

TSB Community Trust



EXECUTIVE REPORT

A Child Centred Profile of Taranaki Children and Services

SUPPORTING CHILD AND YOUTH WELLBEING



PURPOSE

This report summarises a report on a child centred profile of Taranaki children and services. This is to provide information to TSB Community Trust on supporting child and youth wellbeing.

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EXECUTIVE REPORT – A Child Centred Profile of Taranaki Children and Services

This Executive Report combines information from the following sources: a statistical profile of Taranaki; a review of evidence on what contributes to positive wellbeing for children; and a child-centred review of the services and supports currently provided in the region. The intent of this Executive Report is to provide a robust picture of the current status of Taranaki's children and their families, and to give insights into the potential areas where future investment will have the greatest positive impact to help children and the region thrive.

TARANAKI DATA PROFILE

A full descriptive profile of Taranaki based on available statistics and data is included as Section 1 of the report.

The Taranaki Story – is there a problem?

At a cursory glance, all is well in Taranaki. The region is thriving economically, with high rates of GDP growth and low unemployment. Incomes are higher than the national median, and most indicators relating to child wellbeing (poverty, education and health) show that children in Taranaki are doing as well as, or better than, the average across the rest of New Zealand.

The majority of children and their families in Taranaki enjoy a high quality of life and experience good outcomes. In Taranaki, there are 27,696 children under the age of 18. The child poverty rate in Taranaki is less than that of New Zealand, yet a significant number of children in the region are experiencing hardship. Of the 27,696 children in Taranaki, about 17 to 23 percent (4,700 to 6,300 children) are growing up in poverty, achieving less in education and disproportionately affected by poor health. These children are predominantly located in rural townships and a few suburbs of New Plymouth.

In 2013 there were 1,601 students in the lowest schooling quintile, with 5,615 in schools up to decile 4. There are about 110 children and young people in foster homes or youth justice facilities.

Population growth in Taranaki is slow, with both reductions in population sizes in rural areas, and growth in the New Plymouth District's population. The ability to meet future labour market demands for the regional economy and develop prosperous regional centres will require every child to thrive.

The good news is that the size of the issue and the relative prosperity of the Taranaki region mean that providing the right support, in targeted communities, can have beneficial effects on wellbeing for disadvantaged children. We envisage that Taranaki can be a beacon to other regions in enabling equal opportunities for all its children.

How does Taranaki compare to the rest of New Zealand?

According to the New Zealand deprivation index¹ Taranaki has about the same average wellbeing as New Zealand overall. However, New Zealand ranks 29 out of 30 developed countries for an international

¹ The 'deprivation index' uses a set of metrics for each household in a census area unit to give an average 'deprivation score' for that area. These are ranked across New Zealand and decile numbers are applied to each area (1 being least deprived, 10 the most – note this is opposite to school deciles). The NZDep2013 scoring is based on the 2013 census. It is important to note it is a proxy for *comparing* deprivation across areas. It does not necessarily mean all the residents in the area are at that level.

measure of child wellbeing, and has some of the greatest inequality across school achievement levels based on socioeconomic status.

While overall health, education, and economic indicators place Taranaki on a par, or even slightly better, than the national indicators, there are still vulnerable groups in Taranaki affected by low socioeconomic status, particularly Māori, families with very young children, children in low-income families and children in sole parent families.

The challenge for Taranaki is to reduce disparities for Māori, and ensure all children have a good start to life

Taranaki is a bicultural region with 86 percent European and 17 percent Māori². Māori have larger families and start childbearing at younger ages than European in Taranaki, and account for one third of the 1,500 babies being born each year in the region. The ethnic breakdown of Taranaki's most deprived areas shows these communities to be disproportionately Māori.

Educational achievement and child and youth health indicators consistently point to differences in Taranaki between European and Māori children. The key findings from employment data reveal the differences between Māori and European workers in terms of pay, levels of qualification, status of being employer or employee, and unemployment rates.

It is concerning that the disparity between Māori and European qualification rates has shown little improvement, despite decades of reviewing the education system to make it more culturally relevant. It is clear the disadvantages faced by Māori children run deeper than lower achievement at school, and are more likely to be embedded in their higher rates of poverty.

