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PRIME MINISTER'S FOREWORD

When we launched the Child and Youth Wellbeing Strategy in August 2019, it was with an ambitious vision: to make New Zealand, Aotearoa the best place in the world to be a child or young person — a place where all children are loved, confident, happy and healthy, and empowered to live their best life.

The ongoing challenges presented by the COVID-19 pandemic have only deepened our resolve — reducing child poverty and improving child wellbeing continues to be one of the greatest drivers of the work we do as Government.

In 2020/21, we've continued to make significant long-term investments in the wellbeing of our children, young people and their whānau, as well as mitigating the immediate health, social and economic impacts of COVID-19.

These investments include further increases to the minimum wage and main benefits; investment in job programmes to support young people into training and employment; expanding Ka Ora, Ka Ako | healthy school lunches programme; providing devices and internet connectivity to support distance learning; and establishing a greater range of primary mental health and wellbeing programmes for children and young people.

The data in this report shows that the majority of children and young people continue to do well across most outcome areas. It also shows that disparities persist for many groups, in particular, Māori, Pasifika, rainbow and disabled children and young people. Under the Strategy, we've introduced a range of measures to address these long-term inequities in outcomes. These include education programmes to support the engagement and achievement of Māori, Pacific and disabled young people; whānau-centred early intervention support for whānau Māori;

tailored housing outcomes for Māori; and programmes to build financial capability and improve the home ownership rate of Pacific Peoples.

Work is also well underway on an All-of-Government Pacific Wellbeing Strategy, with a strong focus on Pacific children and young people's wellbeing and aspirations, and on New Zealand's first National Action Plan against Racism. Last year we announced the establishment of a new Ministry for Disabled People, to help drive the transformation of the disability system, in line with the Enabling Good Lives approach. We're also transforming the wider health system to make it more equitable, accessible, cohesive and peoplecentred.

Annual reporting is an opportunity to take stock of our achievements and recognise where we need greater focus and work.

Despite the profound impacts of COVID-19 on society and the economy, we've seen a downward trend in child poverty across all nine measures and tens of thousands fewer children living in poverty – the most significant drop in measured child poverty in decades. I continue to be proud of what we've achieved, but focussed on the work that remains.

Our plan to make New Zealand the best place in the world to be a child or young person is making a difference, but we know there is more to do to make that happen. The Strategy will continue to drive us to be bold, to be ambitious and to create meaningful change in the lives of kiwi kids.

Rt Hon Jacinda Ardern Minister for Child Poverty Reduction

INTRODUCTION AND CONTEXT

The Government launched the <u>Child and Youth</u> <u>Wellbeing Strategy</u> (the Strategy) in August 2019.

The vision

The Strategy has a bold vision that:

New Zealand, Aotearoa is the best place in the world for children and young people

The Strategy sets out a shared understanding of what children and young people need and want in order to be well, what Government has committed to do, and how others can help.

The wellbeing outcomes

The Strategy sets out six high-level and interconnected wellbeing outcomes for all children and young people.

The outcomes reflect what children and young people said was important to them and signpost the social, economic and environmental conditions needed for child and youth wellbeing. The six outcomes are:

- Children and young people are loved, safe and nurtured – this includes loving homes free from violence, having time with family and whānau and being safe and secure from harm and accidents.
- Children and young people have what they need - this includes income and resources, as well as other important aspects of material wellbeing such as access to nutritious food and quality housing.
- Children and young people are happy and healthy - this includes physical and mental health, spaces and opportunities to play and healthy environments.
- Children and young people are learning and developing – this includes education to build knowledge, skills and capabilities and encouragement to achieve their potential and navigate life's transitions.

- Children and young people are accepted, respected and connected - this includes feeling a sense of belonging, living free from racism and discrimination, having good relationships and being connected to identity.
- Children and young people are involved and empowered - this includes support to contribute, be listened to, care for others, make healthy choices and develop autonomy.

The guiding principles

Nine principles have been established to guide the development and ongoing implementation of the Strategy.

These principles reflect the values that are important to New Zealanders, and the requirements of the Children's Act 2014, New Zealand's constitutional arrangements, in particular Te Tiriti o Waitangi, and international commitments.

The principles are:

- Children and young people are taonga.
- Māori are tangata whenua and the Māori-Crown Relationship is foundational.
- Children and young people's rights need to be respected and upheld.
- All children and young people deserve to live a good life.
- Wellbeing needs holistic and comprehensive approaches.
- Children and young people's wellbeing is interwoven with family and whānau wellbeing.
- Change requires action by all of us.
- Actions must deliver better life outcomes.
- Early support is needed.

The child and youth wellbeing indicators

The Strategy sets out 36 indicators that help us measure progress towards achieving each of the six wellbeing outcomes for children and young people.

Data for 15 primary indicators is sourced from the Youth Health and Wellbeing Survey. Due to COVID-19 related impacts, this data was not available in time for this report. This data will be made publicly available in late 2022 and will be presented in the 2021/22 Annual Report.

The Programme of Action

The Programme of Action sets out the policies, initiatives, programmes and plans underway across government that contribute to the achievement of the Strategy's vision and outcomes.

The Programme of Action includes a broad range of activity at different levels and stages of implementation. Each action in the programme aligns with at least one wellbeing outcome and may contribute to others.

It is intended to be a living document that is updated as existing actions are completed and new actions are developed.

The latest Programme of Action can be found here: childyouthwellbeing.govt.nz/actions

Purpose of this report

The Children's Act 2014 requires an annual report on the progress of the Strategy's six outcomes. Reporting on the outcomes is essential to, over time, show the impact of the Strategy and government work on child and youth wellbeing.

This report covers the progress made during the year from July 2020 to June 2021. For details on the collection and presentation of data, please refer to the Notes on this Report on p53.

For the full Strategy and current programme of action, go to childyouthwellbeing.govt.nz



2020/21 year at a glance



66,500 children lifted out of poverty*



1,000

transitional housing places delivered, with a further 1,000 by November 2022



49,000

devices for students and more than 40,000 families connected to the internet



\$175

per week increase to family income for families on Government support **



8,350

additional public homes (over four years to June 2021)



193,000

students in 790 schools received free and healthy school lunches through Ka Ora, Ka Ako ***



18

new youth primary mental health and addiction services delivered across 15 DHB areas



192,000

people reached by the Hive Youth Voice climate engagement campaign



800

whānau engaged in early intervention support through Ngā Tini Whetū

^{*} After-housing costs primary measure, since 2017/18

^{**} Average across 109,000 families due to income support changes, since 2017/18

^{***} As at June 2021

CHILD AND YOUTH WELLBEING IN 2020/21

Overview – New Zealand's children and young people

As at 30 June 2021, there were an estimated 1.617m children and young people aged under 25 years resident in New Zealand, making up around 32% of the total population¹.

New Zealand's children and young people are ethnically and culturally diverse. Among children and young people aged under 25 years, 66% are European, 25% are Māori, 13% are Pasifika, 16% are Asian and 2% belong to other ethnic groups including Middle Eastern, Latin American and African*. 17% of children and young people under 25 were born overseas². 11% of children and young people identify as belonging to the disabled community³.

Overview — Child and youth wellbeing in 2020/21

Loved, safe and nurtured

Most children and young people felt their families were doing well. Some measures related to intentional injury are tracking downwards, but unintentional injury remains a leading cause of harm to children and young people.

In 2020/21:

 83% of young people aged 18-24 years rated their family as doing well⁴.

Have what they need

Most children and young people had a good standard of material wellbeing. Food insecurity has significantly decreased since 2019/20. Child poverty rates continue to trend downwards.

In 2020/21:

- 15% of children lived in households where food runs out sometimes or often, compared with 20% the previous year
- 86% of children lived in households experiencing good material wellbeing
- 11% of children experienced material hardship, down from 13.3% three years earlier
- 16% of children (aged 0-17 years) lived in low-income households (after housing costs)⁵, down from 23% three years earlier.

Happy and healthy

Most children and young people reported being in good health. Potentially avoidable illness has decreased over time, however mental distress among young people has sharply increased over the course of the pandemic. The burden of injury, preventable illness and mental distress is inequitably distributed.

In 2020/21:

- 92% of young people aged 15-24 years reported their health as good, very good or excellent⁶
- The New Zealand Health Survey reported 19% of young people aged 15–24 years experienced high or very high psychological distress compared to 11% the previous year (pre-pandemic). The increase in psychological distress has been particularly acute for rangatahi Māori, increasing from 14% in 2019/20 to 26% in 2020/217.

Learning and developing

Attendance at school and early childhood education has decreased in 2020/21 compared to the previous year but remains higher than in 2019⁸. This is considered part of an overall decreasing attendance trend that has been exacerbated by the COVID-19 pandemic. School

^{*} Statistics New Zealand and Census 2018 use total response ethnicity where people can identify with more than one ethnic group, so groups do not sum to 100%

students performed higher than the OECD average in maths, reading and science in 2018. Rates of youth participation in employment, education or training continue to be stable over time. In 2020/21:

- 97% of children participated in early learning before starting school¹⁰
- 83% of 18-year-old students attained the equivalent of NCEA Level 2 or above¹¹
- Around one third of young people participated in tertiary study¹².

Accepted, respected and connected

Most young people felt able to express their identity and had good social support.
Rangatahi Māori and Pacific young people were more likely to experience discrimination.

In 2020/21:

• 18% of young people aged 18-24 years reported experiencing discrimination in the past 12 months. Pacific and Māori young people were more likely to experience discrimination at 20% and 32% respectively ¹³.

Involved and empowered

Children and young people contributed positively to their communities with rates of civic participation increasing over time. Youth offending rates continued their long-term downward trend. Rates of hazardous drinking, smoking and cannabis use were of concern, particularly among young people aged under 18 years.

In 2020/21:

- 78% of young people aged 18-24 years voted in the 2020 general election, compared to 74% of people aged 25-34 years¹⁴
- Offending rates dropped by 10% across all young people aged 10-17 years, 15% among Māori young people aged 10-17 years and 41% among Pacific young people aged 10-17 years¹⁵

 27% of young people aged 15-24 years reported hazardous drinking, 6% reported smoking daily, 12% reported using ecigarettes daily and 8% used cannabis at least weekly¹⁶.

Disparities in outcomes persist

While a majority of children and young people are doing well, long-term disparities remain between population groups across many areas:

In 2020/21:

- Tamariki and rangatahi Māori were five times as likely to be chronically absent from school, and Pacific children and young people four times as likely to be chronically absent from school than Pākeha children and young people¹⁷
- Tamariki Māori were twice as likely to be hospitalised for potentially avoidable dental conditions than Pākehā children¹⁸
- Pacific children were three times as likely to experience food insecurity than non-Pacific households with children¹⁹
- Disabled young people were three times as likely to experience psychological distress than non-disabled young people²⁰
- Children aged 0-4 years were five times as likely to be hospitalised for potentially avoidable illness than those aged 5-24 years^{†21}
- Young people aged 18-24 years were twice as likely to experience a severe non-fatal injury compared to those aged 0-17 years²².

Disparities in outcomes for some population groups are created and maintained by our respective systems, for example through racism and discrimination. The differences in outcomes signal that some populations are underserved by our systems and more should be done to support equitable outcomes.

Government is leading a range of actions to support equitable outcomes for all children and young people.

[†] Age specific rate

Impacts of COVID-19 on child and youth wellbeing

In 2020/21, the COVID-19 pandemic continued to disrupt the lives and wellbeing of children and young people, their whānau and their communities. COVID-19 has had a profound impact on how young people are feeling about themselves, their future prospects and the world around them.

Despite this, children and young people have displayed great resilience in adapting to the new normal of living and learning in COVID-19 times.

Young people, and parents with children aged 0–14 years, fared similarly to adults without children in self–rated family wellbeing, rating their family wellbeing at around 8 out of 10²³. Around 80% of primary and secondary students surveyed agreed or strongly agreed that their bubble was doing well while they were learning at home²⁴. Research with students aged 10–11 years identified that 88% felt supported by their family in lockdowns, and nearly 80% said they had had a 'good time' with their family during lockdowns²⁵.

The COVID-19 pandemic has had a significant economic impact on children, young people and their families. Households with children experienced higher financial distress than households without children during lockdowns²⁶.

For some children and young people, the impacts of the COVID-19 pandemic on mental health are likely to be extensive and enduring. Although rates of psychological distress, depression and suicidality have been rising for the last 20 years ²⁷, the COVID-19 pandemic appears to have exacerbated psychological distress through both increased stressors and reduced access to formal and informal supports. Suspected suicide rates do not appear to have increased in 2020/2128, but rates of psychological distress have increased among young people aged 15-24 years 29. Half of rainbow young people aged 16-24 years reported difficulties accessing mental health care during the COVID-19 pandemic³⁰.

Young people who identified as rainbow, disabled, Māori, Pasifika, rural, or of refugee backgrounds struggled the most with access to

devices and internet connections necessary to enable remote learning³¹.

Many schools have raised concerns about the impacts that disruptions to face-to-face teaching, and the shift to remote learning, will have on the learning progress for children and young people. Short-term impacts appear relatively minor; a Ministry of Education study found learning progress in literacy and numeracy in 2020 was within the range of normal year-to-year fluctuation and found no evidence of a further decrease in equity during the pandemic over ethnicity or school decile.

With its shared understanding of what is important for child and youth wellbeing, the Child and Youth Wellbeing Strategy framework continues to provide a critical lens in Government's response to the COVID-19 pandemic. Continuing to invest in the social and economic determinants of health and wellbeing will have significant long-term benefits for our children, young people and their families, our economy, and our broader society, long after COVID-19 has passed.

