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PRESERVATION

12 leaflets

Discussion Pack Folder

Thank you for requesting this Code of Social and Family Responsibility discussion pack folder. Beneath this introductory sheet you will find 11 double-sided fact sheets, one covering each issue which appears in the Code discussion booklet.

The fact sheets elaborate on the information in the discussion booklet. I hope they will help you in considering the issues under discussion or answer questions relating to the current law or statistics. The source of the information is given at the end of each fact sheet. You should be able to get copies of the publications referred to through your local library.

If you are leading a discussion group it is suggested you take into consideration the following:

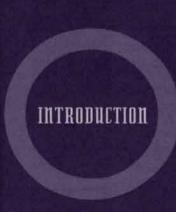
- Full consideration of the 11 issues is unlikely to be achieved in a single sitting. If your group wants to tackle all the issues it is suggested you meet several times.
- You are by no means obliged to consider all the issues or answer all the questions in the
 response form. If your group has a particular interest in just a few issues, you might want
 to spend all your time giving in-depth consideration to those issues and leaving the rest.
- Your group may have more to say than the comment lines on the response form can
 cope with. Or you may come up with other issues you consider worthy of inclusion in the
 proposed Code. If this happens feel free to use other sheets of paper, put them in a
 bigger envelope and send them to the Freepost number listed in the booklet and on the
 response form.
- If you decide to make a group response rather than individual responses, please ensure
 you fill in the question about the size of the group and, if you want to, tell us the name
 or type of group involved. This will help the analysis team to report on the types of
 individuals and groups who will make responses.

Thank you for taking the time to discuss these important social issues. We look forward to receiving your response.

Roger Sowry

Minister of Social Welfare









Looking after our children

EXPECTATION:

Parents should love, care for, support and protect their children.

FACTS

- Parents have a crucial role in the development of their children. Research shows that the
 care and support provided by parents, family members and other significant caregivers
 are important influences on good outcomes for children, along with wider social support
 structures such as the education and health systems.
- Some social and family circumstances are linked with poor outcomes for children. Amongst such circumstances are: long-term unemployment; low educational attainment of caregivers; poor housing; and poor health status².
- Many children in such families are well cared for and have opportunities to develop. But
 many children growing up in adverse social circumstances, often exacerbated by high
 mobility, frequent changes in family structure and poor parenting skills, are at risk of
 experiencing poor health, education and welfare outcomes. It has been estimated that
 one in 20 families in New Zealand (or some 25,000) is highly at risk of poor outcomes for
 their children for these reasons³.
- Child abuse means the harming (physically, emotionally or sexually), ill-treatment, abuse, neglect or deprivation of a child or young person 0 16 years. The Children, Young Persons, and Their Families Service (CYPFS) investigates some 19,000 20,000 suspected cases of child abuse each year. About 70% are found to be substantiated, requiring further action⁴.
- The number of cases investigated by CYPFS does not represent all instances of child abuse. Surveys of adults about past abuse generally show high levels of unreported abuse. Abuse is often associated with other forms of family violence. A recent New Zealand survey of the abuse of women showed that 2% of women with partners and 22% of those recently separated had experienced 10 or more acts of physical or sexual abuse⁵.

NOTE: Information on childhood accidents can be found in the fact sheet for Issue 3.

- Much of current law is about what parents should not do, rather than what they should do. Many responsibilities
 have been defined through case law, which is often difficult for parents to know about.
- The responsibilities of being a parent or guardian include provision of shelter, clothing, food and nurturing
 and education in the broader sense. The Child Support Act 1991 requires that children be financially supported
 where the mother and father are not living together. The Education Act 1989 requires that parents enrol
 children 6 16 years at school and have them attend.
- New Zealand has ratified the United Nations Convention on the Rights of the Child, which sets out the rights
 of a child (0 17 years) to protection and care, and states that both parents have responsibilities for the
 upbringing and development of the child⁶.
- The Children, Young Persons, and Their Families Act 1989 provides for protection from abuse and for arrangements for alternative care where necessary (sections 5, 13). The principles set out in the Act are based on the responsibilities of family, whanau, hapu, iwi and family groups for the primary care of a child, and their ongoing involvement when existing care arrangements break down?
- The Crimes Act 1961 and The Summary Offences Act 1981 contain provisions covering failure by parents to provide the necessities of life, abandonment of a child under six, ill-treatment or neglect, and failure to provide adequate supervision of a child under 14.

- The Government provides payments and services to assist parents to meet their responsibilities. Amongst the
 most significant are:
 - income support payments, eg to almost 108,000 sole parents as at 30 June 1997 at a cost of just over \$1.5 billion in the year to 30 June 1997
 - family support payments at a cost of \$777 million and Independent Family Tax Credits at a cost of \$41 million in the year to 30 June 1997
 - · public health services for children
 - · education services for children.
- The Government funds community and iwi-based services for families in need of support, eg \$58 million this year through the New Zealand Community Funding Agency; \$4.6 million to women's refuges.
- · Care and protection services are provided by:
 - CYPFS at a cost of almost \$140 million this year
 - · Police child abuse teams
 - Specialist Education Services, school counsellors
 - child and adolescent health services.
- 1 Haveman, R. and Wolfe, B., "The determinants of children's attainments a review of methods and findings", Journal of Economic Literature 1995, pp 1829-1878
- 2 DSW, Strategic Directions, 1996, pp 33-36
- 3 Chapple, S. et al, Cycles of Disadvantage, 1995: drawing on NZ research by Fergusson et al in the Christchurch Health and Development Study
- 4 OSW, Statistics Report 1997, pp 90-92
- 5 Morris, A., Women's Safety Survey, Crime Victimisation Committee, Wellington 1996, p vii
- 6 Ministry of Foreign Affairs and Trade, Convention on the Rights of the Child, Human Rights Bulletin No 2, 1997
- 7 For details of law and practices see NZCYPFS, Breaking the Cycle, 1995





Pregnancy care

EXPECTATION:

Pregnant women will protect their own and their baby's health with the support of their partner. They will begin regular visits to a doctor or midwife early in pregnancy.

