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REPORT OF COMMITTEE TO REPORT TO THE
MINISTER OF SOCIAL WELFARE
ON THE CURRENT PRACTICES AND PROCEDURES
FOLLOWED IN INSTITUTIONS OF
THE DEPARTMENT OF SOCIAL WELFARE
IN AUCKLAND

MEMBERSHIP OF THE COMMITTEE

The Most Reverent A.H. Johnston, C.M.G., LL.D, L.th.

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29 October 1982

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ORDER OF REFERENCE

In the light of the report of the Human Rights Commission on Children and Young Person's Homes administered by the Department of Social Welfare,

- (a) To report on the practices and procedures in respect of the responsibilities of the Director-General of Social Welfare in relation to the care and control of children and young persons in the following Auckland institutions of the Department of Social Welfare

Bollard Girls' Home

Allendale Road Girls' Home

Owairaka Boys' Home

Wesleydale Boys' Home

Cornwall Park Reception Centre

Weymouth Girls' School

- (b) To advise the extent to which any practice or procedure falls short of desirable standards;
and

- (c) Where necessary, to make recommendations to improve these practices and procedures.

The Committee was appointed on 3rd September 1982 and began its work in Auckland on 13th September. Offices were provided in the State Insurance Building, Wakefield Street, Auckland.

Owing to her programme within the University Mrs Penfold was only able to give part-time assistance until 8th October 1982. Mrs Jackson began her duties with the Committee on 20th September 1982

THE REPORT OF THE HUMAN RIGHTS COMMISSION

On 6th April 1979 the Commission resolved to receive complaints from the Auckland Committee on Racism and Discrimination as a representation 'affecting human rights' under Section 5 (1) (3) of the Human Rights Commission Act 1977. After preliminary meetings the enquiry was set down to commence in Auckland from 11th February to 13th February 1980. The Report of the Commission was released to the Minister on 30th August 1982.

The Report (pages 15 - 46) describes specific allegations made by Acord against practices and procedures claimed to have occurred in the various residential homes. At the time of hearing the statements of those people brought by the Auckland Committee on Racism and Discrimination (Acord) there was no appearance of any representative of the Department and accordingly no cross-examination.

An extended questionnaire was then submitted to the Department of Social Welfare covering the matters brought to the Commission's attention by Acord. These questions referred to the general practices rather than to any specific instance alleged in the complaint by Acord. Extracts from the Department's replies to the questionnaire and quotations from staff members interviewed are given on pages 61 - 97.

Both Acord and the Department of Social Welfare were invited to present submissions on the interpretations of the various international instruments on human rights which had formed the framework of the original representations. No argument was allowed and the respective views of both Acord and the Department of Social Welfare are included on pages 98 - 119. The Commission then presents its own view that some practices and procedures are of such a nature that they raise serious and substantial questions regarding this country's better compliance with the standards set out in Articles of the United Nations Covenants on Human Rights.

Finally on pages 123 - 135 the Commission presents its own conclusions and recommendations.

The Commission on page 123 acknowledges "that many, if not all, the practices and procedures which formed the basis of the representations by Acord have been eradicated, and the Department has embarked on a programme of innovative change."

COMMITTEE OF ENQUIRY - METHOD OF PROCEDURE

Notices were placed in daily newspapers in Auckland on three different days inviting submissions from recent residents and staff in the Homes.

Members of staff in the Homes and the present residents were told of the Enquiry and invited to make any comments they wished to the Committee. Notices were placed in the Homes giving private telephone numbers of the members of the Enquiry, inviting make any communication in confidence.

All the institutions listed in the Terms of Reference were visited, most of them on several occasions, and for extended periods. Meals were shared with residents. Staff were met personally and inmates interviewed individually.

Several other departmental institutions were visited at Hamilton and Levin, as well as the Group Home at Te Atatu.

In addition, opportunity was taken to visit the Young Persons' Court and the Community Care Unit at Otahuhu, the joint meeting of all agencies at Henderson, the Hoani Waititi Marae, and Henderson House.

Persons who gave important information to the Committee included :-

Ms Pauline Tapp, Faculty of Law, University of Auckland
Judges of Children's and Young Person's Courts
Medical Practitioners of Homes
The Director General of Health
Members of Police Youth Aid Sections
Professor J.S. Werry, Dept of Psychiatry,
University of Auckland
Psychologists - Department of Education
Psychologists - Department of Social Welfare
Child Care Co-ordinating Committee
Public Service Association Staff group
Members of Visiting Committees to the Homes
Dr P. Sharples, Hoani Waititi Marae
Youth for Christ
Social Workers, Department of Social Welfare
Auckland Committee on Racism and Discrimination
Department of Maori Affairs
Detached Social Workers
Individual members of staff of Homes
Women Against Racism

The Terms of Reference require an enquiry into practices and procedures in the Auckland institutions of the Department of Social Welfare in the light of the report of the Human Rights Commission. It would therefore seem appropriate to report on investigations made in each institution, particularly in those areas where criticism was levelled by various people.

It should be stressed that what the Terms of Reference require, and what this Committee has endeavoured to do, is not an investigation into the allegations made concerning the past, but an examination of what is now the situation pertaining to these institutions.

THE HOMES UNDER REVIEW

BOLLARD GIRLS' HOME

The objective of this Home is to provide safe custody, assessment, and short term training for difficult, disturbed or delinquent children and young persons; or children and young persons who are in need of care and protection. Ages can range from 10 to 17 years. The Home has a capacity of 30 beds plus four secure beds.

There are two distinct groups -

- (a) Those who have been remanded by the Court or brought to the Home by the Police on warrant.
- (b) Those brought to the Home on Social Welfare warrants for care and protection where no offence by the girl is involved, e.g. those who are the victims of incest situations.

The Home has no control over the number of admissions on remand from the Courts or on Police warrant. During the past two or three years some 500 girls were admitted annually with an average stay of approximately 2 to 3 weeks. Some may stay only a few days, others a number of months.

Not only is there a wide range of ages, but also a variety of needs that is less than desirable. A very particular approach is required for those needing shelter care. They may have deep emotional problems, have a history of incest or ill-treatment by parents and neglect.

Many factors contribute to a uniformity of treatment in this situation. There is the high rate of change-over, frequent high numbers in the Home as well as the wide range of problems amongst the young people.

To be 'On Remand' can confer a label which, unless carefully considered from time to time, blurs the great variety of reasons which brought the young person into care.

The design of the Home is such that there is little opportunity for staff to provide varying degrees of supervision and varying programmes

Uniformity of approach is unsuitable when staff have to cope with high numbers of diverse transient young people in the present circumstances. Such inappropriate treatment can be seen by the young person as very unfair and unreasonable. In turn this can lead to an anti-authority attitude and suspicion of those in authority.

The average length of stay on the whole does not allow always for a true and full assessment of individual girls to be carried out. Every effort is made in conjunction with the girls' Field Workers to ensure that girls are placed in the Community in an environment where her needs will, in fact, be met. However, community placements are not readily available for teenage girls. Hostel, foster, family homes, private board placements are limited, and the number of girls requiring such placements is steadily rising.

Bollard now has limited hostel type accommodation for girls who require support and supervision while seeking employment and in the initial period of that employment. But jobs are hard to find.

The Committee has been deeply impressed by the approach of the staff to the complex problems of the girls in Bollard. There was a relaxed atmosphere and an obvious dedication on the part of staff for the welfare of these girls.

In the opinion of the Committee, urgent consideration should be given to the manner in which the very different functions at present required of Bollard might be better provided.

Remand facilities need to be recognised as a particular and separate requirement. The present confusion of this function with the role of the Home in providing care and protection for a different group should be resolved.

The short term stay enforced by the pressure of demand from the Court and Police prevents any longer term programme for those who would benefit most from such a programme. Extended term care for girls of 12 - 13 years of age, up to two terms at school, would allow a more positive approach in preventative care. Many need to be re-established in school habits, school routine, going home for weekends, with the Department co-operating with the parents. At present many girls go back into the community and are soon returned to the Home again having re-offended.

The suggestion was made to us that for this age group one institution for boys and girls could answer the need with the children attending schools in the community. The Home would provide necessary support, counselling, psychological services, and the secure environment.

Always in our minds is the question - Is institutional care necessary? Is it the answer? For most of those in these institutions the Home is seen as the place of last resort. In home, school, local community, there has been such a measure of failure in relationship, in achieving any worthwhile purpose, that the institution becomes the only place where any measure of healing is thought possible.

There is a very deep-seated recognition amongst staff that every effort should be made to avoid admittance into an institution if at all possible. Sometimes a girl sent to the Home is found alternative provision within hours of admittance. But those with the strongest desire to keep the young person within the community have no doubts that for some, institutional care, for a variety of reasons, is still necessary.

Admission Procedures

A change in the system of Admissions at Bollard, used experimentally in 1981, has again been introduced.

What was previously known as the "Secure Unit" is now designated "Reception." This is, however, still the "Secure Unit". A six bedroom unit adjoining a dormitory is known as "Admissions". This can only be locked at each end. Rooms are fully furnished with no locks on doors, and one room is used as a lounge. The girls can move about within this area and at night the area is unlocked and becomes part of the dormitory.

On arrival, all girls are admitted through the Reception (Secure) area, and those considered suitable are directly removed to Admissions block. Some, especially those more disturbed on arrival, are kept in Reception.

Girls admitted between 10 p.m. and 6 a.m., unless wellknown to staff, remain in Reception until the following morning.

Figures for a three month period show the length of stay in the Reception and Admission areas.

	<u>Month 1</u>	<u>Month 2</u>	<u>Month 3</u>
Direct to Admissions	25	18	28
Overnight in Reception then to Admission	7	9	7
Direct to Reception	12	5	3
Direct to House	1	1	3

Number of days for each girl in Admissions area.

1 day or less	61
2 days or less	30
3 days or less	13
4 days or less	-
5 days or less	-

Number of days in Reception
(Secure)

	<u>Month 1</u>	<u>Month 2</u>	<u>Month 3</u>
Less than 1 day	1	-	-
1 day or less	6	1	1
2 days or less	5	4	1
3 days or less	-	-	1
	12	5	3

With the exception of the senior staff member in charge of the unit particular staff are not associated solely with the Secure area. Staff and girls are able to build relationships from the beginning.

All girls in Admission and Reception have meals in the main dining room with the other girls. There is occasionally the exception when a meal is taken to a girl in Reception if her circumstances warrant her not coming to the dining room.

Because more staff are involved, girls are able to be given more intensive counselling and help in the Admissions area.

The Admission procedures appear to be working in a relaxed manner and to operate effectively. But the Committee has reservations about the manner of admission at night.

We do not consider that the circumstance of time of admission should necessitate the use of "Secure" for even one night. We are aware that night staff are not qualified to deal with all aspects of the admission process.

However, the welfare of the girl is paramount, and her first night in the institution could well determine much of her subsequent response.

We recommend that accommodation of similar standard and appearance to bedrooms in the open part of the institution be provided for night admissions, and preferably not in the "Secure" area. However, for those admitted to the "Secure" area for special reasons, remarks concerning the redevelopment of this area later in the report have relevance.

Again, this Committee recommends that urgent consideration be given to the provision of a separate Reception area, not to be part of the "Secure" facility.

Also, the Committee recommends that attention be given to the qualifications required for night staff. (See Owairaka section).

