



MINISTRY OF
YOUTH DEVELOPMENT
TE MANATŪ WHAKAHIATO TAIOHI

Administered by the Ministry of Social Development

“PLUS FIVE” REVIEW OF THE 2002 UNITED NATIONS GENERAL ASSEMBLY SPECIAL SESSION ON CHILDREN

Purpose

This document constitutes New Zealand’s report-back on the Plan of Action contained in the final document of the 27th special session of the General Assembly on children, titled *A World Fit for Children*.

Background to this report

In May 2002, New Zealand participated in the UN General Assembly Special Session on Children, which adopted by consensus a plan of action entitled *A World Fit for Children*.

The Special Session was attended by New Zealand’s Minister of Youth Affairs who affirmed in an address to the General Assembly the importance of all nations striving to do more to protect children and young people, to guarantee their human rights, and to build a firm platform for them to enjoy a healthy, happy life.

The Minister also highlighted some of the key initiatives undertaken by New Zealand to advance these goals, including the promotion of youth participation in policymaking, strategies aimed at reducing violence within families and policies aimed at improving access to health and education services.

At around the time of the 2002 Special Session on Children, two key policymaking frameworks relating to children and young people were published: *New Zealand’s Agenda for Children* (June 2002) and the *Youth Development Strategy Aotearoa* (January 2002)¹. Together, these documents established a set of core principles to guide child and youth policy and service development in New Zealand.

Following the 2002 Special Session on Children, it was decided that the best way for New Zealand to advance its compliance with a *World Fit for Children* would be to build on existing Government initiatives within these frameworks, rather than through a specific *World Fit for Children* Action Plan.

¹ *New Zealand’s Agenda for Children* can be viewed at:
www.msd.govt.nz/documents/publications/sector-policy/agendaforchildren.pdf
The *Youth Development Strategy Aotearoa* can be viewed at:
<http://www.myd.govt.nz/uploads/docs/0.7.6.5%20ydsa.pdf>

Since that time, a significant amount of work has been done by successive New Zealand governments to progress and build on initiatives, programmes and services for children and young people. The following report details this work and provides an overview of the progress made to date in advancing the high-level goals and targets set out in *A World Fit for Children*.

Format and structure of this report

This report is divided into three parts. Part one provides an overview of the situation for children and young people in New Zealand under the four goal categories of *A World Fit for Children*:

1. Promoting healthy lives
2. Providing quality education
3. Protecting against exploitation, abuse and violence
4. Combating AIDS/HIV.

Part two identifies the *World Fit for Children* goals of specific relevance to the New Zealand context, correlated with descriptions of the Government policies, programmes and services that are contributing to them.

Part three of this report provides information on the resource targets set out in *A World Fit for Children*, as well as information about New Zealand's development assistance and international trade protocols, as set out in the United Nations Millennium Development Goals.

Web links to the strategies and actions referred to in this report are included as an appendix to this document.

Preparation of this report

This report has been prepared by the Ministry of Youth Development in consultation with the Ministries of Health, Education, Social Development, Justice, Foreign Affairs and Trade, Pacific Island Affairs, NZAID and Te Puni Kōkiri.

Part One: Overview

New Zealand takes very seriously its commitments to the wellbeing and development of children and young people. We are committed to ensuring that New Zealand is a great place to bring up children and that all young people are able to reach their full potential. Government is prioritising this, and investing in families and communities and providing support and protection where needed.

Progress on A World Fit for Children Goals 2002 – 2005

Since New Zealand's participation in the 2002 Special Session on Children, successive governments have made substantial investments in child protection services, health services, education and the youth justice sector. In 2004 the Government implemented a major package of financial supports for families, which in coming years is expected to bring significant numbers of children living in low income families out of poverty.

Over the past five years, advances have been made across a number of key outcome areas for children and young people, including: transitions into further education, training and employment, deaths from accidents and injuries, and rates of smoking. In addition, more of New Zealand's young people are now leaving school with qualifications than ever before, with international comparisons showing favourable results in mathematics, science and reading literacy.

New Zealand also recognises that there are ongoing challenges to be met and issues to be addressed if all children and young people are to have the security and opportunity they deserve. These include:

- inequalities in health outcomes between populations
- family violence, intentional injury and child mortality
- school exclusions and retention in education
- harm caused by excessive use of alcohol
- barriers to accessing early childhood education services.

Part two of this report sets out the policies, programmes and services that have been developed since 2002 in relation to these priority areas, including major investments in primary healthcare for children and young people, a comprehensive immunisation strategy, targeted parental support for vulnerable families, a high-profile cross-government Taskforce for Action on Family Violence, and a significant increase in the provision of free early childhood education services.

Also detailed are a number of policies, programmes and services specifically designed to improve outcomes for Māori and Pacific Island peoples, who tend to be disproportionately represented on a range of health, education and wellbeing measures. These include a number of strategies and plans designed to reduce disparities in health and educational outcomes, including: "Whakatataka Tuarua: the Māori Health Action Plan", the "Pacific Health and Disability Action Plan", the "Māori Education Strategy" and the "Pasifika Education Plan".

The report also sets out some of the legislative measures being taken to improve outcomes for children, including the abolition of the legal defence of reasonable force for the purpose of correction.

Part Two: Government policies, programmes and services

The following tables set out key Government strategies and actions that are contributing to New Zealand's commitments under the four goal areas of *A World Fit for Children*:

1. promoting healthy lives
2. providing quality education
3. protecting against exploitation, abuse and violence
4. combating AIDS/HIV.

1. PROMOTING HEALTHY LIVES

Goal

Develop and implement national early childhood development policies and programmes to ensure children's enhanced physical, social, emotional, spiritual and cognitive development.

