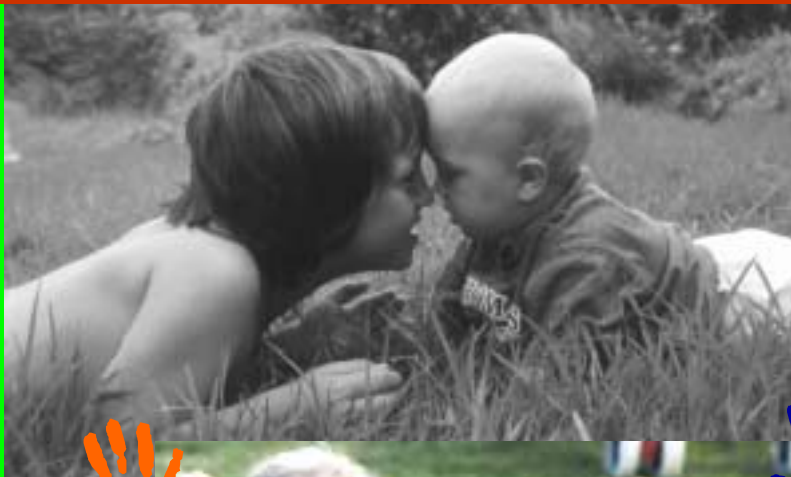


GREAT START WAITAKERE

TE KOROWAI MANAAKI
(PROTECTING AND NURTURING OUR TAMARIKI)
2003-2008



FOREWORD FROM THE CHAIRS OF SAFE WAITAKERE INJURY PREVENTION AND THE WAITAKERE SAFER COMMUNITY COUNCIL TRUST

*“tiakina, a tatou tamariki mokopuna,
ko ratou te iwi apopo”*

collectively, protect and educate our children and grandchildren for they will be our leaders tomorrow.

At the 2001 census there were 14,139 children in Waitakere aged under 5 years. Keeping them safe from harm and giving them every chance to reach their full potential is our collective responsibility.

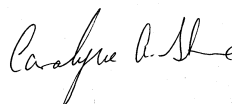
Though the initial focus of the Protecting our Tamariki project has been on preventing physical violence against children in the home in Waitakere City, it has developed into something much more. Our chosen emphasis on primary violence prevention has allowed us to look at the wellbeing of our youngest children more broadly.

Reducing violence against under 5s **isn't** enough, we actually need to stop it from happening in the first place. That means we need to do much more to get things right in the early years. We need to concentrate our effort and resources on supporting families with young children – helping to get the basics right. It's about good health, good education and accessible, affordable and appropriate social supports and services. It's about sustaining and celebrating children, caregivers and whanau. It's about promoting and growing caring and supportive communities. If we get it right, we stand a good chance of preventing violence and injury, if we don't ...we will continue to stay in “fix up” mode forever.

The Protecting our Tamariki Action Plan was started by Safe Waitakere but is now owned by a much larger range of community and government organisations in Waitakere. The plan that follows, points to roles and tasks (both ongoing and new!) for many different agencies. Protecting our Tamariki is now seen an integral part of the wider Waitakere Wellbeing Collaboration Process. What we're trying to do is new and it's exciting. We are committed to making it work and to giving our children the best start possible.



Penny Hulse
Chairperson
WAITAKERE SAFER COMMUNITY COUNCIL TRUST



Carolynne Stone
Chairperson
SAFE WAITAKERE INJURY PREVENTION

August 2003



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1. BACKGROUND TO COMMUNITY SAFETY AND THE PROTECTING OUR TAMARIKI PROJECT

Waitakere City Safety Plan

Waitakere has a long history of collaboration in community safety. In 1999, Waitakere was accredited “Safe Community” status by the World Health Organisation for its efforts in promoting community safety. The City’s first interagency safety plan (led by Safe Waitakere) was produced in June 2000. Involving over 20 agencies, this plan documented for the first time, the breadth of safety activity that (mainly government) agencies were involved with.

Waitakere Safe Under 5s

A gap that emerged from the City Safety Plan was the area of under 5s. Concern about increasing levels of injuries in this age group led Safe Waitakere to facilitate the creation of the Safe Under 5 Plan. Through this process, a range of community and statutory agencies shared information and their plans for making the lives of the under 5s safer in the 2001-02 year. A number of new projects also resulted from the Safe Under 5 planning process including¹:

- ❑ a redirection of existing work so as to target the under 5 population group
- ❑ the creation of a “Drive-over prevention project “ by Housing NZ to ensure caution signage was visible in all of their larger properties
- ❑ a safety forum for pre-schools and early childhood centres
- ❑ people and agencies working together that may not have before
- ❑ preparation of an information pack on child health and safety issues for pre-schools and entertainment venues for under 5s

Development of Protecting our Tamariki

From the Safe Under 5 process another major gap emerged, this time in the area of family violence. Discussions between Safe Waitakere Injury Prevention and the Waitakere Safer Community Council Trust in 2002 resulted in joint funding for a new targeted initiative – “Protecting our Tamariki”. Though spanning the general area of family violence, the main focus of this project has been on:

- ❑ younger children (under 5) and their families in Waitakere City.
- ❑ primary prevention of violence, rather than focusing on identified ‘at-risk’ children/families, or on children who have already come to the attention of medical services, support services, schools and/or the police.
- ❑ preventing violence against children within their home environment.

In December 2002, an interagency advisory group was brought together by Safe Waitakere to guide the development of the Protecting our Tamariki project. By developing a strategic and citywide approach to primary family violence prevention, it was hoped that the City would be in a better position to:

¹ For more detailed information please see the [Safe Under 5 Evaluation Report May 2002](#)

- ❑ understand key local issues and needs with regards to primary violence prevention
- ❑ take a strategic, coordinated and long term view of local needs and solutions
- ❑ develop and implement a number of new important prevention projects that focused on the under 5s
- ❑ further strengthen collaboration between the many agencies and sectors involved in family violence prevention
- ❑ access increased long term funding and resources (local, regional and national) for family violence prevention initiatives in Waitakere

Involvement of Maori and Pacific Communities in the Protecting our Tamariki Project

Although it's recognised that family violence triggers and issues are often different for Maori, Pacific, Asian/other ethnic communities, due to timeframes and resourcing available, a general community approach to family violence was initially taken for this project.

However, over the last 9 months, the need for both Maori and Pacific communities to discuss, debate and develop culturally appropriate responses to family violence issues within their communities has been strongly articulated. Community representatives on the Advisory Group have stressed the importance of cultural frameworks and for the particular needs of Maori and Pacific communities to be both understood **and** specifically resourced.

In response, the "Protecting our Tamariki" process has supported the establishment of family violence caucuses for both Maori and Pacific communities - both of which have begun working out what should come next for their communities. Some initial action areas are noted on pages 30 and 31.

Discussions on the most appropriate structure and framework for the "Great Start Working Group" (which will oversee the implementation of the Protecting our Tamariki Plan) have now begun. Early dialogue has been held with both Maori and Pacific caucuses to ensure that representation and other key issues are addressed from the onset. A strong commitment has also been made to seeking resources for, and assisting the implementation of, Maori and Pacific projects.

Linkages with the Wellbeing Collaboration Strategy Process

As noted above, what started off as a Safe Waitakere project has not finished up that way. The Waitakere Wellbeing Collaboration Process, which seeks to facilitate greater collaboration between government and community agencies in Waitakere², is now the new "umbrella home" for the Protecting our Tamariki Action Plan.

During 2002, the Wellbeing Collaboration Process identified and mandated (via a citywide summit in December 2002) the following goal areas/calls to action:

² For background on the Wellbeing Collaboration Process see Appendix 1.

- ❑ reducing violence to women and children³
- ❑ increasing participation in early childhood education and
- ❑ ensuring that children under 5 and their families have a great start in life

Given that both Protecting our Tamariki and Wellbeing Collaboration processes were working on interagency approaches to family violence prevention, both were working on developing action plans and that there was significant overlap in the participation/ membership of both projects, it seemed sensible that they be brought together into a shared framework. A decision was made to integrate the Protecting our Tamariki project with the Wellbeing Collaboration Process. What this might look like structurally⁴ is discussed at appendix 2. The process of integration is significant. It is considered the best way to ensure a cohesive and coordinated long term programme of action - both for family violence prevention **and** the wellbeing for under 5s in Waitakere.

2. IMPORTANCE OF UNDER 5S AND GETTING IT RIGHT

A few facts about violence against young children in the home:

- ❑ Rates of abuse/neglect of children are higher in lower socio-economic groups
- ❑ Men are responsible for around half of the incidence of physical abuse of children
- ❑ Physical abuse rates of children are higher with younger mothers, single parent and blended families
- ❑ Under 2s are at special risk of injury
- ❑ There's a strong correlation between domestic and family violence (30-60%)
- ❑ Brain development is most critical in the early years of life. Abuse, neglect, and violence can disrupt brain development and lead to lifelong emotional, social and learning difficulties.
- ❑ There were 32 assault related deaths of under 5s in New Zealand between 1993-1997, of which 70% occurred in the home
- ❑ The total cost of family violence is estimated at NZ \$1.2- 5.3b per annum

“Violence prevention must start as early as possible, before violence is learned or reinforced – experiences prenatally and through to 5 years of age impact the rest of an individual’s life”⁵

Background research undertaken for this project has confirmed the importance of focusing and investing both in children under 5 **and** their whanau. So much happens in these first few years of life!

Yet preschoolers are often a hard group to reach. Services for families with young children are complex, with many different government and community agencies involved. Currently there is no comprehensive overview or coordinated approach for services to the preschool age group.

³ Priorities identified at a series of “Family Violence Forums” cohosted by WADCOSS, Waitakere Health Link and WAVES were a key driver in the formation of this Call to Action.

⁴ Discussions were still underway at the time this plan was finalised.

⁵ From: First Steps - Taking Action Early to Prevent Violence

Some of the key answers to stopping violence in the home against preschoolers are about increasing positive outcomes in health, education, social services, employment etc, and at child, family, community and society levels. This will mean revisiting the way we currently do things. Research points to increased investment in the early years, service integration, improving quality of linkages and supports between individuals, families, friends, neighbourhoods and communities as potential contributing factors for success. Getting things right at both policy and service levels is also seen to be critical, in order to better promote children's wellbeing and mitigate against social and economic deprivation.

It can be done! Longitudinal studies in the United States⁶ showed that children from lower socio-economic communities involved in holistic and carefully formulated early childhood education/home visiting programmes had improved life outcomes. These studies also showed long term cost savings from this up front investment in under 5s. It was calculated that each taxpayer dollar spent saved over seven dollars in reduced down stream effects eg. no jails, welfare payments, no unemployment, good health etc.

3. FAMILY VIOLENCE PREVENTION

The National Context – Agenda for Children and Te Rito

In 2002, Government launched "The Agenda for Children". Both a national strategy and a programme of action, the Agenda stated Government's commitment "to making life better for all children" and also noted a key concern of children that – "there is too much violence in society, especially against children"⁷.