FACTS

- About 57,000 children were born in New Zealand in 1996¹. More than 1,400 of these births were to mothers aged less than 18 years².
- New Zealand's teenage fertility (live births) is high compared with Australia, Canada, Japan and some Western European countries. It is similar to the UK and lower than the USA³. International research shows that teenage pregnancies are linked with poor health in babies, and cot death. The babies are also more likely to grow up in homes that offer lower levels of emotional support and intellectual stimulation. For the mothers, giving birth during adolescence is linked with limited educational attainment, which in turn can reduce their later employment prospects and earning potential⁴.
- Maori and Pacific Islands females aged 13 17 years were six times and three times respectively more likely to have a baby than non-Maori/non-Pacific Islands females in this age group⁵.
- Research has shown the benefits of early pregnancy care for both mothers and infants.
 Care started after the second trimester (after six months) is linked with low birth weight and higher postnatal death, including cot death. There is also evidence that better pregnancy care is likely to reduce death in the first few weeks after birth⁶.
- A 1992 study of 4,000 New Zealand infants noted significant variation in the use of antenatal clinics. Late attenders tended to be younger, single, have less education, have a higher number of pregnancies, have lower income and were more likely to be of Maori or Pacific Islands ethnicity than mothers who began pregnancy care in the first trimester?.
 Other studies have noted that poverty, increased pressure of other children and lack of awareness of the benefits of pregnancy care were significant factors.
- Maternal factors in pregnancy, such as calorie intake, general health, alcohol use and
 particularly cigarette smoking are linked to low birth weight babies. Low birth weight is
 a major risk factor for infant illness and death⁹.
- A quarter of all pregnant women and half of all Maori women smoke during pregnancy.
 Smoking is linked with premature birth, low birth weight, cot death, asthma, pneumonia and glue ear¹⁰.

 Health care is based on the principle of informed choice. There is no law that says women must have pregnancy care - but it is strongly recommended.

- The Government provides free pregnancy and childbirth services to make sure the mother and baby are healthy.
 It also provides free public health education materials and health promotion programmes.
- Pregnant women are encouraged to register with a Lead Maternity Carer (LMC) to co-ordinate care for them
 during the pregnancy, birth and the postnatal period. Together, the pregnant woman and her LMC develop a
 "care plan" which is a written record of what the woman wants to happen before, during and after her
 pregnancy. The LMC is usually a general practitioner, midwife or specialist obstetrician or the care can be
 shared. Women can change their LMC at any stage if they are not satisfied.
- Pregnant women on low incomes who are aged 18 or over may qualify for pregnancy-related sickness benefit
 from the 28th week of pregnancy (or earlier if there are medical complications which mean that they cannot
 work). The benefit may be paid up to three months after the birth of the child. About 6,000 women received
 this benefit in the past year. An emergency sickness benefit is available to 16 and 17-year-old pregnant women,
 subject to a parental income test.
- 1 Statistics NZ, Demographic Trends 1996, Wellington, 1997
- 2 DSW, "Strengthening Families Strategy: Report on Outcome Measures and Targets", 1997 (unpubl.), p 24
- 3 Statistics NZ, Demographic Trends 1996, Wellington, 1997
- 4 DSW, "Outcome Measures and Targets", 1997, ρ 24
- 5 DSW, "Outcome Measures and Targets", 1997, p 24
- 6 Clark et al, 1986, "Comprehensive antenatal care and education of young adolescents: Beneficial effects on pregnancy outcomes", in NZ Medical Journal 1986, 99: pp 59-62
- 7 Essex et al, 1992, "The demographic characteristics of early and late attenders for antenatal care", in Australian Journal of Obstetrics and Gynaecology, 1992; 23: pp 306-8
- 8 Cooney, 1985, "What determines the start of prenatal care? in Medical Care 1985; 23: pp 986-97
- 9 DSW, "Outcome Measures and Targets", 1997, p.16
- 10 DSW, "Outcome Measures and Targets", 1997, p 15; Ministry of Health, Progress on Health Outcome Targets, 1997, pp 103, 137





FACT SHEET

Keeping children healthy

EXPECTATION:

Parents will do all they can to keep their children healthy.

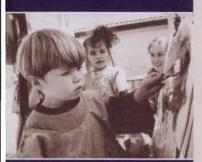
They will make use of free health checks and immunisations, and seek early advice and treatment for sick or injured children.

FACTS

- The incidence of a number of serious infectious diseases in New Zealand has been reduced dramatically by immunisation. These diseases include polio, diphtheria, tetanus, Haemophilus influenzae type b (Hib) disease, congenital rubella, and hepatitis B¹.
- The World Health Organization and the Ministry of Health recommend children be immunised to protect them against nine serious diseases. The risks of the diseases are far greater than the very small risks from the vaccinations. Some of the nine diseases are no longer common in New Zealand, because of immunisation. However, if the number of people who are immune to the diseases drops, they could return. Other diseases are still common, but would become rare if more children were immunised. All of the nine diseases can make children seriously ill. In some children a disease can lead to disability, and some may even die. While in rare cases children can have serious reactions to a vaccine, in the vast majority of cases a child who has a vaccine reaction returns to complete health².
- Although most parents support immunisation, less than two-thirds of children have upto-date immunisations by the age of two years. A 1996 survey by North Health indicates that while there has been an overall improvement in full immunisation coverage at age two years (from 55.4% in 1992 to 63.1% in 1996), full coverage of Maori and Pacific Islands children at this age is still far lower (44.6% and 53.1% respectively)³. To control vaccine-preventable diseases it is important that 95% of children are fully immunised.
- Infants under one year comprise two-thirds of all childhood deaths. Major causes of child deaths include cot death, congenital anomalies, and perinatal conditions, eg prematurity, lung disease, asphyxia, birth trauma⁴.
- More than half of cot deaths, in recent years, have been linked to maternal smoking. Smoking by fathers has also been found to increase the risk of cot death. Babies put to sleep on their stomach have a three times higher risk of cot death than babies put to sleep on their back. Other risk factors for infant deaths, and particularly cot death, include low birth weight, maternal smoking, maternal age 19 years or less, low maternal educational status, low income, and Maori ethnicity⁵.
- A major reduction in the cot death rate occurred between 1989 and 1991 (except for Maori and Pacific Islands infants) but the rate is still of concern and has not dropped significantly since 1991. In the period 1992 - 1994, the cot death rate for Maori infants was 6.7 per 1,000 live births and 1.5 per 1,000 live births for non-Maori⁶.
- Tobacco smoking can damage children's health when a mother smokes during pregnancy, and when children are exposed to environmental tobacco smoke (passive smoking)?.
- Injury and poisoning are the leading causes of death for children aged 1 14 years, causing around half of all deaths in this age group⁸.
- Around 11% of New Zealand children aged 0 14 years have a physical, sensory, psychiatric
 or psychological disability or a long-term disease or illness⁹.

• Parents must decide explicitly whether or not to have their children immunised. Early childhood centres and primary schools must ask parents to give them a copy of the immunisation certificate for children born after January 1995. Early childhood centres and primary schools must record this information on an "immunisation register" which is kept accurate and confidential. In the event of an outbreak of disease in a centre or community, the Medical Officer of Health may use the information contained on the register to help control the disease. Compliance will be audited by the Education Review Office in its audit of early childhood centres and schools. As no children born after January 1995 are as yet of school age, only early childhood centres are currently affected by this requirement (Health [Immunisation] Regulations 1995 pursuant to section 117 of the Health Act 1956).

