



Social Services Committee  
Parliament Buildings  
Wellington 6160

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Department of Public Health  
University of Otago, Wellington  
PO Box 7343  
Wellington

## **Submission on the Vulnerable Children's Bill 2013**

### **Introduction**

1. Thank you for the opportunity to provide this submission on the Vulnerable Children's Bill (the Bill). The Bill is an important and complex piece of legislation. This submission is not comprehensive but aims to focus on those provisions which are most relevant from a public health perspective.
2. The Department of Public Health of the University of Otago, Wellington, works to improve, promote and protect health and to reduce health inequalities through research, teaching and community service.
3. A public health approach is concerned with improving the health and wellbeing of populations. It is a collaborative and empowering approach that considers the distribution of health in society, the causes of such patterns, and considers interventions at multiple levels. A public health approach offers concrete measures that enable children to thrive and contributes to protecting all children from harm, particularly the most vulnerable. Such measures are aimed at preventing the underlying conditions in which poor outcomes will flourish; preventing risk factors; increasing protective factors; encouraging early interventions, and then if harm happens, acting to prevent recurrence and reduce its impact. Important measures include effective regulation or policies for the conditions that shape outcomes for children and their families. The current Bill contains many useful measures but they are excessively focused on the final steps in this framework.
4. We present this submission based on our experience and expertise in public health and our interest in improving health and wellbeing outcomes for children and young people in New Zealand. We believe that by strengthening the public health provisions of the Bill, more children will be protected from harm, good parenting will be made easier for more parents, children's outcomes will improve, and several concerns of the UN Committee on the Rights of the Child (Committee on the Rights of the Child, 2011) will be addressed in time for the next reporting cycle in 2015.
5. We would like to make an oral presentation of this submission.

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## **General comments and overview of our submission**

6. The Department of Public Health congratulates the Government on the sections of this Bill which establish a rigorous framework for cross-agency collaboration, joint responsibility for children, and a transparent accountability framework for government departments. We endorse the concept of “children’s ministers.” We support the intent and many of the specific provisions of the Bill such as those helping to ensure children are safe, enhancing the response to children who have already been harmed, including children who are, or have been, in care and ensuring that child protection services are high-performing.
7. We believe that strengthening the public health provisions of the Bill will complement the existing provisions and in so doing help achieve the Government’s objectives for the protection of vulnerable children, in particular by reducing the numbers of vulnerable children in need of the strengthened protection set out in the Bill. We consider that a broader Bill, which addresses the needs and rights of all children, with particular reference to those most vulnerable, and emphasises the importance of supporting parents, is practicable and will provide a strong platform for progress on improving the physical, mental and social wellbeing and safety of all children.
8. We are concerned that the Bill does not state any underlying principles and, in particular, that it is not stated how the Bill gives effect to the Treaty of Waitangi and the UN Convention on the Rights of the Child (UNCROC).
9. Whilst generally welcoming the provisions within the Bill, we have concerns that aspects of the Bill are not consistent with existing legislation, particularly the Children Young Persons and their Families Act 1989 (CYPFA). We also are concerned that some specific provisions will not achieve the desired objectives of protecting vulnerable children. For example, the periodic safety checks of children’s workers will be disproportionate and have unintended consequences, including diverting resources and attention from more effective measures.
10. We make recommendations on several measures to strengthen the effectiveness of the Bill. In general terms, these recommendations involve incorporating a preventive approach to vulnerability with an orientation to addressing the needs and rights of all children, ensuring that parents are adequately supported in their parenting role, stating more clearly the principles underlying the Bill, and establishing mechanisms for independent advice and community consultation in planning, implementation, and monitoring at national and local levels. This submission will address each of these issues in turn.

## **The Treaty of Waitangi**

11. The Bill does not refer to the Treaty of Waitangi or its principles. This is a significant omission given the importance of tamariki for Maori and the disproportionate burden of hardship and poor outcomes affecting tamariki Maori. We note that the Maori Affairs Committee has conducted an inquiry into the determinants of wellbeing for tamariki Maori and its report is awaited. It is highly likely that the findings from this inquiry will be relevant to this Bill, particularly if the revised Bill incorporates a preventive approach to vulnerability including ensuring that parents and whanau are adequately supported in their caregiving role.

