

Experiences of Care in Aotearoa

summary Report



This is an extract from our report on agency compliance with the National Care Standards (NCS) Regulations - Experiences of Care in Aotearoa 2023/24

> Aro mārama Aro pono Aro motuhake Aroha Aroturuki Tamariki

Clear insight Truthful insight Independent insight Caring insight Independent Children's Monitor

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Foreword

The State should be a model parent. We again found that many tamariki and rangatahi in the care of Oranga Tamariki are not receiving the minimum standard of care the National Care Standards and Related Matters Regulations (NCS Regulations) require. We've seen some improvement in some of the data, but not the level of change we expected to see after four years. From what we heard more recently, it is unlikely to change by the time we next report.

In our fourth year of monitoring compliance with the NCS Regulations, we returned to the regions we visited three years ago to see if the experiences of tamariki (children), rangatahi (young people) and their whānau and caregivers had changed. We heard some examples of good practice, but overall not much has changed.

To improve compliance in 2024/25 and beyond, Oranga Tamariki must address how it can free its social workers to do what they are trained to do – being there for tamariki and rangatahi, completing thorough assessments and plans, supporting caregivers, and ultimately helping to keep tamariki and rangatahi safe, loved and cared for.

In addition to improving practice, Oranga Tamariki must be a better advocate for tamariki and rangatahi in its care and other government agencies must respond to its requests for help. We frequently hear about the lack of priority given to tamariki and rangatahi in care across government agencies. The Oranga Tamariki Action Plan (OTAP) was supposed to make things better by improving collaboration and the coordination of services. We are yet to see evidence that it has made a difference on the ground. Where we saw and heard of collaborative practice between agencies, it was due to individual relationships at a local level, rather than a system designed to make it happen.

Funding is siloed, both within and between government agencies, resulting in stand-offs about who will pay and when care or services will be funded – leaving the child far from the centre. The doorway to help does not open as easily as it should, and it is tamariki and rangatahi who miss out. We're also hearing government agencies are now pulling back to "core business", chipping away at the pockets of collaboration that do exist. Sadly, poor collaboration and prioritisation is not confined to tamariki and rangatahi in care. We see and hear of escalation through the oranga tamariki system because government agencies didn't work together and provide services and support early enough.

In our wider monitoring work, particularly in the latter half of 2024, we heard that funding changes are impacting on the ability of community organisations to support and care for tamariki, rangatahi, caregivers and their whānau. We will cover this in more detail in our first systemwide report, outcomes for tamariki and rangatahi Māori and their whānau, to be published in mid-2025.

In the same year in which the Royal Commission of Inquiry into Abuse in State and Faith-based Care released its final report, *Whanaketia – through pain and trauma, from darkness to light,* more tamariki and rangatahi in care were abused or neglected.

The care and protection system is there to care and protect. This includes addressing what may have happened to tamariki and rangatahi before they came into care, keeping them safe while in care, and providing them with the support they need to experience better life outcomes. A year is a long time in the life of a child, four years is an even longer time to not be receiving the minimum standard of care.

Over the 2023/24 year, we heard from more than 1,800 people – tamariki, rangatahi, whānau, caregivers, social workers, and people who work in government agencies, non-government organisations and iwi and Māori organisations. They share their experiences so openly with us because they desperately want to improve the system for others. We cannot thank them enough for trusting us with their stories.

Arran Jones Chief Executive

NhBaraghen

Nova Banaghan Chief Monitor



Key findings

Tamariki and rangatahi are still not receiving the minimum standard of care required by the National Care Standards Regulations.

With custody of almost 99 percent of tamariki and rangatahi in care, these key findings are mostly about Oranga Tamariki.

Oranga Tamariki has assessed itself as meeting all of its own performance measures for 37 percent of tamariki and rangatahi in its care¹. What we heard in our monitoring is consistent with this. While some areas have improved in the year since our last report, most of what we found, and what Oranga Tamariki has reported to us, remains the same. Unless underlying causes are addressed, it will be difficult for Oranga Tamariki to improve its compliance and with it the experiences of tamariki and rangatahi who are in care.

This is because social workers are not always able to work effectively

Social workers want to make a difference, and we heard this is a primary motivation for joining and remaining in the profession. To meet the NCS Regulations social workers must be able to do social work including completing meaningful assessments and plans, visiting tamariki and rangatahi as often as they need, advocating for services, and supporting caregivers and whanau. To do this, Oranga Tamariki must provide effective leadership, supervision and training, and the right tools and resources to do the job. Establishing and maintaining partnerships with iwi, Māori and community organisations is necessary.