- A new government policy of free doctors' visits and medicines for all children under six years was introduced on 1 July 1997.
- Plunket, Tipu Ora, doctors, public health nurses and others provide free Well Child health checks and family
 support based on the Well Child Tamariki Ora National Immunisation Schedule. Childhood immunisations, as
 specified in the National Immunisation Schedule, are also free. Parents of children with incomplete
 immunisations are encouraged and supported by health services to complete the immunisation schedule.
 There are no sanctions if parents make an informed decision not to immunise their children, or cannot for
 medical reasons.
- About 85% of children receive Plunket nurse checks, and a further 10% receive care from Tipu Ora and other
 providers such as practice nurses. Public health nurses offer a new entrant health check through most schools.
- The Government provides free public health education materials, eg pamphlets on breast-feeding, nutrition, and common childhood illnesses.
- Poor housing is associated with health problems in children, such as respiratory illnesses. The Government provides housing assistance to families in the following ways:
 - rental housing through Housing New Zealand
 - the accommodation supplement, through Income Support, which helps people on low incomes with the cost of renting, boarding or owning their own homes
 - · emergency housing for families, including women's refuges.
- 1 Ministry of Health, Immunisation Choices: Protect Your Child, 1997, p.7
- 2 Ministry of Health, Immunisation Choices, 1997, pp 6, 15
- 3 DSW, "Strengthening Families Strategy: Report on Outcome Measures and Targets", (unpubl.), 1997, p 18
- 4 DSW, "Outcome Measures and Targets", 1997, p 6
- 5 Ministry of Health, Health Outcome Targets, 1997, pp 97-104
- 6 Ministry of Health, Health Outcome Targets, 1997, pp 97-104
- 7 Ministry of Health, Health Outcome Targets, 1997, pp 137
- 8 Ministry of Health, (in preparation) Health Status of New Zealand Children, 1997, Weilington
- 9 Statistics NZ, Report on the 1996 Household Disability Survey, Wellington, 1997





FACT SHFFT

Learning for the under-5s

EXPECTATION:

Parents will do all they can to help their children learn from the time they're born.

FACTS

- A recent New Zealand study concluded that if parents are involved in their children's learning, their children learn better. Studies have also shown that children benefit from attending good quality early childhood services'.
- 96% of four-year-olds and 86% of three-year-olds go to an early childhood education service. Children in difficult circumstances are less likely to attend early childhood education services. Attending a quality childcare service can make a positive difference for these children when it comes to achievement in school².
- The number of Maori children using early childhood education services has grown since the 1980s, largely thanks to Te Kohanga Reo. In 1996, there were 30,323 Maori children enrolled in early childhood education compared with 24,341 in 1992.
- The number of Pacific Islands children in early childhood education has also grown, eg enrolments of three-year-olds increased by 63% between the years 1990 and 1995. But their participation in licensed services is still lower than for other children. Lower participation is indicated by comparing early childhood and age five school enrolments. In 1996, Pacific Islands children made up 6.1% of early childhood enrolments but 8.3% of age five school students. This compares with Pakeha children who constituted 69.3% of early childhood enrolments, but only 65% of age five school enrolments.

In order to be licensed to operate, early childhood education services must meet standards established by the
Government. Licensed early childhood centres must meet The Education (Early Childhood Centres) Regulations
1990 and amendments. Home-based services must meet The Education (Home-Based Care) Order 1992.
Playgroups are required to meet the criteria listed in the NZ Gazette, 31 January, 1991, no. 17.

- · The Government helps to fund a wide range of early childhood education services:
 - childcare centres provide all-day, part-day or flexible hours early childhood services. They may be privately owned businesses, non-profit making organisations, community groups or may operate as an adjunct to the main purpose of a business or organisation
 - Te Kohanga Reo provide an early childhood education in the medium of Maori for children under six years of age. They are administered by the Te Kohanga Reo Trust. By 1996 there were 767 centres
 - playcentres, affiliated to the Playcentre Federation, are parent co-operatives where parents take responsibility
 for the management and supervision of mixed-age sessions for children from birth to school age. Training
 and parent education programmes, which lead to a recognised early childhood education qualification, are
 developed nationally
 - kindergartens operate an early childhood education service for children from three to five years. They are administered by associations. Mobile kindergarten services are available in some rural areas. All teachers are required to be registered teachers
 - home-based services (family daycare) link parents of young children or babies to caregivers who are often themselves parents. Trained co-ordinators supervise the provision of the early childhood education and care
 - Pacific Islands early childhood centres offer programmes based on the values and languages of Pacific Islands
 cultures. They range from informal language groups meeting for one or two sessions a week to licensed and
 chartered all-day centres
 - the Correspondence School includes an early childhood education component, catering for up to 700 children.
- Specific programmes can help groups under-represented in early childhood education to participate. These
 include:
 - the Parents As First Teachers programme, a home visiting programme administered by the Early Childhood Development Unit, which supports parents to help 0 to 3-year-old children learn
 - Awhina Matua, which helps families with no access to early childhood education by setting up parent groups and introducing them to mutual support networks. The Early Childhood Development Unit administers the programme
 - the Home Instruction Programme for Preschool Youngsters (HIPPY), which operates in conjunction with Family Service Centres
 - Anau Ako Pasifika, a home-based community initiative run by and for Pacific Islands communities, on contract to the Ministry of Education. It supports families with 0 to 7-year-olds.

Wylie, C., Five Years Old and Competent, New Zealand Council For Education Research (NZCER), Wellington, 1996; Podmore, V., Early Childhood Education and Care: A Summary and Review of Outcomes of Inadequate Provision, NZCER, Wellington, 1994

² Barnett, W. Steven, "Long-Term Effects of Early Childhood Programs on Cognitive and School Outcomes", in The Future of Children, Vol 5, No. 3, Winter 1995

Getting children to school ready to learn



EXPECTATION:

Parents will take responsibility for seeing that their children are well prepared for school, and attend every day ready to learn.