To address the impact of the COVID-19 pandemic on children and young people, we have, or have committed to:

- provided 49,000 devices to schools for their students, and connected over 40,000 families to the internet during lockdowns to support distance and blended learning
- expanding Mana Ake a holistic mental health programme developed post the Christchurch earthquakes, which seeks to support primary and intermediate school children to be resilient, and experience positive mental health and continued engagement in learning. The programme is being expanded to five new DHB areas: Northland, Counties Manukau, Bay of Plenty, Lakes and West Coast
- developed <u>a pilot programme to support</u>
 <u>Pacific young people</u> to lead their own innovative initiatives to strengthen Pacific youth mental health and resilience

- <u>developed resilience-building and</u>
 <u>mindfulness resources</u> for use at home and in schools
- established the <u>Akonga Youth</u>
 <u>Development Community Fund</u> which
 supports iwi and community-based youth
 development providers to deliver
 programmes to support <u>Akonga</u> who have
 been adversely affected by the impact of
 COVID-19 pandemic to stay engaged in
 education
- delivered <u>Counsellors in Schools</u> initiative to provide counselling support for children and young people across primary, intermediate, area and secondary schools
- increased main benefits by \$20 per adult per week from 1 July 2021, with a further increase from 1 April 2022 including an additional \$15 per adult per week for families with children. This is on top of indexing main benefits to average wage growth for the first time in New Zealand's history.

Wellbeing of tamariki and rangatahi Māori

In 2020/21:

- One in five tamariki Māori lived in material hardship
- One in four rangatahi Māori experienced high levels of psychological distress
- One in three rangatahi Māori experienced discrimination
- Less than half of tamariki and rangatahi Māori attended school regularly.

Around 23% of children and young people in New Zealand identify as Māori. The median age of Māori in New Zealand is 24 years compared to a median age of 37 years for the total New Zealand population. Most Māori children and young people are affiliated with one iwi, but around 38% are affiliated with multiple iwi. Around 18% of Māori children and young people have an unknown iwi affiliation³². As at 1 July 2021, there were over 23,000 students enrolled in Māori medium education, representing 2.8% of the total school population³³.

Government has a responsibility to meet the needs of tamariki and rangatahi Māori as tangata whenua. The Strategy's principles reflect Māori interests, as tangata whenua, and recognise the Māori-Crown relationship is foundational.

Whānau wellbeing, connection to whenua, whakapapa, and status as tangata whenua are central to the wellbeing of rangatahi and tamariki.

Disparities in wellbeing for tamariki and rangatahi Māori compared to other ethnic groups exist throughout the child and youth wellbeing indicators. Many of these disparities reflect the long-term impacts of colonisation as well as racism, discrimination and intergenerational disadvantage.

Hapū wāhine are more likely to face barriers to accessing timely maternity care³⁴, tamariki and rangatahi Māori are twice as likely to be the subject of a report of concern to Oranga Tamariki³⁵, tamariki and rangatahi Māori aged 10–17 years are eight times more likely to appear in Youth Court³⁶ and rangatahi Māori

experience higher rates of psychological distress than other young people³⁷. Tamariki and rangatahi Māori are also more likely to face material deprivation and live in low-income households³⁸ and Māori children face lower food security than non-Māori children and young people³⁹.

However, wellbeing among tamariki and rangatahi Māori has improved in the following areas in the last year, outstripping gains across non-Māori populations.

Between 2019/20 and 2020/21:

- Self-reported good health among rangatahi has increased 6 percentage points, compared to an overall increase of 1 percentage point⁴⁰
- Suspected suicide decreased by 29% among rangatahi, compared to a 4% decrease overall⁴¹
- Smoking among rangatahi decreased by 9 percentage points, compared to an overall decrease of 4 percentage points⁴²
- Offending rates among tamariki and rangatahi decreased by 15%, compared to a 10% decrease overall⁴³.

Delivering on the Strategy means reducing the significant disparities between Māori and non-Māori across the domains of child and youth wellbeing. The Strategy will only be successfully implemented when outcomes for Māori children and young people are equitable.

Work underway to improve wellbeing for tamariki and rangatahi Māori includes:

- <u>Ngā Tini Whetū</u>: a whānau-centred early intervention prototype
- <u>Paihere te Muka Tāngata</u>: a Whānau Ora based initiative supporting Māori and their whānau engaged in the Corrections system
- Intensive (Whānau) Response: a new model of intensive intervention for those at risk of entering care, co-designed with communities, iwi and Māori partners
- Whai Kainga Whai Oranga: a commitment of \$730 million over four years to accelerate Māori-led housing solutions

• <u>Pae Aronui</u>: supporting rangatahi into employment, education or training.

Wellbeing of other population groups

Disparities in outcomes also persist for other population groups across many indicators, in particular: Pacific children and young people; those from other ethnic groups; those experiencing disability; and those who identify

with rainbow communities. The following section of this report presents further analysis of wellbeing outcomes for these groups and identifies government actions that seek to address their specific wellbeing needs.

Wellbeing of Pacific children and young people

In 2020/21:

- One in four Pacific children lived in material hardship
- One in four Pacific children experienced food insecurity
- One in four Pacific young people experienced high levels of psychological distress.

Pacific Peoples represent a culturally and linguistically diverse population made up of more than 16 ethnic groups, including Samoan, Cook Islands Māori, Tongan, Niuean, Tokelauan, Fijian, Kiribati, Tuvalu and other Pacific Peoples. Around 12.6% of children and young people aged 0–17 years in New Zealand identify as Pacific Peoples. The Pacific population has increasingly identified with multiple ethnicities with around one third of Pacific Peoples identifying with two or more ethnic groups since 2006. The Pacific peoples' population in New Zealand is very young, with a median age of 23 years compared with 37 years for the total New Zealand population⁴⁴.

Pacific children and young people see their cultural identity as a strength which gives them a sense of confidence and belonging⁴⁵. Compared to other ethnic groups, Pacific have lower postnatal smoking rates⁴⁶, and Pacific children and young people have significantly lower criminal offending rates⁴⁷.

However, Pacific children live in the most materially deprived households of all ethnic groups and are more likely to experience low and very low incomes⁴⁸. Lower food security and housing quality as well as poorer physical and mental wellbeing are likely consequences of this

Pacific families experienced the greatest lack of access to timely primary maternity care⁴⁹ and Pacific children aged 0–14 years had a significantly higher burden of potentially avoidable hospitalisations – at five times the rate for respiratory conditions and three times the rate for skin conditions than non–Pacific children⁵⁰. A quarter of Pacific young people aged 15–24 years reported experiencing high levels of psychological distress. Around 20% of Pacific children aged 0–14 years, and a third of Pacific people aged 15 and over experienced an unmet need for primary health care⁵¹.

The wellbeing of Pacific children and young people has improved in some areas in the last year. Pacific children experienced a 21% decrease in food insecurity⁵². Potentially avoidable hospitalisations among Pacific children aged 0–14 years decreased by 10%⁵³ and rates of hazardous drinking among Pacific youth aged 15–24 years decreased by 8 percentage points⁵⁴. Since baseline year (2017/18), 6,500 fewer Pacific children lived in poverty on the AHC50 fixed line measure⁵⁵. There was no corresponding decrease for European children – indicating that some of the pre–existing disparities are narrowing on this measure.

To improve wellbeing for Pacific children and young people, we are investing in:

- The Pacific Education Innovation Fund to respond to local wellbeing and curriculum needs of Pacific learners and families arising from and/or exacerbated by the COVID-19 pandemic
- The All-of-Government Pacific Wellbeing Strategy to lift Pacific wellbeing and aspirations in health, housing, education, business, employment, incomes, leadership, Pacific arts, sports, music, and STEAM career pathways
- The Pacific Education Support Fund
- The Pacific Language Strategy.

Wellbeing of children and young people of other ethnic groups

In 2020/21:

- One in five Asian young people said they had experienced discrimination in the past year
- Fewer than one percent of Asian parents reported smoking in their postnatal period
- One in twenty Asian and MELAA children lived in material hardship.

Aotearoa New Zealand's ethnic communities include migrants, refugees, long-term settlers and those born in New Zealand who identify their ethnicity as African, Asian, Continental European, Latin-American and Middle Eastern. Based on the 2018 Census, ethnic communities make up around a fifth of New Zealand's population, almost a million people. They are an incredibly diverse group, representing over 200 ethnicities, speaking over 170 languages and having 45 distinct religious affiliations⁵⁶.

Around 13% of children and young people identify with one or more Asian ethnicities (Chinese, Indian, Filipino, Korean, Japanese, Fijian Indian, Sri Lankan, Cambodian and 18 others), making it the third largest ethnic group in New Zealand.⁵⁷

Asian children and young people experience higher material wellbeing⁵⁸, lower material hardship⁵⁹, higher food security⁶⁰ and better housing quality⁶¹ compared to children of other ethnic groups. Asian young people have higher rates of school attendance⁶² achievement in PISA⁶³, NCEA attainment⁶⁴ and self-reported good health compared to Māori, Pacific and European peers.

The suspected suicide rate among Asian young people aged 15–24 years is lower than other ethnic groups. Although there appears to be an increase in the rate of Asian youth suicide in 2020/21, it is too soon to determine whether this represents an increase or an outlier. Mental health is a growing concern across all youth populations⁶⁵.

Around 18,000 children and young people identify with other ethnic groups including Middle Eastern, Latin-American and African (combined as MELAA for analytical purposes)⁶⁶

Regular school attendance was the highest among MELAA students compared to students of all other ethnic groups, at 66% compared to 61% overall, and appears to be less impacted by COVID-19 related attendance pressures experienced by other ethnic groups⁶⁷.

To improve wellbeing of children and young people of ethnic communities, we are investing in:

- Developing the National Action Plan against Racism
- The Challenging Racism toolkit for year 9 and 10 students
- Community Learning Hubs to support ethnic communities' engagement with the education system.

Wellbeing of children and young people experiencing disability

In 2020/21:

- Over half of disabled young people experienced high levels of psychological distress
- One in five disabled children lived in material hardship
- One in ten disabled children lived in a house with a major problem with dampness or mould.

Disability includes a wide range of physical and mental health issues (including sensorial, mobility, intellectual, developmental, behavioural, psychological and learning disability).

Estimates vary on the number of children and young people living with disability due to differing definitions of disability and survey methods. Statistics New Zealand household surveys report around 11% of children and young people aged 0–17 years are disabled and 30% are living in households with one or more disabled people⁶⁸. The Youth19 Survey reported 9% of students aged 12–18 years were disabled⁶⁹. Older data from the 2013 Disability Survey identified 12% of children aged 0–14 years as having one or more disabilities⁷⁰.

Disabled children aged 0–14 years were more likely to experience material hardship than non–disabled children in 2020/21 but were equally likely to live in a low–income household after housing costs⁷¹. Children in households with at least one disabled person were over three times as likely to experience material hardship than children in households with no disabled people⁷².

Disabled young people were significantly more likely to report experiencing psychological distress at 52% compared to 17% of non-disabled young people aged 15-24 years⁷³.

The intersection of disability and rainbow presents significant impacts on wellbeing. Research commissioned by the Ministry of Youth Development found that 22% of disabled rainbow respondents said they did not feel safe in their bubbles compared with 13% of rainbow respondents overall. 17% of disabled rainbow

respondents said they had been abused in their bubble compared with 9% of rainbow respondents overall ⁷⁴.

There is limited strengths-based data for disabled children and young people. This could be an area for future development, to understand the qualities, strengths and opportunities to support wellbeing among children and young people with disability, and to hear the voices of children and young people with disability. Good-quality data and information is needed to inform decision-making, for policy development and to understand whether the needs of disabled children and young people are being met. Work to redevelop the Disability Survey is underway⁷⁵.

To improve the wellbeing of children and young people experiencing disability, we are investing in:

- Piloting an <u>Employment Service in Schools</u> to support disabled young people to achieve their educational and employment goals
- Redeveloping the Disability Survey
- The <u>Highest Needs Learners</u> Review to ensure that children and young people with the highest needs for learning support achieve their full potential through positive education outcomes. It has a particular focus on children who currently receive individualised support, have an unmet need for individualised support, and are in settings that have inequitable access to these supports (this includes ākonga Māori and Māori medium settings).
- Over 600 Learning Support Coordinator (LSC) roles in schools and kura to support teachers and kaiako get access to the right learning support at the right time
- Te Rourou Whai Hua (Learning Support Toolkit), a collection of over 215 curated resources, including those related to disabled learners
- A digital kete of research-based diagnostic assessment tools for use by teachers with children on entry to school.

Wellbeing of rainbow children and young people

'Rainbow' is an inclusive term that refers to people and communities who do not identify as heterosexual or do not fit standard gender norms and includes who identify as lesbian, gay, bisexual, transgender, takatāpui and intersex (LGBTTQIA+) as well as Pasifika identities – mahu, vakasalewa, palopa, fa'afafine, akava'ine, fakaleiti (leiti), fakafifine⁷⁶. One in 20 adults in New Zealand identified as LGBT+ in the 2020/21 Household Economic Survey⁷⁷ and the rate among young people is expected to be higher.

The Youth Health and Wellbeing Survey is expected to provide a comprehensive picture of wellbeing for rainbow children and young people including physical, mental and family wellbeing, experience of safety, bullying and discrimination.

The COVID-19 pandemic appears to have been particularly challenging for Rainbow youth. Research commissioned by the Ministry of Youth Development among rainbow youth

found that 13% of rainbow young people surveyed did not feel safe in their bubbles and 9% had been abused in their bubble. 15% of all respondents, and 25% of respondents aged 16–18 years, said they had been bullied or harassed online during lockdowns⁷⁸. See the earlier section on disability for an analysis of the intersection of disability and rainbow during the COVID-19 pandemic.

Work underway to improve wellbeing of rainbow children and young people includes:

- Roll-out of curriculum and other resources in schools to <u>strengthen inclusion of</u> <u>LGBTIQA+ learners</u>
- \$4 million of funding targeted to rainbow mental wellbeing initiatives for young people, expanding InsideOUT Koaro school-based services and RainbowYOUTH peer-support services.

