



# **Submission to the Social Services and Community Committee on the Child Poverty Reduction Bill 2018**

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## 1. Introduction

***When children's rights are considered, children with disabilities tend to be forgotten. When the rights of people with disabilities are considered, children with disabilities tend to be forgotten. Gerison Lansdown***

The Child Poverty Reduction Bill (the Bill) is part of an unprecedented and welcome focus on children and their wellbeing. IHC supports the Bill and its intent.

The Bill is about more than reducing poverty. It is about how New Zealand views and values children, including children with disabilities, and the government structures in place to give effect to those views and values. The Bill offers the potential to lay a solid foundation for children with disability in New Zealand, alongside their non-disabled peers, to have good childhoods.

For more than 60 years IHC has advocated for the rights, interests and wellbeing of people with intellectual disability. IHC was founded on children with disabilities being included within the community of all children and this continues to be our vision.

In this submission we:

- provide some overarching comments about the issues for children with disabilities raised by the Bill;
- address the Child Wellbeing Strategy provisions first, as we believe getting that part of the Bill right will be critical to whether this Bill makes a difference in the lives of New Zealand's disabled children; and
- comment on the child poverty reduction provisions within the Bill.

While the impact of the Bill on the daily lives of children with disabilities should not be overestimated - it will be the policies and practices that flow from the Bill that will impact on individual children - this Bill is an opportunity to set a new direction for children in New Zealand, including those with disability. It is an opportunity not to be missed.

## 2. Key points and recommendations

IHC supports the Bill's intent but suggests more work is needed to clarify how the legislative architecture will work in practice. Our main concern is what difference the Bill will make for children with intellectual disabilities and their families.

Children with disabilities are invisible in the current draft of the Bill. Also, the lack of data and information collected about children with disabilities means that, at present, there is no way to measure the rates of poverty and the impact it has on their lives or to set and assess progress against child poverty targets for them as a population group.

Yet we know many children with disabilities do not have the material resources and income they need to realise their rights, including those to develop to their full potential and participate in society on an equal basis with their non-disabled peers.

IHC supports the development and implementation of a Child Wellbeing Strategy due to its potential to encourage and facilitate more coherent, coordinated action for children with disabilities across government. However, the Child Wellbeing Strategy

needs to be broad and inclusive, based on children's rights and clearly linked to other government initiatives affecting children with disabilities.

The processes for developing, implementing and monitoring the Child Wellbeing Strategy must give effect to the principles of the Treaty of Waitangi and be based on consultation with communities, families and whānau and children themselves; including children with intellectual disability, their families, and whānau and communities.

IHC recommends:

**Recommendation 1** - The Bill, as well as the policies, programmes and practices that develop under it, respects the rights and meets the needs of children with disability in age appropriate ways at different life stages.

**Recommendation 2** - The Bill embody the principles of the Treaty of Waitangi and respect for tamariki Māori and their whānau, hapu and iwi as tangata whenua.

**Recommendation 3** – The Bill articulate and be consistent with the general principles of children's rights (non-discrimination, best interests, survival and development, children's views) as well as their rights under Article 5 of the Children's Convention to be guided by family and whānau.

**Recommendation 4** - The Bill align with the Disability Support System transformation and the EGL vision and principles.

**Recommendation 5** – The Child Wellbeing Strategy acknowledge the critical importance of inclusive education to the wellbeing of children with disabilities and make transparent links with the education sector so that education reform contributes positively to child wellbeing.

**Recommendation 6** - The Bill ensure the Child Wellbeing Strategy and Disability Action Plan are aligned so there is an integrated and strong approach to improving the wellbeing of children with disability across government.

**Recommendation 7** - Children with disability are named as a particular group of focus under the Child Wellbeing Strategy.

**Recommendation 8** - Principles similar to those set out in section 5 of the Children, Young Persons, and Their Families (Oranga Tamariki) Legislation Act 2017 be included in the Bill so they apply across all three pieces of legislation.

