



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.

An external party holds copyright on this material and therefore its re-use cannot be licensed by the Department of the Prime Minister and Cabinet.

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.

| | |
|--|---|
| Contact Name: | Susannah Stevens |
| Email Address: | susannah.stevens@canterbury.ac.nz |
| Phone Number: | 9(2) (a) |
| Organisation Name: | Child Well-being Research Institute; University of Canterbury |
| 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?) | <p>We are a newly launched, cutting-edge Institute that brings together researchers across disciplines with the goal to advance knowledge in children’s well-being. We are committed to the philosophies of Vision Mātauranga, and the use of culturally responsive research practices, with particular regard to the needs of Māori and Pasifika communities. We have kairahi in Māori and Pasifika research methodologies who work with all of our researchers. Our Institute is co-directed, led and managed by some of the finest researchers and academics in their respective fields. Our two co-directors consist of one of New Zealand’s most respected Māori professors, and the Pro-Vice chancellor of the College of Education, Health, and Human Development. Our project manager is a nationally and internationally recognised expert in physical education and physical activity. In addition, we have cross-theme specialist professors in collaborative research and e-learning available to support any research project that may be undertaken under our banner. Many of our theme leaders and teams hold prestigious researching and teaching awards.</p> <p>Together we comprise these four co-dependent themes:</p> <ul style="list-style-type: none"> • Learning success • Nutrition and physical well-being • Social and emotional well-being • Child population health and well-being <p>It is the interplay of these themes that creates a unique point of difference, and our axiom ‘<i>Whiriwhiria, kia ora ai te tamaiti</i>’ <i>Braiding education and health together so the child will flourish</i>’ illustrates our dedication to work in both collaborative and multidisciplinary means.</p> |

Executive Summary:

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

The report has been separated into 7 sections. These sections are:

Section I: Strategy in its entirety.

Section II: Working definitions.

Section III: The framework.

Section IV: Appendices.

Section V: Possible inclusions or exclusions.

Section VI: Measurement or reporting of child wellbeing.

Section VII: Concluding Remarks.

The report has been written as a positive, strengths-based critical response with some ideas for consideration for the development and refinement of the document. We are very supportive of the policy, the strategic framework and the work achieved to date.

Overall, we identified that the strategy is meritorious with its philosophy and intent. The framework could be further enhanced with a review targeted at achieving greater internal coherence. Ensuring consistency in language and connecting concepts could achieve this. In particular the areas within this report that we believe would progress the strategy would be;

- Achieving a more consistent working definition of holism (this would prevent the slippage into silo thinking) (see 4 & 5)
- Avoiding using the terms health and wellbeing interchangeably, as this could lead to messiness and confusion (see 5.1.)
- Greater acknowledgement of Māori wellbeing conceptions and implementation at the philosophical level (see 8)
- Acknowledgement that “a flourishing individual and collective life” is the ultimate goal of a wellbeing strategy (see 12.1)
- Giving more acknowledgement to some of the very important wellbeing constructs that acknowledge the whole body (see 14).
- Giving consideration to the access of nutrition (see 15).

Please see the attached PDF report for further detail.

Submission Content

As we began the review prior to the template being offered, please accept the PDF attachment that is separate from this template in place of submission content. We would like to thank the office of the Minister for Child Poverty Reduction and the Office of the Minister for Children for this opportunity.

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.



Review of Government Child Wellbeing Strategy

Date: 26th October 2018

Report prepared by: Susannah Stevens, PhD

On behalf of;

Child Well-being Research Institute (CWRI)

&

College of Education, Health and Human Development
University of Canterbury

Forward.

We would like to sincerely thank the office of the Minister for Child Poverty Reduction and the Office of the Minister for Children for the opportunity to provide feedback to the draft of the Child Wellbeing Strategy. The strategy is an exceptional document. It is ambitious, and is crucial for the health and wellbeing of all New Zealanders. You could say it is long over-due. While the strategy focuses on children and youth, we believe the ripple effect will be significant across all sectors of NZ society reaching those in all stages of the life-course.

Format of this response.

This report has been separated into 7 sections. These sections are:

Section I: Strategy in its entirety.

Section II: Working definitions.

Section III: The framework.

Section IV: Appendices.

Section V: Possible inclusions or exclusions.

Section VI: Measurement or reporting of child wellbeing.

Section VII: Concluding Remarks.

This report has been written as a positive, strengths-based critical response with some ideas for consideration for the development and refinement of the document. We are very supportive of the policy, the strategic framework and the work achieved to date.

Section I: Strategy in its entirety.