2020/21 TIMELINE OF ACTIVITIES

Te Kei o Te Waka launched in Tokoroa

Here Toitū launched – empowering those unable to work due to a health condition or disability, to improve wellbeing Pacific Education Support Fund Round 1 opened

Pacific Education Innovation Fund Round 1 opened

Expansion of DHB Maternity Quality and Safety Programmes Ka Ora, Ka Ako has served 3 million free and healthy school lunches in schools

Tiaki Whānau Enhanced WCTO Support Pilot Rotorua launched

July 2020

Aug 2020 **Sept 2020**

Oct 2020

Nov 2020 Dec 2020

Launch of Keep it Real Online ads for parents and caregivers

Inaugural Section 7AA annual report (Improving Outcomes for Tamariki Māori) delivered

Youth Plan 2020–2022: Turning Voice into Action – Rebuilding and Recovering released

Financial Support for caregivers increased by \$25pw, per child

Ngā Tini Whetū, a whānau-centred early support prototype, launched

Pacific Education Innovation Fund announced

Pacific Education Support Fund announced Te Hurihanganui launched in the first participating community (Te Puke).

Evaluation of Ngā Tini Whetū completed

Te Ara ō Hine support for Māori and Pacific midwives launched

> Pacific Education Innovation Fund Round 2 opened

Pacific Education Support Fund Round 2 opened Mental health and addiction services for young people expanded across the Northland, Waitematā, and Auckland District Health Board areas

Hear Me See Me campaign launched

Jan	Feb	March	April	May	June
2021	2021	2021	2021	2021	2021

Employment Service in Schools pilot launched

Health Active Learning Programme introduced to more than 300 schools

Oranga Tamariki Ministerial Advisory Board established Pregnancy and Parenting Programme supporting whānau with addiction expanded

Mana Ake expanded

Paiheretia te Muka Tāngata pilot launched

Rautaki Whakamana Whāngote: National Breastfeeding Strategy released

Abatement threshold increased for major benefits

Minimum wage increased to \$20 ph

New three-year child poverty targets announced

All schools and kura are able to opt-in to Ikura | Manaakitia te whare tangata, period products in schools initiative.



What this means

This outcome means that children and young people:

- feel loved and supported
- have family, whānau and homes that are loving, safe and nurturing
- are safe from unintentional harm
- are safe from intentional harm (including neglect, and emotional, physical and sexual abuse)
- spend quality time with their parents, family and whānau.

Why this is important

All children and young people deserve to live in stable, loving homes free from violence, have quality time with their family and whānau and be safe and secure from harm and accidents. A stable and quality home environment with love and trust influences a child and young person's wellbeing, learning and development, and their ability to form attachments to others. Lasting and nurturing relationships are critical to many other aspects of wellbeing and the building of resilience and social skills.

This outcome focuses on supporting families and whānau to provide safe, loving and nurturing homes, and preventing children and young people from experiencing abuse or neglect or being exposed to family or sexual violence.

Parents, families and whānau need quality time and the right headspace to develop strong connections with their children. Some children and young people live in families and whānau with toxic stress and complex needs, such as the combined impacts of long-term unemployment, low income, unaddressed physical and mental health needs, parental alcohol and drug addiction, and family violence.

We want to ensure parents have the support, and help they need to reduce their stress burden, so they can be the best parent they can be.

How it will be measured

We have selected six indicators to measure progress in this outcome. These include subjective wellbeing indicators, which draw on children and young people's experiences:

- Feeling loved
- Family and whānau wellbeing
- Quality time with parents
- Harm against children
- Feeling safe
- Serious injuries

"REALLY JUST PEOPLE WHO
REALLY BELIEVE IN YOU IS
THE MOST ESSENTIAL THING
TO HAVING A GOOD LIFE.
AND PEOPLE WHO SUPPORT
YOU NO MATTER WHAT."

Key actions and progress in 2020/21

This section summarises progress in the year ending June 2021 on key actions under the Strategy for the outcome 'Children and young people are loved, safe and nurtured'. More details on actions under this outcome are available on our website: https://childyouthwellbeing.govt.nz/actions/actions-outcome-loved-safe-nurtured

National Strategy and Action Plan to prevent and eliminate family violence and sexual violence	Engagement on the National Strategy and Action Plan was undertaken between May and July 2021, reaching over 2000 people through 120 tangata whenua and community hui and engagement with sector experts. Almost 1000 submissions were also received. Further action since July 2021: 'Te Aorerekura – the National Strategy and Action Plan to eliminate family violence and sexual violence' – was officially launched in December 2021. The Action Plan sets out 40 actions for the next two years, including 27 actions that link with the CYWS. The first annual Te Aorerekura hui is planned for June 2022.
Enhanced Well Child Tamariki Ora (WCTO) pilots (nurse-led family partnership model)	Two of the three pilot sites are now operational (Lakes DHB and Counties Manakau DHB), providing enhanced support for parents and whānau with additional support needs, until a child is 2 years old. There were delays with the Tairāwhiti pilot site, due to workforce and COVID-19 related issues. Next steps: Launch of the Tairāwhiti pilot site in April 2022.
Oranga Tamariki Action Plan (OTAP)	Work continued on the future direction of Oranga Tamariki and the wider children's system, alongside the development of the OTAP which outlines the cross-agency approach to improve the wellbeing of core populations of interest to Oranga Tamariki. Further action since July 2021: Oranga Tamariki released an overview of its future direction in Sept 2021, which helped inform the draft OTAP, developed in collaboration with other
	agencies. This will be finalised and published by mid-2022.
Intensive (Whānau) Response – new model of intensive	Intensive Response community and iwi-led models of care went 'live' in eight locations, with design work with communities, iwi and Māori partners continuing in an additional seven locations.
intervention for those at risk of entering care	Next steps: Support across all 15 Intensive Response locations will be strengthened and expanded. Centrally enabled aspects of the kaupapa will be shifted to the regions where practical.
Creating a safe online and digital environment for children and young	The final phase of <i>Keep It Real Online</i> is now completed, with the release of <i>The Inter-Yeti</i> - an online interactive storybook aimed at children aged 5-11 years, to help them safely navigate the online world.
	Further action since July 2021: An external survey highlighted the successful impact of the Keep It Real Online awareness campaign, with around 90% of participants reporting it prompted a conversation around online/digital safety.
Ngā Tini Whetū - early support for families and whānau	This whānau-centred early intervention prototype is now providing additional support to around 800 whānau. Kaupapa Māori reporting frameworks have been developed to track whānau progress each quarter, and an initial evaluation has been completed.
	Next steps: Workforce development is an ongoing focus, and the first governance hui will be held in 2022. A final evaluation is due mid-2022.

Wellbeing in 2020/21: Indicators

Indicator	Measure	2019/20	2020/21	Change
Feeling loved	Percentage of children and young people (aged 12-18 years) who feel they are loved by the people who look after or care for them			
r cenng loved	Māori			
	Pacific	_	Not yet	-
	Percentage of children and young people (aged 12-18 years) rating their families as doing well		available	
	Māori			
Family and	Pacific			
whānau wellbeing	Percentage of young people (aged 18-24 years) who rate their family as doing well (7-10 in a scale of 0-10)	83%	82%	V
	Māori	77%	79%	↑
	Pacific	83%	88%	1
Quality time with parents	Percentage of children and young people (aged 12-18 years) who feel they get to spend enough time with the people who look after or care for them Māori	-	Not yet available	-
	Pacific			
	Number of children and young people (aged 0-17 years) with notifications to Oranga Tamariki who were referred for further assessment or investigation	34,673	35,081	↑
	Māori (includes Māori and Māori-Pacific)	18,479	18,435	V
	Pacific (includes Pacific and Māori-Pacific)	5,363	5,486	↑
Harm against children	Percentage of children and young people (aged 12-18 years) who have been hit or physically hurt in the last 12 months, or have seen others in the home being hit or physically hurt by adults in the places where they usually live Māori		Not yet available	
	Pacific	=-		-
	Percentage of children and young people (aged 12-18 years) who agree they feel safe at home			
Feeling safe	Māori			
	Pacific			
Serious injuries	Number of serious injuries (non-fatal) per 100,000 children and young people (aged 0-24 years) (2019, 2020)	123	113	V
	Māori	165	164	V
	Number of deaths of children and young people (aged 0-24 years) (2018, 2019)	724	774	1
	Māori	246	266	↑
	Pacific	81	110	1

^{*} Identifies annual change is statistically significant

Loved, safe and nurtured

In 2020/21, most children and young people said they had good whānau wellbeing. Some measures related to intentional injury are tracking downwards, but unintentional injury remains a leading cause of harm to children and young people.



82%

of young people reported good family wellbeing



V44%

decrease in parents using physical punishment



440%

decrease in babies entering care and protection custody



329

injury related deaths among under 25s

Feeling loved

Youth Health and Wellbeing Survey data for this indicator is not yet available. The Youth19 survey reported that 77% of students had someone in their family they trusted to share feelings with and 87% had someone in their family who they had a close bond with⁷⁹.

Family and whānau wellbeing

Family wellbeing rated by young people aged 18–24 years remained stable at around 82% in 2020/21. Family wellbeing as rated by Māori young people was lower at 79%, an increase of two percentage points from 2019/20. Family wellbeing among Pacific young people aged 18–24 years was higher at 88%, an increase from 83% in 2019/20.

Quality time with parents

Youth Health and Wellbeing Survey data for this indicator is not yet available. The Youth19 survey reported that 72% of students agreed they got enough quality time with family80.

Harm against children

Youth Health and Wellbeing Survey data for this indicator is not yet available. The 2020/21 New Zealand Health Survey reported that 2.5% of children had experienced physical punishment in the last 4 weeks, a statistically significant decrease from 4.5% in 2019/20⁸¹.

In 2020/21, 35,081 children and young people aged 0–17 years were referred for further assessment, of a total of 77,948 notifications to Oranga Tamariki. The number of children and young people referred for further assessment increased slightly between 2019/20 and 2020/21, however the total number of notifications to Oranga Tamariki decreased from 80,928 in 2019/20, continuing a downward trend since a peak of 92,250 in 2017/18. Over half of children and young people referred for further assessment were tamariki and rangatahi Māori (18,434).

In 2020/21 there were 1095 entries to care, and a total of 5239 children and young people were

under the care of Oranga Tamariki. Entries to care have more than halved since 2017/18, with the greatest decrease in entries among tamariki and rangatahi Māori (57% decrease from 1533 in 2017/18 to 655 in 2020/21), and among babies 0–12 months (71% decrease from 455 in 2017/18 to 131 in 2020/21, including a 40% decrease since 2019/20 alone)⁸².

Feeling safe

Youth Health and Wellbeing Survey data for this indicator is not yet available. The Youth19 survey reported that 87% of students felt safe at school and 59% felt safe in their community⁸³.

Serious injuries

In 2020 there were 1,851 serious non-fatal injuries among children and young people; a rate of 113 injuries per 100,000 children and young people aged 0-24 years†. Serious injury rates were statistically significantly higher among tamariki and rangatahi Māori (164 per 100,000 in 2020). Serious non-fatal injuries appear to have decreased slightly, from 123 per 100,000 in 2019, however this change is not statistically significant. Serious injury is significantly more prevalent in older age groups. This is particularly evident for rangatahi Māori, with serious injury rates 2.5 times higher among Māori aged 18-24 years than Māori aged 0-17 years in 2020.

In 2019, 774 deaths were reported for children and young people aged 0-24 years. This is an increase on 2018 where 724 deaths were reported. Provisional data by cause shows that 329 deaths among children and young people aged 0-24 years (43%) were from injury or other external causes in 2019. Data by type of injury death is not yet available for 2019, but of all injury or other external causes of death in 2018, 109 were transport related injuries and 155 were intentional injuries (assault or self-harm)⁸⁴.

[‡] Age standardised rate per 100,000 person years at risk



What this means

This outcome means that children and young people:

- have a good standard of material wellbeing
- have regular access to nutritious food
- live in stable housing that is affordable, warm and dry
- have parents/caregivers with the skills and support they need to access quality employment.

Why this is important

All children and young people deserve to grow up in families and whānau that have the resources they need to thrive. Many families lack the resources to meet their basic material needs and are excluded from a minimum acceptable standard of living. This outcome aligns closely with the Government's focus on reducing child poverty.

The experience of poverty can involve various forms of hardship, such as going hungry, living in cold, damp houses, and foregoing opportunities that many take for granted, like birthday parties or joining a sports team.

Evidence shows that the experience of poverty in childhood, especially when that experience is severe and/or persistent, can have negative lifelong impacts. Children and young people may be more likely, on average, to experience poorer educational outcomes, poorer health, and have more difficulty finding work in adulthood. The harmful effects also impact on society as a whole.

This outcome focuses on reducing child poverty by improving the material wellbeing of households in poverty and hardship. This focus has the potential to help break the cycle of disadvantage and intergenerational poverty and improve many other wellbeing outcomes.

How it will be measured

We have selected five indicators to measure progress in this outcome.

- Material wellbeing
- Child poverty
- Food insecurity (CPRI)
- Housing quality (CPRI)
- Housing affordability (CPRI)

Several of these indicators are either official measures of child poverty in the Child Poverty Reduction Act 2018 or have been formally identified and gazetted as Child Poverty Related Indicators (CPRIs) under the Act. For more detailed analysis of the CPRIs, refer to the 2022 CPRI report.

"A GOOD LIFE TO ME IS HAVING THE SAME OPPORTUNITIES AS EVERYONE ELSE."