***We recommend that***

- 1. The Bill gives effect to the Treaty of Waitangi.**
- 2. The Maori Affairs Committee is consulted and consideration is given to their findings from the inquiry into the determinants of wellbeing for tamariki Maori.**

**UN Convention on the Rights of the Child (UNCROC)**

12. The New Zealand Government has agreed to implement, over time and to the maximum extent possible, the Convention on the Rights of the Child (UNCROC). Introducing a major piece of children's legislation without explicit regard to UNCROC is a major omission and, keeping in mind that New Zealand's progress is due to be scrutinised by the UN Committee on the Rights of the Child in 2015, would be a missed opportunity to show New Zealand's commitment to this process. The Children's and Young People's (Scotland) Bill 2013<sup>1</sup> is a good example of how this might be achieved.
13. UNCROC recognises that all children, to some extent, are vulnerable and need special consideration. It is cross-sectoral and collaborative, and recognises the primary role of parents and caregivers and that Governments have an obligation to support the parenting role. UNCROC is expected to underpin all initiatives relating to children. At a minimum, this involves consideration of its four key principles: non-discrimination; the best interests of the child, should be the primary consideration in all matters affecting the child; the right to life, survival and development; and respect for the views of the child.
14. The UN Committee on the Rights of the Child have established guidance for governments on matters relating to the implementation of UNCROC (UNICEF, 2007), including the administrative, legislative, planning and coordination measures required. These are referred to as the "general measures of implementation" and include through legislation, the establishment of coordinating and monitoring bodies, a national plan of action, comprehensive data collection, impact assessment, awareness-raising and training and the development and implementation of appropriate policies, services and programmes (Committee on the Rights of the Child, 2003).
15. The UN Committee on the Rights of the Child, in their most recent assessment of New Zealand, identified several areas of concern (Committee on the Rights of the Child, 2011). These relate to the planning and coordination of the Government's response, allocation of resources, violence and maltreatment, assisting parents/guardians in their child-rearing responsibilities, and listening to the views of children. The Committee's most urgent recommendation related to the need for action to reduce disparities for tamariki Maori and children in poverty and vulnerable circumstances.
16. There are resources (Committee on the Rights of the Child, 2009) and examples available to support agencies to involve the participation of children and young people, see for example, the Children's Commissioner's Young Peoples Reference Group and Appendix C of the Child and Youth Health Compass (Office of the Children's Commissioner, 2013).

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<sup>1</sup> Available at [www.scottish.parliament.uk](http://www.scottish.parliament.uk)

***We recommend***

**3. The Bill, to the maximum extent possible, gives effect to the obligations under the UNCROC and requires that all activities under the Children's Action Plan are consistent with UNCROC. This includes that the views of children are considered (consistent with obligations under Article 12 of UNCROC).**

**4. The National Children's Action Plan and cross-agency measures are adapted to progress the "general measures of implementation" as envisaged by the UN Committee on the Rights of the Child.**