Over the last two years, considerable national effort has gone into identifying issues and solutions in the area of family violence prevention. With the development of Te Rito, a national framework for family violence prevention is now in place. Te Rito notes the need for:

- ❑ a holistic and broad approach to family violence prevention
- ❑ a strong emphasis on prevention and early intervention – with special targeting of children and young people
- ❑ communities to be supported to develop their own solutions to violence prevention
- ❑ approaches to family violence prevention to be integrated, coordinated and collaborative

There is strong local support for the strategic vision and platforms within both the Agenda for Children and Te Rito. Indeed, the Protecting our Tamariki project is a local initiative that implements key strategic principles from Te Rito noted above and sets a framework for collaborative action in Waitakere at the top of the family violence cliff.

⁶ Perry Pre School Project see Tomison A and Wise S "Community based approaches in preventing child maltreatment" National Australian Institute of Family Studies Issues Paper No.11 Autumn 1999

⁷ The Agenda for Children, 2002; page 2

Snapshot of Family Violence Issues in Waitakere

As noted earlier, the 2002 family violence forums hosted by WAVES, Waitakere Health Link and WADCOSS highlighted a number local issues and helped identify priority projects for consideration under the Waitakere Wellbeing Collaboration “Calls to Action” process.⁸

Key informants interviewed as part of the preparation of this Great Start – Protecting our Tamariki Action Plan, have also raised a number of concerns about family violence in Waitakere and its impacts on young children and families. These include:

General Community Issues

- ❑ a feeling that though awareness about family violence may have increased, the incidence of family violence probably hasn't decreased
- ❑ a recognition that a major attitudinal change in the area of family violence is still required. As a City, we need to make family violence unacceptable and in doing so, change our underlying belief systems/values as a society. This will take time and considerable conscious effort to change.
- ❑ the need to ensure we not only change the culture of acceptance around family violence but also **actual** behaviours
- ❑ understanding that domestic and family violence aren't one off occurrences – they are ongoing issues within many families in Waitakere
- ❑ a concern that violent offences seem to be getting more violent – with links made to increasing use of “p” within the community and to ongoing drug and alcohol issues within some families
- ❑ the concern that people don't realise the long term impacts of family violence on children (both from witnessing/ experiencing violence).
- ❑ the need to have a wider range of professionals who deal with children/whanau trained and confident to recognise family violence and able to do something about it
- ❑ an increase in gambling (that often leads to financial issues and family stress) as a possible contributing factor to family violence.
- ❑ the concern that family violence is not talked about enough – it's kept silent, which only helps it survive. The fact it happens behind closed doors means there are also no consequences for perpetrators of violence.
- ❑ the concern that perpetrators of violence are ignoring messages that what they are doing is wrong....we need to know what will change their behaviour
- ❑ a general lack of funding for violence PREVENTION. This isn't helped by the fact that success is so hard to evaluate/measure which means it's hard to get more investment, especially into the primary prevention end
- ❑ multi-agency protocols between agencies dealing with family violence cases haven't had teeth – there are issues of roles and responsibilities of agencies, fit of various structures and processes, and agreed points of intervention/action/monitoring and communication
- ❑ finding the children and their families who are most at risk (ie. who are not in early childhood education, miss well child checks, have a transient lifestyle often due to bad debts, unemployment, lack of housing etc) is actually really hard
- ❑ there's a fear within the community that taking action/reporting family violence will result in reprisals against them or their children.

⁸ Summary notes from the Seminars can be obtained from the WAVES coordinator, Helen Jones, on 838 4834

- ❑ a need to look at child abuse and partner abuse together – need to deal with mothers and children in a more holistic way...reinforce that neither type of violence is acceptable and that we need to better support women so they can support their children
- ❑ the need to shift away from blaming mothers eg. “don’t say why doesn’t she leave him, say why doesn’t he stop hitting her/the children”
- ❑ lack of understanding about child development, how to be a good parent and what you have to do to support your child to ensure they get the best start in life
- ❑ a lack of understanding about the different forms of family violence/abuse – this needs to be clearly defined so people clearly see what is/isn’t acceptable eg. emotional as well as physical abuse is not acceptable
- ❑ the historical/current patch protection among various agencies working in family violence sector is not helpful – there should be much better coordination and collaboration within the sector
- ❑ real capacity issues exist within the family violence sector – in terms of resources and people. Those working at the bottom of the cliff feel incredibly stretched and despite a strong desire to, are unable to undertake more “top of the cliff” initiatives.
- ❑ the need to ensure that downstream effects of increased reporting/early identification of family violence are recognised and matched with extra resources to allow referral agencies to investigate concerns/assist families effectively. Don’t want a repeat of the Waitakere POLL 400 pilot ie. when domestic violence callouts where children were present were reported by Police to CYF, with the latter agency swamped with the increase in notifications to their service that resulted from compulsory reporting
- ❑ recognition that a “one size fits all” approach to solving family violence will not be successful. There are different issues within different communities that mean different preventative approaches will need to be tailored for specific communities eg. within Maori, Pacific, new migrant communities etc.

Some Issues Within the Maori Community

- ❑ there are currently very high rates of abuse within Maori community, in addition to the huge amount that goes unreported. This suggests people don’t want to look for it/front up to it
- ❑ how to/when to recognise abuse within a whanau and when action needs to be taken - is it after the first, second, third episode of violence??
- ❑ when service providers develop a rapport/trust with caregivers (most often women) and get close enough to know about/assist with the family violence issues in their lives, the family sometimes pulls away....they don’t want to be found out/helped. Often it’s the male partner that pulls them away
- ❑ many whanau workers often find it hard to recognise family violence – they’re not trained to think in this way or sufficiently skilled to know what suitable action to take
- ❑ the cycle of violence/acceptability of “the bash” needs to be broken..it’s become normalised and has gotten into the psyche/self esteem of young people
- ❑ sadly, many whanau who really need to be part of whanau meetings at kohanga don’t come
- ❑ a need to increase pride in being Maori and Wahine = it’s all about self esteem
- ❑ resources/tools to assist whanau workers aren’t there – materials need to be culturally appropriate and have Tikanga built into them ie. appropriate and effective Maori resources incorporate more than just Maori words

- ❑ a need for increased resourcing to enable Maori focused support/helping agencies to do more work in primary prevention within their communities (eg. more funding for staff time, cars, resources/aids, administration etc)
- ❑ a need for better strategic information about what's happening within Maori families/whanau in Waitakere. There's a need for specific information to help develop Maori specific responses
- ❑ a need to develop a vision for a new world order for Maori – need to incrementally “breed out” family violence from our whanau/community and take a holistic approach to family wellness focusing on things such as:
 - how to live without violence in the home
 - how to have relationships that are free from abuse
 - be continually checking/correcting young people as they are growing and supporting them if they wander off track
 - teaching conflict resolution/relationship development/life skills within the education system
 - addressing underlying issues of poverty/poor education/lack of employment
 - teaching young people about what it is to be a good person, a good parent and a good citizen
 - having services that are coordinated to support whanau
- ❑ a need to start with education/prevention messages from a young age – about changing a generation
- ❑ a need to involve whanau in children's learning process – about learning and sharing Te Reo and Tikanga and about whakawhanaungatanga (overarching wellness and connectedness of the whanau)
- ❑ a need to teach/reinforce a core Maori value that everything starts from the womb and that wellbeing/safety starts from the very beginning
- ❑ need to better prepare our young women and men for their centrally important role in life - parenting
- ❑ a need for greater emphasis within the education system about parenting and child development
- ❑ more support for those outside of the mainstream education system/who have lost their way as they are the parents of tomorrow – need more use of role models to help show them the way forward

Some Issues Within Pacific Communities

- ❑ at least 30% of Pacific families involved in Family Start have family violence issues (the figure roughly the same or higher for Maori)
- ❑ the issue of family violence is not talked about or understood and issues of culture, patriarchy/male domination in families keep it that way
- ❑ the need for more language specific information about family violence and language specific resources/tools to assist Pacific whanau workers
- ❑ ensuring churches do not condone violence, there is a Christian view that God has forgiven me so you/the community, should too
- ❑ that church leaders have key roles in changing behaviour within Pacific society re: use of physical violence against children – they must be role models both within their churches and within the wider community eg. language nests etc. They must be challenged to do this by the Pacific community themselves.
- ❑ the Pacific culture of smacking is an everyday reality, need to look at other ways of disciplining kids and then work within Pacific communities to promote alternatives

- ❑ a need to address family violence in the Pacific community in an ethnic specific way – there are many Pacific responses NOT just one
- ❑ a need to relook and instill Pacific parenting values..have got lost/mixed up with the palagi way
- ❑ the need to quantify the seriousness of family violence within the Pacific community = need to develop some local statistics to shock, raise awareness and engage people in positive change/solutions

4. CAUSES/RISK FACTORS FOR FAMILY VIOLENCE IN THE HOME

The existence of family violence in our society is due to a combination of factors rather than a single cause or event. Some of these factors noted in the literature include:

- ❑ **psychological disturbances in parents** eg. mental health issues, substance (alcohol/drug) abuse, low self esteem etc
- ❑ **difficult behaviours in children** eg. mental health issues, aggression, learning difficulties etc
- ❑ **dysfunctional patterns of family interaction** eg. domestic violence, poor communication, unrealistic expectations of what children can achieve, poor understanding of child development issues, poor impulse control and high reactivity to behaviours/incidents in the home involving children etc
- ❑ **stress inducing external pressures** eg. poverty, lack of neighbourhood/community/family supports, unemployment, poor access to services, lack of community self esteem/pride
- ❑ **societal values** – eg. the way we view the rights, values and roles of children, traditional approaches to physical discipline, way violence has become part of our every day lives eg. through television etc
- ❑ **colonisation** – eg. spiritual and cultural abuse, land displacement, isolation and loneliness are attributed to family violence, especially in a Maori context

5. PRIMARY PREVENTION FOR UNDER 5s..... WHAT'S LIKELY TO WORK AND WHY?

It is now recognised that there are a number of levels of family violence prevention.

1. **Primary prevention** – takes a general population approach and aims to prevent violence from happening in the first place
2. **Secondary prevention** – looks for warning signs, focuses on those people most at risk and aims to identify violence early and intervene immediately
3. **Tertiary prevention** – focuses on those who have been affected by violence already and aims to stop violence from reoccurring

In recent years, considerable effort has centred on reducing physical violence within our families/communities and minimising its effects. Indeed, a number of important prevention projects and services are currently underway in Waitakere that contribute to the broad city goal of family violence prevention.

However, the area of **primary** violence prevention is fairly new, both in New Zealand and internationally.

In terms of stopping violence against children from happening in the first place, there is unfortunately no “silver bullet”. It is recognised that a multi-dimensional, longterm approach is needed. That means developing a range of preventative projects/programmes rather than a single one, because the issues/needs/trigger points for individuals, families and communities are all different. Similarly, careful consideration needs to be given to the development of ethnically and culturally supportive prevention strategies and projects - as mentioned earlier in section three, a “one size fits all” approach will simply not work. Research also reinforces the need to build on/expand existing services and providers, rather than develop a number of brand new services and providers.