Wellbeing in 2020/21: Key actions and progress

This section summarises progress in the year ending June 2021 on key actions under the Strategy for the outcome 'Children and young people have what they need'. More details on actions under this outcome are available on our website: https://childyouthwellbeing.govt.nz/actions/actions-outcome-have-what-they-need

Overhaul of the welfare system	The multi-year work programme to overhaul the welfare system was adjusted to prioritise the Government's immediate response to COVID-19. The renewed work programme, which Cabinet endorsed in September 2021, focuses on areas of major transformational change, including a specific focus on initiatives that will continue to improve the overall wellbeing of children and vulnerable families.
	Abatement thresholds were further increased from 1 April 2021 for main benefits, increasing the amount beneficiaries can earn before their benefit reduces.
	Further action from July 2021: Government implemented the removal of the subsequent child policy from the Social Security Act 2018 in November 2021.
	Increases to rates of main benefits were announced through Budget 21, to be implemented in two stages. Rates of main benefits were increased by \$20 per adult per week on 1 July 2021. On 1 April 2022 rates of main benefits will be further increased to the levels recommended by the Welfare Expert Advisory Group (WEAG), with an additional \$15 per adult per week for families with children. The total increases to main benefit rates from the Budget 21 package are between \$39.74 and \$62.35 per adult per week. This change means benefits will have increased for three consecutive years, in additional to annual indexation.
	A key focus for 2022 will be to progress the work on the foundational settings of the welfare system with a strong focus on improving outcomes for Māori.
Working for Families Review	The need to satisfy the In-Work Tax Credit hours test was removed as of 1 July 2020, enabling families to receive the payment even if their hours are highly variable or have significantly reduced. Another change to the In-Work Tax Credit, in response to COVID-19, allows a family currently receiving the in-work tax credit to continue receiving the payments for up to two weeks when taking an unpaid break from work. This took effect from 1 April 2021. Next steps: Increasing the Family Tax Credit and Best Start payment, lifting the incomes of 346,000 families by an average of \$20 a week from April 2022.
Ka Ora, Ka Ako Healthy School Lunches Programme	The roll-out of the Ka Ora, Ka Ako programme continued. There was a redistribution process during the COVID-19 lockdowns to support other efforts to reduce food insecurity. At the end of June 2021, 790 schools and kura with approx. 193,000 students were receiving a daily healthy lunch. Further action from July 2021: An independent evaluation of the expanded programme will be undertaken in 2022. As at March 2022, 45 million lunches had been served and 921 schools and 211,000 learners were receiving free and healthy school lunches daily.
Homelessness Action Plan	Significant progress has been made in implementing the 18 immediate actions in the action plan, including: achieving the action plan target of delivering 1,000 transitional housing places; rolling out further supported accommodation places to young people leaving Oranga Tamariki care; and funding two specific initiatives to support rangatahi/young people through the Local Innovation and Partnership Fund. Further action from July 2021: deliver 2000 new transitional housing places through the Public Housing Plan by June 2022, 1,000 of which were completed in November 2021.
Minimum wage increase	The minimum wage was increased to \$20 per hour in April 2021 (up a third from the 2017 rate of \$15.75). Next steps: A further lift of the minimum wage rate will take effect in April 2022, increasing to \$21.20.
Free period products in schools	Started the phased roll-out of the free period products in schools initiative. As at the end of 2021, 1,986 schools and kura had opted into the initiative. Since June 2021, 1,476 orders for products have been placed and delivered to schools and kura.

Wellbeing in 2020/21: Indicators

Indicator	Measure	2019/20	2020/21	Change
Material	Percentage of children (aged 0-17 years) living in households experiencing good material wellbeing	85%	86%	↑
wellbeing	Māori	75%	75%	\rightarrow
	Pacific	63%	71%	↑
	Percentage of children (aged 0-17 years) living in households with less than 50 percent median equivalised disposable household income before housing costs (BHC)	13.2%	13.6%	↑
	Māori	15.8%	18.1%	↑
	Pacific	18.8%	17.2%	\downarrow
Child poverty	Percentage of children (aged 0-17 years) living in households with less than 50 percent median equivalised disposable household income after housing costs (AHC)	17.8%	16.3%	\
	Māori	19.7%	17.8%	→
	Pacific	20.5%	16.3%	\
	Percentage of children (aged 0-17 years) living in households experiencing material hardship	11.5%	11.0%	\
	Māori	19.7%	20.2%	↑
	Pacific	26.5%	24.0%	→
Food	Percentage of children (aged 0-14 years). living in households where food runs out sometimes or often	20%	15%	↓ *
insecurity	Māori	30%	26%	\downarrow
	Pacific	45%	37%	→
Housing quality	Percentage of children (aged 0-17 years) living in households with a major problem with dampness or mould	7%	6%	\
	Māori	11%	10%	\downarrow
	Pacific	17%	12%	\
Housing affordability	Percentage of households with children and young people living in (aged 0-17 years) spending more than 30 percent of their disposable income on housing	37%	34%	\
	Māori	32%	29%	→
	Pacific	35%	27%	\

^{*} Identifies annual change is statistically significant

Progress since the baseline year (2017/18) on primary measures in the Child Poverty Reduction Act 2018.

Measures	Rate (%)				Change in rate
	Year ended June 2018	Year ended June 2019	Year ended June 2020	Year ended June 2021	Year ended June 2018– 2021
Before-housing- cost primary measure (moving line)	16.5 (183,400 children)	13.5 (153,200 children)	13.2 (151,200 children)	13.6 (156,700 children)	-2.9 (-26,700)
After-housing-cost primary measure (fixed line)	22.8 (253,800 children)	18.3 (207,700 children)	17.8 (203,300 children)	16.3 (187,300 children)	-6.5 (-66,500)
Material hardship primary measure	13.3 (147,600 children)	13.2 (149,400 children)	11.5 (131,700 children)	11.0 (125,700 children)	-2.3 (-21,900)

Have what they need

In 2020/21, most children and young people had a good standard of material wellbeing. Food insecurity has significantly decreased, and child poverty rates continue to trend downwards.



86%

of children experienced good material wellbeing



16,000

fewer children lived in poverty (AHC50 fixed)



↓ 26%

decrease in food insecurity for children



11,000

fewer children in damp or mouldy homes

Material Wellbeing

Good material wellbeing means household income meets every-day needs and families can afford essentials. It means children and young people are able to participate in activities and families live without significant financial strain. In 2020/21, 86% of children aged 0-17 years lived in households experiencing good material wellbeing, a slight increase from 85% in 2019/2085. Tamariki and rangatahi Māori were less likely to live in a household with good material wellbeing at 75%. This remained unchanged from 2019/20. Pacific children and young people were also less likely to live in a household with good material wellbeing at 71%, however material wellbeing among children in Pacific households increased from 63% of Pacific children in 2019/20.

Child Poverty

This report uses the primary measures of child poverty in the Child Poverty Reduction Act 2018, which have targets set against a baseline of 2017/18.

In 2020/21, compared to the baseline year 13.6% of children aged 0-17 years (156,700) lived in households with less than 50% of the median equivalised disposable household income before deducting housing costs (BHC). This was a decrease over three years from 16.5% (183,400) in the year ended June 2018. A higher proportion of Māori and Pacific children live in low-income BHC households at 18.1% and 17.2% respectively.

In 2020/21, compared to the baseline year 16.3% of children aged 0-17 years (187,300) lived in households with after-housing-costs equivalised disposable income that was less than 50% of the median after-housing-costs income in the baseline year (AHC fixed cost).

This was down from 22.8% of children (253,800) three years earlier. A higher proportion of Māori children live in low-income AHC fixed cost households at 17.8%.

In 2020/21, compared to the baseline year 11% of children aged 0–17 years (125,700) lived in households experiencing material hardship, defined as households going without six or more of the 17 basic needs most people would regard as essentials. This was down from 13.3% from 2017/18. Māori and Pacific children experienced higher rates of material hardship at 20.2% and 24% respectively.

Statistics New Zealand report that all nine primary child poverty measures have been trending downwards since the baseline year and two out of three of the intermediate child poverty reduction targets were met in 2020/21⁸⁶.

Food insecurity

In 2020/21, 15% of children aged 0–14 years lived in households that reported that food ran out sometimes or often, a statistically significant decrease from 20% in 2019/20. Severe food insecurity also decreased between 2019/20 and 2020/21 – from 4% of children living in households reporting that food runs out often to 3%. Food insecurity is more prevalent amongst Māori children (2.5 times the rate for non–Māori), Pacific children (3.2 times the rate for non–Pacific), and children in areas of high socioeconomic deprivation (6 times the rate for lowest socioeconomic deprivation).

The proportion of children aged 0-14 years in households reporting they often or sometimes eat less because of a lack of money also fell, from 18% in 2019/20 to 14% in 2020/21.

In 2020/21, 12% of children aged 0-14 years lived in households reporting using foodbanks and food grants because of a lack of money, compared to 11% in the previous year. In 2020/21, 22% of Māori children and 33% of Pacific children lived in households that used foodbanks and food grants⁸⁷.

Please see the Child Poverty Related Indicators Report 2022 for further analysis of this indicator.

Housing quality

In 2020/21, 6% of all children aged 0-17 years lived in homes with a major problem with dampness or mould. The rate for Pacific children living in homes with a major problem with dampness or mould was twice that at 12%. 10% of tamariki Māori and 10% of disabled children lived in homes with a major problem with dampness or mould. Housing quality issues are strongly related to tenure. In 2020/21, children living in rented homes were five times more likely to have a home with a major problem with dampness or mould than children in owner-occupied homes (11% compared to 2% respectively).

Please see the Child Poverty Related Indicators Report 2022 for further analysis of this indicator.

Housing affordability

In 2020/21, 34% of all children aged 0-17 lived in households spending more than 30 percent of their disposable income on housing. Rates for tamariki Māori and Pacific children were slightly lower at 29% and 27% respectively.

Please see the Child Poverty Related Indicators Report 2022 for further analysis of this indicator.



What this means

This outcome means that children and young people:

- have the best possible health, starting before birth
- build self-esteem and resilience
- have good mental wellbeing and recover from trauma
- have spaces and opportunities to play and express themselves creatively
- live in healthy, sustainable environments.

Why this is important

All children and young people deserve to realise their best possible physical and mental health, have spaces and opportunities to play and grow up in healthy environments. The key to happy and healthy young people is strong, healthy connections to people who love and nurture them. Good parental mental health is important during and after pregnancy, so parents can establish deep and loving connections with their baby.

Children and young people also need time and spaces just to be themselves, to play, explore and create. Good physical and mental health support other aspects of wellbeing, such as the ability to participate in activities, benefit from learning, have positive social interactions and develop resilience.

The focus in this outcome is to improve infant and child health outcomes, early years experiences, and child and youth mental wellbeing.

How it will be measured

We have selected five indicators to measure progress in this outcome. These include subjective wellbeing indicators which draw on young people's experiences:

- Prenatal wellbeing
- Subjective health status
- Potentially avoidable hospitalisations (CPRI)
- Mental wellbeing
- Self-harm and suicide

"HAVING A GOOD LIFE FOR ME MEANS TO BE HAPPY AND HEALTHY BOTH MENTALLY AND PHYSICALLY."

Wellbeing in 2020/21: Key actions and progress

This section summarises progress in the year ending June 2021 on key actions under the Strategy for the outcome 'Children and young people are happy and healthy'. More details on actions under this outcome are available on our website: https://childyouthwellbeing.govt.nz/actions/actions-outcome-happy-and-healthy

Maternity Action Plan	A refocus of the Maternity Action Plan was approved in 2021, with planning completed for the tangata whenua – tangata Tiriti partnership model for the early years' governance rōpū. A co-owned model was developed, and the Ministry of Health has partnered with The Southern Initiative on initial codesign work. Next steps: Engagement will be undertaken, with a particular focus on Māori and Pacific communities and an early years' taskforce will be established.
Review of the Well-Child Tamariki Ora programme	Work is underway to design a Tamariki Ora network, stabilise IT infrastructure and collate data on costs and workforce to support the redesign. Next steps: Timeframes for this have been pushed out by 2-3 months due to the priority of the COVID-19 response in the community.
Oral health care for children and young people	A service delivery model was finalised to supply and distribute toothbrushes and fluoride toothpaste. Further action from July 2021: A 'baby teeth matter' social marketing campaign ran from June to August 2021, followed by an initial roll-out by 25 Well Child Tamariki Ora (WCTO) providers in December 2021. Further WCTO providers, including Māori and Pacific providers, will be engaged to deliver the initiative, and additional collateral and social marketing will be developed
Healthy active learning	A Physical Activity workforce of over 100 Advisors and Community Connectors have been employed to support schools and kura and local communities with healthy eating and quality physical activity. A suite of Health and Physical Education curriculum resources, including Māori medium resources have also been developed. Next steps: This initiative is expanding from 8 to 14 regions, reaching 800 schools and kura. Refreshed Health and Physical Education Online website, including additional resources will be launched.
Extend nurses in schools (School-based Health Services)	A Youth Advisory Group has been established to ensure that the work is informed by young people. A formative evaluation was undertaken, and the Ministry of Health has developed the work programme based on recommendations from Te Tatau Kitenga – the National Youth Health Leadership Group. Next steps: Completion of the School-based Health Service Workforce development plan.
Counsellors in Schools	From the beginning of 2021, 210 large secondary schools received new funding to employ guidance counselling staff for an additional two days per week. Next steps: The Counsellors in Schools programme will deliver counselling support to 141 primary, intermediate, area and small secondary schools throughout Aotearoa.
Expand access and choice of primary mental health and addiction support.	As of 30 June 2021, there were 18 youth primary mental health and addiction services in 15 DHB areas, including a national youth-specific telehealth/ webchat service. As of 30 June 2021, there were also: integrated primary mental health and addiction services in 237 GP sites; contracts in place for 12 kaupapa Māori services and 9 Pacific services. Work is also underway to expand mental wellbeing supports for tertiary students. Next steps: Co-design of Mana Ake programme in five further DHB areas. Youth primary mental health and addiction services available in remaining DHB areas, and in all universities, Te Pūkenga subsidiaries and wānanga.