**Purpose, principles and a preventive approach to vulnerability**

17. The Bill has no broad statement of purpose or principles and vulnerability is not clearly defined in the Bill. Clause 6 of subpart 1 describes the measures aimed at "improving the wellbeing of vulnerable children" as being determined by Government priorities. Vulnerability is defined in somewhat circular terms; in clause 5 children are identified as vulnerable in the setting of Government priorities under section 7. This provision does not itself indicate criteria for such identification.
18. The explanatory notes, as part of the Bill's context on p 3, state that the White Paper looked at what the government could do better. These included, among other things, an aim to 'prevent vulnerability'. In reviewing the Bill as a whole, it is clear that by far the greatest number of specific provisions attempt in some way to redress those harms already created – an ambulance at the bottom of the cliff approach. The public health approach of preventing and reducing the numbers of children who are vulnerable is addressed to only a very limited degree within the Bill. We think this is a major omission.
19. We consider that while a focus on protecting children defined as vulnerable is needed, this approach alone is inadequate in two ways: first, all children are inherently vulnerable to some degree, given their age, size, lack of development, and dependence on parental and community support. (As noted in UNCROC the "*child, by reason of his physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, before as well as after birth.*") Secondly, we know from other examples in public health that often the most effective and sustainable ways to reduce adverse social and health outcomes such as childhood vulnerability is to put into effect a range of measures which prevent vulnerability occurring by safeguarding and promoting the wellbeing of all children. Specific measures oriented towards protecting those children who are already at heightened risk of harm, or who have already been harmed, remain essential but are not sufficient.
20. We consider therefore that both for conceptual and pragmatic reasons, the Bill should, in order to attain its own ends, also incorporate preventive population approaches rather than only measures focused on those children who have already become highly vulnerable.
21. We know what causes children to be at risk – from a population point of view. The Bill is shaped by the assumption that all parents have the capacity to provide loving and supportive homes for their children. Poor parental choices are presented as the primary cause of child abuse and the Bill takes a punitive approach to parents rather than offering support to those parents in difficulty. Most parents wish to do the best for their children. This is not to deny that particular individuals do inflict harm and should be dealt

with appropriately by criminal processes. However, viewing poor parental choices purely as an individual failure misses many opportunities to make a difference and address some of the factors which make good parenting much harder. This offers alternative and more effective ways in which to improve outcomes for children.

22. Population factors include an array of social, economic, deprivation, and educational forces that, when adverse, are quite difficult for ordinary families to overcome. Welfare reform, by which is largely meant moving into employment, is presented as the solution to poverty and other problems faced by families (New Zealand Government, 2012 pp.54-55). Emotional commitment to this approach is bolstered by childhood memories of the very different social and economic climate of the 1950s-1970s. Recent decades have seen a change in the nature of employment. In the past being employed entailed a stable job, which provided an adequate wage, reasonable and stable hours of work, and a safe working environment. Today jobs often involve long hours and constantly changing shifts for very low pay per hour. This results in a lack of decent alternatives that diminishes hope and optimism, limiting resilience and undermining parents. In the past, alcohol consumption was also constrained by cost and limited sale outlets while the available cheap foodstuffs were nutritious. The changes in these areas have been powerful and destructive. Many parents also suffer the intergenerational impact of their own childhood maltreatment (New Zealand Government, 2012 p 60-61). Blaming parents is unproductive and the absence of support for parents, especially mothers, is a major weakness of the Bill. It should also be noted that the lifetime cost to the State of caring for a child who is in the care of CYF is estimated to be \$750,000. Supporting parents is better for children and may be a more cost effective approach.
23. We consider that the Bill should specify and acknowledge some of the wider determinants of parenting and child vulnerability, and, taking a medium to long term view, should set out some ways they can be addressed. We support a “proportionate universalism” approach to improving child wellbeing i.e. action is based on a universal platform, but scaled and intensified in proportion to need (CSDH, 2008). This means that there is a necessary focus on protecting vulnerable children, while also implementing measures to reduce the occurrence of vulnerability and improving the wellbeing of all children. Note that a universal approach does not necessarily mean expensive services for all children, for example, regulating alcohol marketing and availability are examples of cost-effective universal approaches.
24. Child poverty contributes to childhood vulnerability and is a prevalent problem in New Zealand where as many as 270,000 children live in poverty. The Children’s Commissioner’s Expert Advisory Group has completed a thorough analysis of child poverty, and acknowledging that this is a complex problem requiring a multi-pronged approach, has outlined a series of recommendations for action (Expert Advisory Group on Solutions to Child Poverty, 2012). The Vulnerable Children’s Bill is an opportunity to include the legislative provisions identified by the Expert Advisory Group as an essential component of protecting vulnerable children (Expert Advisory Group on Solutions to Child Poverty, 2012).