Strategies / Actions²

Background

In 2001 the Government began to implement its **Primary Health Care Strategy**, which has been designed to put considerably more resources into the "front end" of health care. With its focus on "getting ahead of illness", and improving access to primary health care, its intention is to promote good health, lessen the burden of chronic disease, and to reduce the inequalities that exist in health between New Zealand populations.

Primary Healthcare

Between 2002 and 2008 an additional \$2.2 billion is being directed into making primary health care more accessible, particularly for children and young people and populations with the highest health needs. To date, all Primary Health Organisations (PHOs) have received funding to provide low- or reduced-cost care to those aged under 25 years.

From 1 October 2006, very low cost access payments were introduced for PHOs and practices charging for a standard consultation a maximum of \$10 for children aged 6 to 17 years, no charge for children under 6 years and a maximum of \$15 for adults aged 18 years and over.

Those practices that charge very low fees typically serve high need communities, and as a result of low revenue for patient fees, were facing challenges with long-term sustainability. In total, nearly 760,000 people, 19.3 % of all PHO enrolees, are covered by this initiative and therefore benefiting from very low fees. Of the enrolees that benefit, 62 % are high need (that is Māori, Pacific peoples and people living in areas of high deprivation).

Over the past two years the **Primary Health Care Strategy** has delivered additional funding for:

- maintaining free or very low cost access for children under six
- lowering the cost of visiting the doctor for children and young people aged 6-24 years
- refugee health care
- child and adolescent dental health
- innovative health care approaches for high needs communities, particularly Māori and Pacific communities.

² Strategies and actions highlighted in bold have web links listed in the appendix to this report.

Immunisation Services

In 2005, New Zealand set up a **National Immunisation Register (NIR)**, a key tool for achieving New Zealand's immunisation targets. The NIR is a computerised database that maintains a record of individual immunisation details for New Zealand children and young people. Among other things, the NIR records all immunisations given to children registered on the NIR, assists primary health care providers to follow up children for immunisation, and is an important tool for determining and improving New Zealand's immunisation coverage rates.

Although low by OECD standards, rates of immunisation have improved significantly over the past fifteen years: between 1992 and 2005 the number of children fully immunised at the age of 2 years increased significantly from 60% to 77%.

Outreach Immunisation Services, established throughout 2003/04, are part of a broader strategy to improve immunisation coverage. They have been implemented in 16 District Health Boards with the primary objective of improving childhood immunisation rates among Māori, Pacific peoples and other priority groups with high rates of vaccine preventable disease and low rates of immunisation.

The Ministry of Health will be funding the remaining five District Health Boards to implement outreach immunisation services from 2006/07. These services will improve immunisation coverage by following up with families who have missed immunisation events.

Māori and Pacific Health

Whakatataka Tuarua: Māori Health Action Plan 2006–2011, the second Māori health action plan is being implemented. As part of Whakatataka Tuarua, the Ministry of Health has identified the following areas for priority attention:

- building quality data and monitoring Māori health
- developing models based on whanau ora (family wellbeing)
- ensuring Māori participation; workforce development and governance
- improving primary health care.

The overall aim is to support Māori families to achieve their maximum health and wellbeing. This requires an approach that recognises and builds on the integral strengths and assets of whanau. The whanau – which may comprise kuia (female elders), koroua (male elders), pakeke (adults), rangatahi (teenagers) and tamariki (children) – is recognised as the foundation of Māori society.

The Pacific Health and Disability Action Plan was launched in 2002. It sets out the strategic direction for, and actions to improve, health outcomes for Pacific peoples, and aims to reduce inequalities between Pacific and non-Pacific peoples. The action plan, which establishes Pacific Child and Youth Health as a priority area, provides a comprehensive approach to co-ordinating holistic and integrated programmes within health and disability services, Pacific communities and health organisations.

The Ministry of Health has identified a number of Pacific health priority areas, including rates of obesity, diabetes and smoking and improved access to primary health organisations.

Goal

Development and implementation of national health policies and programmes for adolescents, including goals and indicators, to promote their physical and mental health.

Strategies / Actions

Background

Youth Health: A Guide to Action – published in 2002 – presented a range of initiatives across a number of settings to improve the health of young people. District Health Boards have been encouraged to use this document to design services in their regions for young people.

Overall, funding for Child and Adolescent Mental Health Services (CAMHS) has steadily increased over the past five years:

	2001/02	2002/03	2003/04	2004/05	2005/06
Total (\$M)	75.2	79.4	85.9	91.4	94.9

This growth continues, although growing the size and capability of the child and adolescent mental health workforce in New Zealand is an enduring challenge, which The Ministry of Health has sought to address with the establishment in 2003 of the **Werry Centre for Child and Adolescent Mental Health Workforce Development**.

The rate at which children and young people access specialist CAMHS increased from an estimated rate of less than 1% in 1995 to 1.8% in 2006. In 2000/01, with the establishment of the **Mental Health Information National Collection**, data on actual access rates have been collected and monitored by the Ministry of Health. In 2007/08 District Health Boards have agreed access rate targets that will lift the national child and youth mental health access rate to 1.96%.

Current activity

Getting ahead of illness

The **Healthy Eating Healthy Action Strategy** has a particular focus on children and families, and there are many programmes throughout the country that are working with schools to increase activity and to improve the eating habits of school children and their families.

Mission-On is a \$67 million Government-wide package of initiatives to help young New Zealanders improve their nutrition and be more active. The Mission-On package includes:

- improving nutrition in schools and early childhood education services
- school-based health promotion events

- a new “lifestyle ambassadors” campaign featuring high-profile New Zealanders
- encouraging the advertising industry to take measures to decrease children's exposure to the advertising of less healthy foods
- the creation of youth-focused websites to promote healthy eating and physical activity
- sponsorship of television and radio programmes that promote healthy choices.