Wellbeing in 2020/21: Indicators

Indicator	Measure	2019/20	2020/21	Change
	Percentage of people registered with an LMC, among all people giving birth (2019, 2020)	93%	94%	↑
	Māori	92%	92%	\rightarrow
	Pacific	85%	87%	1
Prenatal	Percentage of people registering with an LMC in their first trimester of pregnancy, among all people registered with LMCs (2019, 2020)	73%	74%	↑
wellbeing	Māori	60%	61%	↑
	Pacific	45%	47%	1
	Percentage of people giving birth who were smoking two weeks after the birth of their child (2019, 2020)	8%	9%	↑
	Māori	23%	23%	\rightarrow
	Pacific	6%	6%	\rightarrow
	Percentage of young people (aged 12-18 years) reporting their health as good, very good, or excellent		Not yet	
	Māori	-	available	_
Cold of the late	Pacific			
Subjective health status	Percentage of children and young people (aged 15-24 years) reporting their health as good, very good, or excellent	91%	92%	个
	Māori	85%	91%	1
	Pacific	85%	85%	\rightarrow
Potentially	Rate of potentially avoidable hospitalisations per 1000 children aged 0-14 years	49	49	\rightarrow
avoidable	Māori	57	54	\
hospitalisations	Pacific	73	65	\
	Percentage of children and young people (aged 15-24 years) who experienced high or very high levels of psychological distress at some stage over a four-week period	11%	19%	^ *
	Māori	14%	26%	^ *
	Pacific	9%	24%	1
Mental wellbeing	Percentage of children and young people (aged 12-18 years) that in the last 30 days felt nervous, hopeless, restless or fidgety and or so depressed that nothing could cheer you up Māori Pacific	_	Not yet	
Self-harm and suicide	Percentage of children and young people (aged 12-18 years) who deliberately hurt themselves or tried to kill themselves in the last 12 months Māori Pacific		available	
	Number of suicides per 100,000 children and young people (aged 15-24 years)	18	17	\
	Māori	28	22	V
	1	1	1	

^{*} Identifies annual change is statistically significant

Happy and healthy

In 2020/21, most children and young people reported being in good health. Potentially avoidable illness has decreased over time, however mental distress among young people has increased. The burden of injury, preventable disease and mental distress is inequitably distributed.



94%

of whānau received communitybased maternity care



92%

of 15-24 year-olds self-reported being in good health



J 10%

decrease in potentially avoidable hospital events for Pacific children



19%

of 15-24 year olds experienced high or very high mental distress

Prenatal health

Community-based continuity of primary midwifery care is regarded as the international gold standard model of maternity care⁸⁸. Access to Lead Maternity Carers increased slightly in 2020 to 94% of all people giving birth. Access for whānau Māori was slightly below this at 92% in 2020. Access for Pacific was lower, with 87% accessing Lead Maternity Carers in 2020, although this has increased from 85% in 2019.

First trimester access to maternity care is associated with better health outcomes ⁸⁹. In 2020, 73% of pregnant whānau accessed maternity care through a Lead Maternity Carer in their first trimester of pregnancy, the same rate as 2019/20. First trimester registration for whānau Māori was considerably lower at 60% in 2020, and access for Pacific was lower again at 45%. These significant disparities highlight barriers to timely access to maternity care for some communities.

Tobacco exposure during pregnancy is a risk factor for adverse pregnancy and foetal outcomes and increases the risk of infant mortality and morbidity 90. Reported tobacco use at two weeks following birth in 2020 was not significantly different to 2019 (0.2 ppt change). Tobacco use in the postnatal period has decreased markedly over the last decade (from 14% in 2010). Tobacco use among whānau Māori was still significantly higher than non-Māori, however this, too, has decreased over the last decade (from 34% in 2010).

Subjective health status

In 2020/21, 92% of young people aged 15-24 years rated their health as good, very good or excellent. This is similar to 2019/20 at 91%. 91% of rangatahi Māori rated their health as good, very good or excellent in 2020/21. Among Pacific young people, 85% rated their health as good, very good or excellent.

Potentially avoidable hospitalisations

Overall, there has been no change in the agestandardised rate of potentially avoidable hospitalisations since 2019/20 at 49 per 1000 children aged 0-14 years. The notable drop in potentially avoidable hospitalisations seen in 2019/20, and widely attributed to the impact of COVID-19 lockdowns, has persisted. There has been a steep downward trend in potentially avoidable hospitalisations over the last five years.

There is a disparity in the rate of potentially avoidable hospitalisations among tamariki Māori (54 per 1000) and Pacific children (65 per 1000), compared to children of other ethnic groups (45 per 1000). However, this appears to be reducing.

In 2020/21, around half of potentially avoidable hospitalisations among children aged 0-14 years were due to injury, and there were over 5,000 potentially avoidable hospital admissions for dental conditions among children and young people under 25.

Please see the Child Poverty Related Indicators Report 2022 for further analysis of this indicator.

Mental wellbeing

In 2020/21, one in five young people aged 15–24 years experienced high or very high levels of psychological distress at some stage over a four-week period. This is a statistically significant increase from one in ten in 2019/20 (from 11% to 19%). Rates of psychological distress among rangatahi Māori and Pacific

young people have also increased (26% and 24% respectively). This continues a concerning trend of sharply increasing rates of youth psychological distress over the last decade in New Zealand and overseas.

Self-harm and suicide

Youth Health and Wellbeing Survey data for this indicator is not yet available. The Youth19 survey found 6% of all students, 13% of Māori students and 12% of Pacific students had attempted suicide in the last 12 months⁹¹.

In 2020/21 there were 110 deaths from suspected suicide among young people aged 15-24 years and a further 13 deaths from suspected suicide among children aged 0-14 years. Each and every death is a tragic loss§.

The suicide rate in 2020/21 was 17 per 100,000 young people aged 15-24 years, a slight decrease from 18 per 100,000 in 2019/20. Suicide rates are higher among rangatahi Māori at 22 per 100,000, though this has decreased from 28 per 100,000 in 2019/20 and 43 per 100,000 in 2018/19. The decrease in suicide rates among rangatahi Māori between 2018/19 and 2020/21 is statistically significant. Suicide rates for Pacific young people are similar to the total population at 17 per 100,000. The suicide rate among Asian young people appears to have increased between 2019/20 and 2020/21, although this is based on very small numbers and is not statistically significant.

[§] The information included here places an emphasis on data, and as such, can appear to depersonalise the pain and loss behind the statistics. We acknowledge the individuals, families and communities affected by suicide each year in



What this means

This outcome means that children and young people:

- are positively engaged with, progressing and achieving in education
- develop the social, emotional and communication skills they need as they progress through life
- have the knowledge, skills and encouragement to achieve their potential and enable choices around further education, volunteering, employment, and entrepreneurship
- can successfully navigate life's transitions.

Why this is important

Learning opportunities and experiences develop children's social, cultural, emotional and cognitive competencies, including resilience, critical thinking and the ability to relate well to others.

While learning and development begins at home, quality education has an important role in supporting the development of knowledge, competencies and characteristics to be successful in life and to contribute to family, whānau, and communities.

The focus of this outcome is to improve access and equity in education and ensure no one misses out. An immediate priority is children and young people who need extra support in the education system.

How it will be measured

We have selected six indicators to measure progress in this outcome:

- Participation in early learning
- Regular school attendance (CPRI)
- Literacy, numeracy and science skills
- Social-emotional skills
- Self-management skills
- Youth participation in employment, education and training.

"I FEEL LIKE THE BEST LIFE
FOR YOUNG PEOPLE IS TO
HAVE THE OPPORTUNITY TO
DO WHAT YOU LOVE AND
TO FOLLOW THE THINGS
THAT INSPIRE YOU AND
INTEREST YOU."

Wellbeing in 2020/21: Key actions and progress

This section summarises progress in the year ending June 2021 on key actions under the Strategy for the outcome 'Children and young people are learning and developing'. More details on actions under this outcome are available on our website: https://childyouthwellbeing.govt.nz/actions/actions-outcome-learning-and-developing

Support for young children to improve their self-regulation, resilience and social skills

Funding was secured and providers were confirmed to test the scale-up of self-regulation programmes, to embed social and emotional skills in various regions, urban/rural communities and types of early learning services and develop a practice framework focused on social and emotional learning for children aged 0-6 years.

Next steps: Three pilot programmes to support Social and Emotional Learning in young children are on track to reach 6,000 tamariki by 30 June 2022.

Development and trialling of Kōwhiti Whakapae practice and progress tools is underway to support formative assessment and teaching practice within the early childhood curriculum framework, Te Whāriki. In 2020/21 the draft framework and the first tool in the suite of tools, social and emotional learning (SEL), was completed and trialled with 40 early learning services (ELS).

Next steps: A PLD supported trial and evaluation of the framework and SEL tool, with approximately 100 ELS, starts November 2021 and is due for completion in June 2022. A draft of the second tool in the series, oral language and literacy, will also be completed by June 2022 ready for trialling with the sector later in the year.

Development of a *School Entry Kete*, which includes a tool for New Entrant teachers to notice, recognise and respond with next learning steps to the self-regulation and empathic capability of mokopuna entering school, is currently underway.

National Certificate of Educational Achievement (NCEA) change package

The NCEA Change Programme is strengthening NCEA for students by improving wellbeing, equity, coherence, student pathways and credibility:

- Resubmission and course endorsement rules were changed to reduce excess assessment workload and recognise coherent learning from students.
- The new NCEA Level 1 subjects were confirmed to reflect a broad, foundational qualification that provides the key skills, knowledge and competencies needed to support a wide range of pathways.
- Te Ao Haka, Literacy and Numeracy standards, and English Science, Visual Arts and Religious Studies (at NCEA Level 1) were developed and piloted in schools and kura.
- Development of all remaining Level 1 subjects was begun, designed to be inclusive and recognise the most important learning within each subject.

Next steps: Development of all Level 1 subjects was completed in 2021 then minipiloted in schools and kura in 2022. Level 2 development will begin in 2022. A wider pilot of the new Literacy and Numeracy standards will also be completed ahead of full implementation from 2023.

Improve learning support: Learning Support Action Plan

Over 600 Learning Support Coordinator (LSC) roles were employed in schools and kura to support teachers and kaiako.

Initiatives to support young children across universal (early learning servicewide), targeted and individualised support were piloted and evaluated.

Approaches to raise awareness of learning support within ngā kōhanga reo were co-designed and delivered with Te Kōhanga Reo National Trust and a

model of learning support for kōhanga reo through a unique te ao Māori perspective that aligns with Te Whāriki a te kōhanga reo was developed. Training modules were developed on inclusive design for educators, whānau and specialists in English medium settings, inclusive design approaches for Māori medium pathways within the context of refreshing Te Marautanga o Aotearoa. Funding from the Covid-19 Response and Recovery Fund was used to deliver targeted support for at-risk children and young people. Two Attendance Service (AS) trials in Kawerau and South Auckland were piloted in 2020 to test new co-designed ways of working to support children and young people's attendance in two different communities. Next steps: complete the Highest Needs review, progress the redesign of the Attendance Service, and implement a strategy to address attendance and engagement. Enabling distance learning 49,000 devices were provided to schools for their students, and more than 40,000 families were connected to the internet during lockdowns to support distance and blended learning. Next steps: Explore options for increasing collaborative learning opportunities including expanding the roles of Te Kura, the Virtual Learning Networks and other blended education organisations. Build the foundations for blended education, including reviewing legislative settings, and continuing the development of necessary infrastructure. Programmes for young people Pae Aronui is aimed at improving education, training and employment not in Education, Employment outcomes for rangatahi Māori that are not in education, employment or or Training (NEET) training (NEET) or are at risk of becoming NEET (at key transition points). In Year 2 of the programme (to 30 June 2021) more than 270 rangatahi were engaged. Next Steps: Eight providers have been contracted to work with 240 rangatahi in the third and final year and evaluation is underway to be finalised mid-2022. Taiohi Ararau – Passport to Life is an innovative programme that supports rangatahi Māori who are not receiving a benefit and not in employment, education or training. Through the programme, taiohi and their whānau work with community leaders to get essential documents. Providers developed a relational approach focused on supporting taiohi to realise their aspirations,

within the context of their whanau.

Next steps: Taiohi Ararau is ongoing, and 6 providers are currently contracting working with more than 60 rangatahi in Te Tai Tokerau towards their goals.

Wellbeing in 2020/21: Indicators

Indicator	Measure	2019/20	2020/21	Change
	Percentage of 3-year-old children attending early childhood education for 10 or more hours a week on average (2020, 2021)	74%	68%	\
	Māori	62%	57%	\
Participation in	Pacific	67%	57%	\
early learning	Percentage of 4-year-old children attending early childhood education for 10 or more hours a week on average (2020, 2021)	84%	76%	\
	Māori	68%	62%	\downarrow
	Pacific	74%	65%	\
Regular school	Percentage of children and young people aged 6-16 years who are regularly attending school (2020, 2021)	65%	61%	\
attendance	Māori	48%	45%	\downarrow
	Pacific	51%	47%	V
	Percentage of 15-year-old students meeting the level 2 benchmark for reading (2015, 2018)	83%	81%	\
	Māori	70%	70%	\rightarrow
	Pacific	66%	64%	\
Literacy, numeracy, and	Percentage of 15-year-old students meeting the level 2 benchmark for maths (2015, 2018)	78%	78%	\rightarrow
science skills	Māori	63%	63%	\rightarrow
	Pacific	58%	56%	\downarrow
	Percentage of 15-year-old students meeting the level 2 benchmark for science (2015, 2018)	83%	82%	\
	Māori	70%	70%	\rightarrow
	Pacific	62%	60%	\downarrow
Social- emotional skills	Based on aggregated survey data that measures compassion, respectfulness and trust Māori			
	Pacific		Not yet	
Self- management	Based on aggregated survey data that measures organisation, productiveness and responsibility		available	_
skills	Māori	_		
	Pacific			
Youth participation in	Percentage of young people aged 15 to 24 years who are participating in employment, education, or training	88%	88%	\rightarrow
employment, education, or	Māori	81%	81%	\rightarrow
training	Pacific	83%	81%	V

^{*} Identifies annual change is statistically significant

Learning and developing

In 2020/21, participation in early learning and school continued to be impacted by the COVID-19 pandemic. School students performed higher than the OECD average in maths, reading and science. Rates of youth participation in employment, education or training continue to be stable over time. Educational achievement is inequitably distributed.