**Recommendation 9** - The Bill more clearly specify that the Child Wellbeing Strategy is overarching.

**Recommendation 10** - Consideration be given to consolidating the various pieces of legislation dealing with child wellbeing to minimise the risk of inconsistencies, overlaps and gaps in policies, services and practices for children.

**Recommendation 11** - Clause 3 mirror the provisions in Part 3 of the Bill and explain that child poverty reduction is a required component of the Child Wellbeing Strategy.

**Recommendation 12** – The Bill define child poverty based on the EAG's recommended definition: Children living in poverty are those who experience

deprivation of the material resources and income that is required for them to develop and thrive, leaving such children unable to enjoy their rights, achieve their full potential and participate as equal members of society.

**Recommendation 13** - The Bill require the first Child Wellbeing Strategy to include a definition of child wellbeing that is rights based and co-designed with tangata whenua and children and young people, including children and young people with intellectual disability.

**Recommendation 14** - Children with disabilities be made visible within development, implementation and reporting on outcomes under the Child Wellbeing Strategy, by, amongst other things, being:

- i. Specifically named as a focus population group within the strategy;
- ii. Identified as a class of children that must be consulted before the strategy is adopted or changed.

**Recommendation 15** - The Bill provide greater clarity on the relationship between the Child Wellbeing Strategy and other laws, policies, services and practices affecting children including determinants of wellbeing.

**Recommendation 16** - The Child Wellbeing Strategy be based on children's rights, to promote a consistent and coherent approach to policies across government.

**Recommendation 17** - Child impact assessments be routinely used across government and supported by training on children's rights, including the rights of children with disability.

**Recommendation 18** - The Bill provide for children with disability to be supported to participate in consultation on an equal basis with their non-disabled peers so their views are taken into account.

**Recommendation 19** - The Bill specify that child poverty and hardship data collection be designed to ensure analysis and reporting of poverty rates for children with disability and children who have parents or carers with disability.

**Recommendation 20** - There be an advisory group to the Statistician and the advisory group include a disability advisor.

**Recommendation 21** - The Bill require regular qualitative research to assist the statistician in setting and confirming relative income poverty lines and that this include a requirement for research on the experiences of children with disabilities and their families.

### 3. About IHC

IHC advocates for the rights, inclusion and welfare of all people with intellectual disabilities and supports them to live satisfying lives in the community. Underpinning our work is the principle that intellectually disabled children and young people are part of the community of all children and young people – they are entitled to full enjoyment of their human rights and fundamental freedoms on an equal basis with other children and young people<sup>1</sup>.

IHC was founded in 1949 by a group of parents who wanted equal treatment from the education, health and social service systems for their children with intellectual disability. Today IHC is still striving for these same outcomes and is committed to advocating for the rights, welfare and inclusion of all people with an intellectual disability throughout their lives. We support people with intellectual disability to lead satisfying lives and have a genuine place in the community as citizens. We believe that the foundations for inclusion of people with intellectual disability in society are built on integrated support to families of children with intellectual disability.

### 4. Overarching comments

#### 4.1 Definition of “child”

At the outset we want to comment on the definition of a child under the Bill as a person under the age of 18. We support this definition but note that it covers people experiencing a wide variety of life stages - babies, young children, older children and adolescents.

**Recommendation 1** - the Bill, as well as the policies, programmes and practices that develop under it, respects the rights and meets the needs of children with disability in age appropriate ways at different life stages.

#### 4.2 Counting what matters – making children with disabilities visible

*“...due to the severity of my child’s disability and the level of home care I need to provide we only have a single income and a small weekly child disability allowance. This barely gets us week to week and doesn’t allow for additional expenses. We are providing education at home due to the limited hours allowed from my child’s ECE centre.”* IHC 2017 survey respondent<sup>2</sup>

As currently drafted the Bill does not define child poverty. We support the definition put forward by the Children’s Commissioner’s Expert Advisory Group (EAG) on child poverty: “Children living in poverty are those who experience deprivation of the material resources and income that is required for them to develop and thrive, leaving such children unable to enjoy their rights, achieve their full potential and participate as equal members of society.”<sup>3</sup>

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<sup>1</sup> United Nations Convention on the Rights of Persons with Disabilities and United Nations Convention on the Rights of the Child

<sup>2</sup> IHC 2017 How is New Zealand doing for people with intellectual disabilities? [www.ihc.org.nz/survey](http://www.ihc.org.nz/survey)

<sup>3</sup> Office of the Children’s Commissioner (2012) Solutions to Child Poverty in New Zealand: Evidence for Action.