***We recommend***

**5. The Bill be renamed the “Children’s Wellbeing and Safety Bill” or similar.**

**6. A statement of purpose and principles. We suggest that the purpose of the Bill is to protect and promote the wellbeing and safety of all children, and particularly vulnerable children, by, and not limited to:**

**a. Giving effect to the Treaty of Waitangi and its principles, including a process for partnership with iwi, hapu, and other Māori organisations to address the needs of tangata whenua tamariki**

**b. Giving effect to New Zealand’s international obligations relating to child wellbeing and safety, and in particular UNCROC, so that children’s rights are recognised across the public, business and community sectors**

**c. Ensuring that policy development and legislative and regulatory changes across the public sector, address the conditions and which directly or indirectly impact on children’s wellbeing and safety and that of their parents and whanau. This will include housing, employment, economic, education and welfare policies, appropriate regulation of industry, access to health and social services, safe and healthy physical environments.**

**d. Undertaking children’s impact assessments so that the wellbeing of children and their parents is taken into account in all policies, including policies for the underlying conditions that influence children’s vulnerability and wellbeing**

**e. Addressing the support and service needs of children and their parents, families and whanau.**

**7. The list of children’s agencies stated in Subpart 1, Clause 5 should include all agencies which have direct responsibility for the provision of children’s services, and for the conditions which directly or indirectly impact on children’s wellbeing and safety. This includes, and is not limited to, agencies such as Treasury and those responsible for housing, economic, employment, and welfare policies.**

**8. The Bill includes the legislative provisions identified by the Children’s Commissioner’s Expert Advisory Group on Solutions to Child Poverty as an essential component of protecting vulnerable children.**

## **Strategic planning and priority setting for child wellbeing and safety**

25. Under clause 7 of the Bill the responsible Minister has wide powers, without any obligation to consider advice from any other party, to define which children will be considered vulnerable for the purposes of the Bill and to set priorities for improving their wellbeing. There is also no requirement to make these priorities publicly available. As noted above (para 17) vulnerable children are defined in relation to Government priorities. We believe this wording is inappropriate, and that the definition should not only be in relation to the priorities of the Government. Priorities should be set for child wellbeing; this is the responsibility of society as a whole. It is constitutionally inappropriate for the subpart to refer to ‘government’ priorities both here and in other sections. Statutes are, in principle, an expression of the will of Parliament, not the Government.

26. We believe that the structure of the Bill needs to be reoriented to include clearer provisions for strategic development. We believe that a fundamental concern is the need to include provision for broad, independent advice relating to planning, implementation,

and monitoring at a national level. See, for example, the Victorian Children's Wellbeing and Safety Act 2005<sup>2</sup> which provides for an independent advisory council to provide the Premier and the Minister with independent and expert advice relating to policies and services that enhance the health, wellbeing, development and safety of children.

***We recommend***

**9. Major revisions to Part 1 of the Bill. This would consist of two new sub-parts:**

**Subpart 1: Strategic planning and priority setting for child wellbeing and safety (new)**

**Subpart 2: Cross-agency implementation (revised present subpart 1).**

**10. The new subpart 1 would establish a National Children's Committee or Advisory Group or equivalent. Membership should include the Children's Commissioner, professional and community members, give effect to the Treaty of Waitangi, and reflect New Zealand's cultural diversity. This would be in addition to the already proposed Vulnerable Children's Board and Ministerial Oversight Group. The functions of the Committee would be:**

**a. To provide independent advice to the Minister on matters of strategy, implementation, and monitoring.**

**b. To undertake consultation as appropriate and consider the views of children and young people (consistent with obligations under Article 12 of UNCROC).**

**11. The lead Minister together with the Children's Ministers must then, taking into account the recommendations of the National Children's Committee, develop a Child Wellbeing and Safety Plan. This plan must be made publicly available and be presented to the House of Representatives.**

**12. The revised Subpart 2 "Cross-agency implementation" to include the cross-agency and accountability measures specified in the present subpart 1. The role of the chief executives group, the Vulnerable Children's Board, is to, within the strategic parameters set by the Child Wellbeing and Safety Plan, develop operational plans and to be held collectively accountable to achieve the set goals and targets.**

**13. The revised subpart 2 to include a section on the principles for adequate support services and resources for children, particularly vulnerable children, and their parents/caregivers and whanau. Principles could include that services should be effective, accessible, safe, timely, coordinated, culturally appropriate, and take into account the views of children and the caregiving role of adults.**

**14. The revised subpart 2 to include provision for workforce development for the children's workforce. This includes child protection services (multiagency), child development services, mental health and addiction services (infant, child and adult), parenting training and support, and other community-based services such as family violence services.**

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<sup>2</sup> Available at [www.legislation.vic.gov.au](http://www.legislation.vic.gov.au).