We heard about the difference that can be made when social workers are able to work effectively.

"I feel supported now, because of my new social worker, new care parents and how they help me a lot. They make me feel very supported by helping me see my siblings, my parents, my friends. My social worker now has done more than any of my other social workers. I feel happy. I am now surrounded by many people who actually listen to what I have to say, and my feelings." CHILD

"Three weeks ago, within the day [of the report of concern], social workers were there and were uplifting. [Social workers] had already conversed [with the whanau/rangatahi] and put them in a safe space that night ... Really good communication [on] what was happening. [Oranga Tamariki] called early last week to give me an update." SCHOOL PRINCIPAL

However, we consistently heard that too much is getting in the way of social workers doing what they are trained and employed for. One third of tamariki and rangatahi are still not being visited as often as agreed, or at least every eight weeks.

"[Social worker] doesn't do things straight away. He is busy. My caregiver tries [to contact him] but he doesn't come around. We have to go to him he never comes to us. I am annoyed he is absent." CHILD

indicators around needs assessments, planning, consideration of whānau view, and the views of professionals, visits to tamariki and rangatahi, and the quality of engagement, opportunities for play, that social workers are carrying out the actions in tamariki plans, and that tamariki views have been identified and considered. It excludes indicators that are specific to ethnicity or to ages and stages, such

¹ This is a measure of how many tamariki and rangatahi have all nine Oranga Tamariki universal lead indicators met - it includes lead as transitioning to adulthood, which only apply to some tamariki and rangatahi in care at any one time.

Some of the things getting in the way of social workers doing social work

A lack of care options results in social workers spending time struggling to find caregivers, with tamariki and rangatahi then staying in motels.

"We can't get motels [because of funding restrictions] so we have to drive around at night with kids needing emergency placements. One incident where we drove around with a threeyear-old, knocking on doors to find someone to take them." ORANGA TAMARIKI SOCIAL WORKER

Recruitment freezes and vacancies, compounded by a workforce shortage, can lead to high caseloads.

"It's risk. It's high risk, it's so unsafe with such high caseloads. The recommended numbers are 20 children for each social worker. It balances out with wiggle room, but 50+ is beyond wiggle room." ORANGA TAMARIKI SOCIAL WORKER

Policies and processes that add administrative burdens, compounded by a low trust model for expenditure approvals, mean that the needs of tamariki and rangatahi are not always at the centre of decision-making. For example, Oranga Tamariki cannot pay board payments to the unapproved caregivers who it asks to care for tamariki and rangatahi, it instead provides vouchers for food and petrol.

"It took til the end of March to be approved but I've had [child] since the start of December, and I only got back payments until the end of March when the approval came through ... I did get vouchers but had to ask for them and go into the office, then got told I should have been receiving \$250 a week in vouchers. I didn't want to look like a bludger, I didn't care and I managed but I was entitled to it. When I took [child] over I was told I would have no financial burdens and could go back to work." WHĀNAU CAREGIVER

"I just wish that the decision-making was quicker. They [Oranga Tamariki social workers] always say that they need to go to talk with their supervisor. Especially some of the safety things we want to get in place, like the fencing and the car seat. It seems to take a while for things to get done." WHĀNAU CAREGIVER

Rangatahi are still not being given the best chance of a successful transition to adulthood. The transition out of care and into adulthood is a key life milestone for rangatahi. For those rangatahi working with a Transition Support Service, the majority felt their transition worker made things better for them, and the Service makes a positive impact and is highly valued. However, Oranga Tamariki isn't doing enough before they engage with the Service, to ensure key skills are taught and rangatahi have what they need to succeed as an independent adult. Life skills assessments are only completed for 16 percent of rangatahi in care. Referrals to the transition service often come too late for transition support workers to work effectively with rangatahi, with a guarter of rangatahi yet to be offered a referral.

"I've hardly had any support [from Oranga Tamariki]. I need to do everything, and I don't have my family [to support me] ... I have to do everything by myself." RANGATAHI

Tamariki and rangatahi in care are not prioritised for government services and funding does not follow the child

Challenges for social workers and caregivers are compounded by government agencies, particularly the Ministries of Health and Education, not consistently prioritising services for tamariki and rangatahi in care.

The Oranga Tamariki Action Plan (OTAP) was supposed to make things better by improving collaboration and the coordination of services. We are yet to see evidence that it has made a difference on the ground. Where we saw and heard of collaboration between agencies, it was due to individual effort rather than a system designed to make it happen.