Due to the very limited data available on the circumstances and experiences of children with disability it is impossible to accurately assess how many children with disability live lives impacted by poverty. However, based on the data that is available, children with disabilities are more likely to live in poverty, using the EAG definition, than their non-disabled peers<sup>4</sup>.

Children with disability are more likely to live in low income families. Data from the 2013 Disability Survey (the latest available) shows:

- 34 % of disabled children living in families that earn under \$50,000 a year, compared to only 24 % of non-disabled children.
- an estimated 17% of carers of children with disability were unemployed.
- 30% of disabled children lived in one parent households, compared to 17% of non-disabled children.

Estimates from the 2013 Disability Survey also suggest that children with disability were less likely, in the previous four weeks, than non-disabled children to have had music, art, or other similar lessons; played a team sport; done other physical activity such as swimming or gymnastics; visited friends; or been away on holiday in the past 12 months.

A specific issue of concern is the Child Disability Allowance (CDA). The numbers of children granted the CDA almost halved between 2007/2008 and 2011/2012 (2012 is the latest MSD statistical report available)<sup>5</sup>. This was despite the numbers of children with disability rising over that period. The decline in the number of CDA recipients over this period raises serious questions about whether children with disabilities and their families and whānau are receiving their support entitlements and the processes they have to go through to do so.

Any review of the social security system and culture within WINZ must include analysis of the receipt of social security entitlements by those with disability (children with disability and also children whose parents have intellectual disability). Ensuring children with disability and their families are getting the supports they are entitled to will be critical to meeting child poverty reduction targets for children living in households affected by disability.

Like all children and young people, those with disability are impacted by wider systemic issues such as housing, household income levels and family violence. In addition to making disabled children more visible in actions to reduce child poverty they must not be overlooked or left behind in policy responses to these broader societal issues.

### 4.3 Treaty of Waitangi

IHC believes the Bill should embody the principles of the Treaty of Waitangi and respect for tamariki Māori and their whānau, hapu and iwi as tangata whenua. Development of the Child Wellbeing Strategy and work to define, measure and reduce child poverty should be done in partnership with Māori.

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<sup>4</sup> See Wynd, D. *'It shouldn't be this hard': children, poverty and disability*. Child Poverty Action Group. February 2015.

<sup>5</sup> CCS Disability Action *The Rise and Fall of the Child Disability Allowance*. <http://includingallpeople.org.nz/?p=900> posted 9.9.2014; See also Johnson A and Suri J, *Barriers to support: Uptake of the Child Disability Allowance in Otago* Child Poverty Action Group 2016.

**Recommendation 2** - the Bill embody the principles of the Treaty of Waitangi and respect for tamariki Māori and their whānau, hapu and iwi as tangata whenua.

#### 4.4 Children first, as part of family and whānau

Children with disabilities are children first, entitled to “enjoy a full and decent life, in conditions that ensure dignity, promote self-reliance and facilitate the child’s active participation in the community.”<sup>6</sup>

Article 7 of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), which New Zealand ratified in 2008, re-enforces the rights of children with disability and emphasises that children with disabilities are entitled to enjoy their rights on an equal basis with other children. The full text of article 7 is:

1. *States Parties shall take all necessary measures to ensure the full enjoyment by children with disabilities of all human rights and fundamental freedoms on an equal basis with other children.*
2. *In all actions concerning children with disabilities, the best interests of the child shall be a primary consideration.*
3. *States Parties shall ensure that children with disabilities have the right to express their views freely on all matters affecting them, their views being given due weight in accordance with their age and maturity, on an equal basis with other children, and to be provided with disability and age-appropriate assistance to realize that right.*