Taranaki Māori commemorate the Māori Land Wars and Parihaka, and have a stronger connection to their history and whenua than some urban Māori who have moved away from their rohe. In the future, following iwi settlements with the Crown, Māori economic development will have an important role in alleviating the poverty rate among, and its impact on, Taranaki Māori.

The challenge isn't all about ethnicity: it is about the inter-generational transfer of disadvantage; living in deprived communities; and living in rural communities with poor access to services and support. The solution is likely to be locally focussed rather than in regional services and supports.

However, the overwhelming conclusion is that for Taranaki to turn around the potential poor outcomes for children in poverty, and to ensure children and their families in the regional centres are well supported, change will need to be driven by better outcomes for Māori children.

² Ethnicity in this report uses the Statistics New Zealand standard –i.e. people can identify with more than one ethnic group so the total is greater than 100 percent.

FRAMEWORK FOR CHILDHOOD WELLBEING

A report on what children need is included as Section 2 of the report.

The Office of the Children's Commissioner has developed a framework to help givers (including the TSB Community Trust) invest wisely in New Zealand children for greatest impact. This framework considers the various roles for supporting children (families, communities, government) and has identified where philanthropic and business givers can support families and communities, but not displace funding that sits as a clear role of government.

The requirements for healthy childhood development can be characterised by five key developmental stages.

- Ante-natal and healthy babies (Pre-birth to 2 years)
- Developing pre-schoolers (2 -4 years)
- Growing children (5-12 years)
- Empowered teenagers (13-17 years)
- Young adults (18-24 years)

Children's needs by development stage

Ante Natal Development and healthy babies (0-2 years)

Healthy early development in utero and the first couple of years of life are fundamentally important to childhood wellbeing. This is a critical time for brain and body development and establishing the essential hormonal, nutritional and cognitive processes for later life. The foetus and, then, baby requires a physically healthy start, positive attachment with a parent or caregivers, and appropriate stimulation and movement so the brain, nervous system and muscles can develop. A baby needs an appropriate diet and, importantly, sleep.

Families with newborns need healthy, safe housing, access to the material resources required for the baby (such as a safe place for it to sleep and be fed), and access to knowledge, information and support structures. Children can even be disadvantaged before they are born. The effects of maternal smoking, poor nutrition, and stress during pregnancy, can affect the development of the foetal body, hormone system, and brain. Foetal brain development can also be affected if a mother experiences pre-natal depression, economic stress, material deprivation, or family violence.

Healthy housing is very important for babies (and toddlers) because they spend such a lot of time at home during these stages. Homes that are damp and cold make children sick. We know that Māori children across New Zealand are twice as likely as European children to suffer asthma and wheeze, and children in the lowest income quintile are four times more likely to be hospitalised for bronchiolitis than those in the highest income quintile. Families living in poverty are more likely to avoid heating the home to sufficient levels to prevent mould, and they are more likely to live in crowded conditions. Poorly ventilated and insufficiently heated homes are known to cause respiratory illnesses, and overcrowding spreads infectious diseases. Parents need information and support to maintain healthier homes, as well as material goods such as a cot or bed for each child.

Developing Pre-schoolers (2-4 years)

Appropriate behaviour is learned at this age. Young children develop an increased awareness of role models and boundaries, and the effects of negative or positive parenting can begin to manifest in the child's behaviour. Routines and patterns such as regular sleep patterns, good quality nutrition, and limited 'screen time' form an important part of the health of pre-schoolers. Regular routines can help maintain consistent expectations, promote consistent discipline, avoid confusing the child, and provide a supportive environment for child development. It is

particularly important for children who live in more than one home (e.g. with different parents) to have consistent expectations and parental attention at all times.

Learning through play, in a variety of environments, is important for children's development at this age. Preparation for school and children's wider social development and attachments are supported through access to good quality early childhood education.

Growing Children (5-12 years)

Children's participation in school maintains social and educational development and equips them with valuable skills in preparation for the adult world. During these years, the brain is still developmentally flexible enough for children to 'catch up' on learning if they have missed out on opportunities when younger. In addition to reading, writing and numeracy, other fundamental skills such as language, reasoning, behavioural and social skills all need to be in place during this stage of childhood development.