76%

of 4 yearold children participated in early learning services



61%

of students regularly attended school



80%

of 15 year-old students met reading, maths and science benchmarks



88%

of young people were in employment education or training

Participation in early learning

Early learning participation is associated with short- and long-term positive outcomes, especially for vulnerable children 92. The percentage of children aged 3 and 4 years attending early childhood education (ECE) for 10 hours or more a week on average (participation intensity) has decreased since 2020; with the impact of the COVID-19 pandemic being the predominant reason.

Participation intensity for Māori and Pacific children decreased considerably, mostly because of the pandemic. Māori and Pacific children are also more likely to be affected by the additional COVID-19 lockdowns that occurred in Auckland.

However, the overall number of children participating in early learning before starting school (prior participation) has steadily

increased over time, reaching a high of 97% in 2021. Māori and Pacific children have experienced the largest increase in participation in early learning over time. Prior participation for Māori children increased from 91% in 2011 to 94% in 2021; prior participation for Pacific children increased from 86% in 2011 to 93% in 2021.

Regular school attendance

In 2020/21**, 61% of students aged 6-16 years attended school 90% or more of the time (regular attendance). Regular attendance differs across school decile from 43% for Decile 1 to 73% in Decile 10. Māori students have lower regular attendance (45%) and much higher chronic absence (15%) than European students (75% regular attendance, 3% chronic absence) or Asian students (65% regular attendance, 5% chronic absence). Pacific

^{**}Measured in Term 2, 2021

students have similar attendance patterns to Māori students (47% regular attendance, 13% chronic absence). Highest rates of attendance by age are among children aged 8-10 years, with 67% attending regularly. This drops with age to 50% of 16-year-olds attending regularly.

Please see the Child Poverty Related Indicators Report 2022 for further analysis of this indicator.

Literacy, numeracy and science skills

Students in New Zealand score above the OECD average in reading, maths and science, though disparities exist. In 2018, 82% of students aged 15–16 years met the PISA^{††} level 2 benchmark in science, 81% in reading and 78% in maths. Māori and Pacific students scored lower than average across all measures, while Asian students scored higher than average.

In 2020, 80% of school leavers attained a Level 2 qualification or above, including 44% who attained University Entrance, the highest rate in a decade. In 2020, 84% of school leavers had stayed at school to the age of 17 years or above. Retention in education was similar for Pacific students at 85% but significantly lower among rangatahi Māori, 71% of whom stayed at school until age 17 years or above 93.

In 2020, 72% of Year 11 students achieved NCEA Level 1, 80% of Year 12 students achieved Level 2, and 72% of Year 13 students achieved Level 3. NCEA attainment has increased over time across all year levels and ethnic groups, although the largest gains have been among Māori and Pacific students 94.

Social-emotional skills

Youth Health and Wellbeing Survey data for this indicator is not yet available.

Self-management skills

Youth Health and Wellbeing Survey data for this indicator is not yet available.

Youth participation in employment, education and training

Early education, training and employment experiences have long-lasting effects on future earning, employment opportunities and life satisfaction⁹⁵. In 2020/21, 88% of young people aged 15-24 years were in employment, education, or training.

Youth participation in employment, education, or training was statistically significantly lower among rangatahi Māori and Pacific young people at 81% for both, compared to other ethnic groups.

Youth participation is higher among younger age groups. In 2020/21, 91% of young people aged 15–19 years were in employment, education, or training compared to 85% of young people aged 20–24 years. There have been no statistically significant changes in the rates of youth participation, within each ethnic group or age band over the last five years.

[&]quot;The Programme for International Student Assessment (PISA) assesses 15-year-old students in over 70 countries on how well their education system has prepared them to meet real-life opportunities and challenges after they finish



What this means

This outcome means that children and young people:

- feel manaakitanga: kindness, respect and care for others
- feel accepted, respected and valued at home, school, in the community and
- live free from racism and discrimination
- live free from bullying
- have stable and healthy relationships
- are connected to their culture, beliefs and identity, including whakapapa and tūrangawaewae
- are connected to their languages.

Why this is important

Children and young people in New Zealand want to live in a country where culture and diversity is not just accepted, but embraced and celebrated in all environments.

They need safe spaces and time to explore and establish their identities. It's important that they're accepted for who they are without having to fit into narrow and limiting norms. A strong and positive sense of identity builds higher self-esteem and resilience – knowing your heritage helps you understand your identity, connections to others and sense of place, land and time.

The focus in this outcome is to build cultural competency into the design and delivery of services and to promote a society where all children and young people feel accepted and included.

How it will be measured

We have selected seven indicators to measure progress in this outcome. Several of these are subjective wellbeing indicators, and draw on children and young people's experiences:

- Ability to be themselves
- Sense of belonging
- Experience of discrimination
- Experience of bullying
- Social support
- Support for cultural identity
- Languages

"TO BE ACCEPTED. TO BE UNDERSTOOD AND TAKEN SERIOUSLY. IT'S IMPORTANT BECAUSE IT GIVES YOU CONFIDENCE IN YOUR UNIQUENESS."

Wellbeing in 2020/21: Key actions and progress

This section summarises progress in the year ending June 2021 on key actions under the Strategy for the outcome 'Children and young people are accepted, respected and connected'. More details on actions under this outcome are available on our website:

 $\underline{https://childyouthwellbeing.govt.nz/actions-outcome-be-accepted-respected-and-connected}$

Work programme to support	The rollout of a range of products and resources for schools continued,
social cohesion	including: a new resource on the Bullying-Free NZ website to help schools select appropriate bullying prevention resources and programmes; a trial of new survey items on resilience and fairness/racism for Wellbeing@School school climate survey toolkit as well as targeted PLD; support for InsideOUT to develop and release new resources to increase safety and inclusion for LGBTQIA+ learners; and work with the Office of the Children's Commissioner to release the Our Kind of School report highlighting effective school and kura practice in creating safe inclusive environments that deter bullying. Next steps: Bullying-Free NZ Week in May 2022, support InsideOUT development of
	workbook for educators to help them identify and prevent rainbow-focused bullying, establish plan for refresh of Bullying-Free NZ website, undertake engagement for refresh of BFNZ Week awareness raising initiative, develop plan for refresh of PB4L School-Wide which will consider how this approach can support bullying-prevention and response.
Work programme to address racism and discrimination	Work is underway to give practical effect and support in key areas specified by recommendation 36 from the Royal Commission of Inquiry report on the terrorist attack on the Christchurch Masjidain, including: an ongoing pilot of the Challenging Racism toolkit for year 9 and 10 students; social and emotional learning programmes in ECE settings; the rollout of Community Learning Hubs to support ethnic communities' engagement with the education system; and the inclusion of "cultural capability" as a new priority for professional learning and development for teachers and Kaiako. Work is also underway to progress the development of the National Action Plan against Racism.
Te Hurihanganui	Te Hurihanganui is a community-led approach to test how to address racism and inequity across the education system. It is working alongside six communities to test what works in practice to inform how to make changes across the education system.
	In 2020/21 this was implemented with five communities and a sixth community in early 2022. During 2020/21 communities have been progressing through the first phase (Te Pō) which focuses on building relationships and trust, and deepening their understanding of Aotearoa New Zealand histories, colonisation and its effects, Te Ao Māori views of education, and language and revitalisation movements.
Implementation of Section 7AA of the Oranga Tamariki Act 1989	Nine strategic partnership agreements have been signed, and money has been invested to deliver a Whānau as First Navigators programme, which aims to reduce the number of Māori tamariki and rangatahi entering the Oranga Tamariki system and improve outcomes for tamariki and whānau in the Ngāi Tahu takiwā (tribal area).
	Actions since July 2021: The strategic partnership agreement with Te Rūnanga o Ngãi Tahū was refreshed in October 2021. Oranga Tamariki published its second Section 7AA report in March 2022.
Changes to teaching Aotearoa New Zealand histories and Te Takanga o Te Wā in schools and kura	In early 2021 public engagement and feedback on the draft curriculum content for Te Takanga o Te Wā and Aotearoa New Zealand's histories was sought. Te Tāhuhu o te Mātauranga is working with education, history, Māori and community experts to ensure kaiako and leaders have the necessary resources and supports to help them deliver the new Aotearoa New Zealand's histories and Te Takanga o Te Wā curriculum content.
	Next steps: Due to COVID-19, the new content will now be taught in all schools and kura from Term 1 2023 (schools and kura that are ready to begin in 2022 are able

	to do so). Schools and kura will be supported with a variety of resources throughout 2022 to prepare for the 2023 implementation.
Maihi Karauna	The Maihi Karauna is the Crown's Strategy for Māori Language Revitalisation 2019 – 2023. An updated implementation plan was developed and agreed by Te Papa Kōrero and the review of Te Ture mō te Reo Māori 2016 (Māori Language Act 2016) commenced.
	Next steps: 2021 Māori Karauna indicators monitoring report to be published in early 2022. Completion of the Maihi Karauna and Te Whare o te Reo Mauri Ora formative evaluation due to be completed this year. Completion of Te Ture mō Te Reo Māori review.

Wellbeing in 2020/21: Indicators

Indicator	Measure	2019/20	2020/21	Change
Ability to be	Percentage of children and young people (aged 12-18 years) who agree that it is easy for them to express their identity			
themselves	Māori			
	Pacific			
Sense of	Percentage of children and young people (aged 12-18 years) who feel a sense of belonging to Aotearoa/New Zealand as a whole			
belonging	Māori			
	Pacific			
Experience of	Percentage of children and young people (aged 12-18 years) who report experiencing discrimination in the last 12 months		Not yet available	
discrimination	Māori			
	Pacific			-
Experience of	Percentage of children and young people (aged 12-18 years) who experienced bullying in the last 12 months	_		
bullying	Māori			
	Pacific			
Social support	Percentage of children and young people (aged 12-18 years) who say they have an adult they could turn to if they were going through a difficult time and needed help			
Social support	Māori			
	Pacific			
Support for	Percentage of children and young people (aged 12-18 years) who have someone they can ask about their culture, whakapapa or ethnic group			
cultural identity	Māori			
	Pacific	=		
Languages	Percentage of children and young people (aged 12-18 years) who in everyday conversation speak a second and/or third language			
	Māori			
	Pacific			

Wellbeing in 2020/21: Insights

Accepted, respected and connected

In 2020/21^{††}, most young people said they felt a sense of belonging to New Zealand Aotearoa, felt able to express their identity and had family they could rely on. Māori and Pacific young people were more likely to experience discrimination.



83% of 15-24

year-olds felt they could express their identity



63%

of 12-18 year-olds felt a sense of belonging



18%

of 18-24 year-olds experienced discrimination



18%

of 0-14 year-olds spoke two or more languages

Ability to be themselves

Youth Health and Wellbeing Survey data for this indicator is not yet available. A comparable question in the most recent General Social Survey reported that in 2018, 83% of young people aged 15–24 years found it easy or very easy to express their identity 96.

Sense of belonging

Youth Health and Wellbeing Survey data for this indicator is not yet available. A comparable question in the Youth19 survey reported that 63% of secondary school age students felt like they belong in Aotearoa New Zealand⁹⁷.

Experience of discrimination

Youth Health and Wellbeing Survey data for this indicator is not yet available. The Wellbeing Supplement to the Household Labour Force Survey reported that in the March 2021 quarter, 18% of young people aged 18-24 years had experienced discrimination in the past 12 months 98. Rangatahi Māori were more likely to experience discrimination at 32%.

Experience of bullying

Youth Health and Wellbeing Survey data for this indicator is not yet available. The Youth19 survey reported that 6% of students experienced very regular bullying (weekly or more)99. Bullying was most commonly based on body size (25%), ethnicity (12%) and gender diversity (7%).

Social support

Youth Health and Wellbeing Survey data for this indicator is not yet available. The Youth19 survey reported that 76% of students had someone in their family they could talk to about things that are worrying them¹⁰⁰.

Support for cultural identity

Youth Health and Wellbeing Survey data for this indicator is not yet available.

Languages

Youth Health and Wellbeing Survey data for this indicator is not yet available. The 2018 Census showed that 18% of children aged 0-14 years spoke two or more languages.

In 2018, Te Kupenga showed that 17% of rangatahi Māori aged 15-24 years learned te reo Māori as a first language and still understand it.



What this means:

This outcome means that children and young people:

- contribute positively at home, at school and in their communities
- exercise kaitiakitanga: care of the land and connection to nature
- have their voices, perspectives, and opinions listened to and taken into account
- are supported to exercise increasing autonomy as they age, and to be responsible citizens
- are supported to make healthy choices around relationships, sexual health, alcohol, tobacco and other drugs.

Why this is important

Children and young people are experts in their own lives and need to be heard on matters that affect them; they deserve good, accessible information to help them make informed choices about their lives.

Youth driven enterprises, initiatives and campaigns are common and show young people's motivation and ability to galvanise their peers and influence change. Young people need opportunities and information to exercise kaitiakitanga now and for the future.

The focus in this outcome is to ensure children and young people are listened to and taken seriously when decisions are made that affect them, including at school, in State care and in decision–making more broadly.