## Local involvement and planning

27. We support the cross-agency planning and collaboration described in the present subpart 1. However, these provisions refer only to action at the national level. We note that planning processes, in general, are more effective where there is broad participation in their development. This ensures widespread buy-in and legitimacy, and helps to make implementation more likely. Giving effect to child wellbeing policies at the local level should reflect a true local area partnership approach between central and local government agencies, community organisations and iwi social service providers.
28. There are two recent examples of local plans being authorised in New Zealand legislative frameworks: the Sale and Supply of Alcohol 2012 enables local communities to develop local alcohol plans; and the Psychoactive Drugs Act 2013 has a similar provision for local plans relevant to psychoactive drugs – for example to enable local rules to be set on zoning, licensing restrictions etc. These are both the primary responsibility of local authorities, although other agencies are able to provide input. The UK Child Poverty Act 2010 also contains provisions for local area partnerships (Office of the Children's Commissioner, 2012).

### ***We recommend***

**15. Subpart 2 to establish a mechanism for local community participation and input into local planning and service development. This should also consider, where appropriate, the views of children and young people (consistent with the obligations of Article 12 of UNCROC).**

## Interface with the Children Young Persons and their Families Act 1989

29. The Bill is closely related to the CYPFA. It is hard to see what the difference will be between a child who is in need of care and protection and a vulnerable child. Both pieces of legislation may apply to those children who fall within the definition of “vulnerable” at any given point in time.
30. There are discrepancies between both sets of legislation. The Vulnerable Children’s Bill covers children up to the age of 18 whereas the CYPFA only covers children up to the age of 17. The best interests of the child are paramount under the CYPFA, under the Vulnerable Children’s Bill measures must be taken to promote the best interests of children (Clause 6), but their best interests are not paramount. Decision-making under the CYPFA is guided by the principles set out under sections 5 and 6. These include family/whanau involvement in decision-making, respect for the wishes of the child, decision-making in child appropriate time-frames. The Vulnerable Children’s Bill does not include these principles.

### **We recommend**

**16. The Bill is aligned with the Children’s Young Persons and Families Act (CYPFA) so that both comply with UNCROC, in particular, that the age of children covered by CYPFA be raised to 18 years.**

### **Subpart 3 Children's worker safety checking**

31. There are estimated to be 376,000 public sector employees in the "children's workforce," which includes all government employees who have regular or overnight contact with children. The Bill requires that these employees undergo Human Resources reference checking and police vetting when they are initially employed to work with children. Guidance concerning the required process of initial checking and vetting should be provided.
32. The cost and time involved in rechecking the government children's workforce every three years will be disproportionate to the potential benefit. The vast majority of perpetrators of contact sexual abuse (as opposed to verbal abuse or indecent exposure) are family members or close associates of the family. Intrafamily sexual abuse is also more likely to be of the type shown by research to have a more severe impact on victims. Research suggests that less than one per cent of males are perpetrators of sexual abuse outside the family environs (Fanslow, Robinson, Crengle, & Perese, 2007; Fergusson, Lynskey, & Horwood, 1996). Most violence children experience, or are exposed to, also occurs within the family. Rechecking the children's workforce will divert limited funding resources from intrafamily abuse.
33. Furthermore, the number of abusers who come to the attention of police or other agencies without their employer being aware that there are issues concerning them is likely to be very small, further diminishing the benefit of rechecking a workforce of several hundred thousand. Rechecking the workforce may substitute for ongoing vigilance concerning employee's behaviour toward children in the workplace.
34. The key change that will improve the likelihood of preventing abuse is, in fact, improving the response of organisations and persons in authority to complaints, allegations, accusations, or other evidence of abusive or potentially abusive behaviour, within their own organisations. There has been considerable improvement over the past decade in this area and we support the use of resources to improve training, information sharing and organisational systems which will contribute to the gains made in this area.
35. There is a long history of adults ignoring or dismissing children's complaints and other evidence of abuse, or behaving toward children in ways that discourages complaints. This issue arises with monotonous regularity in cases of abuse that reach the courts. The Bill needs to place emphasis on the importance of listening to children and to provide guidance on how to respond to their complaints.
36. Guidance should be provided on how employers are to proceed when a complaint is made, both to ensure care of the child, or children, and on grounds of natural justice for the children's worker who is accused of abuse, or implicated in an incident. The need to ensure the safety of children is obvious but there are also likely to be considerable negative consequences for an individual suspected of abuse. Therefore for both reasons there must be processes that ensure complaints are responded to and investigated promptly and fairly.