Some of the many factors believed to contribute to stopping violence in our families and society include⁹:

- ❑ Increasing the value society places on children
- ❑ Increasing economic self sufficiency of families
- ❑ Enhancing community resources, networks and social supports
- ❑ Discouraging corporal punishment
- ❑ Promoting accessible and affordable healthcare
- ❑ Improving social services – taking a holistic approach, focusing on strengths of families/whanau, looking at needs of preschoolers **and** their caregivers
- ❑ Treating alcohol and drug abuse
- ❑ Identifying and treating mental health problems
- ❑ Promoting available and affordable childcare
- ❑ Increasing participation in early childhood education – enhancing child development and creative play
- ❑ Preventing unwanted pregnancies
- ❑ Targeting increased investment in lower socio-economic areas and starting positive interventions/support as early as possible in a child’s life.
- ❑ Increasing parental understanding of child development and parenting roles especially via homevisiting type programmes

6. PRIORITY PROJECTS FOR ACTION

Lots of Great Ideas for Projects

As a result of the key informant interview process that supported the development of the Protecting our Tamariki Project, 61 potential projects were identified that clustered around the following twelve themes:

- ❑ Training
- ❑ Awareness campaigns
- ❑ Citywide screening
- ❑ Advocacy
- ❑ More support for existing family violence prevention services

⁹ Compiled from a range of sources including; Fanslow J, McGregor K, Coggan C, Bennett S, and McKenzie D “Research into Programmes to Prevent Intentional Injury and Violence to Children” Injury Prevention Research Centre Report Series No. 52

- ❑ Early childhood education
- ❑ Workplace initiatives
- ❑ Parenting education
- ❑ Assisting increased reporting of family violence
- ❑ Celebrating children
- ❑ Improving maternal mental health services
- ❑ Poverty reduction

A brief description of these many project ideas follows as Appendix Three on page 38. It is hoped that a number of these great ideas will be explored and actioned by many different organisations in Waitakere over the next few years.

Need for Prioritisation

Rather than come up with a long wish list of potential projects, the brief for the Protecting our Tamariki project indicated a strong desire to instead prioritise a smaller number of projects for collective action.

Some priority projects were selected for community consideration. These choices were based on:

- ❑ a literature overview of primary violence prevention and strategies which are believed to support preschool children and their families¹⁰
- ❑ interviews with a selected number of local and national “experts”
- ❑ opportunities offered by the project to enhance collaboration between and within sectors
- ❑ observations of the local, regional and national wellbeing scene and opportunities arising
- ❑ strong local support and energy
- ❑ gut instinct!

Community Forum Mandates DRAFT Protecting our Tamariki Plan

On May 29th 2003, a public forum was held to discuss the draft Protecting our Tamariki Plan and the suggested priority areas for action. Around seventy representatives from a wide range of community and government organisations attended the forum and gave a strong mandate for collective action to support the broader needs of under fives and their families/whanau.

At the forum, workshops were held to discuss many of the project areas in more depth. From this, some initial project conveners volunteered to continue discussions around each project and to further develop the draft project plans.

The scoping and implementation of projects will be an ongoing process. Not all projects will begin immediately and some will grow and develop incrementally over time, as both energy and resources permit. It’s recognised that significant capacity issues are currently being faced by both community and government agencies alike and many projects may well roll over into the next calendar/financial year. This is indeed appropriate as Protecting our Tamariki is seen as a five year project.

¹⁰ The literature overview which was prepared as a background report for the Protecting our Tamariki Advisory Group is available on request from Melanie Dunn on 836 8000 ext 8044 or Melanie.Dunn@Waitakere.govt.nz

What follows are brief descriptions of the chosen areas for action which should be seen both as individual projects and a collective basket of actions. The priority projects (which appear in no particular order) are:

- ❑ Formation of a Strategic Working Group for under 5s
- ❑ Health Sector Training in Family Violence Prevention
- ❑ Family Violence Prevention Training for Home Visitors and other Child Focused Agencies
- ❑ Awareness of the Importance of the First Five Years of Life
- ❑ Alternatives to Physical Violence
- ❑ Promoting and Celebrating Waitakere's Children
- ❑ Mental Wellbeing of Parents
- ❑ Locality based Project focused on Outcomes for Under 5s
- ❑ Maori Health and Social Service Capacity Building
- ❑ Pacific Family Violence Radio Campaign

FORMATION OF A STRATEGIC WORKING GROUP FOR UNDER 5S

PROJECT OVERVIEW

The issues for under 5s and their families cut across all sectors and agencies.

There is a need to strengthen relationships among public, private and community stakeholders and to develop long term commitments for increased investment and action to improve not just family violence statistics but wellbeing outcomes for under 5s.

A high level strategic action group for under 5s is required to ensure that visions/strategies/plans included in this Action Plan (and elsewhere within the Wellbeing Collaboration Process) translate into effective actions on the ground.

Key tasks of the Under 5s Working Group:

- Oversee and develop (over time) an intersectoral programme of work focused on under 5s in Waitakere – including the Protecting our Tamariki projects
- Be a clearinghouse for issues, initiatives etc related to under 5s and their families in Waitakere
- Act as a leadership/advocacy group for under 5s (needs, values, rights, resources, policies etc)
- Co-ordinate funding applications and advocate for funding and resources for Protecting our Tamariki projects
- Promote cross sectoral collaboration between agencies providing services for under 5s
- Be a driver and maintain an oversight role in terms of evaluation of process/projects and outcomes
- Be an effective management group that is accountable to both key stakeholders and the wider Waitakere community

SOME KEY STAKEHOLDERS

- Wellbeing Collaboration Strategy Group
- Maori Caucus
- Pacific Caucus
- Preschool/child focused agencies
- Other whanau focused agencies
- Safe Waitakere
- Ministry of Social Development
- Child Youth and Family
- Ministry of Health
- Ministry of Education
- Waitakere City Council
- Children's Agenda and/or other child advocacy groups
- And other interested agencies and individuals

RESOURCES REQUIRED

- Need person/agency to take lead role in establishing/maintaining the group (initial 10 hours per week) and supporting the development of other projects eg. fundraising
- Will be administrative/project support roles as well.

FORMATION OF A STRATEGIC WORKING GROUP FOR UNDER 5S

PROJECT MILESTONES

- Development of a terms of reference for the group
- Formation of the group
- Ongoing coordination resourcing secured
- Work programme developed
- Work programme implemented/reviewed etc
- Process of measuring benefits of the group developed and evaluated

PROCESS FOR GETTING STARTED

- Preparation of options on different kinds of strategic group models that could support under 5s
- Informal whiteboard session(s) on type of strategic group most needed, roles it should play, who should be involved, how it could work etc
- Development of an initial terms of reference to guide the group's formation
- Identification of resources to support the group clarified and potential funders identified and approached
- Group convened
- Terms of Reference reviewed and initial work programme developed

ISSUES TO THINK ABOUT

- Alignment/integration with Collaboration Strategy processes/projects
- Size of group
- Composition of group - government agency or community/ government agencies
- Level of representation required
- Frequency of meetings
- Need for formality – ie. legally formed entity or ad-hoc working group/committee
- Ability of government agencies to advocate to themselves
- Feedback loops/accountability back to wider community

SOME WAYS TO POTENTIALLY MEASURE SUCCESS

- High attendance/participation at Strategic Working Group meetings
- Successful development and implementation of work programme (especially Protecting our Tamariki projects)
- Increased investment in services/supports for under 5s and their families in Waitakere
- Increased collaboration between providers in both the planning and delivery of services and outcomes for under 5s
- Strength of community knowledge and support for work of the Strategic Working Group

FOR FURTHER INFORMATION PLEASE CONTACT

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HEALTH SECTOR TRAINING IN FAMILY VIOLENCE PREVENTION

PROJECT OVERVIEW

The Issues

Health professionals are probably the most common contact points for young children and families/whanau. It's now acknowledged that the health sector has an important role to play in preventing family violence. It's also recognised that that tools, resources and training need to be provided to a range of professionals within the broader health sector to both increase understanding of the issues/effects of family violence and enable more effective responses by health professionals to evidence/suspicious of family violence.

There are also important issues about consistency of training across the health sector, appropriate support for staff (who may also be/have experienced family violence in their own lives), cultural appropriateness of training and the need for training to be ongoing.

From National to Local

At the national level, family violence intervention guidelines have now been developed along with a health sector training package. The latter initiative is based on a "train the trainer" approach and focuses on a process of identification and referral. Specific training packages have been developed for those working in DHBs, general practice and maternity care. Due to resource constraints, only a small number of local "trainers" will be trained across the country. However, a HUGE opportunity still exists to expand and fast track violence prevention training within the health sector in Waitakere (covering public, private and community sector organisations). A comprehensive training plan should be developed through which local organisations:

- ❑ Identify family violence prevention as both an organisation and sector priority
- ❑ Include family violence training within workforce development plans
- ❑ Identify types of health professionals who should be at the highest priority to receive training
- ❑ Share training programmes/trainers, resources, toolkits, referral and people expertise (especially with community sector agencies)
- ❑ Share experiences of what's worked/what hasn't/what else is needed to enhance family violence prevention within the local health sector
- ❑ Promote an ongoing and coordinated approach to family violence prevention in the City
- ❑ Identify additional resources required to enhance existing prevention training initiatives
- ❑ Leverage additional resources to undertake/expand training initiatives over time

HEALTH SECTOR TRAINING IN FAMILY VIOLENCE PREVENTION

SOME KEY STAKEHOLDERS

- Waitemata DHB
- Health West
- Waiora Amataga
- Local midwives collectives
- Well child providers
- WestKids
- Plunket
- Te Whanau O Waipareira
- Family Start
- Shared Vision
- Pharmacists
- Regional Public Health Service
- And other interested agencies and individuals

RESOURCES REQUIRED

- Need person/agency to take lead role in bringing those with family violence responsibilities from across the local health sector together
- Development of a Waitakere health sector training plan
- Additional financial resources as determined through group discussions

PROJECT MILESTONES

- Development of a project group with representatives from a wide range of health agencies in the City
- Strategies, mechanisms developed to ensure a 'Waitakere' health sector approach to family violence training = a local plan
- Coordinated/shared family violence training implemented/evaluated on an ongoing basis

PROCESS FOR GETTING STARTED

- Discussions with key health agencies eg. District Health Board, Health West Board on supporting a sector wide project and identifying key contact people within each participating organisation
- Nominated staff members from across the health sector brought together to further scope the project and how best to proceed

ISSUES TO THINK ABOUT

- Impact of increased notifications to already stretched referral agencies eg. CYF, Tu Wahine, Refuges etc.
- How to get started with limited resources (health dollars are always scarce)
- How to make family violence prevention training a shared priority across the local health sector
- Making sure training of professionals translates into increased reporting/behaviour change
- What kind of sector monitoring is needed? Are there opportunities to dovetail/learn from the national evaluation of health sector training which will be undertaken from (2003-5)?