In 2016 the United Nations Committee on the Rights of the Child recommended that New Zealand adopt a comprehensive, child rights and participatory approach to the fulfilment of the rights of children with disabilities; that more needed to be done to combat the marginalisation and discrimination of children with disabilities in their access to health, education and care and protection, particularly for Maori children with disability, children with disabilities living in poverty and children with multiple disabilities.<sup>7</sup>

These recommendations recognise that children with disabilities are not an homogenous group; their experiences vary, depending on their individual circumstances. A respondent in IHC’s 2017 survey on how New Zealand is doing for people with intellectual disabilities explained “*If you are from a wealthy family and/or a family with high cultural capital things may go well but that is a matter of happen-chance and many are left behind.*”

In order to promote equality and eliminate discrimination, as required under the United Nations Convention on the Rights of the Child (the Children’s Convention) and the UNCRPD the rights of children with disability need to be taken into account in the Bill and in the policies and programmes that develop under it.

IHC believes that, as a minimum, the Bill should articulate and be consistent with the general principles of children’s rights:

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<sup>6</sup> Article 23, United Nations Convention on the Rights of the Child (the Children’s Convention). New Zealand ratified this Convention in 1993.

<sup>7</sup> CRC/C/NZL/CO/5 Committee on the Rights of the Child *Concluding observations on the fifth periodic report of New Zealand*. Paragraph 30.

- Non-discrimination – the Bill’s provisions should apply without discrimination to all children.<sup>8</sup>
- Best interests – the best interests of the child should be a primary consideration under the Bill.
- Survival and development – the Bill should ensure to the maximum extent possible the survival and development of the child.
- The views of the child – the Bill should give effect to the right of every child to form and freely express their views on matters that affect them.

The Bill should also give effect to another central tenet of children’s rights; recognition that children exist within families and that children have the right to be guided and cared for by their parents and family and whānau, and parents are entitled to state support in their important child rearing role.<sup>9</sup>

**Recommendation 3** – the Bill articulate and be consistent with the general principles of children’s rights (non-discrimination, best interests, survival and development, children’s views) as well as their rights under Article 5 of the Children’s Convention to be guided by family and whānau.

#### 4.5 Children’s wellbeing depends on family and whānau wellbeing

Children’s wellbeing cannot be considered in isolation from their family’s wellbeing. The preamble to the Children’s Convention recognises the family as the fundamental group of society and the natural environment for the growth and well-being of all its members, particularly children. The Convention regards growing up in a family environment, in an atmosphere of happiness, love and understanding, as essential to the full and harmonious development of the child’s personality.<sup>10</sup>

Just as the rights within the Children’s Convention are indivisible and interdependent and must be taken together, the child’s right to an adequate standard of living should be read in conjunction with the preamble. An adequate standard of living is one which allows a family environment and atmosphere that enables a child to live and grow to their full potential.

Government is therefore obliged to develop policy settings that foster and support such family environments and which reduce and mitigate the effects of financial and other stresses on families and the children within them.

IHC’s *What’s important for family wellbeing?*<sup>11</sup> report found that many families with children with intellectual disability find it hard to get the life others take for granted. The report identified four themes as important for family wellbeing – attitudes, belonging and inclusion, fair systems and being able to plan with confidence and good support and connections. Processes for developing and reporting on the Child Wellbeing Strategy need to take this kind of knowledge and understanding of the reality of the lives of children with disability into account.

Central to the wellbeing of intellectually disabled children, young people and their families and whānau is timely access to integrated, flexible and high quality universal and specialist supports and services. Yet this access can be fraught and variable,

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<sup>8</sup> It should be noted that New Zealand has a reservation to the Children’s Convention that means it does not have to be applied to children unlawfully in New Zealand.

<sup>9</sup> Children’s Convention Articles 5, 18 and 27.

<sup>10</sup> Children’s Convention, preamble

<sup>11</sup> IHC *What’s important for family wellbeing?* 2016. Available here: <https://ihc.org.nz/advocacy>

depending on the family's circumstances. Long waiting times for early intervention services is an issue of particular concern<sup>12</sup>.