How it will be measured

We have selected four indicators to measure progress in this outcome:

- Involvement in community
- Representation of young people's voices
- Making positive choices
- Criminal offending.

"WE NEED TO BE INCLUDED
IN CONVERSATIONS WITH
ADULTS INSTEAD OF BEING
TOLD WE'RE TOO YOUNG."

Wellbeing in 2020/21: Key actions and progress

This section summarises progress in the year ending June 2021 on key actions under the Strategy for the outcome 'Children and young people are involved and empowered. More details on actions under this outcome are available on our website: https://childyouthwellbeing.govt.nz/actions/actions-outcome-involved-and-empowered

Youth Plan 2020-2022: Turning Voice into Action – Rebuilding and Recovering (the Youth	The Youth Plan was launched in July 2020, and progress across all 16 actions has been made — with all either completed or on track for delivery by June 2022. A crossagency working group meet regularly to share good practice and intel on issues relating to young people.
Plan)	Further work since July 2021: A measurement framework has been developed, which provides a baseline for population level youth data and assesses how government is changing the way it works for and with young people.
Youth Voice Project	The Hive, one of the Youth Voice initiatives, has been working to increase young people's participation in the policy development process. The Hivers (a group of young people involved in the project) have worked with government agencies to engage with young people on the Biodiversity Strategy, climate change, emissions reduction plan, and housing. Their climate engagement campaign reached 192,000 people.
Kau Tulī Innovators of Influence Advisory Group	Kau Tulī, the Ministry for Pacific Peoples youth advisory group, have provided advice on the All-of-Government Pacific Wellbeing Strategy and the Pacific Language Strategy, and have supported COVID communications and engagements targeted towards Pacific young people. Further work since July 2021: An evaluation on Kau Tulī is underway.

Wellbeing in 2020/21: Indicators

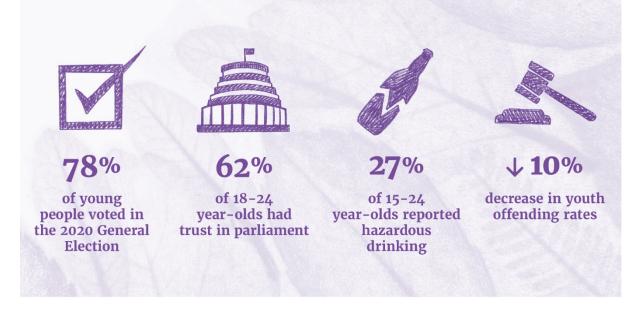
Indicator	Measure	2019/20	2020/21	Change
Involvement in	Percentage of children and young people (aged 12-18 years) who report helping others in the neighbourhood or community	_	Not yet	_
community	Māori		available	
	Pacific			
	Percentage of young people enrolled and voting in the New Zealand General Election (2017, 2020)	69%	78%	↑
Representation	Māori	62%	70%	↑
of young people's voices	Trust held in parliament (aged 18-24)	66%	62%	\
people's voices	Māori	53%	52%	4
	Pacific	60%	64%	1
	Percentage of young people aged 15-24 years who are hazardous drinkers	27%	27%	\rightarrow
	Māori	36%	40%	↑
	Pacific	36%	28%	\
	Percentage of young people aged 15-24 years who smoke daily	10%	6%	\ *
Making positive	Māori	22%	13%	V
choices	Percentage of young people aged 15-24 years who use e- cigarettes daily	4%	12%	^ *
	Māori	-	15%	_
	Percentage of young people aged 15-24 years who have used cannabis in the last 12 months	27%	30%	↑
	Māori	36%	43%	↑
	Pacific	-	27%	_
Criminal	Offending rates per 10,000 young people aged 10-17 years	179	162	4
offending	Māori	329	285	\
	Pacific	103	73	V

^{*} Identifies annual change is statistically significant

Involved and empowered

In 2020/21, the majority of young people had trust in parliament and youth offending rates continue their long-term downward trend.

Rates of hazardous drinking, smoking and cannabis use are of concern, particularly among young people aged under 18 years.



Involvement in community

Youth Health and Wellbeing Survey data for this indicator is not yet available. A comparable question in the Youth19 survey reported that 47% of students gave their time to help others in school or the community¹⁰¹.

Representation of young people's voices

In the 2020 General Election 78% of young people aged 18–24 years enrolled and voted. Among young people aged 18–24 years of Māori descent, 70% enrolled and voted in 2020. Youth voter turnout has increased over time with 69% of young people voting in the 2017 General Election and 63% of voting in the 2014 General Election.

Institutional trust decreased in 2020/21 with 62% of young people aged 18-24 years agreeing or strongly agreeing they had trust in parliament, compared to 66% in 2019/20. Rangatahi Māori were less likely to report trust in parliament (52%), a similar level to 2019/20.

Pacific young people were more likely to report trust in parliament (64%), an increase of four percentage points from 2019/20.

Making positive choices

In 2020/21, 27% of young people aged 15–24 years reported hazardous levels of alcohol consumption in the past 12 months. This is the same rate as 2019/20. Hazardous drinking was more prevalent among rangatahi Māori in 2020/21 at 40%, an increase from 36% in 2019/20. Hazardous drinking among Pacific young people appears to have decreased from 36% in 2019/20 to 28% in 2020/21, however this change is not statistically significant.

In 2020/21, 23% of young people aged 18–24 years reported binge drinking at least weekly and 41% at least monthly. Among young people aged 15–17 years, 59% reported drinking alcohol in the past year, 10% were hazardous drinkers and 9% reported binge drinking in the past month 102.

Reported daily cigarette smoking appears to have decreased markedly among both Māori and non-Māori, with a total smoking rate of 6% among young people aged 15-24 years, a fall from 10% in 2019/20. Among rangatahi Māori, 13% of young people aged 15-24 years reported smoking. Daily e-cigarette use (vaping) among young people increased between 2019/20 and 2020/21, from 4% to 12% (14% among rangatahi Māori)^{‡‡}. In 2020/21, 58% of young people aged 18-24 years and 32% aged 15-17 years had ever tried e-cigarettes.

In 2020/21, 30% of all young people aged 15–24 years, 43% of rangatahi Māori and 27% of Pacific young people reported using cannabis in the last 12 months, with 8% of all young people aged 15–24 years reporting using cannabis at least weekly. Among young people aged 15–17 years, 11% had used cannabis in the last 12 months.

Criminal offending

Youth offending rates among children and young people aged 10-17 years have decreased across all population groups since 2019/20, continuing a long-term trend of reduction.

There was a 10% decrease overall, a 15% decrease among tamariki and rangatahi Māori and a 40% decrease among Pacific children and young people in rates of criminal offending compared to 2019/20.

Large differences still exist between Māori and European/Other children and young people for many Youth Justice measures. In 2020/21, the offending rate for rangatahi Māori was four times higher than European/Other young people and the Youth Court appearance rate for Māori young people was 8.5 times higher than that for European/Other young people aged 14-17 years. Tamariki and rangatahi Māori were almost twice as likely to be remanded in custody compared to European/Other children and young people aged 10-17 years.

Many children and young people who offended have had negative childhood experiences. In 2020/21, 96% of children aged 10–13 years and 89% of young people aged 14–17 years who were referred for Youth Justice Family Group Conferences had previously been the subject of a report of concern to Oranga Tamariki about their care and protection¹⁰³.

substance use data is self-reported and based on small numbers, so should be interpreted with caution.

[#] New Zealand Health Survey data does not distinguish between nicotine and non–nicotine vaping products. Conclusions as to the likely transfer or cross over of cigarette use and vaping cannot be made with the data available. All

Notes on this report

This report presents wellbeing data collated from 16 collections across seven government agencies for the 2020/21 financial year. During this period, all of New Zealand spent a total of seven weeks at COVID-19 Alert Level 2 and Auckland spent a further four weeks at COVID-19 Alert Level 3. This has impacted several surveys that contribute data to this report, either reducing sample sizes due to reduced field time, or delaying delivery dates thus impacting on the data available or the depth of analysis available for this report.

The Youth Health and Wellbeing Survey (YHWS) is the first of its kind, and due to COVID-19 impacts has experienced significant delays in its delivery. Results for this survey are currently being finalised and confirmed, so are not provided in this report. Comparable data from earlier similar surveys is provided where available.

Where there is no data available for the 2020/21 financial year, the most recently available data has been used. This is indicated in brackets alongside each measure throughout the data tables. For ease of reading, where there is no year indicated in brackets, data is for the 2019/20 and 2020/21 financial years.

Where available, data is disaggregated for populations of interest. Data for total New Zealand, tamariki and rangatahi Māori and Pacific children and young people is presented in the body of the report, and all demographic breakdowns (as available) are included in Appendix one of this report. Data sources for each measure are also identified in Appendix one and as such are not referenced within the outcome area analysis. Additional data sources and technical notes are listed in Appendix Two - Endnotes.

For all indicators except those presenting official child poverty statistics, this report covers the 2020/21 financial year, with comparison to the first year of reporting in 2019/20 (where data is available). For Official Child Poverty Statistics which are also Child and Youth Wellbeing Strategy Indicators, comparison to the baseline year (2017/18) is provided. In-depth analysis of the Official Child Poverty Statistics for 2020/21 is published by Statistics New Zealand.

Arrows are used throughout the tables to indicate direction of annual change but may not indicate statistically significant change. Statistical significance testing of annual change is not available for all indicators. Where this is available and a statistically significant threshold (p<0.05) has been reached, this is noted in the table and in the report. Indicators that do not have information on statistical significance may still demonstrate meaningful annual or longer-term change.

Please use caution when interpreting differences in indicators among population subgroups. Numbers of respondents or events can be very small and as such carry wide margins of error.

Information on the development of the indicators and measures is available on the Child and Youth Wellbeing website: https://childyouthwellbeing.govt.nz/development-indicators

Appendix one: Indicator, measure and source tables

	Children and young people are loved, safe and	d nurtured		
Indicator	Measure	2019/20	2020/21	Source
	Percentage of all children and young people (aged 12-18 years) who feel they are loved by the people who look after or care for them			
Feeling loved	Māori			
	Pacific			
	Asian			
	Disabled			Youth
	Rainbow	_	Not yet	Health and Wellbeing
	Percentage of children and young people (aged 12-18 years) rating their families as doing well		available	Survey (MSD)
	Māori			
	Pacific			
	Asian			
Family and whānau	Disabled			
wellbeing	Rainbow			
O	Percentage of young people (aged 18-24 years) who rate their family as doing well (7-10 in a scale of 0-10)	83%	82%	Household Labour
	Māori	77%	79%	Force Survey
	Pacific	83%	88%	
	Parents with a dependent child	88%	87%	(StatsNZ)
	Percentage of children and young people (aged 12-18 years) who feel they get to spend enough time with the people who look after or care for them	-	Not yet available	Youth Health and Wellbeing Survey (MSD)
01:	Māori			
Quality time with parents	Pacific			
1	Asian			
	Disabled			
	Rainbow			
	Number of children and young people with notifications to Oranga Tamariki who were referred for further assessment or investigation (aged 0-17 years)	34,673	35,081	Oranga
	Māori	18,479	18,435	Tamariki
	Pacific	5,363	5,486	
Harm against children	Percentage of children and young people (aged 12-18 years) that in the last 12 months have been hit or physically hurt, or they have seen others in the home being hit or physically hurt by adults in the places where they usually live),3v3	3,4	
	Māori			37
Feeling safe	Pacific		NT - 1	Youth Health and
	Asian	_ Not yet available	,	Wellbeing
	Disabled		a.anabic	Survey (MSD)
	Rainbow			(11101)
	Percentage of children and young people (aged 12-18 years) who agree they feel safe at home			
	Māori			
	Pacific			

	Asian			
	Disabled			
	Rainbow			
	Number of serious injuries (non-fatal) per 100,000 children and young people (aged 0-24 years)	123	113	Stats NZ
	Māori	165	164	
Serious injuries	Number of deaths of children and young people (aged 0-24 years)	724	774	75
injuries	Māori	246	266	Mortality Collection
	Pacific	81	110	(MOH)
	Asian	72	72	

	Children and young people have what they need				
Indicator	Measure	2019/20	2020/21	Source	
	Percentage of children (aged 0-17 years) living in households experiencing good material wellbeing	85%	86%		
	Māori	75%	75%		
	Pacific	63%	71%	Household	
Material	Asian	93%	94%	Economic	
wellbeing	MELAA	85%	88%	Survey (Stats NZ)	
	Low income	66%	70%	(Stats 112)	
	Disabled children	75%	76%		
	Households with at least one disabled person	74%	75%		
	Percentage of children (aged 0-17 years) living in households with less than 50 percent median equivalised disposable household income before housing costs (BHC)	13.2%	13.6%		
	Māori	15.8%	18.1%	Official	
	Pacific	18.8%	17.2%		
	Asian	15.4%	16.9%		
	MELAA	18.8%	19.1%		
	Disabled children	16.0%	15.5%		
	Children in a disabled household	16.5%	17.3%		
	Percentage of children (aged 0-17 years) living in households with less than 50 percent median equivalised disposable household income after housing costs (AHC)	17.8%	16.3%		
01.11	Māori	19.7%	17.8%	Child	
Child poverty	Pacific	20.5%	16.3%	Poverty Measure	
	Asian	23.7%	20.2%	(Stats NZ)	
	MELAA	29.9%	28.0%		
	Disabled children	21.5%	17.6%		
	Children in a disabled household	20.5%	18.8%		
	Percentage of children (aged 0-17 years) living in households experiencing material hardship	11.5%	11.0%		
	Māori	19.7%	20.2%		
	Pacific	22.3%	24.0%		
	Asian	5.8%	4.9%		
	MELAA	10.0%	4.9%	1	
	Disabled children	20.7%	20.5%		