HEALTH SECTOR TRAINING IN FAMILY VIOLENCE PREVENTION

SOME WAYS TO POTENTIALLY MEASURE SUCCESS

- ❑ Increase of family violence referrals from the health sector
- ❑ Health agencies sharing training resources with each other
- ❑ Health workers reporting an increased understanding of family violence issues/impacts and more confidence in recognising violence and taking appropriate action

FOR FURTHER INFORMATION PLEASE CONTACT

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FAMILY VIOLENCE PREVENTION TRAINING FOR HOME VISITORS AND AGENCIES THAT WORK MOST CLOSELY WITH UNDER 5s

PROJECT OVERVIEW

A large number of agencies from a wide range of sectors are involved with families and young children under 5. A broad intersectoral understanding of family violence issues and collective ownership of interagency roles in solutions will be critical if family violence is to be stopped. Family violence prevention is everyone's business and all social service agencies should have protocols/policies about family violence.

Home visitors for example see families in a wide range of situations, often stressful ones, and could be better trained to pick up "early warning" signs of violence and know what appropriate action to take. It is also important that family violence prevention (identification/referral) training packages are consistent across sectors so that citywide standards can be developed, communicated and maintained.

There are a number of family violence training packages, courses and providers already in existence. To some degree, training packages are transferable across sectors. The knowledge/training processes and support materials (eg. database of referral agencies) that will be developed in the health sector for example, could be shared with other sectors and agencies.

A Waitakere specific cross-sector training package could be developed and offered twice yearly for community and government agency staff to attend. Having a low cost, centrally coordinated and organised training course should reduce costs/organisation time for smaller agencies and ensure consistency in messages/teaching across the various sectors and home visitor agencies. Such a process would also likely enhance communication and networking between home visiting agencies.

NOTE: in the first instance, this project will dovetail in with the Health Sector Family Violence Prevention Training Project described on pages 14-16. This is to ensure consistent messages, supporting information and approaches to training are developed across both the health and broader social sector.

SOME KEY STAKEHOLDERS AND/OR RECIPIENTS OF CROSS SECTOR TRAINING

- WAVES
- Waitemata DHB
- Child focused social service agencies
- Housing NZ
- Ministry of Education
- Early childhood education/care providers
- WINZ staff
- Animal welfare officers
- Social workers
- Firemen
- Police
- Youth workers
- CABx and community house staff
- Budgeting agencies
- Social service agencies such as Salvation Army, James Family etc
- And other interested agencies and individuals

FAMILY VIOLENCE PREVENTION TRAINING FOR HOME VISITORS AND AGENCIES THAT WORK MOST CLOSELY WITH UNDER 5S

RESOURCES REQUIRED

- People resource to develop a Waitakere cross sector training package
- Compilation/production of local resources/tool kits
- Coordinator to organise training sessions (trainers, course logistics/admin etc) and evaluation

PROJECT MILESTONES

- Development of preferred local training package
- Appointment of coordinator/organising agency
- Holding first successful training session

PROCESS FOR GETTING STARTED

- Meeting of all those interested in further scoping the project (local needs, timeframes, focus etc)
- Identification/evaluation of existing training packages, processes and providers
- Development of a preferred Waitakere training package
- Identification and sourcing of funding required
- Prepare/organise first cross sector training session (should be closely evaluated with the training package reviewed accordingly)

ISSUES TO THINK ABOUT

- Impact of increased notifications to already stretched referral/helping agencies eg. CYF, Tu Wahine, Refuges etc.
- Appropriate organisational supports for staff attending training who may have had/be experiencing family violence in their own lives
- How to connect with agencies who may not see their staff as having a role in family violence prevention
- Specific training needs of Maori/Pacific home visitors identified and addressed.

SOME WAYS TO POTENTIALLY MEASURE SUCCESS

- Sellout demand for training
- Training attendees' satisfaction with training process
- Follow up with training attendees to see if they have implemented their training (eg. made any referrals)
- Increase in notifications to referral/helping agencies

FOR FURTHER INFORMATION PLEASE CONTACT

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PROMOTING COMMUNITY AWARENESS ABOUT THE IMPORTANCE OF THE FIRST FIVE YEARS

PROJECT OVERVIEW

The importance of the first five years of life and the pace and staging of child development is generally not well understood. Similarly the long term impacts on young children of witnessing/experiencing family violence are also not well recognised.

A strategic and **long term** approach to promote greater community understanding about brain and child development in the first five years of life is essential. The need to give our children the best start in life may be obvious, but the things we can practically do to make sure the “best start” actually happens needs to be more widely understood at both family and community levels.

Consideration will need to be given to the best messages to promote, with appropriate supporting materials developed to reinforce key messages. Effective mechanisms and processes for ongoing information dissemination will also need to be explored and developed.

SOME KEY STAKEHOLDERS

- Brainwaves Trust
- Well child providers
- Barnardos
- Plunket
- Marinoto Family Therapists
- Ministry of Education
- Ministry of Social Development
- Police
- Early childhood education/care providers
- And other interested agencies and individuals

RESOURCES REQUIRED

- Project Coordination
- Research/development/production of information and promotional materials
- Testing effectiveness of resources within the community both before and after

PROJECT MILESTONES

- Developing a project plan and evaluation strategy
- Preparation of messages and support resources/materials
- Identification of dissemination channels
- Putting the campaign into action

PROCESS FOR GETTING STARTED

- Meeting of all those interested
- Scope potential messages and strategies for delivery
- Develop campaign/action plan
- Develop materials/resources and delivery mechanisms
- Develop monitoring process to test impact of messages/resources

PROMOTING COMMUNITY AWARENESS ABOUT THE IMPORTANCE OF THE FIRST FIVE YEARS

ISSUES TO THINK ABOUT

- ❑ Need for messages/resources in a number of languages/cultural frameworks and best processes/people to develop these
- ❑ Best timing for awareness campaign launch
- ❑ Need to review learnings from MOH funded literature review of public health awareness campaigns (available mid year) to see what kinds of awareness campaigns work best/in what settings etc

SOME WAYS TO POTENTIALLY MEASURE SUCCESS

- ❑ Increased self reported awareness of importance of under 5s
- ❑ Increased awareness/publication of issues etc in local news media
- ❑ Requests for additional information/presentations etc to parent groups eg. Plunket, Parent Centres, early childhood centres etc.

FOR FURTHER INFORMATION PLEASE CONTACT

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ALTERNATIVES TO PHYSICAL VIOLENCE CAMPAIGN

PROJECT OVERVIEW

Child development experts generally agree that hitting children does not actually encourage the development of good/appropriate behaviour. It also reinforces the normalization of violence from a very early age. The alternatives that parents do have to physical punishment however are not widely known or understood.

There are already a number of useful publications/materials in existence that could be adapted and distributed locally to families in the first instance. For example: the "We don't hit anybody here" story book (written in 3 languages) for parents to read to their children could be widely distributed at the 15 month well child check, along with material for parents on alternatives to smacking/parenting strategies etc. Evaluation of these materials and development of new resources could be progressed over time.

There is funding in the Government's 2003/4 budget for both national and local alternatives to physical violence awareness campaigns. A local initiative could be launched at a similar time to national media promotion so that both campaigns support each other.

SOME KEY STAKEHOLDERS

- Violence Free Waitakere
- WAVES
- Well child providers
- Office of the Commissioner for Children
- Epoch/Unicef
- Child Youth and Family
- Ministry of Social Development
- Marinoto Family Therapists
- Police
- And other interested agencies and individuals

RESOURCES REQUIRED

- Project coordination and development
- Funding to purchase booklets/resources
- Additional funding for well child providers to include a discussion on alternatives to physical violence at the 15 month health check
- Additional training for well child providers in teaching caregivers about alternatives to physical violence
- Funding to provide some skills/training directly for parents/caregivers
- Funding for group alternatives to physical violence work shops

PROJECT MILESTONES

- Achieving buy in from well child providers
- Attracting project funding
- Launching successful city campaign

ALTERNATIVES TO PHYSICAL VIOLENCE CAMPAIGN

PROCESS FOR GETTING STARTED

- ❑ Meeting of all those interested
- ❑ Further scope project (timing, audience, mechanisms for delivery, best resources, funding requirements etc)
- ❑ Research existing best practice materials
- ❑ Develop local project plan (including well developed communication strategy)
- ❑ Seek funding for project implementation
- ❑ Launch project

ISSUES TO THINK ABOUT

- ❑ A one off or ongoing promotion that should grow/be expanded over time?
- ❑ Likely buy in from busy well child providers to add another component to their wellness checks
- ❑ Process for evaluation/review to ensure that promotion materials are both heightening awareness **and** influencing behaviour change
- ❑ Need for messages/resources in a number of languages/cultural frameworks and best processes/people to develop these

SOME WAYS TO POTENTIALLY MEASURE SUCCESS

- ❑ Survey to see how useful materials were to parents (and to find out what else would be helpful)
- ❑ Reduction in self-reported use of physical violence toward children
- ❑ Increased community awareness of alternatives to physical violence
- ❑ Reduced notifications to CYF and injury to children (note: both are long term measures and would be unlikely to directly reflect the impact of any one initiative alone)

FOR FURTHER INFORMATION PLEASE CONTACT

Elaine Dyer, Violence Free Waitakere - phone 416 8774 elainedyer@timatanga.net.nz

PROMOTING AND CELEBRATING WAITAKERE'S CHILDREN

PROJECT OVERVIEW

Research shows that societies that accept violence and do not value children are more likely to generate a higher incidence of child maltreatment than in societies in which children are highly valued.¹¹

Reclaiming wider community ownership and pride in children will be necessary in stopping family violence against young children. The concept “that it takes a village to raise a child” is one worth promoting, as are strategies and plans that promote the celebration of children and the important place they have in our society.

Although Waitakere City Council has a “First Call for Children” policy, considerably more could be done across the City – especially in terms of involvement of children and young people in on the ground projects, along with the promotion of children’s rights and values within our City.

Some examples:

- ❑ The concept of a Waitakere Children’s Day could be developed. This could be a day/a week/a festival/a series of linked events all focused on celebrating children and could dovetail with national Children’s/Tamariki Day.
- ❑ Or a certificate could be sent to every child born in the City to congratulate them on their arrival and let them know their rights, roles and responsibilities in being a citizen of Waitakere.

SOME KEY STAKEHOLDERS

- ❑ Waitakere City Council - libraries, leisure, public affairs etc
- ❑ Te Whanau o Waipareira Trust
- ❑ WEST
- ❑ Child focused agencies
- ❑ Schools
- ❑ Early childhood education/care centres
- ❑ Ministry of Social Development
- ❑ Child Advocacy Groups
- ❑ And other interested agencies and individuals

RESOURCES REQUIRED

- ❑ Coordination resource to ensure wide range of stakeholders are involved/ linked into celebration/ promotion activities
- ❑ New dedicated funding to run child focused celebrations/ promotions/ events (ongoing annually)
- ❑ Significant communication budget to ensure opportunities for attendance/ participation are widely promoted

¹¹ Department of Child Youth and Family (1999) “Familial Caregivers’ Physical Abuse and Neglect of Children: A literature review”

PROMOTING AND CELEBRATING WAITAKERE'S CHILDREN

PROJECT MILESTONES

- ❑ Development of a special city children's celebration/promotion plan based on both existing activities and potential new celebrations
- ❑ Attraction of necessary resources to fund the plan
- ❑ Successful events/promotions/celebrations held on an ongoing basis and grown and developed over time

PROCESS FOR GETTING STARTED

- ❑ Meeting of those interested
- ❑ Identification of events, activities etc already planned over the next 12 months
- ❑ Opportunities to link/expand/ existing agency event plans explored
- ❑ Additional resourcing requirements to expand children's celebrations identified
- ❑ Potential funding sources explored

ISSUES TO THINK ABOUT

- ❑ Benefits of city celebrations vs. localised suburb/neighbourhood ones
- ❑ Logistics of linking existing events/celebrations for 2003/04
- ❑ Process/how to define children's rights as a citizen of Waitakere and process for development a shared city statement about children are valued in Waitakere
- ❑ How to focus on under 5s within the wider children/youth age group
- ❑ Most sustainable ways to stage and grow child focused events/celebrations over time
- ❑ The need to target Maori and Pacific children and their families, given their increasing proportion within the City's population and the best ways to do this.