Mental Health and addiction services

In June 2005, the Ministry of Health published **Te Tahuu: Improving Mental Health 2005-2015**, which defines 10 key challenges for mental health over the next ten years. Following this, **Te Kōkiri: The mental health and addiction Action Plan 2006-2015** was developed, which focuses directly on implementing Te Tahuu. This plan identifies a series of key actions to increase mental health services that are funded for children and young people.

Mental health and addiction services specifically for young people are currently a key focus for development in New Zealand, specifically in the areas of: youth forensic services, respite care, community alcohol and other drug services, children of parents with mental illness, infant mental health, and support services for independent teens.

The Ministry of Health is currently producing an updated framework for services for children's and young people's mental health and alcohol and other drug issues, including primary, secondary and tertiary health services. The updated framework will consider services for children and adolescents with mental health and alcohol and other drugs needs, including:

- children with parents or other whānau with mental illness
- youth forensic issues
- severe behaviour disorders
- responsibility for children and young people with alcohol or other drug problems
- maternal and infant mental health
- low-prevalence disorders.

This project is aimed at providing greater clarity about what the key focus of CAMHS services should be, what the most effective interventions are, and how CAMHS can be better embedded within both the intersectoral and the wider mental health/primary care context.

The review is due to be completed by mid-2007. The resulting actions will be implemented as part of Te Kokiri over a phased 1-5 year period.

“Improving Access to Mental Health Services for Child, Youth and Family Clients”, a joint project between the Ministry of Social Development and the Ministry of Health is working with individual District Health Boards to identify and remove barriers to mental health service access for children and young people involved with child protection services. The action planning phase is due to be completed by 30 June 2007 and it is intended that implementation will be on-going.

Since the successful introduction of a Youth Suicide Prevention Strategy in 1998, there has been a significant drop in suicide among young people, particularly young males, and the strategy has now been adapted for use with a wider population.

A national sexual health campaign has targeted the 15-19 age group most at risk from pregnancy and sexually transmitted infections.

Action on alcohol and drugs

“Community Action on Youth and Drugs” responds to youth drugs issues at a local level, with a focus on collaboration between community organisations, local agencies and researchers. \$3.6 million is currently being invested in these projects annually.

“Youth Access to Alcohol” (YATA) projects are community-driven programmes aimed at reducing the illegal and irresponsible supply of alcohol to young people, and range from Controlled Purchase Operations, executed in co-ordination with Police, to parents and young people working together to keep “after-ball” parties safe. Investment in these projects is currently \$341,000 per annum. There are now 31 YATA projects underway around New Zealand, supported by the Alcohol Advisory Council of New Zealand.

The New Zealand Government is currently conducting a review of the sale and supply of liquor to under-18 year-olds. The review’s goals are to determine the harm caused by the sale and supply of alcohol to minors, to evaluate the effectiveness of current restrictions, and to develop proposals that might be necessary to address the causes of harm.

Goal
Reduction in the infant and under-five mortality rate by at least one third in pursuit of the goal of reducing it by two-thirds by 2015
Statistics
<p><i>Infant Mortality Rate</i></p> <p>New Zealand's infant mortality rate was 4.8 deaths per 1000 live births in the June 2006 year. This is an improvement from 5.5 per 1000 in the June 2005 year, and continues the decrease from 6.7 in 1996 and 13.9 in 1976 (Statistics New Zealand 2006).</p> <p>Infant mortality rates show inequalities between Māori and the total population, although disparities in infant mortality rates declined from 1996 to 2004. In 1996 the infant mortality rate for Māori was 11.5 deaths per 1000 live births compared with 7.1 for the total population. In 2004 the infant mortality rate had declined to 7.2 deaths per 1000 live births for Māori and 5.6 for the total population. (Statistics New Zealand 2005)</p>

Goal
Access through the primary health-care system to reproductive health for all individuals of appropriate age as soon as possible, and no later than 2015.
Strategies / Actions
<p>In New Zealand, everybody has access to reproductive health services through the primary health-care system. The present Government's Primary Health Care Strategy is designed to improve access to primary health care by making the cost of visits to general practice more affordable.</p> <p>This new funding has improved access to health care for many communities, particularly those in low socio-economic areas. Many primary health-care practices provide free sexual and reproductive health care and advice to those aged under 22. The Government also provides funding to support the New Zealand Family Planning Association's clinics around the country. This funding enables the Family Planning Association to offer low cost or free sexual and reproductive health care services and run clinics in many of New Zealand's secondary schools.</p>

2. PROVIDING QUALITY EDUCATION

Goal

Expand and improve comprehensive early childhood care and education for girls and boys, especially for the most vulnerable and disadvantaged children.

Strategies / Actions

Pathways to the Future: Ngā Huarahi Arataki is a strategic plan for early childhood education that outlines the direction for the early childhood sector from 2002 to 2012. Good progress is being made on the plan's core goals, which are to:

- increase participation in quality early childhood education services
- improve the quality of early childhood education
- to promote collaborative relationships between early childhood education services, parent support and development programmes, education, health and social services to empower parents and whānau to be involved holistically in their children's early learning.

The universal early childhood education funding subsidy has increased significantly in recent years to ensure the funding of services keeps pace with services' costs, including the cost of employing more registered teachers. The amount provided to families/whānau through the childcare subsidy administered by the Ministry of Social Development nearly tripled from \$37.6 million in 1996/97 to \$110 million in 2005/06. The funding system aims to ensure that strategic plan initiatives to improve quality do not result in increased costs for parents, which could reduce participation.