A child experiencing poverty and an unstable family environment may arrive at school disadvantaged, and may require intensive support and guidance. During this phase the challenge of juggling employment with family responsibilities may arise for parents, and access to after school and holiday care can pose challenges and stress for families.

Children require access to safe and stimulating recreation and play activities – parks and playgrounds, libraries, swimming pools, and the chance to enjoy community events. Sports clubs, music lessons, and cultural activities are also important, and children in poverty face barriers to accessing the kinds of opportunities other children take for granted.

During this phase of a child's development, the children's peer relationships and different emotional and physical developments take place, all of which affect the child's view of themselves. Positive relationships and appropriate experiences and supports become more important as the influence of school friends increases, and the influence of parents decreases.

Empowered Teenagers (13-17 years)

A range of unique issues emerge for children as they reach adolescence. Self-harm, suicide and mental illness can emerge. Health knowledge, understanding physical development, and the dynamics of healthy relationships, can empower young people to avoid risky and unsafe behaviours. The risk of societal or school disengagement increases during the phase. When young people become detached or isolated from their education and their family, they have reduced opportunities for learning about relationships, personal opportunities, their unique potential and other life skills.

Leaving school with low or no qualifications puts young people on the back foot as they strive for economic and social independence. The risks associated with drug and alcohol consumption may increase if a young person is not in employment, education or training. Opportunities for recreation, social engagement and/or external mentors may be needed to help turn youths' lives around.

Young Adults (18-24 years)

A young adult's brain has not fully matured, and yet they have all of the rights and responsibilities of older adults in the community. For individuals who have benefited from a positive development path, this is a time of growth, opportunity and independence. For others it can be a time where poverty, despondency and resentment sets in. It is also a time for risk-taking, the added morbidity of which can affect young adults from all deciles.

Young adults are fully aware of the offerings of the world. Inequalities and disparity become more conspicuous to young adults, and a sense of difference and resentment may emerge. During this phase the state has no statutory responsibility to care or provide for these young adults. Those not engaged in education, training or employment are required to meet obligations to receive state benefits. For those who do not wish to engage in those obligations, anti-social behaviour or criminal activity can become the norm.

Six domains to ensure needs of children are met

As children grow and develop, their needs change. Within the developmental framework, childhood poverty has been identified as a key barrier to children thriving, particularly across the six key domains of:

- stable, nurturing families, in which we can help parents be better parents
- a supportive community
- adequate income to meet needs so children have the basics
- education support so children can achieve qualifications and socialisation
- health services that are accessible to children in need
- healthy, safe and affordable homes.



Children must have all these needs met if they are to thrive, and we need mutually-reinforcing activities to bring about the improved wellbeing we seek.

We also know that we get the greatest return on investment and achieve the greatest impact when we start early in the life of the child (0-5 years). This is when the brain is developing and children are learning social skills. Wiring of the brain and its response to stress hormones (e.g. constantly being scared or anxious) can permanently impact learning and behaviour, unless it is remedied when they are young.

The costs of fixing poor early development become more and more expensive as the child gets older and the brain is hardwired. By the age of eight or nine, some aggressive response behaviours are entrenched and difficult to remedy. However, children and young people at all ages need investments in their mental, physical, emotional and cultural wellbeing so they can have a sense of personal worth and contribute positively to society. This benefits everyone.

Poverty has costs to children and everybody

Poverty in families can result in high levels of stress and worry about not having basic needs met. It can make people less patient and tolerant and result in violence in families and communities. Regular high levels of stress can change brain development to make a child more likely to respond aggressively, and less able to concentrate and learn in school. It can also affect their immune system, and lead to increased likelihood of cardiovascular disease in adulthood. The costs to individuals and families can be life-long.

Poor socialisation and employment chances make people feel marginalised, angry and lose hope. They may turn to crime. While all these things can happen in families of all income brackets, they are far more likely to occur among families with the lowest incomes.

There are also costs that everybody bears, through government spending, when there are levels of poverty that negatively affect families. There are added costs of remedial spending in education and health to attempt to mitigate the effects of poverty on children's learning and healthy development. There is also preventative spending such as the rheumatic fever swabbing programme to identify and prevent this costly disease.