FACTS

- Poor school attendance usually results in poor achievement at school¹. Low school
 achievement is associated with a range of undesirable outcomes. These include poor self
 esteem, youth offending, teenage pregnancy, and unemployment².
- Some schools have established programmes for children who come to school ill-equipped to learn, eg health services, social work and breakfast programmes³.
- Approximately 20% of school suspensions are for drug-related offences such as coming to school under the influence of drugs or using drugs at school⁴.
- District Truancy Services (DTS) support parents, students and schools in ensuring students attend school. DTS assist schools in confirming rolls and patrolling for truants, as well as working with truants, their families and their school to resolve the problems causing the truancy and to get the child back to regular school attendance. DTS are organised by representatives of the schools in the district, the local Safer Community Council and other community groups. Most have been in place since the beginning of 1997. By the end of 1998 there will be 110 DTS covering all 2,700 schools. Evidence to date indicates that they are increasing school attendance rates⁵.
- The national Non-Enrolment Truancy Service (NETS) was set up in 1997 to receive referrals
 from schools, the Police, CYPFS and others, on students who may have become non-enrolled.
 Its task is to locate non-enrolled students and enrol them in a new school or place them in
 a legal alternative learning opportunity, such as a job or training course. In 1997 NETS
 assisted 400 students to re-enrol or to gain legal exemptions for a course or job⁶.



- The Education Act 1989 requires each school "to take all reasonable steps to ensure the attendance of students
 enrolled at its school". Sections 30 and 31 empower boards of trustees to ensure attendance of enrolled
 students, and restrict the employment of school-aged children.
- The Act requires parents to enrol their children aged six years and over until their 16th birthday at a registered school (section 20), unless they obtain an exemption either for home schooling by the parent (section 21) or for a 15-year-old for whom school is no longer the best option (section 22). Parents are required to ensure that their children attend school (section 25).
- Parents can be prosecuted and fined up to \$1,000 for not enrolling their child (section 24). Parents who allow
 their child to be absent from school for unjustified reasons (irregular attendance) may be prosecuted and
 fined up to \$150 for the first offence and up to \$400 for any subsequent offence (section 29).

- A range of options for schooling is available:
 - state schools are co-educational at primary and intermediate level. Some offer single-sex education at secondary level
 - integrated schools follow the state curriculum requirement but incorporate their own special character (generally a philosophical or religious belief) into the school programme
 - Kura Kaupapa Maori (Maori medium schools) are state schools where teaching is in the Maori language and is based on Maori culture and values. The curriculum requirements are the same as at other state schools
 - the Correspondence School provides distance learning for students unable to attend a regular school usually because of distance from their nearest school or for medical or other special reasons
 - independent (or private) schools are governed by their own independent manager but are required to meet certain requirements in order to be registered
 - parents can choose to educate their children at home, provided they maintain a standard of education equivalent to that of a registered school and get approval from the Ministry of Education.
- The Specialist Education Services can work with families and students if a child has special needs or serious behaviour problems, or if there seems to be a psychological problem. School counsellors (mainly in secondary schools) also work with families to help deal with emotional issues.
- The Government funds NETS and provides funding support for DTS.
- Income Support can assist parents if they have financial difficulties in purchasing school uniforms or shoes or other requirements for their children.
- 1 House of Representatives Standing Committee on Employment, Education and Training, Truancy and Exclusion from School: Does Anyone Care?, Australian Government Publishing Service, 1996
- 2 Fergusson, D., Horwood, L. and Lynskey M., "Truancy in adolescence", in New Zealand School Trustees Association, Preliminary Report of Taskforce on Truancy, Suspensions and Expulsions, 1994
- 3 Ministry of Education, Improving Achievement: Secondary School Systems to Cater for Students at Risk of Educational Failure, 1997
- 4 Information from Ministry of Education
- 5 Information from Ministry of Education
- 6 Information from Ministry of Education





FACT Sheet

Young offenders

EXPECTATION:

Children must not break the law. Parents will take responsibility for bringing their children up to be law-abiding members of society. When children do offend, families, communities, and government agencies will work together to prevent re-offending.

FACTS

- Crime statistics must be viewed with a degree of caution, as they can be influenced by a
 variety of factors including: what is defined as a crime; reporting practices; policy practices;
 and changes in population numbers¹. However, there is some evidence that more crime
 is being committed by children (0 16) today than 10 years ago:
 - the number of offences cleared by the Police by apprehending young people has changed from just under 36,000 offences in 1987, when the trend was declining, to more than 44,500 in 1996, with significant increases from 1992. There were 42.5 offences for every 1,000 young people 0 - 16 years in 1987, and 48 offences for every 1,000 in 1996²
 - the number of 14 to 16-year-olds apprehended for violent offences remained reasonably static between 1987 and 1992, but has increased significantly in the last four years from 1,813 in 1992 to 3,195 in 1996³.
- Youth crime is not increasing at a faster rate than adult crime. Increases have mirrored
 increases in offending by adults, including the increases in violent offending. The
 proportion of offences cleared by the Police by apprehending young people has remained
 constant over recent years at around 22% of all cleared offences⁴.
- Research into offending by children shows that casual and impulsive offending is common, but seldom persistent and serious in nature. The vast majority (estimated at about 93% -95%) of young offenders do not go on to become serious, persistent or adult offenders. Young offenders are less likely to be apprehended for violent offences, or drugs or antisocial offences than adults, but more likely to be involved in property crime⁵.
- Almost 80% of young offenders apprehended by the Police in 1995 were male. 70% were aged between 14 and 16. 48% were Maori. The rate of apprehension for offences by Maori 0 16 years was twice as high as for the Pacific Islands ethnic group, and almost four times that for New Zealand European and others⁶.
- There is a link between family circumstances and subsequent serious and persistent
 offending. The factors include: social and material disadvantage; a family history of
 criminal behaviour, substance abuse and conflict; childhood experiences of poor
 supervision; and harsh and erratic discipline⁷.

The New Zealand Youth Justice System

- The law for dealing with offending by children is set out in The Children, Young Persons, and Their Families
 Act 1989. The provisions are radical and innovative in their involvement of families and victims. Several overseas
 countries are copying them.
- The law balances objectives of: minimising the involvement of most children in formal procedures such as
 Court; holding offenders accountable for their behaviour; seeking to maximise family involvement and
 responsibility; recognising the interests of victims; and ensuring that young offenders are dealt with in a
 manner that will give them the opportunity to develop in responsible, beneficial and socially acceptable ways.
- A large proportion of offending by children and young people is dealt with directly by the Police, either by the front-line Police Officer giving an on-the-spot warning, or by a Youth Aid Officer taking some action that is deemed sufficient and appropriate in the circumstances.
- Offences too serious to be dealt with informally by the Police are usually decided in a Family Group Conference (FGC) by the offender's family, the victim, the Police and sometimes social workers. The most serious offences, and the cases where agreement is not reached at an FGC, usually go on to a Youth Court.