Social workers, caregivers and whanau have to seek out services and supports child-by-child, relying on established relationships and goodwill, rather than there being a system that automatically responds to need.

Funding is siloed and does not necessarily follow tamariki and rangatahi within Oranga Tamariki, or between agencies. We consistently heard about stand-offs over thresholds and who is responsible for paying. The lack of prioritisation of tamariki and rangatahi in care creates inefficiencies. Social workers need to do additional tasks to get through layers of approval, find other workarounds, or agree to fund supports that are more education or healthrelated, to get access to services. When they are not prioritised, tamariki and rangatahi face delays in accessing the services and supports they need which can then impact school attendance or stable care placements. Delivery of these services is also inconsistent, with some tamariki and rangatahi getting what they need and others not.

When the needs of tamariki and rangatahi are not adequately assessed or assessment is delayed, it affects the timing and guality of decisions and plans on how those needs are met.

"It took nearly one year to get [child] assessed. Everyone knew [child] was ADHD [Attention Deficit/Hyper-Activity Disorder] except Oranga Tamariki. The reason it took so long was because they changed [child's] social worker so many times." NON-WHĀNAU CAREGIVER

"I asked for a third Gateway Assessment where we found the sight and hearing issues and after we got it all going, [child's] doing much better now." NON-WHĀNAU CAREGIVER

Some tamariki and rangatahi are excluded from school, or not getting the supports they need to learn because agencies disagree on who should fund the support.

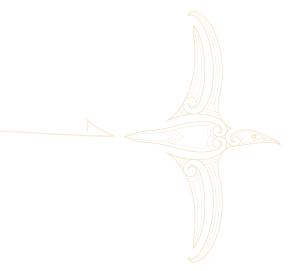
"One of the [tamariki] needs speech therapy, [child] hasn't got it yet because no one can figure out who has responsibility for it. They're all sitting around the table figuring out how to make it someone else's problem." WHĀNAU CAREGIVER

"Some identified schools have pushed us. They say unless Oranga Tamariki provide teacher aide funding the child will need to leave school." ORANGA TAMARIKI KAIMAHI

More tamariki and rangatahi are being abused in care

The number of tamariki and rangatahi being abused in care has continued to increase. This year 507 tamariki and rangatahi (nine percent of all tamariki and rangatahi in care) were found to have been abused or neglected while in the custody of Oranga Tamariki. The areas where disproportionate levels of abuse continue to occur are in secure residences and when children return to their parents' care. In secure residences 23 percent of tamariki and rangatahi were found to have been abused, with 18 percent of the harm caused by residence staff and 79 percent by other rangatahi². For tamariki and rangatahi returned home to the care of a parent while in the custody of Oranga Tamariki, 11 percent of tamariki and rangatahi were abused or neglected. These risks are well known yet key safety factors are not being prioritised³.

If we are to see positive long-term outcomes for tamariki and rangatahi in care, increased compliance with the NCS Regulations and an overall improvement in the delivery of care is required.



2 The remaining three percent of harm was caused by a non-related adult, adult whānau member, child not in placement or unknown

perpetrator.

³ Oranga Tamariki, Safety of Children in Care Annual Report - reporting period 1 April 2023 to 31 March 2024.

About tamariki and rangatahi in care

Care population

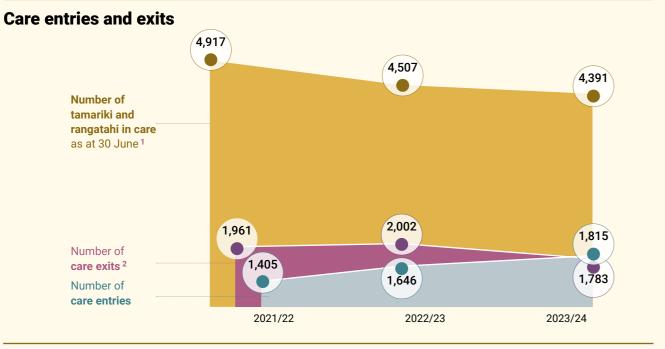
The population of Aotearoa aged 18 years and under is

1.2 million

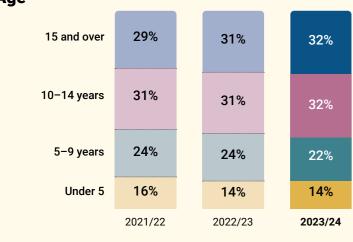
5,722 tamariki and rangatahi spent time in the care of the State or approved child and family social service during the year 1 July 2023 - 30 June 2024.

4,391

tamariki and rangatahi were in the care of the State or approved child and family social service on 30 June 2024.