As part of "Working for Families" – a Government package introduced in 2004 – childcare subsidies are being increased to make quality childcare more affordable and accessible, with new funding of \$307 million over four years from 2005.

From 1 July 2007, three-and-four year-old children will be able to receive 20 hours free education per week in teacher-led early childhood education services.

Māori and Pacific participation in early childhood education

Overall, participation rates among Māori in early childhood education are low compared with the general population. However, the rate is increasing, with the growth in Māori participation rates exceeding the rate for the general population over the past four years.

The latest data shows that in 2005 more than 10,000 children were enrolled in around 500 kohanga reo – a total immersion Māori language family programme for young children from birth to six years of age – a number that has remained fairly static over the past five years.

Pacific participation rates from early childhood to tertiary education have improved

significantly over the past decade. Enrolments of Pacific children in early childhood education as well as the number of hours attending these services have increased for all age groups over this period.

Goal

Ensure that the learning needs of all young people are met through access to appropriate learning and life skills programmes.

Strategies / Actions

Background

New Zealand has a good education system, with high average achievement by international standards: results from the International Programme for International Student Assessment test, conducted in 2003/04, placed New Zealand fourth, eighth and sixth respectively for reading, mathematical and scientific literacy.

There is, however, widespread disparity between the highest and the lowest student achievement rates. Māori and Pacific students, and students from lower socio-economic groups are over-represented among students who underachieve.

Operational funding for schools increased by \$285 million between 1999 and 2006.

Educational outcomes for Māori students

Māori students make up a significant proportion of the school-age population. Māori learners were 19.9 % of all domestic students in 1996, a figure that increased to 21.4 % in 2005. In 2005, Māori made up a greater proportion of the English-medium (mainstream) school population than ever before.

Māori participation and achievement in education is documented annually in **Nga Haeata Matauranga**, an annual report on Māori education published by the Ministry of Education. 25,000 (16% of Māori students) were enrolled in kaupapa Māori schools (full immersion Māori language primary/intermediate schools).

In 2005, Māori students in year 11, who attended schools where teaching was in te reo Māori for between 51 to 100 percent of the time, had a higher rate of attaining National Certificate of Educational Achievement (NCEA) qualifications than Māori in other schools.

There are ongoing challenges: Māori year 12 students remain less likely than their non-Māori peers to gain the highest level of qualification (NCEA level 2) and the most recent truancy, suspension and participation rates continued to show that Māori are overrepresented in the group of students who had disengaged from the education system.

The Suspension Reduction Initiative was established in 2001 to counter this disproportionately high number of Māori suspensions. Its goal is to reduce Māori suspension statistics to the same rate as non-Māori students by 2016, and it is one of a number of initiatives (listed below) directed towards the underlying goal of improving and sustaining Māori student achievement and retention.

Educational outcomes for Pacific students

Pacific participation rates from early childhood to tertiary education have improved significantly over the past decade. Enrolments of Pacific children in Early Childhood Education have increased for all age groups as well as the number of hours attending these services.

NCEA achievement levels among Pacific students have improved significantly and at a faster rate than any other ethnic groups. The percentage of Pacific school leavers with NCEA level 2 is forecast to improve from 44% (2004) to 51% by 2010. There has also been a reduction of 37.5 % in the number of Pacific students leaving school with little or no formal attainment.

In tertiary education, Pacific participation at degree-level or above and the rate of retention has increased significantly. Pacific students that complete their qualification are also more likely to progress to higher levels of study than some other ethnic groups. Pacific participation in industry training and modern apprenticeships has also seen improvement.

Current / ongoing activity

The Ministry of Education's mission is to "raise achievement and reduce disparity" in all groups of New Zealand's children and young people. A range of initiatives are in place that are designed to increase the participation of students at all levels of education and to ensure that children with special education needs are able to participate fully.

Particular attention is being paid to lowering the rates of student suspension and expulsion. Projects and programmes include:

- the Staying at School initiative
- the Literacy and Numeracy Projects
- the Effective Teaching work programme
- the **Māori Education Strategy** and the **Pasifika Education Plan**
- **Better Outcomes for Children.**

These programmes are supported by a number of other initiatives such as a Parents Advocacy Phone Service through the Office of the Children's Commissioner and the Wellington Law Society.

A **Student Engagement Initiative** (SEI) to keep students engaged in learning and to encourage disengaged students back into learning began in 2001. The initiative works with schools with significant student engagement issues. These are identified through high truancy rates, high numbers of early leaving exemptions, and high rates of suspension.

The analysis of the SEI schools' student engagement data demonstrates that long-lasting improvements can be achieved. For example, the combined suspension rate of Māori students in SEI schools has reduced by 26% over the 2001–2005 period.

An increasing number of schools – particularly those in disadvantaged

neighbourhoods – are taking a holistic approach to their students' health and wellbeing and have introduced a range of health and social service support for students. For example, the Healthy Community Schools programme helps schools: provide on-site health and social work services for students; maintain health and exercise programmes; and, improve student achievements.

Supporting youth transitions

In 2001 the Government launched a comprehensive suite of policy and service measures aimed at facilitating school-to-work transitions for young people in New Zealand. This effort was consolidated the following year in the Government's commitment to the goal it shares with the **Mayors' Taskforce for Jobs**: that "By 2007, all 15 to 19 year olds will be engaged in appropriate education, training, work, or other activities that contribute to their long-term economic independence and wellbeing".

Over the past five years there have been a large number of programmes and services developed to support this Goal and to promote good outcomes and enable lifelong learning for young people who are nearing the completion of their compulsory schooling, or who have become disengaged from the education system. These include:

- the nationwide establishment of Youth Transition Services, which work on an education-first principle with their clients
- the establishment and then the increased funding and promotion of the Modern Apprenticeships programme
- the expansion of school-based vocational learning programmes
- the increased provision and support of career guidance to school-age youth
- a variety of industry training or active labour market programmes designed to help young people who have left compulsory schooling to acquire the foundational skills they need to engage in further education or employment.