Medical Examinations

Every girl, on admission, is given the opportunity of a medical examination by the doctor who regularly attends the home. This doctor is a woman, a specialist in obstetrics and gynaecology, particularly interested in work among girls and young women. She is a gentle sensitive person and in good standing within the medical profession. The Department is fortunate to have her professional services available.

The Matron is responsible for counselling girls about the medical examinations. This is done at some convenient time after admission, and may be assisted by the work of Senior Residential Social Workers. If a girl objects to a medical examination, then she is not pressed, but is approached on a subsequent day, following further counselling, and as she is more settled into the new environment. The doctor does not see any girl who has so objected.

The general medical examination includes making a vaginal examination and taking a swab for testing for venereal disease. If a girl objects to this part of the medical examination then no compulsion or coercion is exercised by the doctor, but the Principal is advised that a full medical examination has not been given.

The staff are adamant that no girl is punished by detention in "Secure" for such a refusal. It may be that she is in "Secure" for other reasons, but such detention is not used as a punishment for refusal to undergo a medical examination.

It is important to note that the vaginal examination is part of the general medical examination. It is not a procedure used in isolation. The doctor is always ready to explain the reasons for this examination, and the method to be used.

The authorities in the institutions are aware that a medical examination cannot be a matter of compulsion or coercion. If the young person is capable of giving informed consent and refuses, then the authorities cannot override that refusal. If they are unable to give an informed consent because of youthful incapacity the law permits the parent or guardian to do so for them.

In similar fashion, if a girl who is of sufficient age and understanding held to be able to give informed consent, refuses a medical examination or the perineal area examination necessary to determine the presence of venereal disease or other transmittable vaginal infection then -

1. The Director General has no public responsibility under the Health Act as care giver of the girl; and
2. Cannot compel her to suffer the necessary examinations against her will.

As guardian or quasi-guardian under a Section 11 agreement the Director General has undoubtedly the responsibility to provide all necessary health care for the children and young persons who are his wards in that way. That will clearly include giving the consent necessary to ensure examination and treatment where the ward is unable to give informed consent or in situations where the ward does not refuse. Apart from that he must clearly do everything in reason to persuade the ward to accept an examination, even if no treatment is in fact necessary.

Equally clearly if a girl has refused consent and has overt signs of venereal infection she is subject to the Health Act like any adult and the powers given to a Medical Officer of Health may be used against her like any adult.

There is then a responsibility upon the Department or the Home to provide all necessary health care for those in care. The Department could be held negligent if it failed to do so.

Yet the young person concerned may not be compelled nor coerced to accept a medical examination and her freedom to make this choice must be respected.

It is evident to the Committee that the health of the girls under care is accepted as a major responsibility by the Department. We believe that part of this care must be carried out by an educational programme in many aspects of health and hygiene. The medical examinations can then be placed in this wider context.

In order to make better provision for health education and counselling at Bollard, we recommend that the present part-time nursing appointment (for part of two mornings each week) be replaced by a full-time appointment.

In making such an appointment regard should be taken to the possibility of appointing a nurse with psychiatric as well as general nursing qualifications.

The examination for venereal disease ought not to be part of the examination if the girl objects and particularly if she insists she has not been promiscuous.

The doctor has an adequate surgery in which to carry out all examinations and she is accompanied by a nurse who attends the Home twice each week. There are other reasons for a complete medical examination than the testing for venereal disease. Some girls have little understanding of personal hygiene, some suffer from thrush, pubic lice, etc.

It is important to note that a number of girls on regular medication have either forgotten, or have not been permitted, in the processes of apprehension, to bring their medication tablets into the Home. Therefore, appropriate action needs to be taken.

The doctor lives close to Allendale and Bollard and if the staff have any problems, they bring the girl to the doctor's surgery, or she visits the Home.

I have taken from the medical records at Bollard a list of 36 examinations, not a selection, but 36 in a series of recent date, and shown the results of the medical examinations in every case. This list indicates that a full medical examination is of vital importance for the girl herself. It is in the light of this that girls are counselled regarding the desirability of having a medical examination. In some cases the girl may quickly appreciate the re-assurance which an examination provides.

The Director General of Health has written -

"My view is that the VD regulations have little or no relevance to the investigation of children in homes. Some of these children may indeed be promiscuous and at risk from one or other sexually transmitted diseases. Some of these are asymptomatic and can only be diagnosed or the condition excluded after clinical and laboratory examinations. It is obviously desirable that children who have put themselves at risk by their indiscriminate sexual habits should have the benefit of an examination for their own sake as well as that of any future sexual partners. However this applies to many other people in the community.

Such investigation should only be offered if the assessment of such a person makes it clear that promiscuity is a feature and should not be a routine examination. There should be adequate explanation and counselling."

We have made careful and repeated enquiries into this procedure, and trust that we have been given an accurate account. In the past two months, five girls have declined to take the medical examinations, and have subsequently spent their time of remand and have then been discharged from the Home in the usual manner without having been so examined.

Work in the kitchen is not given to anyone suffering from any communicable disease, nor to anyone refusing a medical examination. Various opinions were expressed to the Commission on this matter in regard to anyone suffering from VD.

The Venereal diseases Regulations 1982 issued on 20th September contains the following -

"13. Offences - Every person commits an offence against these regulations who -

- (a) Except as may be approved by the medical practitioner treating him or by the Medical Officer of Health, engages, while suffering from venereal disease in a communicable form, in any employment, or acts in any capacity, in or about any factory, shop, hotel, restaurant, house, or any place if by reason thereof any food intended for consumption by any other person or any food utensil is exposed to infection from venereal disease or is likely to be so infected;"

In this regard the Director General of Health has written -

"The regulation in respect of food handling was not amended. There is, in fact, very little likelihood that sexually transmitted diseases can be transmitted by food contamination, but the veneriologists who advised us on this felt that there were occasions (in a person suffering from the secondary stage of syphilis) when this was a possibility. The main reason for the regulation was one of aesthetics and perhaps another way of encouraging such people to seek treatment. The matter is provided for in regulation 13 (a) of the regulations whereby an offence is committed unless a doctor or the medical officer of health approve the patient being employed. It must also in circumstances connected with food be "VD" in a communicable form and this implies an examination and diagnosis. Having got this far more normal people would accept treatment anyway and would rapidly become non-communicable! This regulation has no relevance to people who do not have VD in a communicable form which can only be determined after examination.

VD as defined in the regulations means gonorrhoea, syphilis, chancroid, and venereal granuloma. The two latter are very rare in New Zealand. Other sexually transmitted diseases (herpes, warts, and non-specific urethritis) are not included in the definition.

Whether or not a girl with untreated VD can put at risk other people living in an institution depends on a number of factors. A girl with gonorrhoea is very likely to spread the disease to those who have intercourse with her whether she has symptoms or not. It is extremely unlikely to be spread in any other way, although a condition called vulvo-vaginitis (infection of the vulva and vagina) can occur, usually in young girls who have used a towel recently contaminated by the discharge from a symptomatic female.

Syphilis, which is still uncommon in New Zealand, is also spread mainly through sexual intercourse but the periods of communicability are not prolonged even in an untreated case. During the few weeks or months this occurs the patient can be extremely infectious with non-sexual spread possible resulting from physical contact with sores which may occur in the genital regions but also on the lips and in the mouth and throat. It is possible for infection to occur via the medium of a cup or glass but this is very rare as the micro-organism causing syphilis is very sensitive and dies readily when it leaves its human habitat."

The authorities within Bollard believe that there may be other medical conditions than VD which render a person a risk to the health of others if employed in the kitchen.

Allendale Procedure: The medical care of the girls in this Home is under the same medical practitioner as at Bollard. Except when a girl has been transferred from another institution where such an examination has already been carried out, a full medical check is provided for each girl on admission. VD tests are not mandatory and if after counselling these are not thought appropriate then no further action is taken, as is the case if a girl refuses such examination. However, from time to time, a girl will subsequently request such further examination.

.....

This is obviously a matter of sensitivity. The Commission quotes Professor Bonham who emphasizes "The importance of kindness, calmness, and matter-of-factness about this type of examination". The present doctor is one who, in our opinion, is able to fulfil such requirements.

On page 83 of the Report the Commission "wishes to make it quite clear that the allegations made as to venereal disease testing at Bollard Girls' Home on page 15 do not involve practices or procedures employed by this medical practitioner. She was appointed in 1980 after the beginning of this enquiry and any comments in this report do not refer to her."

Unfortunately in this, and in other parts of the Report, there is a historical dimension not apparent to the casual reader. As a result much distress has been caused to staff members and their families by those who used the report as a description of present practices.

In this instance, for example, to suggest that stirrups are used in the medical examination is ludicrous.

The suggestion was made to the Enquiry that the medical examination of girls for VD was discriminatory, in that boys were not so examined. The medical practitioner who is responsible for the Owairaka Home assured the Committee that the medical examination of boys there includes such an examination.

Provision of sanitary napkins

The method of supplying sanitary napkins has to be considered in the light of the former section. Female staff deal with the supply of napkins and in doing so are able to give counsel and advice necessary to an improved standard of personal hygiene.

In addition, the disposal of used napkins is checked when fresh ones are issued. Otherwise, used ones were left in a most unsatisfactory manner in a variety of places.

The health of the girls is always a paramount consideration. What may to an outsider appear at first sight to be a clumsy embarrassing and unnecessary procedure must be seen in the context here described.

At Allendale Road and at Weymouth a supply of napkins is left in a convenient place for the girls to take without further request. It is obvious that in the longer term of residence a method of counselling has been possible which obviates the problems encountered at Bollard. But at two short-stay institutions we were informed that despite several attempts to initiate other procedures this manner of individual issue was found to be necessary.

The appointment of a full-time nurse responsible for health education may well lead to a method of supply as is used at Weymouth and Allendale.

"Secure"

At Bollard the Secure unit consists of four single rooms, plus an art room where mattresses are placed on the floor if it is necessary to use this for sleeping purposes.

Staff insist that the need for this unit is not that it be used as a place of punishment, but rather that girls suffering disturbed conditions may be helped. One estimate given was that 25% of the girls admitted suffer from a disturbed condition that in many cases requires some time for quiet and for personal counselling before admission to the open institution. This disturbed state is becoming noticeable in a younger age group. Sometimes these girls are in personal danger by reason of their own actions.

No girl in secure is left unattended. Two experienced staff members are always on duty. Girls are checked every 30 minutes during the day and a careful record is kept of all that happens. Girls are able to call a staff member by use of a buzzer.

The Committee asked for particulars of the use of Secure in recent months:

<u>June</u>	<u>July</u>	<u>August</u>
3 girls $\frac{1}{2}$ day	1 girl 6 hrs	11 girls 1 day
8 girls 1 day	2 girls overnight	1 girl $1\frac{1}{2}$ days
5 girls $1\frac{1}{2}$ days	10 girls 1 day	5 girls 2 days
12 girls 2 days	2 girls $1\frac{1}{2}$ days	8 girls 3 days
2 girls $2\frac{1}{2}$ days	18 girls 2 days	2 girls 4 days
7 girls 3 days	2 girls $2\frac{1}{2}$ days	
1 girl 4 days	3 girls 3 days	
2 girls 5 days	2 girls 4 days	
	1 girl $4\frac{1}{2}$ days	

The length of stay is determined by the girl's own responses and progress. There is no pre-determination of a period, as in a sentence given as punishment.

On occasions girls in the open institution ask to be allowed some time by themselves in Secure.

With regular reports by staff, twice each day, a constant review of all girls in Secure is kept by the most senior staff. Always the girl's own welfare is of first importance. A visiting psychologist is available for consultations as well as the medical officer.