Age



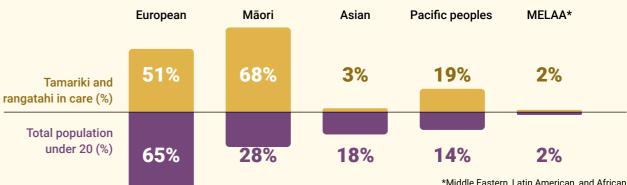
The average age of tamariki and rangatahi in care has continued to increase, from 10 years of age in 2021 to 11 years of age in 2024. As in previous years, there has been a decrease in the percentage of tamariki aged under five and between five and nine years old and an increase in the percentage aged ten years old and over.

1 Oranga Tamariki was unable to include tamariki and rangatahi in care under short-term care and protection warrants in figures for those in care as at 30 June or during the period 1 July - 30 June.

2 Exits and entries into care under short-term care and protection warrants are included in these figures.

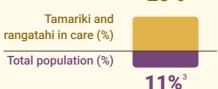
Ethnicity

Ethnicity is the ethnic group or groups a person identifies with or has a sense of belonging to. A person can belong to more than one ethnic group. The ethnicities that tamariki and rangatahi in care identify with are:



Over the past four years, the number of tamariki and rangatahi in care has continued to decline, with tamariki and rangatahi Māori still over-represented in the care population. However, that over-representation appears to be stable or declining. Just over one percent of tamariki Maori spent time in care during the year to 30 June 2024.

Tamariki and rangatahi known to be disabled 20%



Tamariki and rangatahi in care are almost twice as likely to be disabled than the general population of the same age⁴. Across the full care population (0 - 20 years old), 31% of tamariki and rangatahi are known to be disabled.

Custody Agency

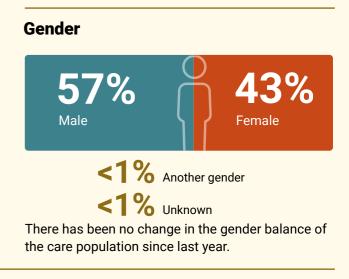
Over the course of 2023/24, 5,722 tamariki and rangatahi spent time in care. They were in the custody of:



Oranga Tamariki is the custodial parent for almost 99 percent of tamariki and rangatahi who were in care during the year.

- 3 Both disabled numbers relate to tamariki and rangatahi under 15 years old. Statistics New Zealand Disability survey 2013 page 3. Oranga Tamariki methodology relies on diagnosed disability, whereas Statistics New Zealand methodology relies on self-reported disability in the New Zealand Disability survey.
- 4 The NZ Disability Survey uses 0 14 and 15 44-year-old age groups. This limits us to comparing with the 0 14-year-old care population.
- when that number is below six. This is to reduce the risk that information could be used to identify individuals or learn private information about them.

*Middle Eastern. Latin American. and African

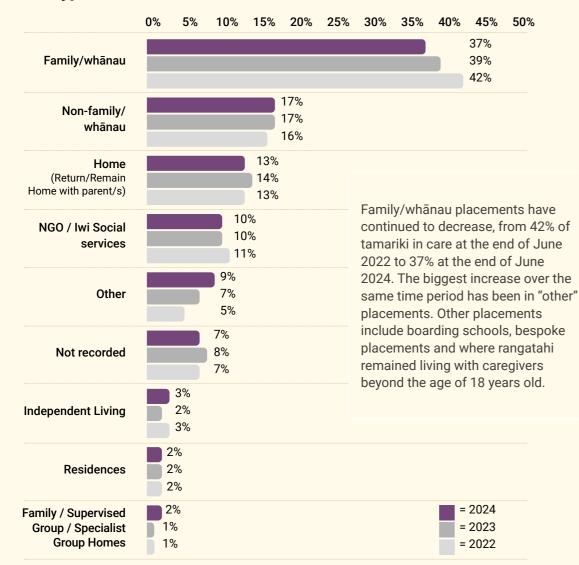




The methodology used by Oranga Tamariki and Statistics New Zealand for disability differs. This may impact on comparability of figures.

5 To protect the privacy of individuals, we follow Statistics New Zealand guidelines and do not disclose the exact number of individuals

Placement types as at 30 June



Duration in care and care entries

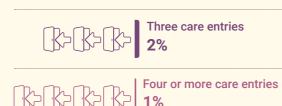
Tamariki and rangatahi in care % by duration in care



Since last year there has been an increase in the proportion of tamariki and rangatahi in care for less than one year (up from 14 percent last year). There was also an increase in the proportion of tamariki and rangatahi in care for more than five years.