Goal

Achieve a 50% improvement in the levels of adult literacy by 2015, especially for women.

New Zealand Indicators

Adult literacy skills in English

Results from the first international literacy survey in 1996 show that 54% of New Zealand's population aged 16-65 years had prose literacy skills at Level 3 or above, 50% had document skills at Level 3 or above and 51% had quantitative skills at level 3 or above.

New Zealand's prose literacy rate of 54.2% was close to the OECD median of 53.5%, and placed New Zealand seventh out of 17 OECD countries.

Reading Literacy of 15 year-olds

In 2000 the combined mean reading literacy score for 15-year-old New Zealand students was 529, significantly higher than the OECD mean of 500.

New Zealand had one of the widest distributions of scores in 2000, with a gap of 147 points between scores at the 25th and 75th percentiles, compared with the OECD average gap of 136 points. New Zealand had the highest proportion of its students at Level 5, the top level of proficiency (19%, compared with the OECD average of 9%). At the other end of the scale, 14% of New Zealand students scored at Level 1 or below, compared with an average of 18% across all countries in the study. Most of the variation in scores in New Zealand is explained by differences in performance within schools, rather than between schools. This means that schools will generally be working with a diverse range of student ability.

New Zealand students scored higher on retrieving information (535) than on reflection and evaluation (529) or interpreting texts (526).

3. PROTECTING AGAINST ABUSE, EXPLOITATION AND VIOLENCE

Goal

Protect children from all forms of abuse, neglect, exploitation and violence.

Strategies / Actions

Background

Violence against children is recognised as a critical and complex social issue in New Zealand. Strategies developed in response to this issue recognise the need to transform societal attitudes towards violence, whilst providing effective and comprehensive support to children affected by all forms of abuse and exploitation.

Early Intervention Services

In 2005, Government announced it would be investing approximately \$43.7 million over four years on a package of early intervention proposals for vulnerable young people. This included:

- expansion of a **Family Start** home visiting programme for vulnerable families to small town and rural areas
- access to free high quality early childhood education for children who are most in need
- Early Childhood Centre based parent support
- parental support built on the core Well Child service (**Toddlers without Tears**)
- services for **Children who Witness Family Violence**
- Family Court parenting information programme.

Other initiatives include “**Strategies with Kids, Information for Parents**” (**SKIP**), which promotes non-physical discipline by helping parents develop confidence, knowledge and skills; and the development by the Ministry of Social Development of a Differential Response Model that allows for a greater range of responses to child abuse notifications.

SKIP’s Pacific Strategy and Strong Pacific Families initiatives aim to reduce family violence and promote alternatives to physical discipline in Pacific communities through the use of ethnic specific tools and theological messages against family violence and physical disciplining of children.

Differential Response Model

A recently developed Differential Response Model (DRM) aims to improve outcomes for New Zealand’s children and young people by ensuring that only those children and young people who need a statutory response become involved with the statutory care and protection system, and that when such a response is required, it is more effective and timely.

DRM encourages closer collaboration with non-government organisation service providers to ensure the most appropriate response is provided; this, combined with

a wider array of response options, and a focus on strengths-based practice, greater transparency and accountability and promoting improved practice within the statutory and non-statutory agencies, all contributes to building a child protection community and preventing children and young people suffering further abuse, exploitation or violence.

Early Years Initiatives

In 2006 the Government invested a further \$7 million in an **Early Years** package of services aimed at assisting children to have the best start in life and be supported to reach their potential by:

- establishing seven early years service hubs to provide a locally responsive approach to improving co-ordination of services
- providing eight teenage parent service co-ordinators dedicated to helping teenage parents and their children
- trialling Roots of Empathy – a classroom based programme that involves parents bringing babies into the classroom nine times over the course of a year – in up to 10 schools to determine whether it can provide positive outcomes (empathy / pro-social behaviours) for children in New Zealand.

Action on violence within families

In June 2005, a **Taskforce for Action on Violence within Families** was established to provide advice to the Government on how to improve the way family violence is addressed, and to help eliminate family violence in New Zealand.

The Taskforce comprises decision-makers from the government and non-government sectors, the judiciary and Crown agencies. The Taskforce reports to a Family Violence Ministerial Team, which was established to provide leadership across the state sector, promote public debate, and demonstrate the Government's commitment to addressing the critical issue of family violence.

As part of the Taskforce, Government has invested:

- \$9 million in additional family violence prevention and support services, including 24 hour crisis lines, counselling, social work support, safe house accommodation, advocacy and information
- \$11.5 million in a community prevention programme to reduce family violence which includes:
 - (i) central co-ordination and resource development
 - (ii) national initiatives to support changes in attitudes and behaviours and
 - (iii) support for community driven initiatives.

Social work workforce issues

The Government is responding to social work workforce issues across the statutory and non-government organisation (NGO) sectors. The key components of this response are:

- the NGO Family Support Services Workforce Programme for Action, which aims to improve the supply and quality of workers in NGO family support services
- the Child, Youth and Family workforce strategy, which aims to increase the supply and quality of workers

- the introduction of registration for social workers through the Social Workers Registration Board, which aims to increase the quality of the social work workforce.

Legislative measures

In May 2007 The Crimes (Substituted Section 59) Amendment Bill passed its final reading in Parliament, and it now awaits Royal Assent to be passed into law. The purpose of the Bill is to make better provision for children to live in a safe and secure environment free from violence by abolishing the use of parental force for the purpose of correction.