In the view of the Committee the extent to which the use of Secure is needed should be carefully established.

Although we accept that time in secure is not used as a means of punishment, some will inevitably interpret it as that, despite the efforts of staff to emphasize a different intention.

Some will come into care who may need to be confined for the safety of others as well as their own safety. We believe that for this purpose, especially in cases of violent disturbance, the present facilities need modifications.

The impression made by the physical structure can over-ride any reason given by Social Workers for time in Secure. The materials used in construction, and the general planning of the unit, leave little alternative but to regard the unit as a group of cells.

Toilettng in the same room as a person sleeps and may occasionally eat is unacceptable except in the most extreme cases. It is to be remembered, as already noted, that for most of those in Secure at Bollard meals are taken in the dining room. At a sensitive age, and often when highly disturbed upon admission, the young person is placed in a situation where privacy of toilettng is impossible.

It is the recommendation of the Committee -

1. That early attention be given to provision of admission facilities other than those in the Secure unit.
2. That the rooms of the Secure unit be soon improved in design and finish, having regard to the need to provide for disturbed persons from time to time.
3. That no person be kept in Secure for longer than two days unless the decision is ratified by a committee consisting of a non-departmental person and a psychologist.
4. That strict criteria for admission to Secure be established.
5. That withdrawal areas, other than the Secure unit, be provided for Young Persons needing to withdraw for a time from the larger group.

ALLENDALE ROAD GIRLS' HOME

Allendale is an extended care residential Home, catering for children and young persons aged 11 years to 14 years plus. The average length of stay is 119 days. Allendale provides a warm nurturing environment. In the house setting the emphasis is on helping girls to acquire social skills to enable them to meet the standard required in the community, to promote understanding of different cultural needs and respect of individuals' feelings. Boundaries are set whereby the young people gain confidence and security. The lack of set limits have been the major stumbling block of most of the young people who came into our care. Allendale has a two roomed school attached. Both house and school work in conjunction with each other. Strong emphasis is placed on our school programme to provide academic success at the girl's own ability level.

This Home has the great advantage of a controlled intake of residents, and of their outgoing. It provides a programme only made possible by the fact that the girls stay for two or three school terms.

Admission procedures (only 45 in a year) can be carried out in a relaxed manner in good surroundings.

The Secure unit is within the general dormitory area and is adequate for the restricted use to which it is put. There are no toilets in the bedrooms.

An imaginative programme outside school hours is provided.

There is good involvement of people from the community and girls are given opportunity to go into the community (shopping on their own, church, weekend leave at home). With a large proportion of Maori girls it is pleasing to note the involvement in cultural programmes, visits to maraes, etc. Much of this is due to the energetic manner in which staff members have encouraged people in the community to take a useful interest in the Home.

The School is an integral part of the Home and its programmes. We were impressed by the fine relationship between staff of school and home, and the close co-operation resulting in the life of the whole.

Because of the number of girls on the roll, the range of educational abilities and emotional conditions amongst them, it is recommended that early attention be given to the appointment of a third teacher.

Difficulties regarding the availability of petty cash, the supply of materials and equipment, the common use of resources by school and home, and the assistance of advisers from the Department of Education, all point to the need for the early implementation of the recommendations of the Rolfe/Doolan Report on School and Teaching Services in the Department of Social Welfare Homes.

CORNWALL PARK RECEPTION CENTRE

This 20 bed residence provides short term shelter care for mainly pre-school children. It has a one teacher kindergarten attached.

Admissions are brought by a Social Welfare worker or by Police. Children may be at Cornwall Park as preparation for adoption and the Centre works closely with the adoption team from the Department.

A visiting medical practitioner is always in close touch with the Centre and is available whenever required.

The older children attend schools within the community and there is good support from groups in the community.

There is good liaison between the kindergarten and the Centre. The teacher is able to take the children out in the Centre's vehicle together with a staff member. For instance once each week there is a visit to a neighbouring kindergarten where the children can be members of a larger group.

The medical practitioner who visits this home at all sorts of hours has told the Enquiry of his deep respect and admiration for the work of the Centre, for the dedication of the staff, and for the able manner in which they deal with a great variety of need.

In a delightful setting this Centre fulfils an urgent need and does so with evident love and care for those who are its residents.

WEYMOUTH GIRLS' SCHOOL

Weymouth Girls School is situated in Manurewa, South Auckland. Weymouth has three 20 bed hostels and a secure unit with a capacity of 19. Weymouth provides a structured environment for girls aged 13 - 17 years. The catchment area for admissions is the northern half of the North Island. The length of stay varies, but most girls spend 9 - 12 months at the school. Girls of school age attend a school on the premises while older girls may choose to embark on a work experience programme. In recent months, one of the hostels has specialised in assessment. At times, the secure unit has also been used to provide additional remand and assessment accommodation when the Bollard Girls Home has been full.

This institution has the distinct advantage of the ability to control all admissions. All proposals for admission are examined carefully in order to establish clearly the reasons for admittance and to collect all the information available in every case. So staff and girls are able to be prepared for new arrivals.

A list of 23 Basic Rules is given to new girls on admission.

For the first six weeks the girls are placed on an internal induction system, with the school being involved. A Residential Social Worker is allocated to each girl and is responsible for her. Medical and dental care are the responsibility of the trained nurse, a permanent staff member.

After six weeks the girls move to another hostel unit. Exceptional girls may use the flatting concept in one of the houses.

Some girls continue at school after they are 15 years of age. A few attend the local High School. Others are involved in the internal work programme and in the various industries - sewing, dressmaking, kitchen, hairdressing, laundry, gardening (a six weekly programme).

Some girls work out in the community on full-time jobs.

Girls are able to join in competition sports in the local community - to take part in Maori culture programmes, to join in the making of rugs and soft toys.

This institution is well equipped with swimming pool, gymnasium, trampolines, canoes, sailing dinghies, horses for riding, and a camping site, in a total of some 30 acres of farmland.

Trips are made to local factories, weekend camps at Leigh, Little Huia, to the marae at Waiouru Camp for an eight day stint. Longer periods of up to three weeks are spent at Summer holiday camps.

Parents are encouraged to visit and accommodation is available for those who travel a distance when their daughters may stay with them and act as hosts.

Secure

There is medium secure provision in Hostel 4 of eight beds for difficult girls. In addition there are five beds in the "Maximum Secure" unit, and six in "Remand Secure."

Girls are admitted to this maximum secure for more serious misdemeanours. Sometimes it may be on a time-out basis for an hour, for up to three hours, or overnight.

With longer periods, as set by senior staff, points are set and a girl earns her release by her response. If this does not prove effective a decision is made at senior level and the girl returned to her hostel.

Medium secure is not a penalty but a treatment programme area. It has a high staff ratio, who supervise a tightly structured programme. Girls are restricted in movement only beyond the exterior bounds of this area, and may on occasions be allowed access to the rest of the property.

General

The practices and procedures in this Home reflect the distinct advantages of the longer term institution. Different needs of girls are able to be met within a flexible programme.

The whole welfare of the girls is obviously taken very seriously by the staff. The relationship with the local community commended itself very strongly.

This institution has many excellent facilities and they appear to be well used.

There is a fine relationship within the whole staff. Proposals are under consideration amongst them for recommendations regarding the better utilisation of this facility, together with an assessment of the present approach at Weymouth to the tasks entrusted to it.

The following letter, unsolicited, is of interest -

"Dear Sir,

For the past eight years my wife and I have visited the Girls' School at Weymouth. We spend four to five hours there every Wednesday evening and visit on other days as well. In addition we have had in excess of 200 girls to our home for meals and evening visits during that time. About six to seven years ago we were issued with a key which gives us access to every area except the cells, so we come and go as we please. In addition we cannot recall ever having been refused permission to visit a girl in "maxi".

We would like you to know that over the years we have come to hold the highest opinion of the staff, of their love and concern for the girls and their dedication to their work. We have met many many fine girls there and it is a constant grief to us that our New Zealand Society is such that the need for such a place should exist.

If you should feel that we could help in any way with your inquiry then we would be very happy to meet with you. I must say that we believe, very strongly, that the real problem is outside of the institutions and the damage to the girls is done long before they get there.

Be that as it may there may be some matters on which our experience could be useful. If you wish it we could be available at short notice and indeed would appreciate the opportunity to speak with you."

WESLEYDALE BOYS' HOME

Wesleydale was opened in 1976 to cater for a roll of 24 boys within the age range of 10 - 14 years. It was expected that medium-term placement of about two months would be the general purpose of the Home, but that warrant/remand cases would also be admitted.

Today the institution's role is governed by the pressures of the warrant/remand cases.

There are no set criteria for admissions. All cases on warrant or remand must be accepted. Overcrowding often occurs, and the Social Work part of the programme suffers.

The Home is staffed to cater for 24 boys. With the overcrowding and constant turnover of residents, adaptations to the programme are frequently necessary. Many recidivists, serious offenders, and boys with a history of persistent absconding are included in the admissions.

Wesleydale is an Open Institution intended to implement a Social Work philosophy, where staff should be able to help a child in a positive supportive and caring manner. A high number of Polynesian and Maori boys come into care and recommendations for staff appointments are made in order that the inclusion of Maori or Polynesian staff may achieve better rapport with the boys.

Defining the role of Wesleydale is difficult to determine in view of the following -

1. The Home has to accept all cases. There is no set criteria for admissions, they cannot select their cases.
2. Because it has to accept all cases, often overcrowding occurs, and the Social Work part of the programme is strained.
3. The Home is staffed to cater for 24 boys, and with the overcrowding and constant turnover of cases, adaptations to the programme need to be developed to meet these needs and demands. This is not always easy, particularly when overcrowding occurs and staff resources are strained.

4. Wesleydale receives many recidivists, serious offenders and boys with a history of persistent absconding. Absconding is one of the main problems - total number for 1981 was 129. Management and care of these cases extends the staff.

A two teacher school provides an excellent educational programme designed to meet the individual needs of boys, many of whom have failed to achieve much in former school experience.

There is a double kind of mixture in the admissions to the Home. First, that of bringing together boys in need of care and protection with those who are on remand from the Courts and perhaps are quite serious offenders. This is seen to be undesirable and every effort is made to find placements in the community for the former group.

Then there is the group of state wards for whom placement in the community is difficult, while others are able to return to their homes, or to some alternative place in the community. The frustration of those for whom placement is difficult is a root cause of absconding. The very uncertainty of the situation contributes to the frustration.

The 'Remand' situation also causes another kind of frustration and this relates to the staff. Dedicated to a social work philosophy, they desire to develop helping relationships with the boys, but this demands a longer term than is here possible.

They see the need for an extended term of care whereby boys could be given the support needed to re-establish them in the school routine and overcome some of the problems underlying truancy, and gradually be prepared for return to living in the community.

Discipline

In the Human Rights Report specific complaints were made of a number of practices used in the enforcement of discipline.

Careful enquiry now goes to show that no such practices exist in this Home today.

Boxing matches, corporal punishment of any kind, and extreme forms of physical exercise are not now part of the enforcement of discipline.

However, while we are assured that this is the present position, there is evidence which suggests that occasional staff use of physical reprimand has been a feature of this institution until recent months. The use of the strap was discontinued in August.

General

In this Home we were aware of the need for a "Mother" person. Some of the boys are quite young, and although the women on the domestic staff are obviously caring in their approach we recommend that attention be given to meeting this need within the Welfare Staff of the Home.