University of Canterbury Private Bag 4800, Christchurch 8140, New Zealand
contact: susannah.stevens@canterbury.ac.nz <http://www.canterbury.ac.nz/childwellbeing/>

1. Vision.
 - 1.1. There is much to be pleased about in this draft. The philosophical intent and general direction is praiseworthy. Of particular note, is the importance of the State taking a leading responsibility for the wellbeing of its citizens. Indeed there is much to admire in the vision statement, the emphasis on proportionate universalism, the focus on public engagement, bi-culturalism, and the strategy to have evidence based interventions. Congratulations on this work.
2. Poverty and wellbeing.
 - 2.1. It is acknowledged that 'child poverty' is one of the key drivers of the strategy, particularly in the initial phase and six focus areas. This is pivotal and warrants prioritisation. However, a subtle messiness in structure could create confusion in the 'scope document'. Here, there are explanations and justifications around poverty, before the explanations and justifications of wellbeing. If wellbeing is, the big conceptual idea then child poverty should follow from this. Perhaps a slight re-ordering of text to achieve a coherent flow of strategy, explanation and justification.
3. Links to national policy and external international organisations.
 - 3.1. It is most pleasing to see links to policy that already exists nationally, and moreover international policy such as the United Nations Convention on the Rights of the Child, OECD data, and the 2017 UNICEF report card.
 - 3.2. The links to Treasury on multiple 'capitals' is exciting and timely, and it is pleasing to see that the Living Standards framework is influencing this strategy.

Section II: Working definitions.

4. Wellbeing.
 - 4.1. The document as a whole does seem to move in and out of using the terms 'health' and 'wellbeing' with ease and arguably in unproblematic ways without clearly differentiating between the two. It is strongly suggested that the strategy maintain its focus on wellbeing to eliminate any possible confusions and give the document more internal coherence.
 - 4.2. The wellbeing domain '*Development*' articulates that '*children have the skills and knowledge to live good lives and meet their aspirations*'. This is excellent to see, as it is really the only area of the strategy that centres on the development of children for their own personal growth and self-concept. The bullet points underneath this title however, advocate development as '*prosocial behaviour, active citizens and educated contributors*'. This is not necessarily problematic, however it does project a very institutionalised view of development – one of productivity, and not personalised human growth. Perhaps the inclusion of one more bullet that is focused on their sense of purpose (this also connects to indigenous models of wellbeing that use spirituality/sense of self to describe this – note spirituality here is not religion, rather connected to concepts of existentialism/self-actualisation).

- 4.3. It may be useful to use the term 'working definitions' for anything within the policy so you can reflect the changing nature of knowledge, different paradigms and the learning process.
5. Holism.
 - 5.1. In terms of holism, the strategy does seem to lose its way in this regard. There does seem to be a lack of internal coherence. The intent for holism is obvious and desirable, but at times there is slippage throughout the document leading back to 'silo thinking'. It is critically important for community 'buy in' for this document to signal a holism in its approach.
 - 5.1.1. For example, in the 'Wellness' focus there is emphasis given to disability, whereas it could be more holistic and inclusive to highlight the importance of 'diverse populations' with perhaps a focus on disability in the first instance.
 - 5.1.2. There is also a significant emphasis on disability as a 'medical' condition within the document and it may pay to explore literature pertaining to the difference between a medical and a social model of disability.
 - 5.1.3. A specific example of a social approach to disability is the Hallberg 'NET (no-exceptions training) framework for inclusion for all children in physical activity, recreation and sport.'¹
 - 5.1.4. Currently this restricted view (slippage) is also evident in other statements within the strategy e.g. in the *Development* focus it is stated '*Mother's mental health is supported*'. It may be more strategic to state 'individual and collective wellbeing needs are supported with an initial emphasis on Mother's mental health (wellbeing)'.

Section III: The framework.

6. Prioritisation.
 - 6.1. Firstly, The framework is meritorious. It is necessary and wise to prioritise some potential areas in the short term, with the intention to expand on these once underway. The six focus areas that have been selected are appropriate starting points.
7. Socio-ecological perspective.
 - 7.1. What is particularly pleasing is the broad perspective that gives cognisance to the 'child, family, community and society'. This socio-ecological approach, first pioneered in *Health and Physical Education in the New Zealand Curriculum* (Ministry of Education, 1999), acknowledges the holism associated with individual and collective wellbeing.
 - 7.1.1. Equally important in this broad approach to Hauora is the need to have clear Health Promotion, and Attitudes and Values statements. These two areas, whilst implied, do need to be made more explicit if the 'strategy' is to achieve its holistic goal. This will further acknowledge the importance and prevalence of relational wellbeing in child wellbeing.