## **We recommend**

**17. Safety checking of new employees in the children’s workforce through the existing police vetting system and Human Resources checking of previous references, without repeating every three years. We support further investigation and consultation on other options to keep children safe such as training, guidelines and resource development.**

**18. Prioritising the development of a workplace culture of listening to and acting on children’s complaints relating to concerns about abusive or potentially abusive behaviour of staff.**

**19. Existing employment protections for the children’s workforce are maintained.**

## **Summary of our recommendations**

1. The Bill gives effect to the Treaty of Waitangi.
2. The Maori Affairs Committee is consulted and consideration is given to their findings from the inquiry into the determinants of wellbeing for tamariki Maori.
3. The Bill, to the maximum extent possible, gives effect to the obligations under the UNCROC and requires that all activities under the Children’s Action Plan are consistent with UNCROC. This includes that the views of children are considered (consistent with obligations under Article 12 of UNCROC).
4. The National Children’s Action Plan and cross-agency measures are adapted to progress the “general measures of implementation” as envisaged by the UN Committee on the Rights of the Child.
5. The Bill be renamed the “Children’s Wellbeing and Safety Bill” or similar.
6. A statement of purpose and principles. We suggest that the purpose of the Bill is to protect and promote the wellbeing and safety of all children, and particularly vulnerable children, by, and not limited to:
  - a. Giving effect to the Treaty of Waitangi and its principles, including a process for partnership with iwi, hapu, and other Māori organisations to address the needs of tangata whenua tamariki
  - b. Giving effect to New Zealand’s international obligations relating to child wellbeing and safety, and in particular UNCROC, so that children’s rights are recognised across the public, business and community sectors
  - c. Ensuring that policy development and legislative and regulatory changes across the public sector, address the conditions and which directly or indirectly impact on children’s wellbeing and safety and that of their parents and whanau. This will include housing, employment, economic, education and welfare policies, appropriate regulation of industry, access to health and social services, safe and healthy physical environments, with special attention given to child poverty as recommended by the Children’s Commissioner’s Expert Advisory Group.
  - d. Undertaking children’s impact assessments so that the wellbeing of children and their parents is taken into account in all policies, including policies for the underlying conditions that influence children’s vulnerability and wellbeing

e. Addressing the support and service needs of children and their parents, families and whanau.

7. The list of children's agencies stated in Subpart 1, Clause 5 should include all agencies which have direct responsibility for the provision of children's services, and for the conditions which directly or indirectly impact on children's wellbeing and safety. This includes, and is not limited to, agencies such as Treasury and those responsible for housing, economic, employment, and welfare policies.

8. The Bill includes the legislative provisions identified by the Children's Commissioner's Expert Advisory Group on Solutions to Child Poverty as an essential component of protecting vulnerable children.

9. Major revisions to Part 1 of the Bill. This would consist of two new sub-parts:

- Subpart 1: Strategic planning and priority setting for child wellbeing and safety (new)
- Subpart 2: Cross-agency implementation (revised present subpart 1).

10. The new subpart 1 would establish a National Children's Committee or Advisory Group or equivalent. Membership should include the Children's Commissioner, professional and community members, give effect to the Treaty of Waitangi, and reflect New Zealand's cultural diversity. This would be in addition to the already proposed Vulnerable Children's Board and Ministerial Oversight Group. The functions of the Committee would be:

- a. To provide independent advice to the Minister on matters of strategy, implementation, and monitoring.
- b. To undertake consultation as appropriate and consider the views of children and young people (consistent with obligations under Article 12 of UNCROC).

