

## Early investment key to ending disadvantage, says New Zealand report

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With intergenerational disadvantage resulting in up to 30% of Aotearoa New Zealand children not having their basic needs met, independent think tank Koi Tū: The Center for Informed Futures is calling for the



country's investment in the earliest life stages to be stepped up and well implemented.

Increased spending on health, upskilling and <u>social support</u> for parents and families over the first 2,000 days, starting from conception and continuing through pregnancy and childhood, would be one of the most cost-effective interventions possible, say researchers Dr. Felicia Low and Dr. Johan Morreau.

Dr. Low, who leads the Knowledge Hub for Maternal and Child Health at Koi Tū which is based at Waipapa Taumata Rau, University of Auckland, and Dr. Morreau, a retired general and community pediatrician and former chief medical advisor at Lakes District Health Board, have produced an evidence brief on the need for and benefits of early investment in breaking the cycle of disadvantage. They also provide solutions regarding the services and systems essential to successful implementation.

"Early investment to minimize the much greater later life cost of largely preventable issues for our children and <u>young people</u> cannot be overstated," says Dr. Low, whose work is funded by the Wright Family Foundation.

In their <u>brief</u>, "Early investment: A key to reversing intergenerational disadvantage and inequity in Aotearoa New Zealand," the researchers say a healthy society depends on healthy children, yet an estimated 20%–30% of New Zealand tamariki live in poverty, a trend that began as a result of economic policy changes in the late 1980s, then exacerbated by the removal of the universal family benefit. Underfunding of such home-visiting services as Public Health Nursing and Plunket has not helped.

Despite the introduction in recent years of fiscal and social interventions



to reduce <u>child poverty</u>, rates remain high and particularly disadvantage Māori and Pasifika populations. It has occurred against the backdrop of New Zealand's colonial history, which has contributed to significant unacceptable disadvantage and inequity for Māori, the researchers say.

"Children born into deprivation from the late 1980s were seriously stressed and are now the cohort of new parents whose children are also at greater risk of a continued cycle of disadvantage," Dr. Morreau says.

"In 2022, the Child Poverty Indicators report showed mixed progress in immediate and longer-term measures of child poverty," he says. "Clearly a more comprehensive systems approach adding to current initiatives is needed to effect more significant change."

Of particular importance in childhood outcomes is maternal <u>mental</u> <u>health</u>, says Dr. Low, which is largely determined by the level of background stressors. Appropriate systems that support all parents to achieve optimal mental well-being or manage mental-health challenges are critically important, she says.

"All children deserve the best possible start to promote their long-term physical, neurodevelopmental and mental health, and in turn their potential to contribute to society," says Dr. Low. "The first 2,000 days presents a critical window of opportunity, as this is when the child's exposures and experiences influence the trajectory of their long-term outcomes."

The researchers advocate a practical, systems approach to reversing the cycle of intergenerational disadvantage, involving cross-sectoral initiatives in the health, education and social development domains. They emphasize the critical importance of developing and growing culturally appropriate, community focused services.



"The health approach requires that mothers and fathers are linked to the maternity system as soon as possible following recognition of pregnancy," Dr. Morreau says. "This acknowledges not only that many disadvantaged young women do not engage with the health sector until pregnant, but also that it is critical to link parents and whānau with supportive systems as soon as is practicable and ensure these systems remain in place at least until the child starts school."

A promising culturally relevant pilot program, Tiaki Whānau, in which young parents are supported by kaitiaki has already begun to demonstrate the value of whānau-centered care, with increased well-being of parents and babies. The researchers say such examples must be rolled out more widely, with commitment to progressively grow and support the kaitiaki workforce to accommodate the level of need.

Sustaining the health, social development and education approaches will require cross-party acknowledgement of the enormity of the challenges, as well as a long-term whole-of-government and public service commitment to the solutions.

"This involves committing to a progressive shift in Government spending from late interventions that are relatively ineffective and expensive to investment in early preventative interventions that are more effective and less costly," both researchers emphasize.

**More information:** Early investment: A key to reversing intergenerational disadvantage and inequity in Aotearoa New Zealand. <a href="mailto:informedfutures.org/early-investment/">informedfutures.org/early-investment/</a>

Provided by Koi Tū: the Centre for Informed Futures



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