



Proactive Release

Submissions on the Child and Youth Wellbeing Strategy

August 2019

The Department of the Prime Minister and Cabinet has released the following submission received during its public consultation on the child and youth wellbeing strategy.

Some of the information contained within this release is considered to not be appropriate to release and, if requested, would be withheld under the Official Information Act 1982 (the Act).

- Where this is the case, the information has been withheld, and the relevant section of the Act that would apply, has been identified.
- Where information has been withheld, no public interest has been identified that would outweigh the reasons for withholding it.

Key to redaction codes and their reference to sections of the Act:

- **9(2)a** – Section 9(2)(a): to protect the privacy of natural persons, including deceased people.

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Child and Youth Wellbeing Strategy – Submission Template

This document is intended for individuals or groups who wish to make a formal submission on the child and youth wellbeing strategy.

Please complete this template and email it to: childandyouthwellbeing@dpmc.govt.nz

A guide to making a submission is available on the DPMC website <https://dpmc.govt.nz/our-programmes/child-and-youth-wellbeing-strategy>

Submissions will close on **Wednesday 5 December**.

Please provide details for a contact person in case we have some follow up questions.

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Organisation Name:	Otago Polytechnic, School of Nursing
Organisation description: (tell us about your organisation – i.e. who do you represent? How many members do you have? Are you a local or national organisation?)	Otago Polytechnic a leading tertiary education institution delivering high quality, career-focused education with some of the best student achievement and satisfaction results in New Zealand. With three campuses, 7,200+ students and approximately 674 members of staff, we have New Zealand covered! You'll find our main campus in the heart of Dunedin and we have a boutique campus in stunning Central Otago and an international campus in New Zealand's largest city, Auckland. This submission is on behalf of the School of Nursing within the Dunedin Campus of Otago Polytechnic.

Executive Summary:

(Please provide a short summary of the key points of your Submission - 200 words)

In summary, we appreciated the huge amount of work and vision that has gone into creating the draft child and youth wellbeing strategy and we fully endorse it's inception.

We are advocates of equitable and affordable access to services for all children and young people. To ensure this becomes a reality, we are recommending increased funding for community and school based nursing roles to help deliver targets set within the strategy framework. We need to start taking services to the people in the communities in which they live and employ increased numbers of health practitioners where they are visible and accessible for all.

Reducing funding competition and creating interagency hubs to promote collaboration between health, education and social services is also recommended to assist in reducing poverty, improving housing and overall wellbeing for our children and young people. Finally, recognising the unique perspective and invaluable work that our midwives, well child nurses and early childhood education teachers currently do and expanding funding to allow them to work with at risk families is crucial.

Submission Content

Overall we would like to commend DPMC on their robust engagement processes to date and we appreciate the vision, and presentation of a holistic model that sets the scene of inclusion of all children and young people in New Zealand, with an emphasis on prevention.

Proposed outcomes framework feedback:

Focus area 6: Needs to reflect strategies for ensuring equitable and affordable access to health, education and support services. Expansion of Nurse Practitioner(NP) roles in rural communities should be considered as a viable option to create equal access opportunities for all children and young people and their families. The scope of NP roles could include community based clinics offered free to all children and young people (and their families), run as a drop in service supported by local health, education and support services. It would include scope for robust assessments, triage and timely referral processes. This would provide more equitable and affordable access for all and help to address our large DNA rates in centralized outpatient clinics.

Focus area 6: We are strong advocates of nurses in schools, and international evidence demonstrates positive outcomes for children and young people where nurses in schools exist. Whilst we support school nursing roles being introduced to low decile schools, we are neglecting opportunities for equal access to healthcare and support services for ALL children and young people by not having nurses in ALL schools. It would be our recommendation to provide funding to expand these roles to all New Zealand schools rather than a referral system to a public health nurse only when a need arises. These school nursing roles could arguably assist with key elements of ALL focus areas within the strategy and could be a conjugate to facilitating interagency approaches for at risk children, young people and their families. These roles would also provide health promotion and preventative work for building resilience and reducing effects of anxiety. Teaching children and young children mindfulness for example, has proven benefits, as does learning how to breathe and how to sleep.

Focus area 12: Children and young people with emerging mental health needs require immediate intervention not just identification. Currently there is a severe lack of primary care services for this group of children and young people and they need to exhibit moderate to severe needs to be seen quickly. This causes those with mild to moderate needs to deteriorate and risk developing greater problems. Brief intervention models such as on site school nursing or visiting NP roles in ALL schools, would significantly reduce this risk.

Focus area 14: There is significant and mounting evidence supporting the thinking that the early childhood period is essential to the future wellbeing of an individual and we are pleased to see such an emphasis on the early years throughout the strategy. To strengthen this focus area, there needs to be more emphasis placed on this period of a child's life. One of the most essential things here is support for parents, such as paid parental leave for a significant amount of time for mothers and fathers. Parents need to be free to raise children in an environment where they are supported and free from financial

constraints. We would also recommend free ante-natal and post-natal courses along with a focus to fund and support community lead initiatives related to parenting, domestic violence, mental wellbeing and resiliency for example.

Focus area 3: In part this focus area refers to protecting children online. This also needs to be reflected more throughout the document. We are yet to know the true impact of a childhood being online however anecdotal evidence suggests this needs to be monitored and explored further. One aspect that could be expanded is the positive benefits in extending valuable health, education and support service information and health promotion and prevention messages to children and young people online. This could be created and owned by children and young people themselves through youth councils for instance.

Focus areas 14, 15 and 16 need to have more emphasis on the invaluable role of the Early Childhood Teacher in providing children with quality early education that sets them up for life. Early screening, identification, assessments and intervention of children who have identified learning needs in the early childhood phase should be free and offer ongoing support throughout their schooling life.

Focus area 11: Children and young people with intellectual disabilities need to be supported adequately throughout their lifespan and supported to live their best life. They need increased support during their transition to adult services that are appropriate for their needs.

Overall feedback:

We all agree that the vision, and 5 wellbeing domains seem appropriate. We would like to see more emphasis placed on the 'development' domain as we see that resilience, emotional strength, communication skills and the ability to learn through play is essential throughout the development domain. These core attributes also link strongly across all 16 focus areas and we would encourage the use of these terms emphasised throughout.

The seven principles are appropriate and we especially like the references and emphasis on our commitment to the UNCROC.

We would like to see competition for funding of essential services particularly NGOs and Well Child Services cease with more collaborative approaches to these services adopted. Creation of community hubs that co-locate health, education and support services as drop in centres free of charge to help strengthen community resilience and help to identify at risk children, young people and their families would be a great approach.

Recognize the unique opportunities midwives have to visit people in their own homes and identify at risk families. Expansion of post natal follow up to 3 months and introduction of joint visiting with Well Child services in order to provide hand over from provider to provider would be a great initiative. An increase of funding for home visits for rural and at risk communities is required to prevent loss of children to follow up as centralized clinic based services are not equitable and accessible for all.

Please note that your submission will become official information. This means that the Department of the Prime Minister and Cabinet may be required to release all or part of the information contained in your submission in response to a request under the Official Information Act 1982.

The Department of the Prime Minister and Cabinet may withhold all or parts of your submission if it is necessary to protect your privacy or if it has been supplied subject to an obligation of confidence.

Please tell us if you don't want all or specific parts of your submission released, and the reasons why. Your views will be taken into account in deciding whether to withhold or release any information requested under the Official Information Act and in deciding if, and how, to refer to your submission in any possible subsequent paper prepared by the Department.