Families say support can be hard to obtain and we hear from service providers that the challenges many families face can make provision of disability support to some children difficult. There is widespread agreement that the current system(s) is difficult to navigate. As a result, families report feeling worn down and worried for their child's future.<sup>13</sup>

#### 4.6 Link with other work across government

The Bill offers an opportunity to co-ordinate, via the Child Wellbeing Strategy, policy initiatives affecting children with disabilities across government. In addition to this Bill there are other significant pieces of work underway that have a direct bearing on the wellbeing of children with disability and their families and whānau. Clearly linking this Bill with these initiatives would encourage more cohesion across government, reducing the risk of a "siloed" approach and potential duplication or inconsistency.

##### 4.6.1 Transformation of the Disability Support System

*"Financial hardship adds an extra burden to families already struggling to do their best for their disabled loved ones, limiting their choice and control over a long period of time."*

The disability support system is currently undergoing transformation, based on the Enabling Good Lives (EGL) vision and principles<sup>14</sup>. The EGL vision is that in the future, disabled children and adults and their families will have greater choice and control over their supports and lives, and make more use of natural and universally available supports. It is based on the principles of: self-determination; beginning early; person centred; ordinary life outcomes; mainstream first; mana enhancing; easy to use; relationship building.<sup>15</sup>

**Recommendation 4** - The Bill align with the Disability Support System transformation and the EGL vision and principles.

##### 4.6.2 Education system review

Work to ensure a high quality public education system has been announced by the Minister of Education and a key priority if this work is looking at how the schooling system can be more responsive to children needing learning support.<sup>16</sup>

Disabled children have the same right to opportunities for learning and being part of their school community as non-disabled children. IHC continually hears of children with disability not getting a fair deal at their local school and the flow on effects that

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<sup>12</sup> <https://www.stuff.co.nz/national/education/96019278/disabled-preschoolers-waiting-months-for-first-early-intervention-service-appointment>;

<https://www.radionz.co.nz/news/national/338692/special-education-wait-times-appalling>

<sup>13</sup> This was a key theme to come through in IHC's 2017 survey on quality of life for people with intellectual disabilities. <https://www.ihc.org.nz/survey>

<sup>14</sup> <http://www.enablinggoodlives.co.nz/about-egl/>

<sup>15</sup> <http://www.enablinggoodlives.co.nz/about-egl/egl-approach/principles/>

<sup>16</sup> <https://www.beehive.govt.nz/release/tomorrow%E2%80%99s-schools-review-terms-reference-announced>

has on their own and their family's wellbeing. The outcome of the education system review will be a critical part of improving the wellbeing of children with disabilities.

**Recommendation 5** – the Child Wellbeing Strategy acknowledge the critical importance of inclusive education to the wellbeing of children with disabilities and make transparent links with the education sector so that education reform contributes positively to child wellbeing.

#### 4.6.3 Disability Action Plan – Good Start in Life project

The Good Start in Life project (Action 4B under the Disability Action Plan) is about developing policy options to improve the government supports for parents, family and whānau of disabled children aged 0-8 years.<sup>17</sup> The project is intended to address a number of known issues that we believe are also relevant to the development of a Child Wellbeing Strategy:

- Parents, family and whānau being valued and having choice and control.
- More timely identification/recognition of need.
- More timely access (capacity, eligibility criteria, geographical coverage).
- Increased access – not targeted only to very high need.
- Easier access – good information, less complexity, fewer hoops.
- Continuity of access over time and when people shift.
- Services and supports strengths-based and aligned with good practice.
- More consistent, coherent and better integrated supports and services.

**Recommendation 6** - the Bill ensure the Child Wellbeing Strategy and Disability Action Plan are aligned so there is an integrated and strong approach to improving the wellbeing of children with disability, across government.