11. The lead Minister together with the Children's Ministers must then, taking into account the recommendations of the National Children's Committee, develop a Child Wellbeing and Safety Plan. This plan must be made publicly available and be presented to the House of Representatives.

12. The revised Subpart 2 "Cross-agency implementation" to include the cross-agency and accountability measures specified in the present subpart 1. The role of the chief executives group, the Vulnerable Children's Board, is to, within the strategic parameters set by the Child Wellbeing and Safety Plan, develop operational plans and to be held collectively accountable to achieve the set goals and targets.

13. The revised subpart 2 to include a section on the principles for adequate support services and resources for children, particularly vulnerable children, and their parents/caregivers and whanau. Principles could include that services should be effective, accessible, safe, timely, coordinated, culturally appropriate, and take into account the views of children and the caregiving role of adults.

14. The revised subpart 2 to include provision for workforce development for the children's workforce. This includes child protection services (multiagency), child development services, mental health and addiction services (infant, child and adult), parenting training and support, and other community-based services such as family violence services.

15. Subpart 2 to establish a mechanism for local community participation and input into local planning and service development. This should also consider, where appropriate, the views of children and young people (consistent with the obligations of Article 12 of UNCROC).

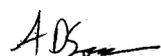
16. The Bill is aligned with the Children's Young Persons and Families Act (CYPFA) so that both comply with UNCROC, in particular, that the age of children covered by CYPFA be raised to 18 years.

17. Safety checking of new employees in the children's workforce through the existing police vetting system and Human Resources checking of previous references, without repeating every three years. We support further investigation and consultation on other options to keep children safe such as training, guidelines and resource development.

18. Prioritising the development of a workplace culture of listening to and acting on children's complaints relating to concerns about abusive or potentially abusive behaviour of staff.

19. Existing employment protections for the children's workforce are maintained.

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#### **References (we would be happy to provide further references on request)**

- Committee on the Rights of the Child. (2003). *General Comment No.5. General measures of implementation of the Convention on the Rights of the Child (arts. 4, 42 and 44, para. 6)*. (CRC/GC/2003/5). Geneva: United Nations.
- Committee on the Rights of the Child. (2009). General Comment 12 The right of the child to be heard. Geneva: United Nations Committee on the Rights of the Child.
- Committee on the Rights of the Child. (2011). Fifty-sixth session. Consideration of the Reports Submitted by States Parties Under Article 44 of the Convention. Concluding Observations: New Zealand. Geneva: United Nations.
- CSDH. (2008). Closing the gap in a generation: health equity through action on the social determinants of health. Final Report of the Commission on Social Determinants of Health. Geneva: Commission on the Social Determinants of Health, World Health Organization.
- Expert Advisory Group on Solutions to Child Poverty. (2012). Solutions to Child Poverty in New Zealand. Evidence for Action. Wellington: Office of the Children's Commissioner.
- Fanslow, J., Robinson, E., Crengle, S., & Perese, L. (2007). Prevalence of child sexual abuse reported by a cross-sectional sample of New Zealand women. . *Child Abuse & Neglect*, 31, 942.
- Fergusson, D., Lynskey, M., & Horwood, L. (1996). Childhood Sexual Abuse and Psychiatric Disorder in Young Adulthood: 1. Prevalence of Sexual Abuse and Factors Associated with Sexual Abuse. *Journal of the American Academy of Child and Adolescent Psychiatry*, 34(10), 1355-1364.

- New Zealand Government. (2012). *The White Paper for Vulnerable Children Volume II*. Wellington: Ministry of Social Development.
- Office of the Children's Commissioner. (2012). *Working Paper 6 Legislative mechanisms to reduce child poverty*. Wellington: Office of the Children's Commission.
- Office of the Children's Commissioner. (2013). *The Child and Youth Health Compass*. Wellington: Office of the Children's Commissioner.
- UNICEF. (2007). *Implementation Handbook for the Convention on the Rights of the Child* (Fully revised third edition ed.). Geneva, Switzerland: UNICEF Europe Office.