SOME WAYS TO POTENTIALLY MEASURE SUCCESS

- ❑ Participation at events/celebrations
- ❑ Number of stakeholders involved in citywide promotions/celebrations
- ❑ Perception question on how the city values children included as part of the City Council's wellbeing monitoring process (should be asked of young children as well as adults)

FOR FURTHER INFORMATION PLEASE CONTACT

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MENTAL WELLBEING OF PARENTS

PROJECT OVERVIEW

Supporting the mental wellbeing of parents and caregivers is critical. Drug and alcohol addiction, along with mental unwellness can be major factors in family violence and can impact on many parents' ability to provide for their children and keep them safe.

Ensuring that mental health issues and addiction issues are recognised as early as possible and that intervention/support services provided EARLY to support parents is paramount. It's also important that plans are made to ensure children's safety during this time.

Primary health care providers are key to ensuring mental wellbeing issues are recognised and assisted at the earliest stage possible. Accessible information to enable GPs, Midwives, Well Child Providers etc to support and respond to parental wellbeing needs is key in this regard.

It's also important to ensure that resources and funding to support parents and caregivers known to mental health services remains high on both DHB and Ministry of Health funding priorities. Increased funding for maternal mental health services (especially early intervention assessment/services) is also key.

First Steps

- Collating and updating existing mental wellbeing resources and referral points for GPs and other primary care providers in Waitakere would be a useful first step
- Ongoing advocacy for better resourced maternal mental health services

SOME KEY STAKEHOLDERS

Shared Vision in consultation with:

- Waitemata Mental Health Services (including maternal mental health services)
- Regional Drug and Alcohol Services (CADS WEST)
- Health West
- Waiora Amataga
- Other relevant primary health providers
- Consumer support groups including Postnatal Depression Support Group

RESOURCES REQUIRED

- Initial coordination resource to convene group to look at existing Shared Vision information/material sources for primary care providers
- Resourcing to update existing Shared Vision material for primary care providers
- Funding to print, distribute and publicise manual and its usefulness among primary care providers

PROJECT MILESTONES

- Group convened to review existing materials and assess current needs from both primary care providers and consumer perspective
- "People" resources made available to review and update existing materials/information
- Buy in from local PHOs to the project – budget and participation on project team

MENTAL WELLBEING OF PARENTS

PROCESS FOR GETTING STARTED

- ❑ Meeting of those interested to revisit existing materials and look at what other information/referral points etc is needed
- ❑ Discussions with PHOs on ways to best communicate with primary care providers re: assessment/referral of carers with potential mental wellbeing/addiction issues
- ❑ Development of project plan – timing, resources required
- ❑ Updating/preparation of new resource
- ❑ New resource peer reviewed by GPs/Primary care providers prior to implementation
- ❑ Printing and dissemination

ISSUES TO THINK ABOUT

- ❑ Could also develop training sessions for primary care providers to maximise usage of new resource manual
- ❑ Links to health sector family violence training - way to get mental health/addiction messages across at the same time and to promote resources produced by this working group
- ❑ Need for web based resource?
- ❑ Service gaps and priorities – especially in terms of early intervention and for Maori/Pacific caregivers

SOME WAYS TO POTENTIALLY MEASURE SUCCESS

- ❑ Primary Care Providers reporting use of manual
- ❑ Plans made and funding provided to update the manual annually by PHOs

FOR FURTHER INFORMATION PLEASE CONTACT

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LOCALITY BASED INTERSECTORAL PROJECT FOCUSED ON IMPROVED SERVICES/OUTCOMES FOR UNDER 5S AND THEIR FAMILIES

PROJECT OVERVIEW

The need for greater community involvement in local services planning is being increasingly recognised, as is the need for improvements in intersectoral planning, service coordination and funding at the local level. Evidence has also shown the benefit of increased investment in targeted health/education and child development services for under 5s, especially in lower socio-economic areas.

In the UK, considerable investment (approx. £452million per annum) is now being focused on the establishment of community development type projects in selected localities but with very specific health and wellbeing targets for young children. There are now more than 500 "Sure Start" communities in the UK. The aim of these programmes is to work with parents-to-be, parents and children to promote the physical, intellectual and social development of babies and young children - particularly those who are disadvantaged - so that they can flourish at home and when they get to school, and thereby break the cycle of disadvantage for the current generation of young children.

This approach has not really been investigated in a New Zealand context, yet may well have considerable merit. By focusing on a locality in the City where there is both high socio-economic need and significant proportions of under 5s, an intensive, under 5s focused project could make a significant impact both on child, family and community outcomes by:

- ❑ Reviewing local access to services and service providers and identifying other unmet needs of families/whanau caring for under 5s eg. need for outreach clinics, specific language speaking home visitors/professionals, local provision of preschool education/primary health services etc, need for more parks/playgrounds, provision of public transport, family centres/community centres, need for increased funding for existing service providers
- ❑ Extending/introducing new learning/development programmes for children and whanau eg. HIPPPY, literacy programmes for parents, home/whanau based learning, behaviour change programmes for difficult preschoolers
- ❑ Undertaking targeted campaigns/programmes eg. alternatives to smacking, immunization, diet/exercise and nutrition, checking early for glue ear or hearing difficulties, participating in early childhood education
- ❑ Reviewing local health/social service information and working with communities to identify and implement local priorities for child/whanau focused action
- ❑ Celebrating local children

LOCALITY BASED INTERSECTORAL PROJECT FOCUSED ON IMPROVED SERVICES/OUTCOMES FOR UNDER 5S AND THEIR FAMILIES

Responsibility for developing and managing the project would lie with a joint committee made up of local community leaders, parents and government/ community agency representatives.

In some ways, the project concept mirrors the community development framework of the Ranui Action Project but would have more targeted outcomes for the under 5 population within a given locality. The project itself would likely incorporate many of the strategies for success noted on page 9.

A project of this nature would undoubtedly mean an increased investment in services for the chosen locality. However, in many cases it could involve a reprioritization or reconfiguration of existing investment/services.

The process for locality selection would need to be well researched and mandated by a wide group of potential participating agencies. The host community themselves would also need to show a strong desire to actively participate/engage.

Given the newness of the project concept and the potential need for significant new investment, strong support for the project would also be required from the Ministers (and Ministries) of Social Development, Child Youth and Family, Health and Education etc, along with the City Council.

It is recommended that the above project be approached in two stages:

- (1) Completion of a full project scoping exercise – project description (purpose, outcomes, objectives, service specifications etc), project process, identification of key stakeholders, costs/benefits, opportunities/ challenges, costs, governance issues, potential risks, timeframes, outcome measures, success indicators etc
- (2) Identification of Potential Locality for project implementation

SOME KEY STAKEHOLDERS

- Ministries of Social Development, Health, Education, Child Youth and Family
- Waitakere Collaboration Strategy Group
- Waitakere Intersector Group (government agencies)
- Waitakere City Council
- CYF Local Services Mapping Project
- Child/whanau service based agencies
- Health West
- Waiora Amataga
- Safe Waitakere
- Pacific Foundation
- Institute of Policy Studies (AUT)
- Centre for Social and Health Outcomes Research and Evaluation (SHORE) – Caregivers Needs in Waitakere/North Shore Research Project

LOCALITY BASED INTERSECTORAL PROJECT FOCUSED ON IMPROVED SERVICES/OUTCOMES FOR UNDER 5S AND THEIR FAMILIES

RESOURCES REQUIRED

- ❑ Establishment/coordination of an initial working group
- ❑ Funding to allow initial project proposal to be scoped/developed and communicated
- ❑ If a project is subsequently developed then an overall coordination/development resource will be required along with resources within individual agencies and special project/services funding
- ❑ Evaluation resource will also be essential, given the investment involved and the national significance of the initiative

PROJECT MILESTONES

- ❑ Agreement from key Ministries that this is a project they will consider investing in (both stages one and two)
- ❑ Formation of a local working group
- ❑ A robust project proposal is prepared and reviewed by the working group
- ❑ A collective decision on whether or not to proceed with the locality project is made. If yes.....
 - Locality chosen
 - Funding acquired
 - Project initiated
 - Successful set up phase implemented

PROCESS FOR GETTING STARTED

- ❑ Discussions with key stakeholders to seek interest in progressing/resourcing initial project scoping work
- ❑ Establishment of initial working group to explore the potential of the under 5s/wraparound locality concept
- ❑ Identification of resources and a contractor to undertake a robust project scoping exercise (costs/benefits of project, clarification of sector outcomes sought, alignment with city/government goals, ownership of the project, responsibilities/resourcing requirements of various agencies, process for selecting a locality, steps for locality project establishment)
- ❑ Scoping exercise undertaken
- ❑ Communication with/buy in sought from key Ministers/Ministries and Council – ie. commitments from major funders gained for actual implementation (if scoping report recommends implementation)
- ❑ Decision made locally on whether to proceed with a locality project
- ❑ If yes, process for choosing and approaching a locality is developed and undertaken

LOCALITY BASED INTERSECTORAL PROJECT FOCUSED ON IMPROVED SERVICES/OUTCOMES FOR UNDER 5S AND THEIR FAMILIES

ISSUES TO THINK ABOUT

- ❑ Effort/passion required to establish the project
- ❑ Ability to separate project scoping exercise with discussions about actual localities
- ❑ Timing – is this good idea that's a couple of years too early?
- ❑ Likelihood of attracting significant new funding for the chosen locality
- ❑ Strategies required to redirect already allocated government resources into a multifunded locality project
- ❑ Local ownership vs ownership from Wellington (and its implications)
- ❑ Commitment and buy in from larger government and community agencies
- ❑ How to ensure voice of community and community agencies is strong throughout project development and implementation
- ❑ Evidenced commitment to partnership approach by all key stakeholders and to shared power and control

SOME WAYS TO POTENTIALLY MEASURE SUCCESS

- ❑ Improvements in a few selected health, welfare, education measures (ie. measures that relate to specific outcome targeted)
- ❑ Levels of community participation/buy in to the project
- ❑ Increased investment in under 5s in the chosen locality

FOR FURTHER INFORMATION PLEASE CONTACT

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MAORI FAMILY VIOLENCE PREVENTION CAUCUS UPDATE

RESPONSE FROM THE MAORI CAUCUS TO THE PROTECTING OUR TAMARIKI PROJECT AND PROCESS

Discussions within the Maori Caucus highlighted the following issues:

- ❑ Maori are significantly over-represented in “Family Violence” statistics.
- ❑ However Maori are not appropriately represented in the many diverse forums, hui, groups etc...in which “Family Violence” issues are discussed and caucused.
- ❑ The issue of inadequate Maori representation and participation in all the varying caucus groups at this particular forum highlighted an ongoing frustration held by many of the Maori professionals who were present at this hui.
- ❑ This frustration was due to the varying caucus groups in which Maori would like to have and needed to participate. However participation was somewhat inhibited due to the inclusion of a separate Maori caucus in which Maori also felt an obligation to attend. Some Maori also felt that the research done in this field did not provide a reasonable level of Maori consultation or perspectives.
- ❑ Nevertheless, the inclusion of a Maori caucus is both acceptable and appropriate. However Maori input in all the caucus groups is necessary in order that we can share our expertise to non-Maori as skilled professionals in our particular field and also provide a Maori viewpoint.
- ❑ That appropriate Maori representation and perspectives are necessary to raise awareness and provide a knowledge base for all professionals, both Maori and non-Maori.
- ❑ The “Protecting our Tamariki” forum raised awareness to Maori present at this hui that we needed better representation in the issues of family violence and that there be representation of Maori at all levels of hui, consultation, research and information sharing
- ❑ That as Maori we will spearhead our own initiatives towards addressing better Maori representation and consultation throughout the myriad of the many social service delivery agencies within the West Auckland/Waitakere rohe.