8. Children's culture and Te Ao Māori.

University of Canterbury Private Bag 4800, Christchurch 8140, New Zealand
contact:susannah.stevens@canterbury.ac.nz <http://www.canterbury.ac.nz/childwellbeing/>

- 8.1. The focus area '*Children's cultures are celebrated, and Te Ao Māori and Te Reo Māori are promoted*' is excellent. To make this more logical, you could change the order of these bullets underneath the heading to align with the title. The first bullet would then become '*children see their cultures portrayed in a positive way*'.
 - 8.2. The use of Te Reo Māori throughout the document is exceptionally positive; and it is pleasing to see reference to the Crown-Māori partnership reiterating the special status of tangata whenua.
 - 8.3. Despite this inclusion and explanation of Te Ao Māori within the focus areas, the framework does need to acknowledge more overtly a number of Māori Conceptions of wellbeing. This may also give the document more internal coherence.
 - 8.3.1. A clear starting point here would be the acknowledgement of five dimensions of holistic wellbeing: Mental and Emotional, Social, Physical, Spiritual and Whenua (land). (Spiritual wellbeing is a vital part to both Te Ao Māori and Pasifika Talanoa). Although implied with 'connectedness' and 'identity' the philosophy is not encapsulated in a clear statement. For example; connectedness could include connecting to the 'land' or 'place', not just the people.
9. Relational wellbeing.
- 9.1. Explicit acknowledgement of relational wellbeing would further strengthen the strategy.
 - 9.1.1. For example; within the science advisors report there is a list associated with factors contributing to the likelihood of poor wellbeing (p26, Appendix A.). Over 50% of these factors relate directly to relational wellbeing, not individual wellbeing.
 - 9.1.2. From the 49 bullet points that exist within the 18 potential focus areas, 31 of these rely explicitly on relational wellbeing and a further 5 could be identified (to a slightly lesser extent) to relying on relational wellbeing.
10. Feel of the framework.
- 10.1. At times the framework feels clinical and institutionalised. For example the terminology and titles of the domains. The human elements within the philosophy of the document are not present in the structure. With due respect to the fact that this is a strategic, high-level governmental document – the strategy could benefit from further personalisation and humanisation.

Section IV: Appendices.

11. Appendix A: Science advisors report.
 - 11.1. The science advisors report pertaining to 'Childhood Wellbeing' has been compiled and presented from the view of five very influential and knowledgeable advisors. It should be noted however, that these advisors are representative of a similar paradigm with regards to knowledge construction and gender. Significant benefits could be gained from listening to non-western perspectives, gender and

age diverse perspectives and holding these in equal esteem to the science advisors report.

- 11.2. The science advisors report does mention that other paradigms of wellbeing should be explored, such as Te Ao Māori, however these do not seem to have influenced the philosophical underpinning, and therefore the structure, of the framework (for example whenua and spirituality as vital components to wellbeing for many cultures).
- 11.3. The science advisors report does an exceptional job of identifying the importance of the socio-ecological perspective and factors impacting a child's wellbeing. There are suggestions of the significance of relational wellbeing, yet this is not specifically mentioned or explored within the strategy.

12. Appendix B: Child Wellbeing Strategy.

- 12.1. The opening statement, while worthy, states *'it supports them to participate as citizens, enjoy their rights, meet their responsibilities, and play a positive part in society, now and through their whole life course'*. This is a good statement, arguably very mechanistic and institutionalised, but the vital aspect missing is the 'leading to a flourishing' piece. This surely must be a key focus of the strategy and needs to be signalled – their own flourishing, living a life of meaning and purpose.

13. Appendix C: Proposed initial focus areas.

- 13.1. It has been identified within this report that these areas seem vital for a successful wellbeing strategy.

Section V: Possible inclusions or exclusions.

14. Wellbeing constructs – the lived body.

- 14.1. In the scope of the strategy and specifically in the Appendices, mention is made of 'Physical Activity', 'Recreation', 'Play' and 'Sport'. Given the importance of these constructs for individual and collective holistic wellbeing, these constructs could be given more prominence.
 - 14.1.1. The pivotal element here, is these components of wellbeing include the whole body. These are vital and should not be relegated to simple acknowledgements. To be 'well' a child must be well within their entire lived body and the physicality, fleshly difference and bodily identity is not clear within the document. Currently the only explicit references within the strategy made to the lived body are 'exercise' and 'healthy weight' – a reduction of a whole body/person to a scientific physiological body. This marginalises moving and a lived body to a measured body. Significant care should be taken here, as the risk of the measurement of children as 'overweight or obese bodies' or 'gendered' bodies can be detrimental and counterproductive to holistic wellbeing (including their mental, emotional, social and spiritual wellbeing).