This legislative change aligns with the measures to eliminate corporal punishment proposed by the United Nations Committee on the Rights of the Child's General Comment on Corporal Punishment in June 2006.

Goal
<p>Protect children from all forms of sexual exploitation, including paedophilia, trafficking and abduction.</p>
Strategies / Actions
<p><i>Legislation</i></p> <p>The Prostitution Reform Act 2003 protects children from exploitation related to prostitution. Under the Act, it is an offence to cause or assist children to participate in the sex industry, or benefit from their participation. The Prostitution Reform Act also increased the penalty for being a client in an act of prostitution by a person under the age of 18 from the maximum of five years available under section 149A the Crimes Act 1961, to a maximum of seven years imprisonment.</p> <p>The Films, Videos & Publications Classification Amendment Act came into force on 22 February 2005. Powers of search and seizure under the Act have been increased. As amended, the Act now empowers inspectors of publications to obtain search warrants where they have evidence that a suspect is knowingly in possession of objectionable material.</p> <p>New Zealand is one of several countries that have passed legislation enabling a New Zealander engaging in sexual crimes against children overseas to be prosecuted in New Zealand. Several pieces of New Zealand legislation criminalising the sexual exploitation of children contain provisions with such an extraterritorial aspect, including the Crimes Act 1961, the Films, Videos and Classification Act 1993, the Customs and Excise Act 1996, and the Prostitution Reform Act 2003.</p> <p>New Zealand's laws dealing with extradition and mutual legal assistance also contribute to international child protection by allowing law enforcement agencies (both New Zealand and overseas counterparts) to request and/or provide assistance with the investigation and prosecution of criminal offending.</p> <p><i>International commitments</i></p> <p>New Zealand is party to a range of multilateral treaties that seek to improve child wellbeing and protect against child abuse and exploitation: International Labour Organisation Convention 182 (Worst Forms of Child Labour); the United Nations Convention against Transnational Organized Crime; the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime; the Hague Convention on the Civil Aspects of International Child Abduction; and, the United Nations Convention on the Rights of the Child.</p> <p><i>Action Plans</i></p> <p>The Government released Safer Communities: Action Plan to Reduce Community and Sexual Violence in 2004. The Action Plan was developed to specifically address identified gaps in efforts to reduce sexual violence and community</p>

violence in New Zealand. It represents a move towards a coordinated and comprehensive approach to reducing community violence and sexual violence. The Action Plan has four priority areas for action: attitudes to violence; alcohol-related violence; violence in public places and sexual violence, and includes a range of strategies to strengthen cross-sectoral initiatives in these areas.

New Zealand's National Plan of Action against Commercial Sexual Exploitation of Children, was published in 2001. The National Plan of Action outlines measures being undertaken in New Zealand to prevent child prostitution. A stock-take of initiatives undertaken by government and non government agencies under the National Plan of Action was completed in 2006.

Current activity

New Zealand has signed the Optional Protocol to the United Nations Convention of the Rights of the Child on the sale of children, child prostitution and child pornography, and is actively working towards ratification.

4. HIV / AIDS

Goal

Establish time-bound national targets to achieve the internationally agreed global prevention goal to reduce by 2005 HIV prevalence among young men and women aged 15 to 24 in the most affected countries by 25% and by 25% globally by 2010.

By 2005, reduce the proportion of infants infected with HIV by 20%, and by 50% by 2010 by: ensuring that 80% of pregnant women accessing antenatal care have information, counselling and other HIV prevention services available to them, increasing the availability of and by providing access for HIV-infected women and babies to effective treatment to reduce mother-to-child transmission of HIV, as well as through effective interventions for HIV-infected women, including voluntary and confidential counselling and testing, access to treatment, especially anti-retroviral therapy and, where appropriate, breast milk substitutes and the provision of a continuum of care.

By 2003, develop and by 2005 implement national policies and strategies to: build and strengthen governmental, family and community capacities to provide a supportive environment for orphans and girls and boys infected and affected by HIV/AIDS including by providing appropriate counselling and psycho-social support; ensuring their enrolment in school and access to shelter, good nutrition, health and social services on an equal basis with other children; to protect orphans and vulnerable children from all forms of abuse, violence, exploitation, discrimination, trafficking and loss of inheritance.

Strategies / Actions

Background

In 2003, the Government published an **HIV/AIDS Action Plan** – published twice-yearly – sets out high-level goals, and specific action points for reducing instances of HIV transmission and AIDS infection, and associated negative outcomes.

In June 2005, the Ministry of Health announced New Zealand was moving to a policy of routinely offering antenatal HIV screening as part of standard antenatal care. This will be introduced nationally over a three-year period.

Current Activity

The purpose of this programme, once fully established, will be to reduce the likelihood of transmission of HIV from an HIV-infected mother to her baby. Preventive measures can reduce the chance of babies becoming infected from approximately 25% to less than 2%.

Key Partnerships

International

In 2004 New Zealand undertook a multilateral and regional agency assessment

framework (MARAAF) of the United Nations Joint Programme on HIV/AIDS.

The report concluded that the development goals of New Zealand and UNAIDS are well aligned and that New Zealand should consider funding UNAIDS as core funding partners, which subsequently happened. UNAIDS is considered a medium level engagement partner for NZAID and receives \$2 million each year for core funding. NZAID is likely to be the constituency representative on the UNAIDS Coordinating Board (PCB) from June 2007-June 2009.

NZAID has also provided funding to the Global Fund on AIDS, TB and Malaria (GFATM). By 2006 the total contribution over three years was \$3.45m.