Next Steps for the Maori Caucus:

Identify and Prioritise Issues and Needs for the Maori Service Providers and the Maori Community, including:

- ❑ Development of a Maori Service Providers Network
 - Examine and use existing Maori Network Models
 - Set up a network to provide support, skills and intelligence to Maori Service Providers and the Maori Community
- ❑ Inventory / Directory of Maori Service Providers
 - To identify competencies, skill level of each organisation and service provider.
- ❑ Identify Funding Options
- ❑ Share information and intelligence.

For further information or to join the Maori Caucus please contact Ngaromata Reid, Waitakere Safer Community Council Trust (WSCCT) phone 837-2273 or email WSCCT@ihug.co.nz or Breena Tatana, Puriri Project, phone 832-3711, or email Taiao@xtra.co.nz

ATAATA O LE TAEAO
PACIFIC FAMILY VIOLENCE PREVENTION CAUCUS UPDATE
KIA ORANA, TALOFA LAVA, BULA VINAKA, FAKALOFA LAHI ATU,
TALOHA NI, MALO E LELEI

Formation of Ataata o le taeao

The Protecting our Tamariki project talks about giving our children a good start. Ataata o le taeao is the dawning of light (early morning). In this symbolises the dawning of a new day bringing new promises, new ideas, new thoughts and new visions all working towards a new start. The child also is seen as a new seedling. To give the seed a good start, it needs to be nurtured and protected. The Ataata o le taeao project looks at promoting Pacific children and giving them a good start by raising awareness of the present situation and initiating community discussions on how to value our children. Hopefully, this will be a start to changing attitudes and behaviours in how we discipline our children.

The Pacific Caucus group has begun meeting regularly and has developed three major project ideas to date

1. *Year Long Radio Campaign*

increasing community awareness about family violence issues and prevention via a 12 month radio campaign

- ❑ different issues per week with a 30 minute presentation of issues and 30 minute talkback. This will allow for interaction as well as evaluation of the project
- ❑ 531 PI, Niu FM, ethnic radio could be targeted = would have a regional and potentially national audience
- ❑ sessions in different Pacific languages
- ❑ could start with brain development and link up to damage that can happen from violence to children as well as presenting practical strategies to replace hitting

2. *Pacific Community Group Pilot*

- ❑ Need to find places where families with young children congregate. Early childhood centres probably won't work as most parents drop their children off on their way to work
- ❑ A better option may be to work with the newly created Pacific Ministers Fraternal in the West to seek two churches to host a family violence prevention initiative

3. *Celebrating Pacific Children in Waitakere*

- ❑ Look to build on celebrations for Children's Day Sunday in October
- ❑ Focus on developing a fun day for young children and their families (games, fun, food etc).
- ❑ There is a Father's Day and a Mother's Day but no children's day. We would like to concentrate on this and maybe even work towards making it a formal Children's Day.

For further information or to join the Pacific Family Violence Prevention Caucus please contact Rita.Harder@WaitemataDHB.govt.nz, phone 837-6643 ext-6643.

7. NEXT STEPS FOR THE PROTECTING OUR TAMARIKI ACTION PLAN

Funding For Projects Being Sought

Funding to assist with project implementation plans will be critical. We are now much clearer on what we want and need to do to stop family violence and its impacts on small children BUT resources to develop appropriate programmes, training, campaigns, promotions and support structures is our next big challenge. The strength of Protecting our Tamariki is that it incorporates actions across a number of different levels, sectors and communities. It's a package of interlinked projects that collectively will make a positive change to family violence outcomes in Waitakere. We will be holding meetings with a range of potential funders to seek their ongoing financial support for this initiative.

Coordination Resource Essential

One of the most immediate needs is for coordination and development funding to assist the growth and implementation of projects. Given the long term nature of the plan and its many strands, the creation of a Strategic Working Group to 'keep things together' is seen as key. Resourcing will be sought for a part-time project coordinator to assist the formation of the Strategic Working Group.

Evaluation Resource

Like many others, we want to ensure that what we are going to do over the next five years will make a difference within our community. We will seek to attract additional funding for evaluation of both our process¹² and impacts/outcomes of projects, both individually and collectively, over time.

From Protecting Our Tamariki to "Great Start?"

As outlined above and on pages 12-13 the creation of a Strategic Working Group will be essential for the successful implementation of this Plan.

Discussions on the appropriate structure and focus for this group are underway now and it is hoped that this leadership/coordination group will be up and running by December. Issues of representation will also be key. Bringing together a small group of passionate individuals with the right technical /professional/people qualities will be no easy feat.

It's essential that both ongoing processes and structures are designed to best meet the needs of both Maori and Pacific communities – especially given the significant projected growth of children within these (and other!) ethnic groups.

Monitoring and Communication

The Plan has been written, now it's time for projects to get started. A key role of the Strategic Working Group will be to develop ongoing communication with the wider community about progress with this next phase of project implementation. Updates will initially be made via the Safe Waitakere newsletter and the Wellbeing Collaboration newsletter. It's also expected that a Community Forum process will be developed by the Strategic Working Group in 2004, allowing for wider community feedback, discussion and input into this area of work on an ongoing basis.

¹² A case study that follows the development of Protecting our Tamariki Project is currently being undertaken as part of the Strengthening Communities through Local Partnerships Research Project (www.lpg.org.nz)

Appendix One



ABOUT THE WAITAKERE WELLBEING COLLABORATION PROJECT

THE PROJECT'S PURPOSE....

The Waitakere Wellbeing Collaboration Project is an initiative to facilitate government and community agencies, and Waitakere City Council to identify collaborative focus areas and projects, and to facilitate joint action and planning.

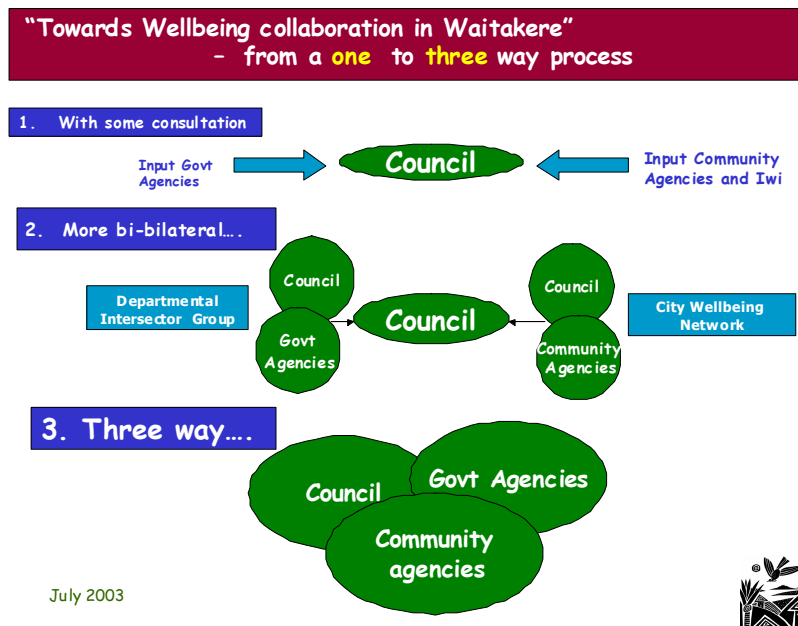
HOW DID WE GET TO HERE.....

This initiative has come from a strong base of collective action in the City. The wellbeing process, which began in 1996, has involved community and government agencies working with Council to assess, report and strategise on key wellbeing issues in the City. Wellbeing Reports were prepared and Summits held to discuss and debate next steps in 1996, 1998 and 1999. In 2000, a presentation on the City's needs was made to Prime Minister Helen Clark and a follow up first Wellbeing Strategy was prepared by community networks in 2000-1.

Two ongoing forums were also formed to work with Council on wellbeing issues, an Intersector group (a quarterly meeting of government agencies) and a Community Wellbeing Network (a super-network of community networks).

COLLABORATION PROCESS BEGINS....

Rather than work independently, it was jointly decided that the three sectors – community agencies, government agencies and the City Council, should be working together.



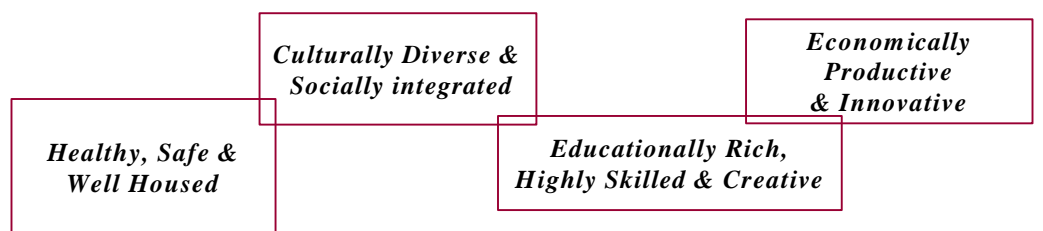
From there a small "Collaboration Strategy Group" was setup consisting of representatives from each of the three sectors (Council, Government and Community) and over the winter of 2002 they drafted some shared strategic outcomes and focus areas for collaborative effort.

This new Collaboration Group also secured funding from Ministry of Social Development, Ministry of Health, Community Employment Group, Department of Child Youth and Family, Waitakere City Council and Housing New Zealand to employ a Collaboration Project Manager.

The Strategy Group identified the collective outcomes and drafted the priority focus areas and some goal areas to gather around, called "Calls To Action".

