

Emma Davies and Dr Nikki Turner: **Children fall by the wayside**

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The report from Unicef on child wellbeing in rich countries tells an old story - a story of damage from decades of neglect of New Zealand's youngest citizens.

International comparisons are useful contributions to a debate about the status of our children. The report makes two crucial points.

First, there is no obvious relationship between gross domestic product - relative to population - and child wellbeing.

Second, countries poorer than our own do better by their children.

Levels of child wellbeing are not inevitable but are susceptible to policies and the Government could do a lot more.

The reforms of the 1980s and 1990s left the most vulnerable children behind. Since then, progress has been made but changes are slow and inconsistent and we are still bottom of the table for too many indicators of child wellbeing.

The reality of New Zealand policy is that children remain overwhelmingly more likely to live in poverty than adults. The Ministry of Social Development's Living Standards Report of 2004 said 26 per cent of children lived in severe or significant hardship - a worse figure than that for 2000 and much worse than any adult group.

In 2004 the figures for those living in severe or significant hardship were: 15 per cent of those aged 25 to 44; 10 per cent of those 45 to 64; and 4 per cent of those 65 years or more.

Yet, as studies clearly show, children who grow up in poverty risk poorer health throughout their lives irrelevant of how much they earn as adults.

The effects of deprivation, abuse and violence in the very early years live on in adult physical and mental health, drug and alcohol abuse, social and educational outcomes, and

crime. Deprivation in childhood is much more damaging in the short and long term than is adult deprivation.

Government policies are leaving many children behind. The main economic gains for children in the Working for Families package are tied to whether their parents are working.

At least 250,000 children live in families with non-working parents and have had minimal real gain. The Child Poverty Action Group estimates that at least 175,000 of those children suffer from serious poverty.

Policy-making is ostensibly a political process. Your lobbying power is strongest if you vote and if you have economic power. Children have neither.

In reality, no parent or nuclear family raises a child alone. Extended family, friends, community networks, health and education workers and government departments all play roles.

The state takes many roles that enter the private space of the family. We have consensus on compulsory schooling and subsidised health care. Most people accept that the state tells us what age we can have sex. You don't get much more private than that.

Yet every time a government attempts to do something that affects children in a way that a vocal minority think infringes the autonomy of the family, ministers have to withstand a lot of bluster about social engineering and nanny states.

It's much safer to talk about families than children. It's more politically sensitive to talk about child policies than family policies.

The most vulnerable children will continue to be most visible as anonymous statistics unless we can better focus political attention to meet their needs. Perhaps it would help to have a cross-party parliamentary committee, where quality debate would focus on what is best for children.

New Zealand's children might also benefit if there were a cabinet minister responsible for overseeing all departments that have responsibilities to children.

Perhaps then we would see more serious political attention paid to developing innovative and thoughtful policies that can turn our shameful statistics around.

Countries that perform best don't seem to be so diverted by blaming bad families or by fear of the state's role in relation to children, and the family is not seen as an institution isolated from the state.

Responsibility for children's services is fragmented.

We have huge gaps in quality community-based services. And co-ordination of services is often poor, so we waste some resources.

There isn't enough funding in child health and education to make access free to all and we have no clear integrated policies for children.

New Zealand does not have to stay near the bottom.

The Government's economic ambition is to reach the top half of the OECD. When it comes to our children, we should be aiming for the summit.

* This article is an abridged version of talks to the Unicef New Zealand forum on child wellbeing. Dr Emma Davies is a programme leader at the Institute of Public Policy, AUT University. Dr Nikki Turner is a GP and a senior lecturer with the Department of General Practice and Primary Health Care, University of Auckland.