Child poverty has negative impacts on school qualifications, future employment options, and, indirectly, the unemployment rate. People with low skills cannot participate in higher income jobs, and the country loses these people from the labour market because low income jobs are increasingly being outsourced overseas. Lower educational achievement and lower skills (due to poverty) represent a lost productivity opportunity to the nation, which has been calculated at between 1.2 percent and 5.8 percent of GDP³.

Social services are required to mitigate the effects of poverty – such as providing budgeting advice, behavioural management, help to get into work, counselling etc. There are also increased costs of crime, courts, incarceration, and rehabilitation that can be attributed to poverty among children³.

Ensuring better wellbeing of children and young people has benefits to the whole nation in addition to the individuals concerned.

³ Pearce, J. (2011). *An estimate of the national costs of child poverty in New Zealand*. Analytica, Auckland. Accessed October 2014

A CHILD-CENTRED PROFILE OF SERVICES IN TARANAKI

Overview

The research report identifying existing child-related programmes, services and supports for children and their families in Taranaki, as well as needs, gaps and potential areas for future development is included as Section 3 of the report.

This child-centred profile of services in Taranaki is based on:

- A stocktake of child and youth providers in the region, to identify the services and support currently provided to children, young people and their families
- A survey of child and youth providers and stakeholders, to elicit information and views on the nature of child wellbeing in Taranaki, including the challenges facing many children and what services and supports seem to be making a positive difference
- Strategic conversations with a number of key informants, who are providers and stakeholders across Taranaki, to explore relevant strategic topics in more detail.

The findings from these research undertakings are summarised here.

There was a positive sense from the members of the community who participated in this research that Taranaki is well placed to improve outcomes for children and young people. The region is fortunate to benefit not only from strong economic sectors and a rich environment, but also a committed social sector, and the will to affect positively the lives of children and young people in the community.

Most research participants recognised that childhood wellbeing is fundamental to a cohesive society and future economic productivity. Children are our future workforce; they provide sustainability for communities and will ultimately support our ageing population. Children have specific needs, starting from before birth and continuing into adulthood, to enable them to achieve their full potential. Health, education and socialisation are basic building blocks to childhood wellbeing. Research participants stated that no Taranaki child should be left behind, as all are valuable taonga.

The relative affluence in Taranaki can make those experiencing economic and family hardship less visible. Children living in poverty, or those who are vulnerable, have additional needs in terms of nurturing and stable families, preparation for and engagement in school, socialisation and civic participation, and achieving qualifications that will lead to productive employment.

The good news is that these needs can be supported well. There are skills within the Taranaki region that are untapped, and partnerships that have yet to be explored. There is opportunity for transformative change and for the Taranaki region to be a beacon for New Zealand, in terms of demonstrating the ability to ensure all children in the region have equal opportunities and equitable outcomes in life.

A large number of services exist for children and young people in Taranaki

Taranaki has over 200 service provider organisations whose major focus is providing services and supports for children and young people's wellbeing (excluding primary health, early childhood education and school aged education, and sport and recreation providers).

In addition, this research identified 27 primary health providers, 6 centralised children's dental clinics, and 1 mobile dentist clinic. There are 111 registered early childhood centres, and 94 schools. Recreational opportunities for children and young people are provided by over 350 sport and recreation groups and clubs.

The conclusion is that there is a large number of services available, and many child-focused activities happening in Taranaki. However, the research identified some macro and systemic features of poverty, which affect children and young people across all developmental phases, and require attention through supports provided to families.

Demand for services to support children and young people in Taranaki is increasing

Most service providers who participated in the survey noted an increase in demand for their services. The main reasons cited were:

Increased struggles of young people and an increasing complexity of need, for example:

- children who experienced multiple health challenges, and whose health, social, economic and family circumstances were resulting in them experiencing difficulty in mainstream education
- impacts that family separation, family violence and blended families were having on children
- increased 'at risk' behaviours – drug use, disengaging from school and suicide ideation

Economic hardship:

- Economic hardship is impacting on children's physical and emotional health, and their ability to learn
- Families are facing increasing economic stresses because of the lack of a job, or low paid employment, coupled with the financial pressures associated with rents and housing costs. Problems of substandard housing, hunger amongst children, and debt levels within families were noted
- Financial hardship was also identified as a reason for increasing family disputes and violence.