In some respects this Home seems to be more affected by the confusion as to its role, and also by the requirements to change from former methods. The institution has not yet been able to incorporate the school into its whole outlook and policy as much as is desirable.

It seems that the pressure of numbers extending the available staff, and the associated problems, are preventing a more positive approach.

There was a strong request from staff members for additional staff.

In any review of the role of the Homes, we recommend that attention be given to the pressure on accommodation and staffing when numbers at Wesleydale exceed 24. In the past this number has been frequently exceeded, with the obvious results. Boys then are given beds in the recreation room, a practice which deprives the Home of a necessary facility.

OWAIRAKA BOYS' HOME

Owairaka Boys' Home has a capacity of 43 beds in the open unit plus 18 beds in the secure unit. It provides a remand and assessment facility for young persons (14 - 17 years old) for the Auckland region. It is the Department's largest remand home.

A two teacher school is on the complex.

Owairaka Home is almost solely concerned with the provision of care for boys 14 to 17 years of age, admitted, usually without prior warning, on warrants or short remands from Courts. The number of admissions averages 60 per month, with an equal number of discharges.

Because of the role this institution has been given by the pressure of Police admissions and Court remands, it is rare for a young person to be admitted purely for shelter and protection. Admission of such cases is seen to be quite inappropriate, and the Home staff are quick to find alternative provision for any who belong to this category.

However, a great variety of need exists amongst those brought by the Police or on remand from the Courts. There is no selection of young persons, all sent must be accepted. There is no other provision in Auckland for them. So Owairaka has become a holding place for boys and youths awaiting a Court appearance, or placed on remand by the Court.

It is essentially a "short-stay" place, the average length of stay being 20 days. This has a determining effect upon all practices and procedures.

This Home is an open institution where the main atmosphere and facilities are akin to those of a hostel or boarding school. The philosophy of the Home is the Social Work philosophy, where the youth is seen as a casualty of society, and the institution's role to be one of assisting him in a supportive, understanding, and caring manner.

As it is an open institution Owairaka has a high rate of absconding (300 in 1981). There is no physical barrier to prevent a boy from leaving the building or the grounds of the property.

A two teacher school in the grounds provides for those still of school age. In order to provide better supervision for school work in the Secure wing, another teacher is required. The observed programme in the school is designed to give the greatest possible assistance to these short-stay pupils, and to give a variety of activities within the programme.

Current alterations to the Secure wing and the addition of an "Admissions" unit are a marked improvement to the buildings of this institution.

Admissions

The new Admissions unit provides for all the procedures on admission to be completed without recourse to the Secure facilities. Once admitted most boys are taken immediately to the Open section but some are transferred to the Secure unit when their circumstances make it unwise to place them immediately in the Open section. Those admitted during the night are given a shower and bedded down in the Secure unit until trained staff come on duty next morning to carry out interviews and other procedures.

This is obviously an improvement on the procedures previously in use and necessitated by the physical limitations of the buildings. Personal privacy is now more easily provided and a less forbidding place of admission should assist the settling-in process.

We repeat, however, our concern about the manner of admitting all boys to the Secure unit when admissions occur after 10 p.m.

We recommend, as with Bollard Girls' Home, that provision be made for such admissions outside the Secure facility.

The Committee also endorses a request from the Home that adequately trained staff be provided at night in order to carry out the admissions procedures as they are operated during the day.

Secure Unit

The facilities here have been improved in the recent building operation. The unit now consists of nine bedrooms, a medical room, duty room, a kitchen and dining room in which all meals can be served, a large recreation room, a covered courtyard (bedrooms open on to this) and an outdoor area and bathroom, and toilets. (Plan attached).

Bedroom doors are open during the day and the boys can move about the whole Secure area. Although toilets are still placed in the bedrooms, there are other toilet facilities which can be used during the day. Meals need never be served in the bedrooms. If a boy is so disturbed that he does not wish to eat with the others in the dining area there is an alternative place where he may be given his food.

Nodding System

There is no trace of this system being used. On unannounced visits to Secure we have found no evidence of a "realm of silence" but staff and inmates being able to communicate freely. The use of the whole unit rather than confinement to the one room is evidently common custom.

Daily Routine

We found no instance of boys being confined to their room for at least 23 hours a day, (see previous paragraph)

Cell 7

This has been included in the upgrading of the Secure building. It is used for ordinary Secure accommodation when necessary and for isolating extremely disturbed cases for a very short time. The room has standard lighting. Along with some other rooms it has only cold water laid on to the handbasins. Its window opens to the outside of the building rather than inwardly to the courtyard. Its door opens to a short corridor rather than immediately to the inner courtyard. Otherwise it does not differ from other rooms.

Physical Discipline and Exercising

There is a firm policy which forbids the use of physical abuse by staff. There is some evidence to suggest that such incidents would be reported by another member of staff. Extreme forms of physical exercise have no present place in the discipline. Corporal punishment was abolished in 1976. Some apprehensions were expressed that there may not be enough exercise.

** The Home authorities believe that the provision of a swimming pool is a most desirable requirement. This could be so built as to allow for its use by those in Secure.

** There is also a plan to move the present gymnasium to a position adjacent to the Secure wing in order that it may be used by those in Secure as well as by those in the Open wing.

The Committee endorses these requests.

Ages

It is the case that there are exceptional occasions when boys who have proven too difficult to control at Wesleydale which has no kind of Secure unit, are brought to Owairaka.

Physical Conditions and Clothing

The recent building alterations have improved the physical conditions a great deal. Ventilation has been one of the matters included in this programme. Air conditioning was installed three or four years ago.

Clothing issued to those in Secure is no different from that issued to the Open institution.

Visiting

Improvements both in the open wing and now at Secure have made satisfactory arrangements for visitors to come at any time of day.

A circular is given to parents welcoming them to the home and sets out the conditions belonging to visiting. If other than parents wish to visit, a request is made to the Principal, and every effort is made to arrange this.

Education

Lessons are provided for all of school age in Secure and a teacher from the school attends the unit every morning.

The appointment of another teacher is seen as an urgent need.

Use of Secure Unit

On some occasions the time in Secure is governed by the time of a Court appearance. This would generally be known to the boy concerned. Otherwise the time is governed by the general response of the boy himself.

The following table shows the admissions and length of stay in the Secure unit at Owairaka for -

1. Returned absconders
2. Admissions to the Home

	Total Admissions	Immediately to Open	Held in Secure
June 1982	63	30	33
July 1982	70	35	35
August 1982	56	26	30

Number of days spent in Secure

	No of days	New Admissions No of boys	Returned Absconders
July and August 1982	21	-	1
	17	1	-
	15	1	2
	13	-	2
	12	-	1
	11	1	3
	10	-	1
	9	-	9
	8	2	5
	7	8	11
	6	5	2
	5	2	2
	4	7	4
	3	9	6
	2	20	8
	1	41	3
	Not held	-	5

The Principal pointed out that during this period a great deal of pressure was brought to bear by the Police and Community leaders in South Auckland to reduce the absconding rate because of the offences being committed by absconders.

From time to time directions are given to the Home Authorities to keep certain boys in Secure after their admission. The Principal and Senior staff believe that they should be free to determine the extent to which this is necessary.

Solitary confinement cannot, in our judgment, be acknowledged as a suitable means of punishment in the Homes. There may be cases where, for the safety of a severely disturbed person, he or she has to be confined alone, but this we suggest is a totally different matter. Yet even here such confinement ought not to be continued without specialist advice.

It is our recommendation that criteria for the use of all "Secure" blocks be formulated and made available to staff and inmates.

General

Because of publicity given to the former criticism of conditions at Owairaka, repeated visits have been made to this Home. Staff were found to be committed to the best welfare of those in their care. When possible excursions including training in the bush, camping out and longer periods at a campsite are arranged.

Staff go to some trouble to provide extra equipment for recreational programmes from their own resources.

Under staff supervision the boys have refurbished and decorated the interior of a large games room.

When staff with backgrounds like that of one who is a District Commissioner of Scouting find real satisfaction in the work of this institution, the present situation is most encouraging.

The range of admissions and the problem of providing adequate programmes for them all is difficult to describe. Again, the mixture of the short-stay and the longer term inmates adds to the difficulties of the staff.

Those over school age in this institution seem to lack sufficient worthwhile occupation. They have ample recreational facilities but this is hardly enough to prevent boredom. In any review of the Remand system it is suggested that attention be given to the greater encouragement of skills. Some who are still of technical school age but may, at the age of 14, have already been out of the school system for some time, and are unlikely to return to formal education, could be better assisted by a different kind of programme.

The following letter was sent to the Committee of Inquiry by the parent of a former inmate. It is an interesting and unsought comment upon this institution -

"In January of this year (1982) our son, ran away from home and whilst away from home was arrested and charged with a burglary. Because of his behaviour for some time prior to his arrest we did not feel able to assure the Court that he would remain at our home and return to the Children's Court when required. The Judge, therefore, remanded him to the Owairaka Children's Home where he remained for eight days.

During this period I visited him each day and his father also visited him during the weekend that he was in the Home. Several of his contemporaries, on their own initiative, satisfied the Department that they were suitable and also made visits to

Some years prior to this time I had read suggestions that boys at the Owairaka Home were subjected to harsh treatment and observed the situation as it existed for our son with some care.

Our son appeared adequately clothed and more than adequately fed and the staff appeared to us and by our son's reports, to be firm but quite approachable.

He told us of the following incidents which happened during the time he was a resident:-

1. A fight took place between two of the boys and this seemed to be handled in a reasonable way.
2. Two or three absconders were returned to the Home and passed through the security wing and returned to the main Home without incident from the boys and with no signs that they had been physically ill-treated.
3. Some drugs were brought into the Home by visitors. This appeared to be pills of some kind.

We observed that our son's complaint was of boredom. However he was permitted his own reading material. He was also offered the opportunity to make two trips away from the Home, once to the beach and once to a swimming pool.

It also appeared to us that none of the work that he was required to do was more than basic household chores.

We are perfectly satisfied that our son was treated reasonably at all times. Our son has read this letter and would make himself available if this is necessary."

As an indication of the interest of staff members in the welfare of the boys and the work of the Home, we detail the following suggestions which were made by one member:-

"Video Recorder: A video recorder would enable staff or others to record simulated job interviews which could be played back to show them where improvement could be made in their presentation. There is also the recreational advantage.

Confidence Course: Twenty-eight telegraph poles and fifteen cable reels have been collected free from the post office for a proposed confidence course. Financial Aid is now required to start construction. The boys in the Home have been asking when would the course be completed as they have strong wishes to use it.

A Larger Bus: The current mini bus places strong restrictions on trips. This occurs for the following reasons -

Because of the fast changing numbers it is impossible to plan ahead with the small bus. Cultural trips are hit harder as these require advance plans with other people and organisations.

It is not always possible to be fair in choosing those to be left behind. "

THE INSTITUTIONS

GENERAL

In all the institutions the Committee was impressed by the evident care and effort to develop a good environment for the residents. The standard of accommodation is high. All have individual bedrooms with the exception of some younger children in the Reception Centres and some at Allendale.

The interior decoration of the buildings is often bright and appealing, and obviously appreciated if the general standard of maintenance is a guiding factor. The inmates themselves have sometimes been involved in the improvement of the interior appearance of the homes. No effort seems to be spared in making the Homes comfortable and with ample facilities for recreation.

The Committee has looked at the various Secure units in these homes and realises the necessity for something of this kind.

We do, however, suggest that the effect of environment is an important factor, and in some cases the appearance of the Secure units is far from encouraging.