Current Provisions

- Children aged 10 13 years can be prosecuted for murder or manslaughter. In such cases the preliminary hearing takes place in the Youth Court. However, if the child is committed for trial, it transfers to the High Court.
- Apart from murder or manslaughter, children aged 10 13 years cannot be charged with criminal offences.
 Where a child commits an offence and is referred to the CYPFS, the matter is dealt with by way of an FGC, which is identical to the process for those over 14 years. In addition, the Police may apply to the Family Court for a declaration that the child is in need of care and protection on the grounds that the offence(s) is of a nature or magnitude which raises serious concerns for the child's well-being.
- For young offenders aged 14 16 years, the Youth Court can order (inter alia): fines, costs, reparations and restitution; supervision (probation); community work; and supervision in a residence for up to three months. Those 15 years and over can be sentenced in a District Court if the offence is a serious offence requiring a custodial sentence. Parents can be ordered to pay costs, or make reparation or restitution, if the young person is under 16 years (The Children, Young Persons, and Their Families Act 1989, Pts II-V).

- CYPFS will spend almost \$48 million in 1997/98 on youth justice related activities. Almost half will go on CYPFS
 residences containing young offenders on remand or given custodial sentences. Currently there are 100 places
 in residences; a specialist sex abusers' unit will be built shortly; and specialist youth justice residences are in the
 planning stage. The number of places will increase to 141.
- The Youth Risk Crime Prevention Package announced in the 1997 Budget includes: a new service in South Auckland to address the education, health and welfare needs of youth at high risk of serious and persistent offending (\$3 million over three years); funding for community initiatives to reduce offending by young Maori (\$1.06 million over three years); and funding for community based Police programmes in 15 areas (\$3.13 million over three years).
- 1 Maxwell, G., and Robertson, J., Child Offenders 1995, pp 8-11
- 2 Police Statistics; see also Statistics NZ, New Zealand Now: Crime, 1996, pp 28-30
- 3 Ministry of Justice, Convictions and Sentencing of Offending in New Zealand 1987 to 1996, 1997, p 101
- 4 Cheer, M. C., Youth Recidivist Offending, 1995, p 9; Statistics NZ, Crime, 1996, pp 37-41
- 5 Statistics NZ, Crime 1996, p 37; Lovell, R. and Norris, M., One in Four, DSW, 1990; Cheer, 1995, p 29
- 6 Statistics NZ, Crime 1996, p 38
- 7 "Measuring youth offending and reoffending", (unpubl.) Report prepared for DSW, 1997; Cheer (1995); Sherman, L. W. et al, Preventing Crime: What Works, What Doesn't, What's Promising, Report to US Congress 1996, p. 4-1





FACT SHEET

Sharing parenthood

EXPECTATION:

Parents will love and care for their children, support them financially and, where possible, share the parenting responsibilities, even when they are not living together.

FACTS

Sole Parent Families

- The number of sole parent families in New Zealand grew rapidly in the 1970s and 1980s, and since 1991 it has continued to grow but at a slower rate. In 1976, 10% of all families with dependent children were sole parent families. In 1991 this figure was 24% and in 1996 it was 27% (126,700 families)¹.
- At the time of the 1996 Census 24% of all dependent children were living in sole parent families. The likelihood of living with just one parent is higher for Maori children (41%) and for Pacific Islands children (29%)².

Custody and Access

- A 1990 New Zealand survey of both custodial and non-custodial parents found that a significant and growing proportion of children in sole custody arrangements did not see their non-custodial parent at all. 18% of custodial parents and 15% of non-custodial parents reported that the non-custodial parent had no contact with their child(ren) six months after the separation³.
- New Zealand ratified the United Nations Convention on the Rights of the Child in 1993.
 Article 9 of the Convention provides that the child has a right to live with his or her parents unless this is deemed to be incompatible with the child's best interests. The child also has the right to maintain contact with both parents if separated from one or both⁴.

Child Support

- 173,800 non-custodial parents were paying child support as at 31 July 1997 including those paying arrears. Of this group, approximately 53% (93,700) were salary or wage earners, nearly 26% (44,800) were beneficiaries and 20.3% (35,700) were self employed. 80% were male.
- Of the 133,200 non-custodial parents assessed to date for child support for the 1997/98 child support year, approximately 65% have been assessed for the annual minimum amount of \$520 (\$10/week).
- In the 1996/97 financial year, the gross amount of child support collected (including penalties) was \$177.8 million. Of this approximately 31% was paid to the person looking after the child. The Crown retained the balance. The Crown retains child support when the person looking after a child receives a benefit, to offset the cost of that benefit. (Approximately 82% of custodial parents in sole parent families received the domestic purposes benefit in 1996.) The Crown also retains late payment penalties to offset the costs of enforcing payment.

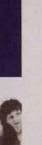
Family Violence

- The 1996 Women's Safety Survey showed that 25% of women with a current partner and 75% of women with recent partners reported experiencing one or more acts of physical or sexual abuse by their partner. Ten or more acts of physical or sexual abuse were reported by 2% of women with current partners and 22% of women with recent partners. More than half of those experiencing violence rated the violence as quite serious or very serious. The most common "trigger" reported for violence by a partner was his drinking. Maori women were more likely to have experienced physical and sexual abuse, the abuse was likely to be more serious, and they were more likely to have been repeat victims of violence. The principal strategy suggested by the women for dealing with their partner's violence was "leave him permanently".
- A 1994 study of the economic costs of family violence (defined as being violence or threats of violence on men, women or children in a family) found that the annual direct cost is at least \$1.2 billion. This cost was based on the assumption that family violence affects one in seven members of the population, and included costs to the individual, and costs to the Government such as health care, income support payments, funding of community support agencies and law enforcement costs arising from family violence⁶.

CURRENT LAW

- The Guardianship Act 1968 requires that the Court regard the welfare of the child as the first and paramount consideration where the custody or guardianship of, or access to, a child is in question.
- The objectives of The Child Support Act 1991 include:
 - to affirm the right of children to be maintained by their parents
 - to affirm the obligation of parents to maintain their children
 - to affirm the right of caregivers of children to receive financial support for children from the non-custodial parents of those children
 - to provide that the level of financial support due by parents for their children is determined according to their capacity to provide financial support
 - to ensure that equity exists between custodial and non-custodial parents, in respect of the costs of supporting their children
 - to ensure that obligations to birth and adopted children are not extinguished by obligations to stepchildren.
- Child support liability is generally calculated according to a legislative formula which is a fixed percentage (based on the number of children for whom child support is payable) of the non-custodial parent's taxable income minus a living allowance.
- As well as placing orders on salary and wages and/or bank accounts, the Child Support Act has a number of
 enforcement provisions. Inland Revenue Child Support can seek an enforcement order for arrears. If the noncustodial parent refuses or fails to pay as directed by the order, periodic detention for a maximum of 12 months
 may be imposed by the Court. There is a right of appeal to the High Court. If it is believed that a non-custodial
 parent may leave the country as an avoidance tactic, the Child Support Act provides for his or her arrest.