Waitakere Wellbeing Collaboration Project

Strategic Outcomes



Focus areas



June 2003



In December 2002 the Wellbeing Summit, attended by over 170 individuals from more than 70 organisations, adopted and mandated the collaborative direction for the City and the 6 draft Calls to Action. The Summit also created one extra Call to Action around Inclusion. At the Summit, organisations also committed to participating on working groups to identify specific, measurable and achievable collaborative projects and ways to make them happen.

The Calls to Action for 2003-5 are:

- ❑ Every child has access to quality preschool education
- ❑ Every new migrant and refugee to Waitakere City settles successfully
- ❑ Families give their children a great start
- ❑ Violence against children and women is reduced
- ❑ Every student in Waitakere leaves school with a plan
- ❑ Develop a culture of inclusion that fully includes all people in Waitakere City
- ❑ Schools and communities working together

These Calls to Action have provided a gathering point for action. As of August 2003, the Calls to Action Teams have and are still identifying projects. Over 45 groups and organisations are currently involved with 9 projects currently in action.

A sample of the projects completed, in progress or being developed include:

- ❑ setting up an Ethnic Board
- ❑ migrant settlement services and information service setup
- ❑ formulating a checklist for inclusion
- ❑ convening an early-childhood providers forum
- ❑ a Gateway/youthworks employment initiative
- ❑ collation of parenting support information
- ❑ best practice school/community relationship promotion

The Great Start Waitakere; Protecting Our Tamariki initiative has also been integrated into the Collaborative framework. Up to a further 10 projects are being developed through this project.

The Collaboration project is also progressing two other components, an online information portal and the facilitation of more a coordinated planning approach.

Collaboration Information And Planning Projects

Online social services information

- Link to database of community organisations collated by CAB's, Child Youth and Family, WADCOSS and others
- Link to Waitakere social services data and research
- Link to relevant & useful Strategic and Business Plans
- Noticeboard and discussion area

Coordinated Planning

- Facilitate shared planning
- Facilitate inclusion by contributing groups in individual plans
- Identifying joint consultation

June 2003

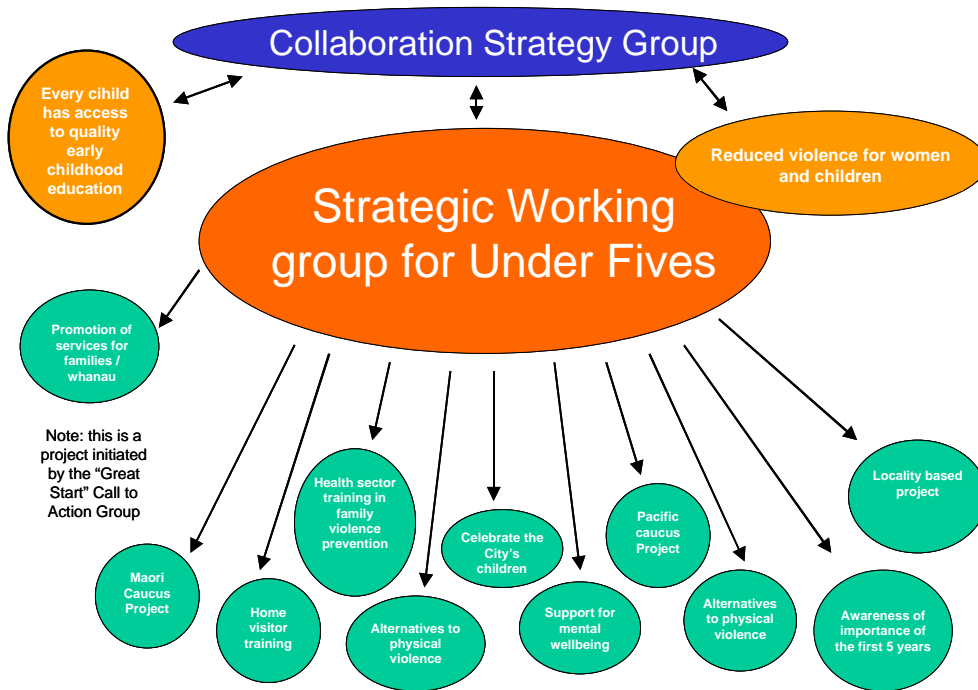


Further information can be seen at <http://www.waitakere.govt.nz/ourpar/collabproj.asp> or please contact Mark Allen, Collaboration Project Manager, on 836-8000, extn 8813 or mark.allen@waitakere.govt.nz

Appendix Two

The diagrams below show the relationship between the Protecting our Tamariki Projects, the Collaboration Strategy Group and its linkages and to the other related "Calls to Action" working groups who have projects ongoing. These relationships will be further developed over time.

Potential structure for Waitakere collaborative under 5 initiatives



All groups are autonomous, collaborative and consultative

Collaboration Strategy Group role is the consideration of overall coordination

Responsibility for conflict resolution sits with all

Appendix Three

Stopping Family Violence in Waitakere SOME IDEAS FOR ACTION ...

Sixteen key informant interviews were undertaken with a range of local and national “experts”. Their ideas for action have been grouped into thirteen main themes below....

1. Training

NB: consistency of training key – both between and within sectors

- Comprehensive violence prevention training across the local health sector
 - Check on plans/progress with workforce training within WDHB
 - Check on plans/progress with workforce training within Health West, local midwives collectives, well child agencies, West Kids, mental health services, Wai Health, Pasifika Healthcare and Union Health
 - Check on ability/willingness of DHB to take a leadership role in facilitating/leading cross sector training in family violence prevention training ie share trainers/training packages, possibly coordinate and/or fund training to home visitors outside health sector
- Develop family violence training (emphasis on identification and referral) for a wide range of agencies (community, public and private sector) involved with families/under 5s, with an emphasis on home visitors - training should include initial and refresher courses – needs to be ongoing not just one off)....
 - Eg. Housing NZ staff, early childhood education/care employees, WINZ staff, sports coaches, animal welfare officers, meter readers, social workers, firemen, community constables, youth workers, CABx and community house staff, budgeting agencies, social service agencies such as Salvation Army/James Family, pharmacists (“the health professional we see most often”) etc
 - Target sectors who should be having high rates of referrals but they are not eg. preschools and GPs
 - Will need to also some culturally appropriate training for Maori and PI home visitors as their agencies often designate them to work with Maori/PI families specifically and we need to recognise that approaches/responses to family violence are often different for these cultures
- Expand knowledge within the wider health/social sector about practical alternatives to violence that parents can adopt when disciplining their children so that professionals can “teach” others within their professions and parents/families they are working with as the opportunity arises (one on one role modeling/explanation is often better than a pamphlet)

2. Awareness Campaigns

- Locally led campaign that says violence isn't acceptable in our community. Needs to be more than billboards/slogans/social marketing campaign – would need to be underpinned by series of community initiatives that expand discussion, awareness.
 - Could promote bad local stats, don't get people to engage unless there's some local horror/concern...need to promote nosiness, gossip and curiousness about what's happening over YOUR fence
 - Bad news stories can help grab attention, but use this as a launch pad to promote the local response/plan
 - BUT when get down to working with those who are living with/most at risk from family violence need to be much more sensitive/discrete in terms of awareness interventions – don't focus overtly on the family violence label, get to it a different way

 - Talk with perpetrators of violence, maybe via Man Alive etc to do some local primary research on what would make them stop offending, what messages, services, triggers etc. This information could then shape a further targeted awareness campaign.

 - Get a specific family violence component worked into health promoting schools, Family Start

 - Get school children to do a survey about what they watch at home. One was done at Henderson Primary a few years ago and it blew people away, as it showed:
 - time children were going to bed
 - what children were watching
 - normalising" of violence based on fact that children were watching things that they officially shouldn't have been watching

 - Are fantastic posters about Pacific Women and family violence (are PI ethnic specific) - these could be made multicultural specific (ie. in Indian, Chinese etc) and promoted within other migrant communities

 - Really push Zero Tolerance to Violence in Waitakere - it needs more teeth and more resources if it's to be really effective

 - Encourage suburbs, schools, early childhood centres etc to develop their own local family violence prevention campaigns/projects...have community based funding pool that people can apply to, to do their own thing in their own way...but make "expertise"/support available if they need it.
- NB:** was suggested an extra sum of funding specifically for family violence could be tacked on to the Council administered "Community Wellbeing Fund"...a process for application, administration, selection etc is already in place
- City level campaign/material about impacts of violence on children and importance of early years, how we set children up for life

 - Essay competition - get older children to write about how they want to be valued, supported, disciplined
-

- Poster competition - for younger children, maybe with theme on celebrating children in Waitakere could be developed into a public art/poster campaigns at City Bus Stops, in Libraries, public places etc
- Postcard Drop in every letter box – family violence not acceptable in Waitakere, as a city time to do something about it, things you can do, contact numbers etc.

3. Citywide Screening

- Get all well child providers universally screening for family violence (not just Plunket).....do it for first 5 years of child's life
- Plunket family violence screening question should happen at each visit – not just first or three month visit. It takes a long time to build up relationships of trust whereby women may feel comfortable to confide/seek help

4. Advocacy

- Local advocacy campaign for government to repeal section 59 of the Crimes Act
- Council to take a much stronger role and put more resources into child advocacy
 - Lead the charge politically, in the local media, with stories/projects/actions that: promote children, their rights and our obligations to support/nurture/value them
 - Take strong role in encouraging government agencies to collaborate around family violence and under 5s
 - Set up some seed funding for initiatives that will help attract other funders – eg. develop and administer a special community violence prevention funding pool alongside the community wellbeing fund process
 - Take a monitoring/overview role in terms of what's happening for children across the City and checking on progress regularly – need to ensure central government policy intentions are actually being translated into services/initiatives on the ground, and be vocal if this isn't happening
 - Stronger citywide leadership for Waitakere to be Zero Violence City – the charter that was signed a few years ago needs to have some REAL TEETH, and resources allocated to achieve this. Also need stronger political leadership - like Mayor Rudolf Giuliani did in New York
- First Call for Young Children in budgets of government agencies in Waitakere
 - Increased local investment in under 5s
 - More co-funding of projects/initiatives
- Formation of ongoing Waitakere based action/advocacy group for under 5s.
 - Oversee implementation of “Protecting our Tamariki” – support and reporting body for those undertaking specific tasks/projects
 - Promote and monitor ongoing collaboration between agencies for under 5s – multisector, multilevel.
 - Look to develop some multiagency protocols (that have TEETH) around coordination of services for children under 5 and their families etc
 - Monitor local issues/problems and take appropriate action
 - Lead/coordinate initiatives as an entity, or involving range of sector/community providers eg. PI Family Start, Pasifika Healthcare, HIPPY, PI Mental Health services, PI Safety and Prevention, PI Social Workers, PI community health workers = about strengthening coordinated responses, sharing issues, ideas and resources for under 5s etc

- Promote children's rights locally
 - Maintain a big picture view but focus on local issues/children's needs
 - Develop stronger local, regional and national links/integration to support local under 5s
- Ensure Health West (new local PHO) develops a strong focus on "family wellbeing" rather than just health – means primary care sector needs to own family violence issues and be involved in prevention initiatives too (funding, support, training, identification, promotion etc)
 - Emphasise importance of migrant males getting work – helps their self esteem and means they aren't home all day.....big stressor in many households and likely contributor of family violence in new migrant communities