15. Access to nutrition.

- 15.1. The strategy makes specific reference to being able to obtain the '*knowledge and resources to make healthy decisions about diet and exercise*'. This does not articulate that children need to have *access* to nutritious food.
- 15.2. Given the extensive researchⁱⁱ that links;
- Maternal nutrition intake to her mental wellbeing; and
 - Nutrient levels with child growth, development and thriving;
- This addition could significantly strengthen this area within the strategy.
16. Educators as a major ecological influence for wellbeing.
- 16.1. The inclusion and reference to Te Whāriki or the NZC is limited. Despite the fact that curriculum review is ongoing, or change will inevitably be made with curriculum, the core of these educational documents is child development and wellbeing. Within the strategy, whānau are identified as the main ecological context supported to promote positive child wellbeing. However, local and international literature demonstrates that educators are just as important (and for some children even more important) as parents in facilitating wellbeing. Specifically young children who spend an increased amount of time in ECE settings. Therefore, acknowledgement that both educators and parents are important ecological influences could be included in the strategy.
- 16.2. With this, the Child Wellbeing Strategy may like to make a commitment to supporting and equipping early childhood educators with the skills and knowledge to assess and respond to young children's wellbeing and that of their whānau. As it stand, the current strategy is lacking the wraparound of the two most crucial ecological contexts in young children's lives.
17. Consideration could be given to including a statement on children living with chronic conditions, life threatening or life limiting illness and their families / whanau.
18. There were no identified exclusions of any of the content within the document, all was deemed important and necessary.

Section VI: Measurement or reporting of child wellbeing.

19. The intent to establish evidence through appropriate measures is note-worthy and critically important. However, a cautionary warning is given to not over do the measures that, in effect, may shift the focus from individual and personal development, to State justifications.
20. The strategy describes the importance of identifying concrete outcomes that are sensitive to change. There are probably several methods and measures for evaluating outcomes that are already being explored; but we would recommend a variety of qualitative and quantitative options. Subjective wellbeing surveys or psychometrically robust measures of Health Related Quality of Life (HRQoL) could be useful models to learn from. This could be complimented with locally-led, strengths-based quality research projects that centre on children within their communities. Researchers within our UC Child Well-being Research Institute have particular expertise in developing

strengths based approaches to assessment and community engagement and we are very happy to share this knowledge or work in collaboration with others.

Section VII: Concluding Remarks.

Overall, the strategy is meritorious with its philosophy and intent. The framework could be further enhanced with a review targeted at achieving greater internal coherence. Ensuring consistency in language and connecting concepts could achieve this. In particular the areas within this report that we believe would progress the strategy would be;

- Achieving a more consistent working definition of holism (this would prevent the slippage into silo thinking) (see 4 & 5)
- Avoiding using the terms health and wellbeing interchangeably, as this could lead to messiness and confusion (see 5.1.)
- Greater acknowledgement of Māori wellbeing conceptions and implementation at the philosophical level (see 8)
- Acknowledgement that “a flourishing individual and collective life” is the ultimate goal of a wellbeing strategy (see 12.1)
- Giving more acknowledgement to some of the very important wellbeing constructs that acknowledge the whole body (see 14).
- Giving consideration to the access of nutrition (see 15).

Lastly, congratulations on this very important initiative. What an exceptional feat to be designing a strategy that values and prioritises wellbeing. The University of Canterbury Child Wellbeing Research Institute (CWRI) and the UC College of Education, Health and Human Development support and wish acknowledge the hard work that has gone into this strategy development.

If any comment or clarification on this report is required, please do not hesitate to contact;



Dr Susannah Stevens, PhD.

Project manager Child Well-being Research Institute

University of Canterbury

Te Whare Wānaga o Waitaha

susannah.stevens@canterbury.ac.nz

Lead Educational Advisor Physical Education New Zealand (PENZ)

Member Foundation for Global Community Health (GCH) (FLV)

ⁱ <https://www.halbergallsports.co.nz/>

ⁱⁱ Evidence can be found at <https://www.canterbury.ac.nz/science/schools-and-departments/psychology/research/mental-health-nutrition/> or contact Professor Julia Rucklidge here <https://www.canterbury.ac.nz/childwellbeing/people/>