As far as individual cases permit we think that the Secure units should allow as much freedom of movement within the whole area as is possible. In many cases this is now a feature of the units, and therefore the young person is confined to the bedroom only at night.

Considerable improvements have just been completed at the Owairaka Boys Home Secure Unit, and we recommend that urgent attention be given to the same area at Bollard.

A somewhat revolutionary scheme has been carried out in the Hamilton Girls Home and we recommend that a similar scheme be given priority at Bollard. The whole interior has been tastefully wallpapered, decorated, and furnished. The interior of the bedrooms presents little difference of appearance from the bedrooms elsewhere in the Home. Windows are curtained. Beds have pleasant linen and coverings. And there has been no abuse of this. There are comfortable chairs in the living rooms.

Toilets are provided in most bedrooms in Secure. In some cases they have been so shielded as to provide a measure of privacy, and in other cases they are covered when not in use by a movable wooden furnishing. It would appear that generally there are sufficient other toilets in the whole secure area to ensure that those in the bedrooms need only be used during the night.

The need for any toilets in these rooms should be further examined.

Rarely if ever need meals be served in the bedrooms. We cannot emphasize too strongly the need to avoid the service of meals in these rooms. There are deep cultural resentments against the eating of food in the proximity of toilets.

Each institution has rules for the use of Secure. These set out the duties and responsibilities of staff, and govern the conditions under which only senior staff may approve time in Secure. These rules are found in various forms and are generally available only to staff, who inform those sent to Secure of the regulations governing their time in the unit. However, it is our recommendation that the criteria for the use of Secure be formulated in such a way that they may be available to all residents.

For the benefit of staff and inmates, the extent to which the use of Secure is needed should be carefully established.

As a safeguard for the staff and inmates, we recommend that no person be kept in Secure for longer than a set period unless that decision is ratified by a committee consisting of a person from outside the institution and a psychologist. The period we have in mind is two days, but we leave this determination to more able advice.

In some cases, staff are allocated to duty in Secure for quite long terms. It is appreciated that senior staff are appointed to this duty. However, the Committee is of the opinion that further attention be given to the question of length of such staff deployments.

Procedures whereby the purpose of the stay in the institutions are enunciated and shared with the young person concerned are not always evident. The uncertainty that can result from this has serious effects. Communication between the case worker in the Home and the Field Social Worker varies according to circumstances.

To illustrate the need for shared programmes, we were told of the sense of frustration causing a boy to abscond which could have been avoided had he been told that arrangements had been made for his return home on the very day he absconded.

The Enquiry was told of instances of young persons already accounted as being beyond the Social Work programme and passed on to the Justice Department institutions, on re-offending, were sent to Department of Social Welfare Institutions. This appears to the Committee to be an undesirable practice.

From time to time the Homes are required to care for severely disturbed young persons seemingly in need of psychiatric care. The Committee was told by other authorities of a pressing need for some other provision in our community for adolescents who have such psychiatric needs.

Counselling

The Committee was deeply impressed by the personal counselling ministry carried out in the four Auckland institutions by a member of a Roman Catholic Order. Sister Rose, in a full-time capacity, has unrestricted access to the Homes, and is available to any member for quiet personal counselling.

THE ROLE AND FUNCTION OF THE INSTITUTIONS

The enquiry into procedures and practices in these institutions very soon developed into a deeper sort of question. This question asks what is the philosophy undergirding the Homes and establishing their proper function. It is the view of this Committee that further and urgent consideration should be given to this enunciation of the philosophy and purpose of the institutions.

In regard to Allendale and Weymouth the longer term stay, with a planned purpose worked out at the admission of a girl, admits to the pursuit of a defined social work goal.

However, at Owairaka, Wesleydale and Bollard, the situation is confused and ill-defined, by reason of the demands made on these institutions by the Police and the Courts. They have increasingly become 'Remand' centres. But this was not their original purpose. Vestiges of the former functions remain, but are not now the primary purpose, and indeed cannot be given the proper attention necessary to carrying out such functions.

The practice of holding high proportions of often unruly and unsettled young people for quite short periods and the effect of this upon the whole programme of the institution in the mind of this Committee requires further and urgent investigation.

At Wesleydale it is said that there is no clearly defined role for the institution and it is the Police and Courts who dictate the functions of the Home.

Of 307 admissions to Wesleydale in 1981, 49 were in residence for 2 - 7 months and 94 for less than a week. The needs of those in the longer term group are so totally different that it would appear that separate provision should be made for them. Urgent consideration should be accorded this. What purpose is served by keeping 94 in the Home for less than a week?

With a separate programme for those residing for a longer term absconding could well be reduced, and a satisfying role given to the Home in providing positive assistance to the boys in their care.

The inadequacy of the present system is illustrated by the list of re-admissions. Of the 307 admissions to Wesleydale in 1981 134 had been admitted on previous occasions.

The pattern is -	2nd admission	70
	3rd "	39
	4th "	19
	5th "	4
	6th "	2

This is in the age group of 7 to 14 years, of whom the majority are 12 to 13 years of age.

This feature of admissions may point to the need for a separate provision for extended care as already mentioned.

The current trend in offending by young people is towards a younger age involvement. This would suggest that consideration needs to be given to preventative measures and to measures designed to lead to a more satisfying approach to living. For some, this may be best accomplished in long term or extended term care and education within an institution. Very often what is required is assistance to enable a better adjustment to school, and to overcome the incidence of truancy.

The question must be asked however, whether the 'Remand' role of the Homes in its present form ought to be taken as an established one. At Wesleydale, of 292 boys discharged in 1981 172 returned to their homes after a short stay in the institution.

The establishment of the Community Care Unit at Otahuhu has already shown the possibility of providing for such young persons within the community rather than in the institution. It is to be hoped that similar units may be set up in other districts.

For several reasons it is generally agreed by those working within the institutions that every effort should be made to find alternative care within the community. This will entail a greater willingness within the community to become involved in such care. At present, it would appear that the Homes are regarded by many as a convenient means by which the Community passes on its responsibilities in this regard.

Alternatives which are already in existence, or which may prove worthy of investigation include -

- (a) The use of a panel to decide whether a child or young person requires admittance to an institution when placed on remand.
- (b) The use of parent custody with suitable sanctions.
- (c) The use of adequately paid families to provide temporary community placements for remands and other short stay purposes.
- (d) The development of further family support services, to be readily available to parents under stress in the family situation.
- (e) The use of Family Homes for remand and short-stay young persons.

For those requiring institutional care, attention should be given to the postponement of the remand period to a period long enough to allow for settlement and for adequate assessment and such assistance as may be given to enable the youngster to adjust better into society. This period might need to be at least eight weeks.

In such a re-assessment of the role of the institution the present practice of admission to the Homes could be changed to provide for a more effective application of their Social Work philosophy.

This Committee therefore recommends that urgent attention be given to the whole question of remand, what better use can be made of this time, and how the institutions can be re-organised to meet the need, or whether institutional care is indeed necessary for the Remand period.

Only so can the Homes render a more clearly defined and more accountable service, with a more professional approach to their use and the training and deployment of staff.

The danger now is that they become the uncomfortable appendage to the Welfare system, the place of last resort. The stigma of guilt and failure can be projected both on to the residential service and the young people committed to care.

This need not be. This should not be. The Children and Young Person's Act provides for the postponement of up to three months between the Court finding of a charge proven and its final consideration.

In those cases so considered appropriate for such postponement, this period would allow for the involvement of all concerned with the young person, for effective planning and for a kind of assessment that would lead to a far more effective "follow-up" after discharge from the institution. So the final decision of a Court may depend upon a sounder basis than is possible otherwise.

At the present time, placements may be made in a hurry, and there is insufficient time to establish a contract between all concerned before that placement is made.

More effective communication between the Institution and Field Social Workers, Parents, and others concerned would then be possible.

If this approach does not meet all requirements, then the question is raised as to the kind of institution that is required for a short-term remand stay, with more strict security provision than an open institution can offer.

The Committee is of the strong opinion that an early discussion between the Departments of Social Welfare, Maori Affairs, Justice and the Police should be initiated in order to examine a better system of providing for those on Remand.

The Police are concerned with the high rate of absconding from institutions which were never designed for this purpose. Three hundred absconded from three of the homes in four recent months. These absconders soon resort to further offending if only for their survival. The Police are concerned for the custodial care of the hard-core persistent juvenile offender, now in greater numbers in the community.

Those concerned with the implementation of the rehabilitation of such offenders ask for a change in the procedure of Remand, as already outlined, allowing for longer periods rather than the present unsatisfactory short-stay use of the institutions.

The younger age of offenders raises the further question of longer term training for 12 - 13 year olds where such institutional rehabilitation is seen to be necessary.

The Committee sees this examination of the role of the institutions as the most urgent problem now to be faced.

Assessment Procedures

The short-stay character of the remand period reduces the function of the staff almost to a custodial role. Although assessment is to be carried out, this again is reduced in effectiveness to the short period available and the difficulty of making the assessment without a more positive programme.

The value of the assessment needs to be related to the after-care of the person. The Department is aware of the work being carried out by the Hamilton Boys Home in initiating "The Care Profile", a system of assessment carried out in the institution, designed for the use of all the major care givers, especially those who have the major face to face contact with youngsters needing care. The Field Social Worker, as caseworker/co-ordinator, will decide who will require to have the Profile, and distribute accordingly.

Such a better use of scarce social work resources requires a time in residence of six to eight weeks to allow for a valid assessment. Where such a period is not thought to be justified, then alternative provision for the Remand period should be found.

The Committee wishes to commend this whole approach to assessment procedures, involving in addition to the Care Profile a more comprehensive skill-based school assessment, and hopefully a recreation skill assessment, a recreation "survival kit" and an extensive pre-vocational/vocational assessment.

After-care

Reference has been made to the need for more effective "after-care". The provisions of more adequate assessments, the more effective planning for return to life in the community, raises the further question about the part which the case-worker, within the institution, may take in this after-care.

We were told of occasional instances where a staff member had taken such an interest in those who had been in his responsibility. Can there be a place for this involvement?

It would undoubtedly mean a further addition to staff. But the successful return of a young person into the life of the community must be the governing factor. The addition of one extra qualified staff member to an institution would provide this.

.....

It was a member of staff who observed that the danger of the 'Institution' was to encourage its residents to become conforming members of its system rather than prepare them for the very different life of society.

Some young persons are not averse to returning to another period of life in an institution just because it does so protect them from the difficulties and pressures of their normal world.

But the constant oversight and controlled life of the institution may inhibit the growth of qualities necessary for everyday life. And there were those who submitted to us that the end result can be a diminution of personality rather than a growth into Tu-tangata.

We are very aware that there are questions yet to be answered in this whole area of legitimate enquiry.

Forms of society among us are changing. We cannot rely upon unquestioned use of methods of an earlier social milieu.

INVOLVEMENT OF COMMUNITY

There is little doubt that many of those who enter the Homes are those with a record of broken homes or homes under stress, those who have failed to achieve any worthwhile goals at school, those with literacy difficulties, history of truancy, running away from homes etc.

Today there are many agencies in the community which bring help of one kind or another to those in social need.

Those coming to the Courts and to the Institutions are usually those who have failed to adjust into society despite the many efforts of community agencies. The institutions are places of last resort.

Yet it is our belief that efforts can still be made within the community to help children and young persons in such a way as to avoid institutional care. We have seen some such efforts whose record of keeping young people within the community rather than in institutional care is already impressive. We know that there are others, but time did not permit our visiting them.