5. More Support for Existing Services

- Increased funding for Wai/Pasifika and other culturally based social service agencies (eg. Tu Wahine) to do MORE health/social service/safety/violence prevention messages/supports in early childhood centre settings
- Increased funding for childcare respite services provided by Barnardos etc so that a larger number of families are able to access these services in times of stress
- Increased funding to allow Family Start criteria to be expanded to achieve citywide coverage of under 5s and referrals from sectors other than health
- Funding to get more "family and community helpers" back into communities – more Plunket nurses and public health nurses who were funded to do the broader 'care' things they used to do. Need time/space/opportunity to build up relationships/trust so that women can seek help and/or be supported in a safe, non threatening way
 - Help women/families in their home setting and enabling them to reach out/join into community based networks/agencies/supports
- Increased funding for maternal mental health services so that a larger number women are able to be assisted more effectively and more immediately (could develop a joint campaign for this with Shared Vision)
- Waitakere Home Visitors Initiative – more coordination and awareness (at a strategic level) of range of organisations that are visiting homes eg. Public Health Nurses, Iwi services, CYF social workers, James Family, Barnardos, DHB, Family Start, HIPPY, Plunket, Wai Health (maternity/PAFT/well child/social services), West Kids, Housing NZ Tenancy Managers, RTLBs, Anau Ako, Salvation Army, Viviana, Police Youth Aid workers.) Could organise a hui/forum on home visitors – bring in an interesting speaker, look at issues and solutions to make services more collectively effective
- Need closer linkages between women's and children's agencies. This would be assisted by providing support services for women within children's services and more support services for children within women's and men's services eg. Children's advocate in Man Alive and women's advocates within CYF
- More funding and support for young people outside of the school system (alternative education) – need to put extra resources/training/supports around them before (and as) they become the parents of tomorrow. Need to break the cycle of despair before the next generation arrives.

6. Early Childhood Education

- Get ALL under 5s in Waitakere into early childhood education (have a 100% target)
 - promote easy access, ongoing attendance, services that focus on mothers AND children, do more than just education

7. Workplace Initiatives

- Replicate Safe Auckland/DV Centre joint venture pilot where Sky City and Police are working with the Auckland DV Centre to deal with employee family violence issues in a conscious way - about de-normalising family violence
 - facilitate information sharing/understanding/education about the problem and responses to it
 - understand absentee issues that relate to FV
 - develop a workplace atmosphere of support for employee welfare
 - way to reach men on a much wider scale...a universal rather than targeted approach
 - get started via a couple of larger employers in the City (maybe the Council and Waitemata Health)

8. Parenting Education etc

- Expand antenatal class agendas to introduce frameworks for parenting – give people some language and material re: options for their own parenting strategies. Let new parents see they have choices and options. Midwives/well child providers could also do more of this post baby – ie handing out pamphlets, resource materials, contact points etc.
- Pacific Foundation and Brainwave Trust want to get parenting education into schools, at the 4th form level
 - Teach about brain development and anger/violence triggers
 - Incorporate family violence learning/messages right across the curriculum
 - in science, look at nutrition, and child development
 - in social studies, look at the way different cultures deal with issues such as parent/child relationships, and the way different cultures value children
 - in English, look at literature which focuses on child/parent issues
 - in maths, calculate cost of living etc
 - in physed, look at how children play and do things like design a safe playground
- include an experiential component like visiting/working in a crèche and then discuss observations/learnings back in the school classroom setting.....Birkdale College did this some years ago with great success
- Develop more education within schools about what the roles/responsibilities of parenting are (can't rely on children getting this from home)
- budgeting skills
- how to be a good parent
- relationship development and relationship responsibilities

- Expand HIPPY programme to other communities in Waitakere - it's been shown to work
- Develop special parenting and support programmes for young parents and especially young men (pre and postnatally) as they are most at risk
- Need to ensure those outside of the education sector and/or in alternative education are receiving effective "life skills" training – about being a good person, a good parent and a good citizen. About making sure these young people are having their wider needs addressed – self esteem, education, basic work skills training, cultural foundations, and broader life skills (money, relationships, good parenting, what they could be and how they could get there)
 - at risk teens are the parents of tomorrow (need to know about what harm they can do to their babies from smoking, drinking, drugs etc)
 - "Life Skills" education around parenting should also be more effectively incorporated into the mainstream education system
- Develop/distribute a series of brochures for what/how to protect your child, what to do if you're feeling aggressive, how to be the mum you want to be, alternatives to smacking etc
 - use cartoon pictures
 - keep things simple
 - available in lots of languages
 - circulate widely via early childhood centres (private/public/community sector), well child providers, GPs, schools
- Increase community knowledge about little children via parenting programmes/discussion groups
 - go to places where parents are/will be ie. schools, preschools, childcare, sports clubs, churches, Plunket...try to get groups meeting on a long term basis to build up trust, relationships and local social support networks
 - take on a "train the trainer" approach – teach locals how to teach others about good parenting...about local capacity building, ensuring skills remain at the local level
 - early childhood centres (public and private) could run courses for the parents of children that attend their centres which focused on:
 - expectations of what children can do when
 - how to talk to children, how to play with them, how to enjoy them
 - strategies for discipline, including alternatives to smacking and what to do when they make you angry
 - toilet training
 - how to teach children to read, be creative etc
 - healthy eating ideas
- Mentoring - set young mothers up with mother/grandmother figure to act as an informal support/mentor. Can help provide stability, oversight on parenting and in times of stress/crisis can help out with care of children

9. Information:

- ❑ Need to look at what information is required for monitoring within the family violence sector, who has it and how it could be collated on an ongoing basis
- ❑ Get one centralization/collation point for family violence statistics in Waitakere – best place would be Police Family Violence Unit (provided there is wide community access)
- ❑ Get all calls relating to family violence logged (event registrar) - whether or not a poll 400 is done or not...so that we get a fuller local picture of family violence
- ❑ Need to ensure community access for data/information/statistics from the Court and police (charges laid and prosecutions)
 - Police could review to look at WAVES old system for info recording and see what could be set up between police/courts to facilitate a reliable/accessible information flow
- ❑ Getting some local data to measure effectiveness of criminal justice system outcomes eg. how many people do community service, jail, anger change programmes and how many are recidivist FV offenders
- ❑ Preparation of a “family help pack” – info about doctors, well child providers, Plunket, early childhood services, community houses/facilities, social services etc..could be done on a ward basis for the City and distributed by real estate agents and Housing NZ tenancy managers. Council could take the lead role in preparing/developing the pack on an annual basis so that it remained current.
- ❑ Get student placement to do 6 month study on local family violence notifications to CYF – look at percentage actioned by CYF, those that weren’t actioned and if they turn into repeat notifications, track where/which sectors referrals come from

10. Assist increased reporting

- ❑ Rebuild community capacity to care about and act on what goes on next door/in their street/in their neighbourhood
 - Neighbourhood Watch should worry about state of the children in their neighbourhood not just about stopping crime....have a huge potential role in fostering a caring neighbourhood. They could promote/lead family violence training for their volunteers.
- ❑ Promote options of what to do when you suspect family violence is occurring – prominent page in front of the West Auckland phonebook about local options about who to contact/what to do.
- ❑ CYF not the best place for people with suspicions to report to as their thresholds are so high that much goes uninvestigated, need to utilise community sector interventions/responses BUT they must be resourced to cope with possible increased demand on their services
- ❑ Would need to start with a forum/hui of community agencies to see if they collectively want to take on this role, how they could do it, what resources would be required etc

11. Celebrating Children

- ❑ Promote and celebrate children – expand national children’s day to be a REALLY BIG THING in Waitakere. Do lots of promotion around the day (before and after) which emphasises why children are important, how to value/support them as a community
- ❑ Could develop the celebration day above into a well child week – focus on a whole range of things over a week ie. safety, health, education, play, etc
- ❑ Could have a tamariki/wahine YEAR like the do the International Year of the XXX
- ❑ Develop Xmas in the park concept that was held at Parrs Park – with an emphasis on children
- ❑ Develop a “children have a go day” like Sport Waitakere do – have it in a city park rather than out at Huia which is hard for many families to get to....broaden it to be about more than sport/recreation/leisure
- ❑ Have community events in local/neighbourhood parks...when these have been held in Ranui they have had HUGE turnouts..could be local celebration of children that are dovetails into existing events like Trees for Babies plantings or School Galas

12. Mental Health

- ❑ Specific training so that mental health staff don’t just look at presenting adult clients but the impact of their illness on their children and what strategies/supports should be in place to keep them safe/healthy too
- ❑ Write into recovery plans what is to happen to the children in times of unwellness (ie. children go to a family member/respite service etc) so that things are organised in advance and can happen quickly and children are kept safe
- ❑ Maternal mental health: need improved coordination between mental health, GPs and maternity service providers ie. if someone is a mental health service patient then this is made known to other services so the person can be more closely monitored. Protocols could be developed between agencies and other community agencies involved if required. Ie. CAT and CCT may see things that they refer to CYF but CYF are not able to monitor cases in an ongoing way...will only act if it’s severe. Referral may be better to another agency.
 - Also ensure service providers know what mental health indicators to look for along the way in pregnancy and in first year of child’s life
- ❑ More funding for maternal mental health
 - Review service specifications put together by Shared vision and Waitemata that were put together a few years ago (approx 1995) for an improved integrated maternal mental health/community support service. Was a model that involved joint management between maternity and community mental health services

13. Reduce Poverty Levels

- Close local foodbanks etc, put the pressure/responsibility back onto government
- Be more creative about helping families get out of the poverty trap, develop incentives that reward
 - Give people more than they need to live on so that with that extra help, they can actually start to get out of the poverty trap they are in
 - John Tamihere's ideas need further exploration, could look at a local pilot of 20 families to see if/how families in need are able to respond given a different welfare regime....grow the capacity of third sector to better assist needy families
 - Ie. work out what a family's budget is and what would be needed in various spending categories such as food, rent clothing, healthcare etc. Allocate a credit to their bank account which reflects their estimated budget with some discretionary spending included (\$20 or \$40 etc). Then at the end of the month, reward people with bonuses (ie. they get to keep their unallocated discretionary dollars) for doing well with their monthly budgeting, rather than punishing people by taking away what they haven't spent.
 - Any family being paid by the State to look after their/other children should also be subject to checks by CYF or Barnardos etc to see that the children are in fact being well cared for and that their needs are being met

Acknowledgement

A huge thank you to all the individuals and agencies who have contributed both to this Protecting our Tamariki Plan, and to the development of this project over the last 9 months.

Special thanks to:

- ✚ members of the Project Advisory Group
- ✚ those who shared their ideas and their time as part of the interview process
- ✚ those who attended the Community Forum
- ✚ initial project convenors and teams

Your commitment, your energetic ideas and your desire to work collectively across agencies, sectors and communities has been fantastic.

**Waitakere Safer Community Council Trust
Safe Waitakere Injury Prevention
Waitakere Wellbeing Collaboration Project**

August 2003