

Education Amendment Bill

Submission to the Education and Science Committee

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About New Zealand Nurses Organisation MNO

The New Zealand Nurses Organisation is the leading professional and industrial organisation for nurses in Aotearoa New Zealand, representing over 45 000 nurses, midwives, students, kaimahi hauora and health workers on a range of employment-related and professional issues. Te Runanga o Aotearoa comprises our Māori membership and is the arm through which our Te Tiriti o Waitangi partnership is articulated.

NZNO provides leadership, research and support for professional excellence in nursing, negotiates collective employment agreements on behalf of its members and collaborates with government and other agencies throughout the health sector. Nurses are the largest group of health professionals comprising half the health workforce.

The NZNO vision is “Freed to care, Proud to nurse”. Our members enhance the health and wellbeing of all people of Aotearoa New Zealand and are united in their professional and industrial aspirations to achieve a safe, sustainable and accessible system of public health care for all New Zealanders.

EXECUTIVE SUMMARY

1. The New Zealand Nurses Organisation (NZNO) welcomes the opportunity to briefly comment on the Education Amendment Bill.
2. As regulated health professionals who liaise with, and work in schools in a variety of capacities, nurses are well aware of the critical influence the education environment has in enhancing health and health literacy, necessary to meet the very real health challenges we face.
3. NZNO is affiliated to the Council of Trade unions and supports its submission and those of the teaching professional associations and unions.
4. NZNO subscribes to the evidence that the best outcomes are achieved through well regulated (i.e. appropriately trained, qualified and registered) staff practising within established guidelines (i.e. a national curriculum).
5. This Bill proposes to do away with both, by allowing unregistered people to teach children and young people according to their own curricula, which may or may not include science and health information, and may not accord with best public health practice.
6. Accordingly, NZNO **does not** support the Bill and **recommends** that it does not proceed.

DISCUSSION

7. Next to the family, schools are the most influential places shaping and improving the lives of New Zealanders.
8. Over the past century the state school system has been central to the roll out of public health information and programmes to increase health and hygiene, reduce infectious disease, control epidemics and immunise en masse against such scourges as polio, tuberculosis, rubella, hepatitis, and more recently cervical cancer.
9. Schools have been instrumental in combating ignorance and discrimination against disability, sexual orientation, and mental health

problems and have supported healthy living programmes which give young people the information and tools to make better decisions about for example drinking, smoking, eating, sexual health etc. which have been extraordinarily effective considering the exponentially greater resources that industry has put into persuading them to behave otherwise.

10. The safe delivery of such vital cost-effective public health programmes has been effected by trained and accountable (i.e. registered) professionals whose practise is informed by evidence. The same results could not be expected from disparate health goals delivered by people for whom no formal professional accountability exists.
11. Education and health are interrelated factors and the most important predictors of a range of outcomes including longevity, productivity, achievement, financial success etc.
12. The risk of charter schools is that, since they stand outside national curricula and professional standards, public health information and programmes will be compromised.
13. NZNO members have extensive experience in working with teachers, children and young people in both private and public schools, and in hospital-based, and residential services.
14. As regulated professionals, they value working with colleagues trained within the same research/evidence-based paradigm and who share similar ethical codes of conduct and professional standards.
15. Their experience is that private schools are often the ones that public health nurses have difficulty getting access to for example for immunisation, sexual health, health education programmes and care. Without information, including where to find help/advice/health care, children and young people, especially those most vulnerable, are at risk of poorer health outcomes at a point in their lives where sound primary health care could have improved health and minimal cost.
16. The health challenges besetting New Zealand, apart from the overstated 'grey tsunami', are virtually all related to children and young people - disease arising from eating/lifestyle choices, teen age pregnancy, youth suicide, and the very frightening increase in infectious diseases of poverty (Baker et al) unseen in other developed countries.
17. A strong nationally consistent and coordinated response to these challenges is necessary, and this cannot be achieved with unregistered teachers and disparate curricula.
18. Government policy supports the addition of nurses in schools to enhance the health and wellbeing of young people, but this bill may limit implementation of this policy, placing already vulnerable young people at greater risk of poor health outcomes.
19. There is overwhelming evidence that government policy ensuring equitable access to sound education and health delivered by trained, qualified and accountable (i.e. regulated) practitioners is the most cost effective way of maximising health and productivity (WHO, 2008, Mills et al, 2012).
20. It is no more acceptable to have unregistered teachers than it would be to have unregulated doctors and nurses, or any other of the myriad

occupations where health and safety is conceivably at risk - electricians, engineers, pilots, etc.

21. We note with dismay the readiness with which taxpayer funds are used to fund teaching foreign (and often inferior and irrelevant) educational qualifications, for example the International Baccalaureate (IB), and Cambridge International Examinations, despite the world-leading New Zealand education which has produced the original thinkers, scientists and artists that enable New Zealand to 'punch above its weight' in so many fields.
22. The autonomy proposed for charter schools amounts to a continuation of ceding cultural and intellectual hegemony to other nations (and multinational corporations), and further risks extreme systems which are pedagogically and socially substandard and certainly inimitable to the development of a skilled workforce supporting a smart economy.
23. Despite 'globalisation', Aotearoa is demographically, geographically and culturally unique; our identity is synonymous with equality, originality, flair and technical skill, an outcome of our strong public education system which has put the rights of all children to education first.
24. Charter schools are a direct reversal of the principles of that system and risks poorer and more disparate outcomes in educational achievement, health, productivity and independence.

CONCLUSION

25. NZNO recommends that the Committee:

- **note** the important role that schools and teachers have in facilitating and effecting public health policy and programmes that reduce the incidence and spread of disease and infection and improve the health and well being of new Zealanders;
- **note** that public health nurses have found barriers to access in some schools outside the state system and that this results in suboptimal delivery of important public health programmes;
- **agree** that the exemptions of charter schools from requirements to employ registered teachers and conform to appropriate national curricula developed for the benefit of students and the good of the nation, place an undue burden of risk on both children and New Zealand society;
- **note** that NZNO **does not** support this bill and **recommends** that it does not proceed.

References

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