At the outset let it be clear that the success or failure of such efforts is dependent upon the willingness of people in the community to become involved.

Community Care Unit

The Community Care Unit based at Otahuhu and working in the South Auckland area consists of three experienced social workers of the Department of Social Welfare who have an extensive knowledge of the community in which they live, and who are dedicated to a service in that community beyond any regard for regular office hours or personal convenience. Some 30 homes are available to them for the placing of youngsters in the "Remand" situation, for short terms. In the time since the beginning of this unit's work a discernible reduction in the number admitted to institutions from this area is already obvious.

The Community Care Unit is a programme set up by the Department of Social Welfare believing that -

1. Young people can take more responsibility for their actions in the community.
2. Many young people can be kept out of institutions and remain in their own community.
3. Various factors in a young person's life can contribute to the development of delinquent behaviour.
4. The community is willing to take some responsibility for its young people.

We understand that it is proposed to extend this service to other areas. The success of such ventures will depend upon the availability of suitable and experienced staff, and upon the response within the community to become involved in this work of rehabilitation.

We wish to support the extension of this scheme.

In the West Auckland area we were able to observe two other community based efforts to assist young people who might otherwise require institutional care.

Under the general guidance of and co-ordination by the Young Aid Section of the Police in this area regular and frequent meetings are held of all agencies with responsibility for children in the district. The Schools, the Department of Social Welfare, the Department of Maori Affairs, and the Department of Justice come together to initiate and to co-ordinate measures designed to deal with youthful offenders in a positive way, and to bring such assistance to those involved as may allow them to be rehabilitated within the community.

The Police Youth Aid Section is able to provide a 24 hour service for urgent calls, and to co-ordinate necessary measures of assistance.

It may be helpful for this kind of co-operation to be discussed between the Departments concerned in order to avoid unnecessary duplication of effort, and to establish a unity of approach in what is a community task.

A highly important adjunct to this scheme is the acceptance of responsibility by the local Maori community for dealing with offenders in a manner springing out of the Maori culture, and centred upon the Hoani Waititi Marae. The marae has at its disposal a whole network of community groups scattered throughout the area, available for involvement in this community responsibility for its own people. On the marae itself a wide variety of activities provides for the training of young people in many skills and crafts.

Such highly encouraging enterprises as these will not result from legislation or from new regulations. They spring from the spirit of devotion and dedication of people in the various service agencies and within the larger community.

Here then are just three examples of ways in which the place of the institutions may be seen within a framework involving the community. Such schemes may be ways to deal with many on Remand, as well as providing preventative measures to help young people who might otherwise become offenders.

Yet it is held by most people involved in this whole field that for some children and young persons institutional care is necessary.

CULTURAL PRACTICE

With the large proportion of Maori and Polynesian young people in the Homes the Committee of Enquiry was interested to learn to what extent it was possible for them to become involved in the expression of their own culture and to what extent cultural values were evident on shaping the general policy of the institutions.

Here are two quite distinct concerns:

First, the involvement of young persons in the expression of their culture.

Again the difference of opportunity in short and long term institutions was apparent. At Allendale and Weymouth there was clear evidence of a concerted effort to involve the girls in programmes within and outside the Homes which reflected the culture of the Maori people.

In the short-stay homes such programmes do not occur. It was said to us that visiting groups soon become frustrated by the rapid turnover of residents and the resulting lack of continuity this caused to any programme. However the presence of Maori and Polynesian staff was seen to assist in the recognition of cultural identity.

Maoritanga

The Commission sees a place for more emphasis throughout all institutions for the development of aspects of Maoritanga. The establishment of contacts with the local committees should be encouraged and to this end formation of "Friends" to the different institutions could be considered. It is reasonable too to consider the marae situation to help kindle or confirm understanding as to what goes on in the marae situation. It requires knowledge of the language in order to play the role of a Caller (karanga) Speaker, Elder, (Kaumatua), Chant (waiata) and protocol. In having such an arrangement the teaching of the different features of Maoritanga will be meaningful to the young and helpful in their own environment out in the community. Where possible exchange between the different institutions using the marae forum would create greater interest and awareness among the boys and girls in things Maori.

House Staff

The Commission noted the role of members of the House Staff and were impressed with the way this was played. There is a high percentage of mature caring women in this area and their involvement in the institutions is to be commended and maintained in the interests of the young people who are admitted. These staff members find it very easy to recognise and respond to body language of young people who in the majority of cases have not experienced the fact of being treated as an individual. It is in this area that the women staff play such an important part in hopefully initiating or certainly participating in the rehabilitation of the young people that come under their care.

But the second concern is more fundamental:
The shaping of the general policy of the institutions
according to the values of Maori or Polynesian culture.

There is a growing concern amongst Maori people that the philosophy upon which the policy of the Homes is based takes little account of their culture.

The population of the Homes is so largely Maori that to ignore the applications of Maori values upon their policy is to run counter to the prior purpose of such institutions, that is the welfare of the young people in care. If Maori cultural values have any place in our New Zealand Society, then institutions whose population is so predominantly Maori must surely provide, for those in their care, a setting recognisably Maori in the working out of the established goals.

If Tu-tangata be the goal, it may well be that our present policies do not allow the young Maori to stand tall, because he is being subjected to a withdrawal from the supporting community which provides the environment in which the Young Tree may grow and flourish.

This report supports strongly a policy which will keep young persons out of the institutions. That policy will demand much of the local Maori communities. But if those communities are willing, in one way or another, according to their own traditions, to provide the necessary shelter and nurture for Tu-tangata, then they may rightly expect financial resources put at their disposal for such a purpose.

This, we suggest and recommend, is a proper response to the recommendation of the Commission which warrants serious attention.

For those whose welfare requires institutional care, and we do not doubt that there are some, of whatever race, we recommend that an early discussion with Maori and Polynesian representatives be held in order to determine how best the policies of the Homes in which Maori young people predominate can reflect the cultural values of their people.

At a time when the whole philosophy of these institutions is under review, to neglect this concern would, we believe, have serious effect upon the whole community.

A GUARANTEE OF BASIC RIGHTS AND LEGAL SAFEGUARDS

The Human Rights Commission recommended (page 128) the consideration of detailed statutory or regulatory provisions establishing the legal rights of children in State care. In the course of our discussions with various people connected with the institutions there is general agreement about the desirability for such a provision.

Ms Pauline Tapp has made submissions to us in this respect and has kindly supplied copies of legislation enacted in Canada. We attach these documents.

Ms Tapp has suggested the following as necessary ingredients in any Bill of Rights for children in care.

1. The right to be treated as an interested and affected person i.e. the right to separate representation in any legal action concerning him/her; to be consulted on all decisions affecting him/her; to be informed of the rights of young persons in a manner s/he can understand.
2. To have regular and sustained contact with his/her family, including persons who the young person regards as family.
3. The right to have free access to a 'friend'.
4. To receive adequate health, social and educational services continuously and according to his/her individual requirements having particular regard to the young person's cultural heritage.
5. The right that every disciplinary measure taken be in the young person's interest and in conformity with regulations made under the Children and Young Person's Act. A copy of the rules to be posted in a conspicuous place in the institution and a copy to be given to the young person, the 'friend', the young person's family. The rules to be written in a manner which the young person would understand.
6. The right to communicate confidentially with his/her 'friend', lawyer, the director of the institution, the office of the Official Guardian and his/her social worker.
7. The right to have his/her cultural identity recognised as being of paramount importance.

If such a Bill is to have any value, then there need to be procedures whereby the young person is able to appeal to such rights, and here Ms Tapp has suggested a system whereby -

1. Each young person should have a 'Friend', a member of the young person's race and community, totally independent of the Department to assist that young person to enforce his/her legal rights and to be the liaison between the young person and the Department.
2. An Official Guardian is appointed who will be charged with investigating all complaints regarding the violation of the young person's rights and to take the necessary actions to enforce those rights. (See recommendation by Royal Commission on Court Procedures 1978).

The Enquiry commends this whole proposal for early consideration and implementation.

(h) "security unit" means any reception centre or part of a reception centre determined as such by regulation pursuant to subparagraph c of the first paragraph of section 132.

The expressions "reception centre", "social service centre", "hospital centre", "local community service centre", "regional council", "establishment" and "foster family" have the same meaning as they have in the Act respecting health services and social services (1971, chapter 48).

In this act, the word "clerk", wherever it appears, includes the assistant clerk.

2. The Government may, for the purposes of the application of the Juvenile Delinquents Act (Revised Statutes of Canada, 1970, chapter J-3) or of any other act in force in Québec amending or replacing such act, designate or determine any person, establishment or body contemplated in this act to be the person or body exercising in Québec the functions of a person or provincial body contemplated in the said act.

CHAPTER II

RIGHTS OF CHILDREN

3. Respect for the rights of the child must be the determining consideration in making any decision in his regard under this act.

4. Such decision must contemplate the child's remaining in his natural environment.

Where the child has no family or must be removed from it, such decision must contemplate his being provided with conditions of life and development as nearly similar to those of a normal family environment as possible.

5. Persons having responsibilities regarding a child under this act must inform him and his parents as fully as possible of their rights under this act and in particular, of the right to consult an advocate and of the rights of appeal provided for in this act.

On being taken in charge under this act, a child is entitled to obtain a description of the means and stages of rehabilitation and protection envisaged towards ending his being thus taken in charge through return to his family, if that is in keeping with his interest, or through organization and adaptation of his conditions of life to make them correspond to a normal environment for his age.

6. The persons and courts called upon to take decisions respecting a child under this act must give this child, his parents and every person wishing to intervene in the interest of the child an opportunity to be heard. Right to be heard.

7. Before a child is transferred from one reception centre or foster family to another reception centre or foster family, the child's parents and the child himself, if he is capable of understanding, must be consulted. Consulted on transfer.

In addition, before such transfer is effected, the child must receive the necessary information and preparation, having regard to his age. Transfer.

8. A child is entitled to receive adequate health services and social services and educational services, on all scientific, human and social levels, continuously and according to his personal requirements, account being taken of the organization of the resources of the establishments providing such services. Right to health, social, educational services.

9. Any child placed in a reception centre or foster family has the right to communicate in all confidentiality with his advocate, the director who has taken charge of him, the Comité and the judges and clerks of the Court. Confidential communication.

He may also communicate in all confidentiality with his parents, brothers and sisters or any other person, unless the Court decides otherwise. Idem.

10. Every disciplinary measure taken by a reception centre against any child must be in the child's interest in conformity with internal rules, which must be posted up in a conspicuous place in the establishment and of which a copy must be delivered by the administration to the child capable of understanding, to his parents, to the Comité, to the Ministre des affaires sociales, to the regional council and to the social service centre. Discipline.

11. No child shall be placed in a house of detention within the meaning of the Probation and Houses of Detention Act (1969, chapter 21) or in a police station. No detention.

Interpre-
tation.

1. In this part, unless the context otherwise requires,
 - "expert witness" means any person who, as a result of
 - (a) professional skill and training, or
 - (b) involvement with the child, with members of the child's family or associates or with the child's circumstances generallymay have an insight to give a court in its deliberations under section 4 respecting a child;
 - "parent" includes guardian;
 - "person responsible for a child" or "person responsible for the child" means a person having a duty under the laws of the Province to make available to a child assistance or direction and includes, insofar as each is responsible towards the child under law: a guardian, a guardian of the person, a guardian of the estate, a person exercising custody, a person standing in loco parentis, a teacher, social worker, probation officer, family counsellor, or other person acting as required by law or the Province, a municipality, or other corporate body acting as required by law;
 - "procedural rights" means the rights described in sections 2 (h) to (k);
 - "responsible" or "responsibilities" means responsible or responsibilities under the laws and customs of the Province;
 - "rights of a child" or "rights of children" means the rights described in section 2.