## 5. Comments on the Bill

### 5.1 Why so many pieces of legislation?

Once this Bill is passed there will be at least three pieces of interconnected legislation covering children and their wellbeing:

- Under Part 3 of the Bill the Vulnerable Children's Act 2014 will become the Children's Act 2014. It will require the government to adopt, publish, and review a Government strategy for all children and require children's agencies to work together to improve the wellbeing of particular groups of children;
- Parts 1 and 2 of the Bill will establish a stand-alone Child Poverty Reduction Act 2018, which will:
  - Encourage a focus by government and society on child poverty reduction.
  - Facilitate political accountability against published targets.
  - Require transparent reporting on levels of child poverty.
- The Oranga Tamariki Act 1989, which is in the process of being amended by the Children, Young Persons, and Their Families (Oranga Tamariki) Legislation Act 2017 and will require a number of principles to be applied in the exercise of powers under the Act. As well as covering care and protection,

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<sup>17</sup> <https://www.odi.govt.nz/nz-disability-strategy/outcome-7-choice-and-control/#progress>

youth justice and children in care, Oranga Tamariki has powers to intervene in the lives of children with early risk factors for statutory involvement.

At present the Bill is vague as to how the different pieces of legislation will work together. It would seem that the intention is for the Child Wellbeing Strategy to be overarching but this is not clear.

As drafted, although Clause 45 sets out what the Child Wellbeing Strategy will address there is no provision for corresponding links back to the strategy in the Child Poverty Reduction Act or Oranga Tamariki legislation. In practice this may make it difficult to assess which statutory framework applies to a particular situation or child. There is a risk of gaps and overlaps in service provision and also inconsistencies in the way services are provided. Given children with disability are known to be over-represented in care and protection, youth justice and child poverty they are more likely to be affected by any gaps or inconsistencies in service provision.

On the face of it children with disability should fall within the Child Wellbeing Strategy - there is much that could be done to improve their wellbeing as a population group, including government agencies working together better, and they may have greater needs than non-disabled children. However, it is far from clear that children with disability will, as a matter of course, be covered by the strategy. Neither is there any requirement for action to be taken to improve their wellbeing unless they also fall within the groups of children to be covered by the Oranga Tamariki action plan.

If children with disabilities and their families and whānau are dealing with Oranga Tamariki, under the strategy, those dealings will be governed by a set of principles, including statutorily mandated respect for their rights under the Children's Convention and the UNCRC as well as regard for their experience of disability and a requirement to support their full and effective participation in society.<sup>18</sup> On current drafting these principles will not apply to children with disabilities who are the subject of actions to reduce child poverty, under the Child Poverty Act 2018, but not covered by Oranga Tamariki.

IHC favours a more consistent approach across all legislation dealing with child wellbeing. At a minimum the same principles should apply under each separate statute. We suggest that consideration be given to a consolidated legislative framework for child wellbeing that brings together the Child Poverty Reduction Act, the Children's Act and also, potentially, Oranga Tamariki legislation so that no matter which branch of government a child and their family or whānau are dealing with the service they receive is based on the same, human-rights based, principles.

**Recommendation 7** - Children with disability are named as a particular group of focus under the Child Wellbeing Strategy;

**Recommendation 8** - Principles similar to those set out in section 5 of the Children, Young Persons, and Their Families (Oranga Tamariki) Legislation Act 2017 be included in the Bill so they apply across all three pieces of legislation;

**Recommendation 9** - the Bill more clearly specify that the Child Wellbeing Strategy is overarching.

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<sup>18</sup> Section 5, Children, Young Persons, and Their Families (Oranga Tamariki) Legislation Act 2017

**Recommendation 10** - consideration be given to consolidating the various pieces of legislation dealing with child wellbeing to minimise the risk of inconsistencies, overlaps and gaps in policies, services and practices for children.

## 5.2 Preliminary provisions

### *Clause 3 – Purpose of parts 1 and 2*

Child poverty reduction and child wellbeing are interlinked yet current drafting does not make it clear that child poverty reduction is a strand of work under the Child Wellbeing Strategy.

Although this is outlined in Part 3 of the Bill, once the Bill becomes law Parts 1 and 2 will be stand-alone pieces of legislation.

**Recommendation 11**- clause 3 mirror the provisions in Part 3 of the Bill and explain that child poverty reduction is a required component of the child wellbeing strategy.