Maturation of the services

- Some providers noted that as they became well known in the community and their reputation to deliver outcomes grew, so did demand for their services. Some of the respondents reflected that their increased profile resulted in a greater number of clients.
- A small number of the organisations stated that their services had expanded because of increased funding (community grants or government funding), adding new programmes to their portfolios and a deliberate strategic intention to grow and expand.

Challenges affecting Taranaki children's wellbeing

Research participants identified a range of challenges and circumstances that they perceived were adversely affecting the families, children and young people with whom they worked. The results are telling in looking at (1) the response identified most often – children living in stressful home situations, and (2) the themes for the main clusters of responses:

- Problematic home environments – stressful, lack of stability, nurturing and role models
- Housing issues – quality, supply, overcrowding and affordability
- Not enough money to meet basic needs – not enough food, can't pay utilities, don't have proper clothes
- Child health issues – poor mental, emotional, physical and dental health alongside lack of access to and affordability of health services
- Transport issues – access to employment, health education, services, but can't pay vehicle costs
- Parental employment issues – long hours, low wages, shift work and non-family friendly
- Child care and out-of-school care – affordable, accessible and flexible access to child care, holiday programmes and after-school programmes

- Lack of stimulating recreation activities

The information from the research begins to show a picture where the challenges facing children are not shared equally among the population. While overall, the Taranaki region is relatively prosperous, there are pockets of deprivation. This was shown in the data profile of the region, and is also reflected in the lived experiences of many children.

The reality of Taranaki is a tale of two centres:

- North Taranaki, and the rest of the region. The wealth, the services, housing, transport, the cultural, social and economic opportunities are predominantly in the New Plymouth District.
- Within Stratford and South Taranaki Districts, the employment opportunities are fewer and lower paid, access to public transport is patchy, and the quality of the housing is often poorer. Health services beyond the GP practice are minimal, and the services and supports for families exist at very low levels, if at all. Children and young people are most affected by these factors, because they are dependent on parents and caregivers to access these services. Many jobs in these areas are low paid, unstable (seasonal and temporary) and, due to patterns of work and shift work, do not recognise or accommodate the needs of children adequately.

Survey respondents believed the wellbeing of children in the region was worsening: 66 percent of respondents said it was getting worse; 31 percent thought it was staying about the same; just 3 percent thought child and youth wellbeing was getting better. It was recognised that the declining wellbeing is the cumulative effect of many complex factors and circumstances, with the most common reasons grouped below:

Parenting

- Lack of secure parent-child attachments – complex family issues (often intergenerational) that contribute to a lack of positive parenting and attachment
- Parenting, mentoring and support systems – lack of parenting skills leaving parents without some basic knowledge of how to best address their children's needs.

Economic

- Economic constraints – more families are 'working poor' due to seasonal work, low-skill/low-pay work and regional disparities.
- Material hardship – rising costs of basic necessities, coupled with low wages or reliance on benefits meant there was little discretionary income to cover necessities. Children are just going without the basics.

Drugs, alcohol and violence

- Consumption of alcohol and drugs – parents with problem drinking or drug use are not able to best care for their children, and increasingly young people themselves are turning to drugs and alcohol.
- Family violence – extremely damaging for children, and seems to be increasing but there are limited resources to support families.

Many of these issues were also noted to have intergenerational factors, where the disadvantage of multiple generations was increasing the issues and reducing opportunities for some children.

We explored if there were issues for Taranaki children specific to the region. Research participants indicated that the issues facing children in our region were the same as many other regions across New

Zealand. They concluded that issues stem from families experiencing poverty and despondency over several generations, increasing differences between the families and communities doing well and those struggling, and local economic and employment factors.

What is making a positive difference to children and young people's wellbeing?

It is clear that there are children in Taranaki who are living in varying states of poverty. Children and young people living in rural communities in Stratford and South Taranaki Districts have higher needs and less access to services and supports.

Whilst the impacts of child poverty on children and young people's wellbeing were evident from the research in this report, there is also a sense of achievement about the progress being made by many services and supports. The following programmes, initiatives and organisations were identified, often more than once, as things that are making a positive difference to children and young people's wellbeing.