The rights
of children.

2. Each child has
 - (a) the right to food, clothing and housing in order to ensure good health and personal development,
 - (b) the right to an environment free from physical abuse, exploitation and degrading treatment,
 - (c) the right to health care necessary to promote physical and mental health and to remedy illness,
 - (d) the right to reside with parents and siblings except where it is in the best interests of the child and family members for the child to reside elsewhere,
 - (e) the right to parental and adult support, guidance and continuity in the child's life,
 - (f) the right to an education that ensures every child the opportunity to reach and exercise his or her full potential,

Formulated by the British Columbian Royal Commission on
Family and Children's Law 5th Report. Part III
Children's Rights. This xerox is from the proposed model
Children's Act 1976

- (g) the right to play and recreation,
- (h) the right to be consulted in decisions related to guardianship, custody, and a determination of status,
- (i) the right to independent adult counselling and legal assistance in relation to all decisions affecting guardianship, custody, or a determination of status,
- (j) the right to a competent interpreter where language or a disability is a barrier in relation to all decisions affecting guardianship, custody, or a determination of status,
- (k) the right to an explanation of all decisions affecting guardianship, custody, or a determination of status, and
- (l) the right to be informed of the rights of children and to have them applied and enforced.

Duties of
persons
responsible
for a
child.

3. (1) Each person responsible for a child shall fulfill his duties under this section in a manner consistent with
- (a) the needs and abilities of the child,
 - (b) his own resources and responsibilities towards the child, and
 - (c) the resources and responsibilities towards the child of other persons responsible for the child.

(2) A parent, or other person responsible for a child, who has the right of custody of the child has a duty to take all reasonable measures to ensure that the rights of the child are fulfilled when he and other persons, insofar as each has responsibilities, perform their responsibilities towards the child.

(3) A person responsible for a child, other than a parent or persons having custody of the child, has the duty to take all reasonable steps to perform his responsibilities towards the child in a manner consistent with the fulfillment of the rights of the child.

(4) In addition to its duties under subsection (3), the Province must take all reasonable measures to fulfill the rights of a child wherever it is not reasonable for other persons to take particular measures or wherever other persons responsible for a child are in default on their responsibilities.

(5) Where the Province acts under subsection (4) on the default of another person it is entitled to compensation from that person.

- a. A child is suffering or there is substantial likelihood that he or she will imminently suffer a serious injury and
- b. Where the intervention will not create a greater harm than that which led to the intervention.
3. Harms for which intervention is permitted.
 - a. A child has suffered a non-accidental physical injury causing disfigurement, impairment of bodily functioning or severe bodily harm, or there is a substantial likelihood that the child will imminently suffer such an injury.
 - b. A child is suffering serious emotional damage evidenced by severe anxiety, depression or withdrawal, and his/her parents are unwilling/unable to provide or permit the necessary treatment for him/her.
 - c. A child has been sexually abused by a member of his/her household.
 - d. A child is in need of medical treatment to prevent serious physical harm and his/her parents and are unwilling/unable to provide or permit the necessary treatment for him/her.

4c. Charter of Rights for Children in Institutions

This charter of rights draws upon three principal sources: the Council of Europe's Resolution 77 (33) on the placement of children (adopted on 3 November 1977), a text prepared by MIND as a statute for formal admission to, and discharge from, a treatment facility, and a document 'Declaration of the Rights of the Child' drawn up by a *Voice of the Child in Care* Working Party.

1. All residents shall have the right to dignity, privacy and humane care: each institution will ensure that each resident may live as normally as possible: each resident should have the right to be fully informed as to his legal status.
2. Each resident shall have the right to:

- i. receive sealed correspondence.
- ii. send correspondence unopened, and have access to writing materials, postage and staff assistance where necessary.
- iii. send and receive confidential telephone calls.
- iv. receive visitors at any time during the day.
- v. make visits outside the institution.
- vi. have access to facilities and equipment for physical exercise.
- vii. go out of doors daily.
- viii. keep and use personal possessions, including their own clothes.
- ix. communicate and interact with persons of their own choice, including members of the opposite sex, upon the consent of such persons.
- x. have access to individually locked storage space for their private use.
- xi. keep and spend an amount of money equivalent to that available to one of similar age and status outside the institution.
- xii. receive any financial benefits which might be available outside the institution (e.g. supplementary benefit).
- xiii. receive the same educational opportunities as other children outside the institution.
- xiv. receive a nutritious and varied diet, and have an opportunity to purchase

- and experiment with the cooking and eating of foods.
- xv. independent medical examination.
- xvi. contraception and, if necessary, abortion services on the same basis as other young people in the community.
- xvii. know what punishments and sanctions are permitted in the place where they live; and to know what the rules are and what may happen if they break them.
- xviii. access by themselves or by their parents or representatives to all documents pertaining to themselves.
- xix. three-monthly review of 'sentence' or 'treatment' (except in the case of regimes with determinate sentences).
- xx. participate, or have parents or representatives, participate in decisions taken by the review body.
- xxi. refer their own case after review to independent body at which they, or their parents or representatives, will participate.
- xxii. subject only to a prior determination of the child's ability to comprehend the factors involved, the right to give informed consent to, or to refuse treatment, particularly treatments which are hazardous, irreversible, experimental or unproven.
- xxiii. refuse to be moved from a place where they wish to stay without a conference, independently chaired, at which they are present or represented.

The charter below was drawn up by a group of young people in care.

Charter of rights for young people in care

We have drawn up this charter for 'young people' because we feel it is the responsibility of the residential worker and social worker to make sure that younger kids get a good deal.

1. The right to be accepted and treated as an individual member of society. Also the right to be treated with the same respect given to any other valid member of the human race.
2. The right to know who we are. To know our parents and brothers and sisters. To have factual information about our family origins and background.
3. The right to be able to make our own decisions and to have real influence over those decisions we are sometimes considered too thick to participate in.
4. The right to privacy. We understand that in care it is not always possible to choose who we are going to live and share our lives with. But we are still human beings and are still entitled to the essential amount of privacy needed before cracking up.
5. The right to be given an insight into the use of money by handling it,

"In Whose Best Interests?" 88

Laure Taylor, Ron Lacey, Denis Bracken
Cobden Trust/MIND E.B. 1979.

using it and paying the consequences if we misuse it, e.g. being given the money in our hand to buy the clothes our clothing allowance will allow.

6. The right to choose those who will represent us whether it be legally or otherwise, e.g. social workers. Also the right to choose those whom we wish to confide in.

7. Finally, the right to be as much a part of society as the next person and not to be labelled in any way. In short, to live.

These rights can be interpreted how you like. But don't misuse them or distort them for your own devices. (From *Who Cares: Young People in Care Speak Out*. National Children's Bureau. 1977.)

4d. Some Specific and Immediate Recommendations

Although we regard the juvenile justice system in this country as fundamentally flawed, we have no grounds for believing that it is likely to be reformed in any major way in the immediate future. The history of change in this area is not, as we emphasised in our introduction, one in which contradictions are resolved, irrationalities corrected, denials of natural justice remedied, or degrees of efficacy evaluated. Instead it is a record of compromise and expediency, in which the vested interests of the particular groups involved — magistrates, social workers, police, community home staff, prison department personnel — do more to determine the procedural and institutional outcome than any theoretical formulations or research findings.

It is for this reason that we also include in this section a set of very specific recommendations which, while not altering the nature of the present system, would do something to reduce its more glaring inconsistencies, and would also go some way to 'calling the bluff' on certain ideas and practices which do much to bolster the present state of affairs.

1. *Extension of the use of the caution to cases which at present lead to court appearances: the reduction of the present differences between police authorities in the employment of this procedure.*

This recommendation is aimed at increasing our tolerance of delinquency, at showing that society will not fall apart if even larger numbers of children who have committed relatively minor offences are dealt with outside the court. Some police authorities have already made a good start in this direction, although, as we have seen, the 'cautioning zeal' of Juvenile Bureaux may do something to invalidate this effect in certain areas. In addition, there is evidence that the police have been unofficially responsible, by the use of 'no further action' and cautionary procedures, for the relative rarity with which offenders between the age of 10-12 appear in court. The age of criminal responsibility has thus in effect been shifted upwards in line with the original hopes of the sponsors of the 1969 Act.

We might couple with this recommendation the idea which emerges from our

consideration of the traffic paradox in section 2d, namely an increased reliance upon fines and a decreased dependence upon social enquiry reports in those relatively minor cases of delinquency which are not kept out of court by the use of cautions and 'no further action' decisions.

2. *The abolition or re-labelling of assessment centres in recognition of their actual functions as 'holding' or 'containment centres'.*

As we have argued in section 3a it is doubtful if anything which might meaningfully be called 'assessment' is occurring in those centres which enjoy the name. Not only does their present title provide our present ad hoc system of placement with a spurious scientific gloss, but it also conceals from the view of magistrates, parents, children and the general public, that we already possess a considerable number of establishments in which children who are supposedly in care, are in fact merely being 'warehoused'.

3. *A halt to the construction of 'secure units': immediate examination of the role of the existing units in view of research indicating that many 'problems' with which they cope are institutionally induced.*

Such an action might go some way to dealing with the myth that there is an alarming rise in the number of children whose behaviour is such as to require secure conditions. It is this belief which adds fuel to so many of the recent debates about juvenile justice.

We do not deny that there are certain children whose behaviour constitutes a serious threat to the safety or well-being of other people. However, as research indicates this number is smaller than assumed and might best be handled as suggested by Priestley *et al* by a new kind of public protection proceedings in the Crown Court. A protective custody order would commit the child to secure accommodation for a finite period and could be appealed or reviewed at three monthly intervals. This might act as some break upon the readiness of magistrates to detect dangerousness where none existed as well as ensuring that our debate about the juvenile justice system and about allocation of resources within it was not dominated by the regular introduction of this issue.

4. *An immediate enquiry into the use of medication for the purposes of control in juvenile institutions.* Such an enquiry would seek to establish the types of drugs which are at present administered, their differential use by institutions and the length of time for which they are prescribed.

5. *The implementation of the recommendation of the 1969 CYPA that Borstals should now be phased out.*

As section 3f indicates, there is now little credibility which can be attached to the idea of Borstals as offering some form of specialised treatment or training facilities (even though the Home Office handbook still manages to refer to a borstal sentence as 'the only form of medium term training for young offenders who need a longer period of remedial treatment than is available in detention centres'). The present punitive climate in this country might not allow their physical destruction (in fact £20m is at the moment being spent on rebuilding Feltham Borstal) but it would do much to remove a further source of hypocrisy

EDUCATION

The Human Rights Report makes reference to the need for educational opportunities in the Secure block at Owairaka. This is now being provided, and one of the two teachers in the school attends the Secure block every morning. A further member of staff for the purpose would help immensely. Whether a ratio of one to three can be achieved is perhaps for someone else to answer!

The whole subject of the Review of Schools and Teaching Services in the Homes has been dealt with comprehensively and most helpfully by Messrs J.N. Rolfe and M.P. Doolen in their report of November-December 1981. This Committee only wishes to commend the report and early implementation of its recommendations.