One care entry 83%

Number of care entries over time



Similarly to last year, most tamariki and rangatahi in care have only entered care once in their lives, although 17 percent have been in care more than once.

Change in key relationships



Caregivers

Tamariki and rangatahi we heard from during our monitoring engagements told us their relationships with caregivers and social workers are really important. We looked at how many different caregivers and social workers tamariki and rangatahi had during their time in care.

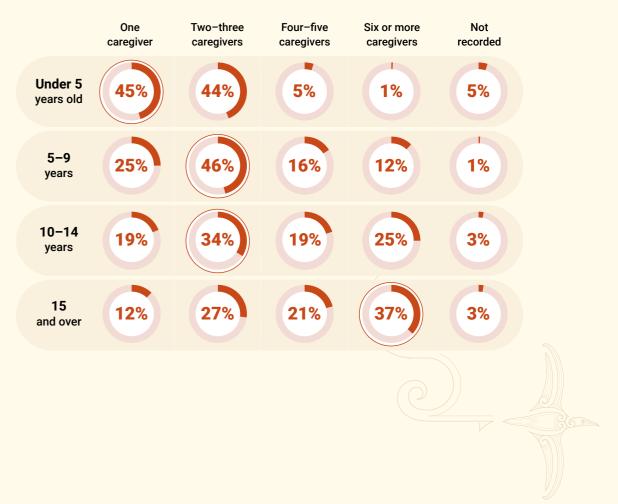
As the data below shows, for those over 15 years of age, 12 percent had more than 20 social workers and 37 percent had more than six caregivers during their time in care.

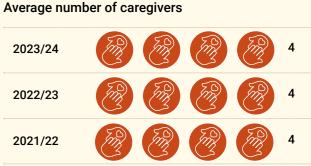


Changing caregivers

Looking outside the average, one quarter of those aged 10-14 years old and more than one third of those aged over 15 years old have had six or more caregivers during their time in care.

For the younger group, at least half of those under five years of age have experienced a change in caregiver, and 12 percent of those aged between five and nine years of age had six or more caregivers during their time in care.





On average, tamariki and rangatahi had four

caregivers during their time in care. This hasn't changed over time.



Social workers

On average, tamariki and rangatahi had ten social workers during their time in care. This hasn't changed in recent years.

Average number of social workers





Changing social workers

The majority (65 percent) of tamariki under five years of age had between two and five social workers over their time in care. In contrast, the majority (48 percent) of rangatahi over 15 years of age had between 11 and 20 social workers.





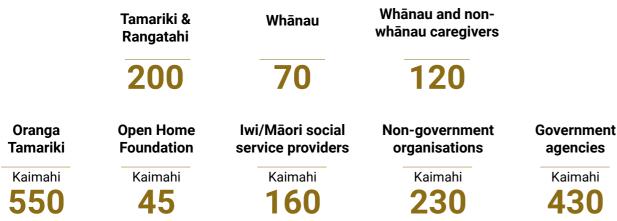
Our approach

The voices of tamariki, rangatahi, whānau and caregivers are at the centre of our monitoring approach

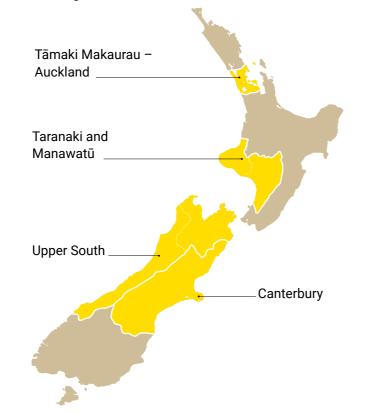
Compliance with the National Care Standards Regulations (NCS Regulations) directly impacts the experiences and outcomes of tamariki, rangatahi, whānau, and caregivers. For this reason, their voices are central to our report and are highlighted in the use of quotes throughout the text.

Who we spoke with during 2023/24

We visit communities on a three-yearly cycle to ensure we get a range of regional perspectives and cover the motu (country) every three years. In the 12 months to 30 June 2024, we spoke with around 1,800 people about their experiences.



For this 2023/24 reporting period, we visited the following communities:



Our full report on agency compliance with the National Care Standards and **Related Matters** Regulations

Our full report is available to read or download on our website:

https://aroturuki.govt.nz/reports/eoc-23-24

It includes reporting on the compliance of other agencies with custody of tamariki and rangatahi: Open Home Foundation, Barnardos and Kōkiri Marae.

If you'd like a hard copy of our full report, email us on info@aroturuki.govt.nz



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