Regional

Over and above the annual contributions made to multilateral agencies working in the HIV/AIDS area, New Zealand funds several specific Pacific regional initiatives. New Zealand is concerned about the HIV/AIDS threat in the Pacific and believes that regional cooperation is an important element to addressing the problem. Accordingly, New Zealand continues to explore innovative and effective ways of developing such collaboration, including:

- US\$5 million to support the Pacific regional HIV/AIDS strategy and implementation plan
- financial support for the UNAIDS office in the Pacific to encourage the visibility of the Pacific linked to HIV/AIDS in the UN system
- two region-wide United Nations Development Programme for Children (UNDP) programmes over three years: Youth Health and Development Programme covering several Pacific Island states (\$NZ 893,000)
- Prevention of Mother to Child Transmission of HIV/AIDS initiative (\$NZ 417,800).

Recently New Zealand announced a new package of support of \$12 million over 3 years (2005-2008) covering the following new initiatives:

- the AusAID Pacific Regional HIV/AIDS Project Competitive Grants Fund
- the implementation of the Regional HIV/AIDS strategy
- the Asia Pacific Leadership Forum (APLF)
- increasing men's involvement in and responsibility for reproductive health
- the social marketing of condoms to reduce STI and HIV/AIDS amongst high risk populations in Fiji, Tuvalu and Samoa.

Through the Pacific Regional Governance Fund, New Zealand is also supporting the Pacific Islands Chiefs of Police Secretariat to train 22 Pacific Police forces in HIV/AIDS awareness and prevention issues.

Bilateral

Africa: The NZAID South Africa and Regional Africa programmes have HIV/AIDS as a key objective to support initiatives that increase HIV/AIDS awareness, target the vulnerable and support communities through community based partnerships.

Pacific Bilateral programmes currently include HIV/AIDS work in Papua

New Guinea and Vanuatu (PNG):

Up until 2011 \$10 million will be provided to a Women and Children's primary health care (including sexual health) project, in PNG's East Sepik Province. In addition, New Zealand contributes \$2 million annually to support the PNG Health Sector Improvement Programme (or sector wide approach), of which HIV/AIDS is a high level priority.

A reproductive health youth awareness and training programme in Vanuatu (\$37,549). In Vanuatu New Zealand is also funding the living allowance for two Voluntary Service Overseas volunteers to work with the HIV/AIDS Unit at the Department of Health to assist with strategic planning and implementation of the National STI/HIV/AIDS Strategy and intervention, care and treatment services. This is funded out of the Small Project Scheme (\$54,000).

The Asia and Latin America Programmes do not specifically focus on HIV/AIDS, although a New Zealand funded UNFPA maternal child care programme in Vietnam has an HIV/AIDS component.

Part Three: Resource targets - development assistance and trade protocols

TARGET	PROGRESS MADE
<p>Meet the internationally agreed target of 0.7% of Gross National Product (GNP) for overall official development assistance by developed countries as soon as possible</p>	<p>The New Zealand Government continues to be committed to playing its part in the international effort to reduce poverty and achieve the Millennium Development Goals. Overseas development assistance (ODA) spending in 2005/06 increased to a total of just over \$380 million. This is expected to rise to nearly \$400 million in 2006/07 and to approximately \$430 million in 2007/08 (a 31% increase since 2004/05).</p> <p>The 2005/06 figure has increased New Zealand's ODA/Gross National Income (GNI) ratio from 0.23 to 0.27%. This will increase to 0.3% in 2007/2008. New Zealand recognises that further substantial increases will be needed to meet the 0.7% GNI target and is continuing to work towards that aim.</p> <p>Financial assistance in the form of ODA is important, but this is only part of the picture. In order to have a lasting impact the international community also has to apply itself to ensuring there are improvements across the range of human rights, security, governance, environmental, trade and other issues facing poor people.</p> <p>New Zealand's overall performance in a number of these areas is reflected in the Centre for Global Development 2006 Commitment to Development Index (www.cgdev.org), where New Zealand ranked fifth out of 21 countries when our policies in the areas of trade, investment, migration, the environment, security, and technology are compared alongside aid levels.</p>
<p>Implement the enhanced heavily indebted poor countries initiative (HIPC) and agree to cancel all bilateral official debts of heavily indebted poor countries as soon as possible</p>	<p>In June 2005 New Zealand announced that it would support the Multilateral Debt Relief Initiative (MDRI) scheme of implementation for the International Development Association (IDA), making firm and indicative commitments totalling NZ\$68.93 million from 2007 to 2043. This is in addition to a contribution of \$2.31 million to the earlier "Enhanced HIPC" initiative.</p>
<p>Concerted action to address the debt problems of least developed</p>	<p>New Zealand continues to play a full and active role in discussions concerning the MDRI and other debt reduction initiatives in relevant multilateral and other international fora, and is</p>

<p>countries (LDCs) through national and international measures designed to make their debts sustainable in the long term</p>	<p>providing help to strengthen financial management and budgetary processes through regional and bilateral programmes.</p>
<p>Increase and improve access of products and services of developing countries to international markets, through inter alia, the negotiated reduction of tariff barriers, which unjustifiably hinder trade of developing countries, according to the multilateral trading system</p>	<p>New Zealand has one of the most open economies in the world, with minimal import tariffs and no trade distorting subsidies.</p> <p>Agricultural products enter quota free with an average applied tariff of 2.1% and those from LDCs enter duty free and quota free.</p> <p>In international negotiations New Zealand seeks to promote trade liberalisation managed in a way that contributes to sustainable development and poverty reduction. We continue to work with developing country colleagues in the Cairns Group and G20 to achieve ambitious cuts in trade-distorting subsidies and improved market access. We support special and differential treatment for developing countries that supports their development, responds to an identified need, is targeted and facilitates the integration of developing countries into the multilateral trading system.</p> <p>New Zealand also funds technical assistance programmes, through NZAID, to support developing country partners in taking advantage of trading opportunities. In the year to June 2006 this amounted to nearly NZ\$28 million. This assistance includes trade-related capacity building (such as helping developing countries meet quarantine and SPS standards) as well as the broader economic development aspects of Aid-for-Trade, such as access to finance, market linkages, and the general macroeconomic environment.</p>
<p>Aim at improving preferential market access for LDCs by working towards the objective of duty-free and quota-free market access for all LDCs' products in the markets of developed countries</p>	<p>New Zealand has offered unilateral duty-free access to all imports originating from Forum member Pacific Island countries since 1981 under the South Pacific Regional Trade and Economic Cooperation Agreement (SPARTECA). In 2001, New Zealand extended duty-free access to all LDCs, one of the first developed countries to do so. We continue to advocate for duty and quota free access for all LDCs in all developed country markets.</p> <p>New Zealand also supports a programme to raise consumer awareness in New Zealand about fair trade issues and to increase the access of Fair Trade certified products in the New Zealand retail sector.</p>