- The Government administers family law provisions to provide a framework for issues of guardianship, custody and access.
- For those custodians and non-custodial parents for whom the child support formula produces an unjust and inequitable result, the Child Support Act allows those parents to seek a departure from the formula by seeking an administrative determination. This is a low-cost informal process carried out by the Commissioner of Inland Revenue using an independent person experienced in law.
- Inland Revenue Child Support will also administer voluntary agreements for child support and spousal maintenance.
- t Derived from unpublished census figures by Social Policy Agency, DSW
- 2 Derived from unpublished census figures by Social Policy Agency, DSW
- 3 Lee, A., "A Survey of Parents who have Obtained a Dissolution" in Family Court Custody and Access Research, Report No. 2, 1990, p 63
- 4 Ministry of Foreign Affairs and Trade, Convention on the Rights of the Child, Human Rights Bulletin, No. 2, May 1997, p 40
- 5 Morris, A., Women's Safety Survey 1996, Victimisation Survey Committee, Wellington, 1997, pp vii ix
- 6 Snively, S., The New Zealand Economic Cost of Family Violence, Report for DSW, 1994



8

Training and learning for employment

EXPECTATION:

People will take responsibility for developing the skills and knowledge they need to help them get a job, or take on a new job.

FACTS

- People with education and training are more likely to get and stay in work than people who are unskilled or untrained. This is particularly so for those who have completed tertiary education, as they have an advantage in the workplace over others with fewer qualifications¹. People who continue to learn and develop new skills are more likely to get jobs and cope with change. For example, literacy skills tend to decline over time if not used and developed².
- Ten years ago, most school leavers did not continue with their education. Participation
 in any form of tertiary education and training was low by international standards³. Today,
 about half of all school leavers continue with some form of tertiary education and training.
- The growth in participation among disadvantaged groups previously under-represented in universities and polytechnics has been higher than general growth. Although these groups, including Maori, are still under-represented, the gap has narrowed over the last decade⁴.
- In 1995 the participation rate for the 18 to 24-year-old age group in tertiary education and training was 27.3%⁵.
- The Household Labour Force Survey shows that participation in education and training outside of that funded by the Government is substantial⁶. As well as formal education and training, learning takes place informally at home, in the community and at work.

CURRENT LAW

- Children must attend school from their sixth until their 16th birthday, or be exempted from attendance by the Secretary for Education (The Education Act 1989).
- In return for the benefit, 44% of working-age beneficiaries (eg unemployment beneficiaries, domestic purposes beneficiaries with older children) are legally required to seek work and/or do training to help them get work (The Social Security Act 1964).

- The Government provides support for a wide variety of tertiary education and training from a variety of providers, including:
 - universities, polytechnics, colleges of education, and government training establishments
 - where wananga teaching and research institutions that advance knowledge of ahuatanga Maori (Maori tradition) according to tikanga Maori (Maori custom); three wananga are established tertiary institutions
 - private training establishments which offer a wide range of courses and/or deliver government-funded programmes such as Training Opportunities Programmes (TOP).
- The Government also supports individuals in education and training by:
 - paying income support to individuals while they are training. Training benefit is available to people doing
 approved employment-related training such as TOP courses. The rates are similar to those paid to
 unemployment beneficiaries and tertiary students. In the year to 30 June 1997, 32,000 training benefits
 were granted. 61% of recipients were aged under 20 years
 - providing student loans and student allowances to ensure tuition and living costs are not a barrier to
 participation. Just over \$356 million will be spent on allowances for tertiary students in 1997/98. Loans are
 available to cover living costs, course materials and student fees
 - supporting a range of second-chance education opportunities. Training incentive allowance is paid to people receiving domestic purposes, widows or invalids benefits or emergency maintenance allowance to assist them with approved employment-related training. The allowance helps to meet costs of attending courses that enhance work skills, eg tuition fees.
- A wide range of training opportunities for job seekers is also funded by the Government:
 - as well as programmes available to all job seekers, specific programmes have been developed which are targeted at specific groups such as youth, women, Maori and Pacific Islands job seekers, and long-term unemployed job seekers in particular
 - TOP to assist people with low skills to obtain employment or credit towards nationally recognised qualifications. TOP is targeted to early school leavers and to long-term unemployed people with low qualifications, as well as other people who are educationally disadvantaged
 - the Government's policy for industry training encourages industry to be responsible for developing, implementing and administering industry training arrangements through the establishment of industry training organisations (ITOs). Industry training includes primary industry cadet schemes, traineeships and some arrangements which still use the traditional apprenticeship approach. Total appropriation in 1997/98 is almost \$63 million
 - Career Services staff provide information and guidance to senior secondary school students and through the New Zealand Employment Service to those who are unemployed. Information is also available through tertiary institutions and public libraries
 - the Education and Training Support Agency is a Crown agency which focuses on the transition from education and training to work, and on increasing access to training in the workplace?.
- Sholeh Maani, An Appraisal of the Private and Social Rates of Return to Secondary and Tertiary Education in New Zealand: Evidence from the 1991 Census. Report to the New Zealand Treasury, 1994
- 2 OECD, Literacy Skills for the Knowledge Society (the International Literacy Survey Report), 1997
- 3 Ministry of Education, Tertiary Education and Training in New Zealand: a Guide, Wellington, 1997, p 6
- 4 Ministry of Education, Tertiary Education and Training, 1997
- 5 Ministry of Education, Tertiary Education and Training, 1997, p 6
- 6 Statistics NZ, The Household Labour Force Survey, 1997
- 7 Information from Ministry of Education

Work obligations and income support



EXPECTATION:

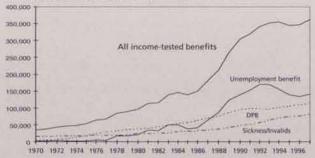
People receiving income support will seek full-time or parttime work (where appropriate), or take steps to improve their chances of getting a job.