### *Definition of poverty*

The Bill would be strengthened by including a definition of child poverty. As already noted above, we support the definition adopted by the EAG “Children living in poverty are those who experience deprivation of the material resources and income that is required for them to develop and thrive, leaving such children unable to enjoy their rights, achieve their full potential and participate as equal members of society.”

Including a definition of child poverty along these lines would help to connect the various parts of the Bill and establish a more cohesive approach to child poverty reduction and improvement in child wellbeing.

**Recommendation 12** – the Bill define child poverty based on the EAG’s recommended definition.

### *Definition of child wellbeing*

Child wellbeing is not defined in the Bill. In keeping with our view that rights based principles need to underpin the Bill, we recommend the Bill require the first child wellbeing strategy to include a definition of child wellbeing that is rights based and co-designed with tangata whenua and children and young people, including children and young people with intellectual disability. Co-design should occur in consultation with families and whānau, communities and non-government organisations, particularly those in the children’s sector.

**Recommendation 13** - The Bill require the first Child Wellbeing Strategy to include a definition of child wellbeing that is rights based and co-designed with tangata whenua and children and young people, including children and young people with intellectual disability.

## 5.3 Child Wellbeing Strategy

### *Making children with disability visible in the Child Wellbeing Strategy*

IHC supports the development of a Child Wellbeing Strategy and the promise it holds for a more cohesive and consistent approach to policy affecting the wellbeing of children with disability across government.

The wellbeing of children with disabilities is greatly affected by systemic issues, particularly having equitable access to and outcomes from universal public services such as health and education. Timely access to integrated and flexible support services is also critical to the wellbeing of children with disability.

IHC would like to see the Government take the opportunity provided by the Bill to develop a Child Wellbeing Strategy that addresses the UN Committee's recommendation that New Zealand establish comprehensive, child rights and participatory approach to the fulfilment of the rights of children with disabilities.

As far as possible, connections between developments in other sectors, such as transformation of the Disability Support System and education reform, must be captured by the Child Wellbeing Strategy so that the complex and interrelated factors that lead to improvements and deteriorations in the wellbeing of children with disabilities can be monitored.

The Bill should require determinants of child wellbeing to be considered as part of the development of the child wellbeing strategy. A UNICEF hosted expert consultation on the structural determinants of child wellbeing in 2012 found:

- i. There is a major untapped potential for improving child wellbeing through structural approaches
- ii. Achieving a common language, definitions and concepts is a critical first step.
- iii. Context matters.
- iv. An integrated view of child wellbeing requires inter-sectoral and comprehensive approaches
- v. The imperative to reduce inequities for children can help sharpen the focus.
- vi. Some analytical tools exist but better ones are needed.
- vii. Data and measurements are critical gaps in understanding structural approaches for children.<sup>19</sup>

Children's rights offer an existing framework for promoting and protecting children's wellbeing and should underpin the Child Wellbeing Strategy. Children with disability have rights as children and as disabled people. More systematic application and implementation of the Children's Convention and the UNCRC across government would help to ensure policies and initiatives affecting children are aligned and reinforce each other.

IHC understands that a Child Impact Assessment tool has been developed by the Ministry of Social Development to assist agencies to think about and apply children's rights in their work. Ideally child impact assessments, supported by training on children's rights including disabled children's rights, should be standard practice across government.

#### *Consultation with children on the Child Wellbeing Strategy*

IHC strongly supports the requirement in the Bill that children be consulted. We question the use of the terminology "classes of children", especially as it is not defined. It would seem that classes of children are different to the "groups of children" under the *oranga tamariki* action plan but more clarity is needed on which children the Minister must consult with.

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<sup>19</sup> [https://www.unicef-irc.org/publications/pdf/structural\\_determ\\_eng.pdf](https://www.unicef-irc.org/publications/pdf/structural_determ_eng.pdf)

We also have some concerns about the wording “representatives of classes of children”. This could be read as consulting with adult representatives as an alternative to consulting with classes of children directly, or as child representatives of a class of children. Consultation with adult representatives should be in addition to consultation with children themselves, not an alternative.