Appendix: Web Links

The list of web links below correlate with the strategies and actions identified in bold in this report.

Strategy / Action	Web link
PROMOTING HEALTHY LIVES	
Healthy Eating Healthy Action Strategy	http://www.moh.govt.nz/moh.nsf/0/CD182E2C03925C09CC256EBD0016CF4B/\$File/healthyeatinghealthactionimplementationplan.pdf
National Immunisation Register	http://www.moh.govt.nz/moh.nsf/0/FA74067C640C0F0FCC256E58000B2089/\$File/OverviewoftheNationalImmunisationRegister.pdf
Mental Health Information National Collection	http://www.nzhis.govt.nz/documentation/dictionaries/mhinc-dictionary.html
Mission On	http://www.sparc.org.nz/education/mission-on
Outreach Immunisation Services	http://www.moh.govt.nz/moh.nsf/0/9E55D2641A885E6DCC256EB2007D721D/\$File/NationalImmunisationRegisterFactSheet5.pdf
Primary Health Care Strategy	http://www.moh.govt.nz/moh.nsf/0/7BAFAD2531E04D92CC2569E600013D04/\$File/PHCStrat.pdf
Te Kōkiri: The mental health and addiction Action Plan 2006-2015	http://www.beehive.govt.nz/Documents/Files/Te%20Kokiri%20plan%202006%20to%202015.pdf
Te Tahuu: Improving Mental Health 2005-2015	http://www.moh.govt.nz/moh.nsf/0/F2907744575A9DA9CC25702C007E8411/\$File/tetahuu-improvingmentalhealth.pdf
The Pacific Health and Disability Action Plan	http://www.moh.govt.nz/moh.nsf/0/e248f338ca98bd29cc256b6b00706edf/\$FILE/Pacific%20Health.pdf
Whakatata Tuarua: Māori Health Action Plan 2006-2011	http://www.maorihealth.govt.nz/moh.nsf/pagesmh/5583/\$File/whakatata-tuarua-action-plan.pdf
Youth Access to Alcohol	http://www.alac.org.nz/FileLinks/0_WTStream2-3_CA_ALACYata.cfc5ba3e.pdf
Youth Health: A Guide to Action	http://www.moh.govt.nz/moh.nsf/f872666357c511eb4c25666d000c8888/4356ec32544a506ccc256c670013b59c/\$FILE/youth-healthGuidetoaction.pdf
Werry Centre for Child and Adolescent Mental Health Workforce Development	http://www.werrycentre.org.nz/?t=214

Strategy / Action	Web link
PROVIDING QUALITY EDUCATION	
Better Outcomes for Children	http://www.minedu.govt.nz/web/downloadable/dl11382_v1/11382-gse-full-action-plan.pdf
Mayors' Taskforce for Jobs	http://www.mayorstaskforceforjobs.co.nz/
Māori Education Strategy	http://www.minedu.govt.nz/web/downloadable/dl10448_v1/maori-education-strategy-may-05.pdf
Nga Haeata Matauranga	http://www.minedu.govt.nz/index.cfm?layout=document&documentid=11556&data=l
Pasifika Education Plan	http://www.minedu.govt.nz/web/downloadable/dl4711_v1/latest-version-pep-wall-chart-2006-2010.pdf
Pathways to the Future: Ngā Huarahi Arataki	http://www.minedu.govt.nz/web/downloadable/dl7648_v1/english.plan.art.pdf
Student Engagement Initiative	http://educationcounts.edcentre.govt.nz/themes/downloads/StudentEngagement2005.pdf
PROTECTING AGAINST VIOLENCE ABUSE AND EXPLOITATION	
Children who witness family violence	http://www.familyservices.govt.nz/our-work/preventing-violence/children-witness.html
Early Years Initiatives	http://www.familyservices.govt.nz/our-work/strong-families/early-years/
Family Start	http://www.familyservices.govt.nz/our-work/strong-families/family-start/index.html
'SKIP'	http://www.familyservices.govt.nz/info-for-families/skip/
Taskforce for Action on Violence within Families	http://www.msd.govt.nz/documents/work-areas/sector-policy/te-rito/taskforce-report-action-on-violence.pdf
Safer Communities: Action Plan to Reduce Community and Sexual Violence	http://www.justice.govt.nz/pubs/reports/2004/action-plan-community-sexual-violence/action-plan.pdf
Toddlers without tears	http://www.familyservices.govt.nz/our-work/strong-families/toddlers.html
HIV / AIDS	
HIV / AIDS Action Plan	http://www.moh.govt.nz/moh.nsf/49ba80c00757b8804c256673001d47d0/2d2f24bba8b949bccc256dec0015360/\$FILE/HIVAIDSActionPlan.pdf