FACTS

- Official unemployment was 119,300 in September 1997¹. The number of people receiving unemployment benefits in September 1997 was 142,628². The figures are different because of the different definitions and criteria used.
- There has been a large increase in the number of jobs in recent years. Over 230,000 more
 people had jobs in September 1997 than in September 1992. Over the same period, the
 number of people officially unemployed fell by over 40,000. Because new people enter
 the labour force each year, there is not a one-for-one reduction in unemployment for
 each new job created. The majority of new jobs were full-time³.
- The overall unemployment rate for both men and women was 6.6% in September 1997.
 The rate was higher for younger people: 15% for those aged 15 19 and 11.7% for those aged 20 24. The rate was also higher for Maori (18.2%) and for Pacific Islands people (15.5%)⁴.
- Many young families have no parent in paid employment. Census data shows that in 1996 27% of families with children under five years (54,000 families) had no parent in paid work, down slightly from 1991 when 30% of such families (58,000) had no parent in paid work. In 1996, 72% of such families were sole parent families and 28% were twoparent families⁵.
- Between 1991 and 1996 the percentage of sole parents in employment (all hours) increased from 27% to 36%⁶ the highest level since 1976. Between July 1996 and July 1997, the percentage of domestic purposes beneficiaries with other income increased from 19% to 22%. New Zealand European recipients of domestic purposes benefit are much more likely to have other income (28%) than Maori (14%) or Pacific Islands (9%) recipients. This indicates that Maori and Pacific Islands domestic purposes beneficiaries may have more difficulty in accessing other earnings and work⁷.
- As the following graph shows, the total number of working-age people on the main income-tested benefits has grown substantially since 1970.

BENEFIT NUMBERS 1970 TO 1997



Source: DSW Annual Reports and Statistical Information Reports.

- Unemployment benefit is payable to unemployed people aged 18 and over, or married people aged 16 and
 over with dependent children, who are able to work and are actively seeking work. The overall trend in
 unemployment benefits closely follows economic trends, with numbers rising up until the end of 1992 and
 then falling from early 1993 as the economy improved. Since mid-1996, numbers have started to increase
 again, reflecting a slowdown in the economy.
- Invalids benefit is payable to people aged 16 and over who are permanently and severely restricted in their
 capacity to work owing to a disability or blindness. Numbers receiving the invalids benefit continue to rise
 steadily (see graph invalids benefit and sickness benefit are shown together).
- Sickness benefit is payable to people 18 years or over who are temporarily incapacitated for work and have
 thereby suffered a loss of earnings. Applicants who do not meet all eligibility requirements may be granted
 emergency sickness benefit because of hardship. Except for the period following the 1991 benefit rate changes,
 sickness benefits have been increasing over the past decade. The rate of growth slowed when more regular
 medical reviews were introduced, but has now resumed the former trend.
- The domestic purposes benefit is payable to sole parents, some full-time caregivers of dependent adults, and
 older women without children who are severely disadvantaged in the job market. The lowering of the rate of
 payment in 1991 and a benefit fraud amnesty in 1993 appeared to halt the growth in numbers of domestic
 purposes benefits. However, over the past four years, numbers have again been increasing.

- The Social Security Act 1964 contains a number of work-related obligations for beneficiaries:
 - those people receiving the unemployment benefit are required to seek full-time work or to participate in training. The spouse of an unemployment beneficiary is also required to seek full-time work or training if they have no children or if their youngest child is aged 14 or more
 - those receiving the domestic purposes benefit or widows benefit who have no children or whose youngest child is aged 14 or more, are required to seek *part-time* work or training
 - spouses of those on unemployment benefit and those on domestic purposes benefit or widows benefit
 whose youngest child is aged 7 13 are required to attend an annual interview to begin considering future
 employment and training options.

- The Government spent almost \$250 million last year in helping people who were unemployed seek work, including job search assistance, training, work experience and community projects.
- The Government also funds programmes to assist other beneficiary groups to improve their job prospects,
 eg Compass, which assists sole parent beneficiaries into education, training and employment. A recent evaluation
 of Compass showed that Compass participants were 1.56 times more likely than other sole parents to earn
 other income or cancel their benefit owing to work⁸.
- In 1996, the Government amended the income rules for some groups of beneficiaries to allow them to keep
 more of the money they earn from part-time jobs before their main income support is affected. Part-time
 work can help as a transition from a benefit to independence.
- The Government is merging the New Zealand Employment Service, Income Support and the Community Employment Group from 1 October 1998 to ensure a more co-ordinated approach to helping job seekers.
- 1 Statistics NZ, Household Labour Force Survey
- 2 DSW, SWIFTT data
- 3 Statistics NZ, Household Labour Force Survey
- 4 Statistics NZ, Household Labour Force Survey
- 5 Derived from unpublished census data by Social Policy Agency, DSW
- 6 Derived from unpublished census data by Social Policy Agency, DSW
- 7 DSW, SWIFTT data
- 8 Colmar Brunton, "Report of a Quantitative Evaluation of the Compass Programme after Three Years", Report for DSW (unpubl.), April 1997





Managing money

EXPECTATION:

People will manage their money to meet the basic needs of themselves and their family.

FACTS

- · A survey of people using budgeting services in 1994 found:
 - · most lived in households with children
 - most sought budget advice because of a gradual build up of debt, not a sudden emergency
 - 74% were on a benefit; 25% on wages
 - average levels of indebtedness were \$5,000 for those on a benefit and just over \$8,000 for those on wages; and debt repayments were a significant expenditure item
 - · before receiving budget advice their weekly expenditure exceeded weekly income!.
- Most foodbank users are on benefit; most in households with children; and most use a
 foodbank infrequently because some additional cost such as repairs to the car or washing
 machine has caused difficulties. A smaller group faces underlying and complex difficulties:
 gambling; drug and alcohol abuse; fines and debt arrears; and/or poor money management
 skills².
- Special needs grants (SNGs) are made to those who have an immediate, essential, specific
 circumstance or emergency need, and have no other way of paying for it. The most
 common circumstances in the year to 30 June 1997 are set out in the following table³:

REASONS FOR GRANT	NUMBERS	AMOUNT \$000
Food	254,560	22,459
Medical	51,109	8,232
Re-establishment	9,266	3,049
Education	8,176	1,466

- The number of SNGs made each month has shown a declining trend since the beginning
 of 1995; this is likely to be a consequence of policy changes, and the progressive change
 to weekly benefit payments, which has assisted beneficiaries with money management.
- An analysis of the number of people receiving SNGs in the year to 31 August 1997 showed
 that just under 176,000 people received SNGs almost all were beneficiaries. Just over
 7,700 people received five or more payments^a. Those who repeatedly seek SNGs are
 referred for budget advice. In 1996/97 budget advice services were contracted to work
 with almost 7,200 clients referred from Income Support. There is evidence that only
 about 60% of those referred actually take up the referral and obtain budget advice.
- · Benefit advances are made to meet immediate and essential needs. The advance is

recovered from subsequent benefit payments. The most common reasons for an advance are set out in the table below⁵:

REASON	NUMBERS	AMOUNT \$000
Accommodation (rent, bonds etc)	105,210	40,971
Furniture and appliances	67,746	20,745
Electricity and gas	43,885	8,192
Clothing	41,579	5,084
Medical	32,348	10,374

- Research in 1994 showed that budget advice did assist people to improve their financial situation. In most cases:
 - income was increased, expenditure was decreased and clients moved from a deficit in household weekly budgets to a surplus
 - accumulated debt was reduced⁶.