Children with intellectual disability and/or communication impairments may need support to ensure they are able to participate in such consultation on an equal basis with their non-disabled peers. IHC recommends the Bill provide for such support.

#### *Children with early risk factors for future statutory involvement*

We note that the Child Wellbeing Strategy will have a focus on children with early risk factors for statutory involvement. Processes for identifying these children should be transparent and based on a wide range of risk factors, as well as professional judgement.

For children with disability there needs to be a careful balance struck in determining likely risk of future statutory involvement. On the one hand there is potential for diagnostic overshadowing<sup>20</sup>. On the other hand there is potential for children with disabilities to be unnecessarily identified as having risk factors for statutory intervention, particularly if they and their families have not had the supports they need.

**Recommendation 14** - Children with disabilities be made visible within development, implementation and reporting on outcomes under the Child Wellbeing Strategy, by, amongst other things, being:

- i. Specifically named as a focus population group within the strategy.
- ii. Identified as a class of children that must be consulted before the strategy is adopted or changed.

**Recommendation 15** - The Bill provide greater clarity on the relationship between the Child Wellbeing Strategy and other laws, policies, services and practices affecting children including determinants of wellbeing.

**Recommendation 16** - The Child Wellbeing Strategy be based on children’s rights, to promote a consistent and coherent approach to policies across government.

**Recommendation 17** - Child impact assessments be routinely used across government and supported by training on children’s rights, including the rights of children with disability.

**Recommendation 18** - The Bill provide for children with disability to be supported to participate in consultation on an equal basis with their non-disabled peers so their views are taken into account.

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<sup>20</sup> Diagnostic overshadowing refers to the situation where the presence of disability masks other needs, such as health or safety needs, or the problem or concern is attributed to the child or young person having an intellectual disability. This results in the risk to that child or young person being overlooked or a differentiated (often higher) threshold for intervention or access to services being applied.

## 5.4 Child Poverty Reduction

*“...the majority of parents would not both be able to work full time if they have a child with any sort of disability. People who are not in this situation do not understand the barriers that this places on the entire family unit.” IHC survey respondent<sup>21</sup>*

Poverty reduction measures have the potential to counteract and disrupt the compounding disadvantage often faced by the families of children and young people with disability, improving the wellbeing and life chances of everyone within the family.

*Making children with disability visible in measurement, targets and reporting.*

Due to the tendency for children with disability to be overlooked in data collection and policy initiatives, it is essential that children with disability are made visible in definitions, data collection, data analysis and reporting under the Bill. Data on children whose parents or carers are disabled and the siblings of disabled children should also be collected to enable accurate assessments of the impact disability has on the wellbeing and standard of living of children and their families.

**Recommendation 19** - The Bill specify that child poverty and hardship data collection be designed to ensure analysis and reporting of poverty rates for children with disability and children who have parents or carers with disability.

*Improving data collection*

As already noted, there is a paucity of data on the rates of poverty amongst disabled children or children of disabled parents/carers. This lack of data will hamper efforts to identify and effectively address child poverty amongst children with disability and children whose parents or carers have a disability. Improved collection and disaggregation of data on children with disability, including by impairment type, is an essential pre-requisite to reducing poverty and improving the wellbeing of children with intellectual disability.

In addition to improved data collection about children with disabilities, IHC would like to see a more consultative approach to qualitative research and information gathering, including from children themselves, about the lived experience of children with disabilities and their families.

*Statistician’s definitions*

IHC supports the Bill’s requirement that the Government statistician report independently of Ministers on child poverty measures. However we are concerned that there is no requirement in the Bill for the Statistician to consult with others, apart from the chief executive, on the collection and reporting of data.

**Recommendation 20** - There be an advisory group to the Statistician and the advisory group include a disability advisor.

**Recommendation 21** - The Bill require regular qualitative research to assist the statistician in setting and confirming relative income poverty lines and that this include a requirement for research on the experiences of children with disabilities and their families.

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<sup>21</sup> IHC 2017 How is New Zealand doing for people with intellectual disabilities? [www.ihc.org.nz/survey](http://www.ihc.org.nz/survey)

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