Our call for the enunciation of a philosophy for the residential institutions is matched in this Report by the request for a clear statement setting out the philosophy underlying residential care and education as an integral part of that residential care.

In particular we feel able to mention the following recommendations of the Rolfe/Doolen report because of their relevance to matters raised in our Enquiry.

- A2 That the Department of Social Welfare prepare a written policy statement on residential care and define the role of each institution with particular reference to "assessment", "short-term care", "long-term care" etc.
- C1 That role definitions of principal and head-teacher be further clarified with emphasis on expectation of consultation.
- C2 That programmes be instituted to enable teachers and social workers to better understand each other's role.
- C3 That teachers should be encouraged to attend scheduled meetings of residential staff, and vice versa.
- C4 That teachers be fully involved in, for example, staff meetings, case meetings, planning meetings and in all decision making about children's programmes.

- C6 That principals be required to consult with teachers as well as social workers on all matters affecting the welfare of children and young persons in care.
- C8 That principals be required to include headteachers in all senior staff meetings with the same rights and responsibilities as other members.
- E2 That a policy for the sharing of classroom equipment and other resources be established.
- E5 That a sum of petty cash for purchase of emergency teaching materials and to assist in programme development be made available directly to the headteacher.
- G2 That teachers and social workers have more joint in-service courses at both local and national level.
- H2 That sufficient teachers be appointed to every Home -
 - (i) to enable an appropriate educational programme to be provided for every child and young person in care.
 - (ii) to provide a flexibility to meet changing needs.
 - (iii) to allow for individualised programmes and groups of varying sizes.
 - (iv) to develop an effective liaison scheme with ordinary schools in the vicinity.
 - (v) to provide for professional leadership with an element of a career structure.

EXPLANATORY BOOKLET

The provision of such a booklet has been discussed in the various institutions. In some cases it is held quite strongly that oral instruction is a preferable means of imparting this knowledge.

On the other hand attempts have been made to produce a simple illustrated booklet at Weymouth and attached is a sample of a very commendable effort.

It is recommended that assistance be given to the institutions for the production of simple illustrated booklets of information for each Home suitable for the use of those admitted.

CODE OF PRACTICE

In addition to a Bill of Rights, and as a corollary to it, the Enquiry recommends an immediate adoption of a Code of Practice in each institution.

In some cases the ingredients for such a Code are at present embodied in various manuals, but they need to be codified and set out in a clear and simple manner.

As an example of what is suggested, we attach the "Code of Practice" as adopted at Beck House. The setting out of such a code would be of assistance to all concerned in the institutions, to Staff and those under care.

Residential Care at Beck House is premised on the belief that people do not make significant changes in their lives unless they are able to experience a positive sense of their own worth and are able to develop relationships in which they have a sense of belonging and a feeling of being loved.

In the accepting climate of Beck House it is anticipated that a child will feel secure and cared for. He will be assisted in making changes in his behaviour, in increasing confidence and self-esteem, in developing awareness of himself and his inter-personal relationships, and in enhancing social and educational skills that will equip him to return successfully to his own community.

In order to ensure that staff pursue these aims and objectives; that their practices are consistent with professional social work standards and that the rights of children are protected and preserved the following code of practice has been defined and collectively adopted.

A. NURTURING

The staff at Beck House undertake to be responsible for the nurturing of each child during his stay here and in particular to

1. Provide a safe and secure living environment that will be free from physical abuse, corporal punishment, exploitation and degrading treatment.
2. Provide shelter and accommodation that will be warm comfortable and protecting from harsh and unpleasant elements.
3. Provide without any obstruction or interference, regular meals that are nutritious, ample and attractively presented

4. Provide a range of clothing that is in good repair, attractive to the child, of good fit and suitable to the seasonal conditions of the local area.
5. Allow children the opportunity for free expression and the freedom to associate with others through visiting, telephone and writing which is free from censoring except where such contact is prejudicial to the welfare of the child or some other person.
6. Provide children with a standard of medical and dental care that will allow them to overcome any deficits and thus develop in a normal healthy manner.
7. Provide children with access to a reasonable range of recreational and cultural pursuits that are congruent with their developmental needs and represent a cross section of the pursuits that are available in normal community living.
8. Provide children with the opportunity of contact with children of the opposite sex; a healthy sex and human relation education programme and the right to sexual privacy.
9. Provide children with the opportunity to be away from the group and experience some degree of solitude and privacy.
10. Provide children with the opportunity to participate in some form of religious worship and instruction.

B. TREATMENT AND REHABILITATION

The staff also undertake responsibility for the provision of treatment programmes for the child and in particular

1. Provide children with forms of treatment that will meet those needs that necessitated admission to Beck House.

2. Allow children the opportunity to decline particular forms of treatment they do not wish to participate in.
3. Provide children with a comprehensive remedial education that will be directed towards both overcoming educational deficits and enhancing existing strengths.
4. Ensure that children are actively involved with social workers and families in planning and reviewing short and long term goals and in making decisions.
5. Allow children access to information about themselves unless their own welfare is at risk or the confidentiality of another person is likely to be breached.
6. Ensure that all such information about children is kept secure and confidential.
7. Allow children to remain anonymous in the public eye and ensure that their knowledge of residence at Beck House is preserved as confidential information.

USE OF DEPARTMENTAL VEHICLES

The attention of the Committee has been drawn to the practice of using motor vehicles bearing the Department of Social Welfare logo plainly displayed, for the transport of children from the Homes for various outings within the community. This submission holds that this practice can be very humiliating for the young people concerned. Wherever they go, they are given a label.

We recommend that either the logo be removed from vehicles so used, or that some effective method be used to cover the logo on these occasions.

MALE AND FEMALE STAFF

A submission has alleged that embarrassment or distress has been caused in the Homes by the actions of staff of opposite sex to residents at times of showering for admission, and in bathroom and shower areas in the Homes. The submission asks that the ratio of male/female staff be kept at levels which will obviate the need for any duties that may cause such embarrassment or distress. All but one of the incidents alleged are connected with Homes for Boys.

An examination of the present staff lists shows that at Wesleydale, apart from the domestic services, there are no female staff. At Owairaka out of 25 staff (apart from the domestic areas) there are two female members.

An enquiry of Bollard about the possibility of male staff being so involved as to cause this kind of embarrassment showed that there are four male members in a staff of 30. Again, duties do not require male members to be in situations which may cause distress to inmates.

Apart from the ratio of male and female staff, the real factor in this matter is one of staff character and responsibility. There is certainly in the Girls Home a jealous safeguarding of the girls' welfare in such matters on the part of the Matron and female staff, and a real measure of responsibility on the part of male members.

VISITING COMMITTEES

Each home has a Visiting Committee, consisting of two or three people, appointed by the Minister.

These function variously. In some institutions they were hardly known. Sometimes they visit once in two or three months, in other cases less frequently.

Although notices are displayed in the Homes, giving their names and telephone numbers, some of them were not easily reached when we endeavoured to arrange a meeting with them, and probably the same difficulty could be experienced by others.

We met most of those concerned. Rarely, if ever, do inmates of the homes communicate with them in between their periodic visits to the institutions.

In order that the independent nature of such visiting committees be recognized, it may be helpful if they were seen to be representatives of the community, rather than of the Department.

The Committee's recommendation is that as the Minister presently responsible for their appointment, you might consider a discussion with some representation of the Auckland community, and in particular the Maori and Polynesian sections of that community, in order that the nomination of such visitors might arise from the local community. The purpose and function of the committees may need to be re-defined, and notice taken of any Code of Practices established within the institution and of any legislation establishing the rights of children in care.

STAFF

All that the Human Rights Commission has said about staff (pages 133-4) has been evident in this present enquiry.

What has been written elsewhere in the Report about the involvement of the whole community in this work of Child Care is equally applicable here. Only as men and women of character, dedication and ability are encouraged to see this work as an important and satisfying vocation, will the quality of the staff reflect the best that the community is able to provide.

In our judgment every new appointment should include more adequate training before taking up duties. We acknowledge that academic qualities are not the only qualifications, but on the other hand there are just as many reasons, if not more, for the adequate training of a social worker as for a teacher.

It has been drawn to our attention that there is no national recognised standard or qualification required for child care workers. There is a series of different criteria from some training through to no training at all. Further, where there are training programmes they are run in isolation by different Departments.

In each of the institutions under review some form of in-service training has been introduced. Sometimes institutions have combined in arranging such programmes. We are aware of the Departmental scheme of "Training for Newly Appointed Social Workers in Residential Care" yet to be implemented. Other possibilities include, the "Diploma in Applied Studies", a two-year full time course for which the Department grants bursaries to members of staff and the R.C.A. certificates from the Technical Institute.

The lack of adequate training becomes evident in situations of pressure and of stress. All staff are by the nature of their appointment committed to the social work concept and should be willing to accept such further training as may be necessary to equip them for this. At every level of staffing in the Homes the Committee became aware of instances of this kind of need.

There is still a real confusion regarding the function and role of staff. Are they to be supervisors, custodians, or social workers? The Department's attitude to the role of the institutions will of course govern the role of the staff - to be caretakers, or have a more positive function.

The quality of the work carried out in the institutions depends upon the character and ability of the staff, since this work is primarily one within human relationships. There is always a danger of staff being absorbed into the institutional system and for initiative to be neglected.

One of the benefits of the Human Rights Report may be that community expectations should provide an incentive for better training and better recruiting of staff.

CONCLUSION

The Committee of Enquiry has a limited brief, and is not attempting a total response to the Report of the Human Rights Commission. Many substantial questions were raised in that Report and others with greater competence and more facilities will carry on that important task of making such changes in the Institutions of the Department of Social Welfare as are necessary to fulfil their role in today's society.

So there are limitations to this report and I know that they will be readily acknowledged. There is the limitation of the Terms of Reference. This is not meant to be an examination of the evidence before the Human Rights Commission, nor indeed of the past history of the Homes. The Terms of Reference ask for a report on the present procedures and practices, but in the light of the recommendations of the earlier report.

There is the limitation of time. That earlier report was issued three years after the initial moves. We have been given six weeks. There is the limitation of a one person committee, even though it has associated with it a very competent advisor.

And even to report on present practices and procedures requires some measure of assistance from those who have been the more recent recipients of care under those practices and procedures. For a variety of reasons this has not proved easy to achieve.

The need for these institutions lies in the very fabric of our society. Unless this be acknowledged they will remain an unpleasant factor in our midst which most of us would prefer to ignore.

This Enquiry has to do with six institutions in or near the City of Auckland. No attempt is made, nor by the Terms of Reference should be made, to include institutions in other parts of New Zealand within the survey. Some generalizations as may exist in the report are those which cannot be avoided in looking at some of the work of a Government Department with wider responsibilities.

We have ventured to make some recommendations. Some of them are perhaps not very significant, but others are more basic to the whole question. The Homes are intended for the welfare of young people.

During the period of the enquiry the members of the Committee have become increasingly aware of the complexity and seriousness of the issues brought to its notice. They have recognised their inability to give final answers to many of those questions.

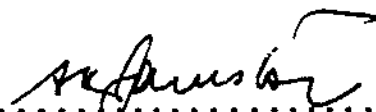
The staffs of the institutions have been unfailingly patient with our many and repeated enquiries. It has been evident to us that some of those in charge of the institutions are under considerable strain. We believe that a sense of uncertainty and insecurity presently exists amongst staff members.

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The Minister of Social Welfare
WELLINGTON

I therefore submit this as my report

29 October 1982


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Committee of Enquiry

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