CURRENT LAW

- Section 83 of The Social Security Act allows for payment of a benefit to someone other than the beneficiaries
 with the consent of the beneficiary (ie voluntarily), or where the beneficiary has not sufficient capacity in law
 to make such a decision. The current law does not appear to provide for payment to an agent because of the
 failure of the beneficiary to meet important obligations, for example by failing to financially support their
 children.
- · Use of a budget advice service is voluntary, even if the referral is made by Income Support.

- The income support system contains "safety net" programmes for special or emergency situations not catered for elsewhere. The programmes are mainly discretionary, and cost about \$230 million a year around 2% of income support expenditure. This assistance is both income and asset-tested.
- The main programmes (with costs and numbers) are:
 - special benefit: ongoing payments to help meet the difference between income and essential outgoings; 1996/97 expenditure \$74 million; 24,000 benefits current at 30 June 1997
 - SNGs: one-off grants for financial hardship or emergencies; 1996/97 expenditure \$41 million; 373,000 grants in 1996/97
 - advance payments of benefit: to help meet immediate needs; 1996/97 \$99 million advanced; 370,500 advances made.
- The Government provides contributory funding to budget advice services across New Zealand. In 1997/98 its
 contribution will be just under \$3.2 million.
- 1 Wilson, A. G., Houghton, R. M. and Piper, R. K., Budgeting Assistance and Low-Income Families, Report for DSW, 1995
- 2 Mackay, R., "Foodbank demand and supplementary assistance programmes: a research and policy case study", Social Policy Journal 5, 1995.
- 3 DSW, Statistics Report, 1997, Table 66
- 4 DSW, unpublished analysis
- 5 DSW, Statistics Report 1997, Table 68
- 6 Wilson et al, Budgeting Assistance, 1995, p vii





FACT SHEET

Keeping ourselves healthy

EXPECTATION:

People will do all they can to keep themselves physically and mentally healthy.

FACTS

- Around 4,500 deaths each year are attributable to tobacco smoking. About a quarter of New Zealanders smoke cigarettes¹.
- 30% of the 314 drivers/riders killed in fatal motor vehicle crashes in 1995 were above the legal alcohol limit². Heavy drinking of alcohol has been linked to a number of health problems, particularly liver and heart damage, hypertension, diseases of the digestive system, and certain types of cancer³.
- Each year around 500 deaths and 7,000 hospitalisations are attributed to motor vehicle crashes. Males aged 15 - 24 years are over-represented in motor vehicle crash death and injury statistics. Travel on country roads is about 50% more risky in terms of mortality than travel in towns or cities⁴.
- To keep healthy it is recommended that people eat a variety of foods each day, including vegetables, fruits, bread and cereals⁵.
- Regular physical activity is linked with a number of health benefits, including:
 - reduced risk of ischaemic heart disease, strokes, certain cancers, non-insulin-dependent diabetes and osteoporosis
 - · improved weight control
 - · preserving optimum function of muscles and joints
 - · improved mental health6.
- A 1993 survey showed that 53% of New Zealanders want to be more physically active, and many of these people are currently inactive. A report by the University of Otago suggested that a 10% increase in the number of people who participate in frequent physical activity would result in a significant saving to the nation's direct health costs each year, mostly as a result of a reduced incidence of ischaemic heart disease and cerebrovascular disease⁷.
- In 1994, there were 409 male and 103 female deaths as a result of suicide. 27% of suicide deaths were in the 15 24 year age group. Youth suicide rates have almost doubled for males between 1984 and 1994 and the female rate increased 73% over the same period. 90% or more of young people who commit suicide have a diagnosable mental disorder (including depression, conduct disorder and substance abuse)⁸.
- 19% of New Zealanders aged 15 years and over require help with everyday activities because they have a disability. Mental illness accounts for almost one-third of disabilities. Mental health disorders are common, with two-thirds of New Zealanders experiencing at least one occurrence in their lifetime. The most common disorders are anxiety, alcohol abuse and major depression⁹.

- Smoking in the workplace and most tobacco advertising is banned. It is illegal to sell tobacco products to people under the age of 18 (*The Smoke-Free Environments Act 1990*).
- The sale and supply of liquor to the public is controlled with the aim of contributing to the reduction of liquor abuse (The Sale of Liquor Act 1989).
- It is illegal to drive with a blood alcohol concentration of more than 80mg per 100mls of blood (The Transport Act 1962).

- The Government funds free public health services, health education materials and health promotion programmes, such as the "Why start?" campaign against smoking and the "5-plus a day" campaign which promotes healthy eating.
- It also funds disease prevention programmes such as the national cervical screening programme. By the end of 1997, 85.5% of New Zealand women aged 20 - 69 years (about 860,000 women) were enrolled in the national cervical screening programme and had had a smear in the previous five years. Provisional figures indicate that both incidence and mortality rates are reducing for all women, although the incidence rate for Maori women is not reducing as much.
- Pilot breast cancer screening programmes have been operating in Otago-Southland and Waikato since 1992.
 On the basis of the success of these pilot programmes, the Government has provided funding for a free national breast cancer screening programme for women aged from 50 to 64 years. This programme will begin soon.
- The Hillary Commission is the government funding body that supports sports, fitness and leisure in New Zealand. In the year to June 1997, national bodies and local sports clubs received \$22.7 million through the Hillary Commission.
- Specialist mental health services cater for about 54,300 people each year and disability support services cater for about 110,000 each year.
- A National Youth Suicide Prevention Strategy has been developed to provide a comprehensive and co-ordinated
 approach to preventing youth suicide, linking the work of government departments and community agencies.
 The work is being led by the Ministry of Youth Affairs, with input from the Ministry of Health and the Ministry
 of Maori Development. The Strategy is due to be published in March 1998.
- 1 Ministry of Health, Progress on Health Outcome Targets, 1997, p 136
- 2 Ministry of Health, Health Outcome Targets, 1997, p 114
- 3 Ministry of Health, Health Outcome Targets, 1997, p 164
- 4 Ministry of Health, Health Outcome Targets, 1997, pp 114-122
- 5 Ministry of Health, Health Outcome Targets, 1997, pp 38-41
- 6 Pate et al 1995; US Department of Health and Human Services 1996; quoted in Ministry of Health, Health Outcome Targets, 1997, pp 58-59
- 7 Wilson et al 1993; Russell et al 1993; quoted in Ministry of Health, Health Outcome Targets, 1997, p 59
- 8 Ministry of Health, Suicide Trends in New Zealand 1974-1994, NZHIS, 1997
- 9 Ministry of Health, Mental Health in New Zealand from a Public Health Perspective, 1997