(Note: * denotes where organisations were identified more than once).

- Box Office Boxing Club - supporting young people with positive sporting opportunity
- *Big Brothers Big Sisters - providing long term mentoring support to young people throughout Taranaki.
- Youth Guarantee Employment Scheme - working to place young people into positive employment
- Taranaki Futures - providing pathways for youth employment and training
- KidSafe Taranaki - working to prevent injury rates amongst children
- *New Waves - providing a youth hub, a safe place for youth, and providing a focal point for the coordination of youth services and supports
- Parents as First Teachers (PAFT) - providing enduring and persistent mentoring and parenting support for the first three years of a child's life.
- *Incredible Years Programmes - collaborating with schools to support positive behaviour outcomes in primary aged school children
- *Whanau Pakiri - supporting families with weight and obesity management
- *Food Bank - helping families to meet basic food needs
- Taranaki Kindergartens - providing accessible affordable pre-school education across the region
- *E town - providing breakfast in schools, youth opportunities
- Nga Kete Hauora - supporting parents and whanau in Opunake, Manaia and Patea
- Taiohi Tu - health and wellbeing workshops and training available to youth workers working with rangatahi
- Let's Go Programmes - aimed at improving active transport through education, events and support programmes with schools (walking, cycling, and public transport across the community)
- Girl Guiding / Scouts - offering positive role modelling, pastoral support and fun for young people
- Churches - providing youth groups, pastoral support, mentoring and role modelling
- Breakfast in Schools Programmes - feeding children to help their learning
- Barnardos (providing broad support for families – Parents as First Teachers, Strengthening Families and Incredible Years programmes; social work support)
- SWIS (Social Workers in Schools) - Patea
- Seasons - supporting young people through grief and loss
- Youth Justice Interventions – Rangatahi Youth Court at Owae Mārae
- Fruit in Schools Programme
- Tui Ora - providing culturally appropriate health and social support for tamariki and whanau

- *YMCA - providing holiday programmes, after school care, alternative education and teen parenting programmes, kindy gym
- EnviroSchools programme - teaching young people about sustainability and their connections to the land
- Patea Youth Trust - providing youth leadership opportunities, pastoral support and recreation
- Maatua Whangai - Manaia
- Red Cross No Limits – youth development programme

Based on international experience, interventions that prove most successful are those where the community has control, where there is adequate resourcing and support, and where intervention is comprehensive. Interventions that were less successful were ‘education’ and ‘persuasion programmes’ as sole interventions.

Other barriers to effective service provision included short-term one-off funding, provision of services in isolation, and a failure to develop capacity in the community.

Collaborative efforts operating successfully in Taranaki

Research participants identified opportunities to improve collaborative efforts across Taranaki. The following list identifies organisations that were reported to be key collaborations operating successfully in Taranaki.

- Social Sector Trial in South Taranaki - coordination of resources for youth at risk; collaboration between the Police, Child Youth and Families, and social service providers to ensure effective intervention into high needs families*
- Te Ohu Kura Waioara o Taranaki - interagency group of health, education and social services agencies providing support to schools
- Big Brothers Big Sisters collaboration with Te Puna - opportunity for mentoring parents
- The Kete Centre - partnerships between The Bishop’s Action Foundation, midwives, health, Child Youth and Families and the Ministry of Social Development
- New Waves working alongside the YMCA, like minds, supporting Families, Tui Ora, Youth Justice and Community Corrections
- Food Banks working with schools, kindergartens and school holiday programmes
- Milk in Schools partnership between schools and Fonterra
- School multi-agency SENCO (Special Education Needs Coordinators) meetings
- Ruanui Health Services - iwi led primary health services
- Whanau Pakiri programmes supported by the Taranaki District Health Board and Sport Taranaki and hosted by the YMCA
- Public Health Nurse partnership with schools
- Breastfeeding Coalition - supporting women to choose breastfeeding
- Meme Pepe / Pepe Hauora partnership provided by Tui Ora, Sport Taranaki, Taranaki District Health Board and Plunket
- Taranaki Primary Connections - mental health collaborative
- Taranaki Safe Families Collaborative - providing leadership against family violence

(* Denotes collaborations identified more than once.)

