveness to the needs of children under five were identified as clear indications for the need for culture change.

“The organisational culture of the statutory care and protection system needs to support parents and whānau to care for their own pēpi.”

“I think that's a really hard thing for us as professionals, it's about power and us giving the power back to whānau and to community.”

Interviewees described the need to shift from a ‘duty of care’ - a legal obligation to ensure the safety or wellbeing of others, to a ‘duty **to** care approach,’ which describes our relational obligations to each other. Interviewees envisioned a culture within the care and protection system that was relational, strengths based, whānau-centred and whānau-led. This shift in culture would result in significant shifts in how services are delivered and practised.

“To build this beautifully affirming relationship with because that gives rise to safety. And that's what children say really clearly, it's the person that makes them feel good, that they look forward to spending time with, that they feel safe enough to say anything to.”

“Identifying as early as possible, whānau that are experiencing those really high levels of stresses and (a) not adding more stress to them, (b) helping make sure they've got the resources to support them, the time and the deep breath space, along with the lack of burden to actually work through that together.”

Kaupapa Māori organisations were identified by the [Family Violence Death Review Committee \(2022\)](#) as leading the way with their “duty to care” approach to service delivery and practice.

Case study: Whānau Ora

Te Kupenga provides a range of health and social services for whānau in Hawkes Bay. In a recent case study of their role as a Whānau Ora provider they shared the following:

“Our karanga to all whānau who come in search of support is “Every door is the right door.” What does that mean? For us this means that no matter what has brought you to our door (organisation), we will support you to find the best pathway that suits you. We have no judgement and no agenda.

Our goal is to guide whānau towards achieving their goals. When working with whānau, it is important to us that we walk the full journey with our whānau. They are not a parcel to hand around from service to service, or agency to agency. The key here is that once whānau are able to continue independently on their journey, we will stay with them to ensure they sustain their independence. We don’t leave them. Why? Because we have seen so many of our whānau come upon tough times, hit bottom, rise again, and then hit the repeat button. It takes generations of support and change in order to mend generational trauma and suffering. We become a part of the “Village.”

Whānau Ora Commissioning Agency, 2021, p.7

In the 2019 review of Whānau Ora for Te Puni Kōkiri the following case study about the role of the Navigator/Kaiārahi was shared:

“I had a case of violence at home. A friend of mine introduced me to a Whānau Ora navigator. My navigator made it really easy to talk about things you don’t want to talk about. The father of my children went to jail and Oranga Tamariki got involved. Oranga Tamariki said my kids shouldn’t be with me. I said to my navigator, ‘This is what is going on; what do I do? People are trying to take my children away.’ My navigator said ‘No, we can deal with this.’ Just like that she took it all in and came up with some solutions.”

Mother

“This case came through at Christmas time. I talked to Oranga Tamariki, they tried to tell me what to do, but I know the process. Just like that, on the same day, Oranga Tamariki dropped the case. After all that uncertainty. I helped the father, who was in prison... I had to work with the Court to lift his bail conditions first, so he could attend. He hadn’t seen his kids for six months, so I got the lawyer to approve supervised visits. The Court said that was ok as long as I would supervise the visit. So, every fortnight, Sunday afternoon, I travel with the whānau for a supervised visit.” Whānau Ora Navigator

[Independent Whānau Ora Review Panel, 2018, p. 44](#)

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