	Children in a disabled household	20.8%	21.1%	
Food	Percentage of children (aged 0-14 years). living in households where food runs out sometimes or often	20%	15%	NIZ II lul.
	Māori	30%	26%	NZ Health Survey
insecurity	Pacific	45%	37%	(MOH)
	Asian	12%	7%	
	Percentage of children (aged 0-17 years) living in households with a major problem with dampness or mould	7%	6%	
	Māori	11%	10%	
	Pacific	17%	12%	Household
Housing quality	Asian	4%	3%	
1	MELAA	8%	3%	
	Low income	15%	10%	
	Disabled children	5%	10%	
	Households with at least one disabled person	13%	10%	Economic
	Percentage of households with children and young people living in (aged 0-17 years) spending more than 30 percent of their disposable income on housing	37%	34%	Survey (Stats NZ)
	Māori	32%	29%	
Housing	Pacific	35%	27%	
Housing affordability	Asian	49%	45%	
	MELAA	50%	44%	
	Low income	62%	60%	
	Disabled children	36%	33%	
	Households with at least one disabled person	33%	32%	

	Children and young people are happy and healthy				
Indicator	Measure	2019/20	2020/21	Source	
	Percentage of people registered with an LMC, among all people giving birth (2019, 2020)	93%	94%		
	Māori	92%	92%		
	Pacific	85%	87%		
	Asian	91%	92%		
	High deprivation	90%	91%		
	Percentage of people registering with an LMC in their first trimester of pregnancy, among all people registered with LMCs (2019, 2020)	73%	74%	National	
Prenatal wellbeing	Māori	60%	61%	Maternity Collection	
	Pacific	45%	47%	(MOH)	
	Asian	77%	78%		
	High deprivation	59%	59%		
	Percentage of people giving birth who were smoking two weeks after the birth of their child (2019, 2020)	8%	9%		
	Māori	23%	23%		
	Pacific	6%	6%		
	Asian	<1%	<1%		
Subjective health status	Percentage of young people (aged 12-18 years) reporting their health as good, very good, or excellent	-	Not yet available	Youth Health and	

	Māori			Wellbeing
	Pacific			Survey (MSD)
	Asian			(1.102)
	Disabled			
	Rainbow			
	Percentage of children and young people (aged 15-24 years) reporting their health as good, very good, or excellent	91%	92%	
	Māori	85%	91%	NZ Health
	Pacific	85%	85%	Survey
	Asian	94%	95%	(MOH)
	Disabled	49%	70%	
	High deprivation (NZ Dep Quintile 5)	84%	90%	
Potentially	Rate of potentially avoidable hospitalisations per 1000 children aged 0-14 years	49	49	National
avoidable	Māori	57	54	Minimum
hospitalisati ons	Pacific	73	65	Dataset (MOH)
0110	High deprivation	58	56	(111011)
	Percentage of children and young people (aged 15-24 years) who experienced high or very high levels of psychological distress at some stage over a four-week period	11%	19%	NZ Health Survey (MOH)
	Māori	14%	26%	
	Pacific	9%	24%	
	Disabled	52%	52%	
Mental wellbeing	Percentage of children and young people (aged 12-18 years) that in the last 30 days felt nervous, hopeless, restless or fidgety and or so depressed that nothing could cheer you up Māori			
	Pacific			
	Asian			
	Disabled			Youth
	Rainbow		Not yet	Health and
	Percentage of children and young people (aged 12-18 years) that in the last 12 months who deliberately hurt themselves or tried to kill themselves	-	available	Wellbeing Survey (MSD)
	Māori			
	Pacific			
Self-harm and suicide	Asian			
	Disabled			
	Rainbow			
	Number of suicides per 100,000 children and young people (aged 15-24 years)	18	17	Youth
	Māori	28	22	Justice
	Pacific	14	17	Indicators (MOJ)
	Asian	6	13	(IVIOJ)

	Children and young people are learning and developing				
Indicator	Measure	2019/20	2020/21	Source	
Participation in early learning	Percentage of 3 year old children attending early childhood education for 10 or more hours a week on average	74%	68%		
	Māori	62%	57%		
	Pacific	67%	57%		
	Low income	66%	62%	Early Learning	
	Percentage of 4 year old children attending early childhood education for 10 or more hours a week on average	84%	76%	Information System (MOE)	
	Māori	68%	62%		
	Pacific	74%	65%		
	Low income	69%	69%		
	Percentage of children and young people who are regularly attending school (6-16)	65%	61%		
Regular	Māori	48%	45%		
school	Pacific	51%	47%	School Attendance	
attendance	Asian	75%	75%	Survey (MOE)	
	MELAA	-	66%		
	Decile 1 School (lowest income area)	41%	43%		
	Percentage of 15 year olds meeting the level 2 benchmark for reading	83%	81%		
	Māori	70%	70%		
	Pacific	66%	64%	D	
Literacy, numeracy,	Percentage of 15 year olds meeting the level 2 benchmark for maths	78%	78%	Programme for International Student Assessment (MOE)	
and science skills	Māori	63%	63%		
SKIIIS	Pacific	58%	56%		
	Percentage of 15 year olds meeting the level 2 benchmark for science	83%	82%		
	Māori	70%	70%		
	Pacific	62%	60%		
Social-	Based on aggregated survey data that measures compassion, respectfulness and trust Māori		Not yet available	Youth Health and Wellbeing Survey (MSD)	
emotional	Pacific				
skills	Asian				
	Disabled				
	Rainbow				
	Based on aggregated survey data that measures organisation, productiveness and responsibility				
Self-	Māori				
management skills	Pacific				
	Asian				
	Disabled				
	Rainbow				
Youth participation in	Percentage of young people aged 15 to 24 years who are participating in education, training, or employment	88%	88%	Household Labour Force	

employment,	Māori	81%	81%	Survey
education, or training	Pacific	83%	81%	(StatsNZ)

To diant	Children and young people are accepted, respec			00
Indicator	Measure	2019/20	2020/21	Source
Ability to be themselves	Percentage of children and young people (aged 12-18 years) who agree that is easy for them to express			
	their identity			
	Māori			
	Pacific			
	Asian			
	Disabled			
	Rainbow			
	Percentage of children and young people (aged 12-18 years) who feel a sense of belonging to Aotearoa/New Zealand as a whole			
	Māori			
Sense of belonging	Pacific			
belonging	Asian			
	Disabled			
	Rainbow			
	Percentage of children and young people (aged 12-18 years) who report experiencing discrimination in the last 12 months			
Experience	Māori			
of	Pacific			Youth Health and Wellbeing Survey (MSD)
discriminatio n	Asian			
11	Disabled		Not yet available	
	Rainbow			
	Percentage of children and young people (aged 12-18 years) who experienced bullying in the last 12 months			
	Māori			
Experience	Pacific			
of bullying	Asian			
	Disabled			
	Rainbow			
	Percentage of children and young people (aged 12-18 years) who say they have an adult they could turn to if they were going through a difficult time and needed help			
Social	Māori			
support	Pacific			
	Asian			
	Disabled			
	Rainbow			
Support for cultural identity	Percentage of children and young people (aged 12-18 years) who have someone they can ask about their culture, whakapapa or ethnic group Māori			

	Pacific	
	Asian	
	Disabled	
	Rainbow	
	Percentage of children and young people (aged 12-18 years) who in everyday conversation speak a second and/or third language	
	Māori	
Languages	Pacific	
	Asian	
	Disabled	
	Rainbow	

	Children and young people are involved and empowered					
Indicator	Measure	2019/20	2020/21	Source		
Involvement in community	Percentage of children and young people (aged 12-18 years) who report helping others in the neighbourhood or community Māori	_		Youth Health and Wellbeing Survey (MSD)		
	Pacific		Not yet available			
	Asian					
	Disabled					
	Rainbow					
	Percentage of young people enrolled and voting in the New Zealand General Election	69%	78%	Electoral		
Representati	Māori	62%	70%	Commission		
on of young people's	Average rating given for trust in parliament (aged 18-24 years)	66%	62%	Household Labour Force Survey (StatsNZ		
voices	Māori	53%	52%			
	Pacific	60%	64%			
	Percentage of young people aged 15-24 years who are hazardous drinkers	27%	27%	NZ Health Survey (MOH)		
	Māori	36%	40%			
	Pacific	36%	28%			
	Disabled	-	34%			
	Percentage of young people aged 15-24 years who smoke daily	10%	6%			
Making	Māori	22%	13%			
positive choices	Percentage of young people aged 15-24 years who use e-cigarettes daily	4%	12%			
	Māori	-	15%			
	Percentage of young people aged 15-24 years who have used cannabis in the last 12 months	27%	30%			
	Māori	36%	43%			
	Pacific	-	27%			
	Disabled	-	43%			
Criminal offending	Offending rates per 10,000 young people aged 10-17 years	179	162	Youth Justice Indicators (MOJ)		
	Māori	329	285			
	Pacific	103	73			

Appendix two: Endnotes

- ¹ National population estimates: At 30 June 2021 | Stats NZ
- ² 2018 Census ethnic group summaries | Stats NZ
- ³ Statistics New Zealand. 2020/21 Household Economic Survey. Customised data request.
- ⁴ Statistics New Zealand. 2022. 2020/21 Household Economic Survey. Customised data request.
- ⁵ Child poverty statistics: Year ended June 2021 | Stats NZ
- ⁶ Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- $^{7}\,\mathrm{Ministry}$ of Health. 2022. New Zealand Health Survey, Customised data request
- ⁸ Early Learning Participation | Education Counts
- ⁹ Attendance | Education Counts
- ¹⁰ Early Learning Participation | Education Counts
- ¹¹ <u>School Leaver's Attainment | Education Counts</u>
- ¹² <u>Tertiary Population Data | Education Counts</u>
- ¹³ Statistics New Zealand. 2020/21 Household Economic Survey. Customised data request.
- ¹⁴ Voter turnout statistics for the 2020 General Election | Elections
- ¹⁵ Youth Justice Indicators | New Zealand Ministry of Justice
- ¹⁶ Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- ¹⁷ Ministry of Education. 2022. Student Attendance Survey. Customised data request
- ¹⁸ Ministry of Health. 2022. National Minimum Dataset, Customised data request.
- ¹⁹ <u>Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ</u> ARR: after adjustment for age and gender
- ²⁰ Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- ²¹ Ministry of Health. 2022. National Minimum Dataset, Customised data request.
- ²² Serious injury outcome indicators: 2000–19 | Stats NZ, Customised Request, 2022
- ²³ Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- ²⁴ Covid-19 Learning in Lockdown | Education Review Office (ero.govt.nz)
- ²⁵ Life During Lockdown: Findings from the GUiNZ survey Ministry of Social Development (msd.govt.nz)
- ²⁶ COVID-19 Health and Wellbeing Survey | Ministry of Health NZ
- ²⁷ Youth-Mental-Health-in-Aotearoa-NZ.pdf (informedfutures.org)
- ²⁸Suicide web tool | Ministry of Health NZ
- ²⁹ Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- ³⁰ Poupard, J. (2021). Experiences of COVID-19 for takatāpui, queer, gender diverse and intersex young people aged 16-24. Retrieved from experiences-of-covid-19-for-takat-pui-queer-gender-diverse-and-intersex-young-people-aged-16-24-report.pdf (myd.govt.nz)
- ³¹ Ministry of Youth Development. 2020. Youth Pulse Check Survey. Retrieved from What is the MYD Youth Pulse Check Survey?
- ³² Statistics New Zealand. 2021. Census ethnic group summaries. Retrieved from https://www.stats.govt.nz/tools/2018-census-ethnic-group-summaries/m%C4%81ori

- ³³ <u>Māori Language in Schooling | Education Counts</u>
- ³⁴ National Maternity Collection, Ministry of Health, Customised Request, 2022.
- ³⁵ Statistics about how we work with children | Oranga Tamariki Ministry for Children
- ³⁶ Youth Justice Indicators | New Zealand Ministry of Justice
- ³⁷ Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- ³⁸ Child poverty statistics: Year ended June 2021 | Stats NZ
- ³⁹ Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- ⁴⁰ Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- ⁴¹ Suicide web tool | Ministry of Health NZ
- 42 Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- ⁴³ Youth Justice Indicators | New Zealand Ministry of Justice
- ⁴⁴ Statistics New Zealand. 2021. Census ethnic group summaries. Retrieved from https://www.stats.govt.nz/tools/2018-census-ethnic-group-summaries/m%C4%81ori
- 45 https://www.mpp.govt.nz/assets/Reports/Pacific-Aotearoa-Lalanga-Fou-Report.pdf
- ⁴⁶ Ministry of Health. 2022. National Maternity Collection, Customised data request.
- 47 Youth Justice Indicators | New Zealand Ministry of Justice
- ⁴⁸ Child poverty statistics: Year ended June 2021 | Stats NZ
- ⁴⁹ Ministry of Health. 2022. National Maternity Collection, Customised data request.
- ⁵⁰ Ministry of Health. 2022. National Minimum Dataset, Customised data request.
- ⁵¹ Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- ⁵² Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- 53 Ministry of Health. 2022. National Minimum Dataset, Customised data request.
- ⁵⁴ Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- ⁵⁵ Child poverty statistics: Year ended June 2021 | Stats NZ
- ⁵⁶ Home | Ministry for Ethnic Communities
- ⁵⁷ Statistics New Zealand. 2021. Census ethnic group summaries. Retrieved from https://www.stats.govt.nz/tools/2018-census-ethnic-group-summaries/m%C4%81ori
- ⁵⁸ Statistics New Zealand. 2020/21 Household Economic Survey. Customised data request.
- ⁵⁹ Child poverty statistics: Year ended June 2021 | Stats NZ
- ⁶⁰ Annual Update of Key Results 2020/21: New Zealand Health Survey | Ministry of Health NZ
- 61 Statistics New Zealand. 2020/21 Household Economic Survey. Customised data request.
- 62 Attendance | Education Counts
- 63 PISA (Programme for International Student Assessment) | Education Counts
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