How can we make the greatest difference for children and their families in the region?

Looking across the different elements of our research, it is clear that research participants are positive and hopeful for Taranaki’s future. They see skills within the region that are untapped, and partnerships that have yet to be explored. There is opportunity for transformative change to improve the wellbeing of children across the entire region, their families, communities and society.

Taranaki is generally well served by programmes, projects, services and supports. However, some families in Taranaki are not necessarily accessing these supports. Interventions must be earlier, long term, and in partnership, to effect lasting change for disadvantaged children and their families. While social service programmes about parenting, food and cooking, or budget management are beneficial, they are not always adequate in the long term.

A collaborative effort between local and central government, community, philanthropic groups and businesses, was thought the best way to identify where investment will have the greatest potential to break systemic and cyclical effects of poverty for children in the Taranaki region. There will be no quick fix, and a positive difference is unlikely to be achieved by working alone.

For transformational change to happen, research participants identified that more focus would need to be directed at the pockets of disparity within the region, and that the approach would need to embody the following three elements:

1. Break intergenerational transmission of poverty and disadvantage

There are families in Taranaki who are experiencing social isolation and in an intergenerational cycle of poverty. For families who have experienced several generations of poverty, a paucity of material goods, helplessness and impaired knowledge becomes the norm, and the cycles become harder to break.

The lack of resources and knowledge is impairing the ability of families to provide necessary levels of care and support for themselves and their children. Children living within these households can experience less social, emotional and material support, and can have worsened health and insecure attachments because of the stresses and instabilities that such living causes. For example, when poor health is normalised, children's infections go untreated, which can escalate illness to emergency hospital admissions and /or have lifelong consequences on the health of the child.

Breaking the intergenerational transmission of poverty should consider the needs of the whole family (whanau ora), and must offer positive opportunities and aspirations for children, young people and their families.

2. Take a community-development approach to supporting communities, families and children

Taranaki's rural communities and small townships require better economic development and social supports. These can both be created for children and young people through local employment for the provision of parenting classes, outreach support, family violence interventions, early childhood centres, after school clubs, holiday programmes or youth mentoring and programmes. When possible, staff for health and social services outreach initiatives are best employed from within the community they will be serving. This creates local jobs, builds capacity of human capital and improves health and wellbeing, while maintaining cultural integrity.

Supporting communities through jobs and resources can help them to help themselves. It also ensures services and supports for families are available to those who need them most and in ways families can access them. This approach helps employers, educators, training providers and support services to recognise what families in isolation or economic hardship need. For example, facilitating access to training and sustainable employment, supports and improves a family's economic and social wellbeing. This provides benefits to children through more resources, confidence, social inclusion and parental mental health.

3. Be sustainable in the long term

To effect lasting change for families, we need to think beyond discrete programme interventions. Rather, effective interventions would start earlier (starting with antenatal and young babies where most life course development occurs) and they would be long term (transitioning the support over the years as that child and family's needs change). While some short term interventions are necessary, these need to link so that services providers in the community are supported to walk with clients for a longer period.

Positive change is sometimes not realised for a long time, far beyond the project or the funding period, particularly when working with families who have suffered intergenerational disadvantage. While accountability for funding will remain an imperative, the community must identify where its investment has the greatest potential to break the systemic and cyclical effects of poverty and impaired wellbeing.

The nature of investments that are most likely to improve the situation in Taranaki were noted:

- Funding is best invested into areas that make a systemic difference to health and wellbeing. These are housing, mentoring, material goods for those without, parenting skills development, and actions to reduce abuse and neglect of children
- Parents, children and families need support from day one. Early intervention and investment can prevent many of the negative impacts of poverty and stop a new cycle of poverty from developing
- Mentoring for children and young people offers stable, trusting and empowering relationships and role modelling
- A balance needs to be struck between crisis intervention and sustainable, long-term interventions, because the latter can effect real change through addressing systemic causes.

One of the clear outcomes of the research was the consideration that service delivery agencies and funding partners may be required to change their thinking about outcomes and what success looks like. They need to acknowledge that solutions to these problems may take several years.