Child Poverty in New Zealand - a primary care lens

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Future Direction: Your Road Map
R.N.
Robo.Nurse.

Concept Designed by ERIC TOMAKIN RN BSN
But in our reality
What we have to offer.....
..but it can be really hard

Please Help
recognition
Juliette

- 7 months old
- Presents to GP on Monday morning
- Only 1 vaccination
- Admitted to hospital with pneumonia

- Solo mother, 17 years, one other sibling
  - No education past 14 years
  - History of physical/sexual abuse
  - Significant debt, Car repossessed
  - Very shy of authority figures – health, social services...

- Abusive partner, awol, drugs, criminal conviction
  ............

- Moved 4 times since child is born
  - Currently with Aunty’s whanau, 16 in house, cold, damp, smokers
Why does she get sick?

• Spread of the ‘bug’
  – Overcrowded
  – Surrounded by other sick people
  – Hygiene – coughing, handwashing

• Weaker immune response
  – Stressed
  – Not fully immunised
  – Poor nutrition

• Reduced access to health care services
  – Mother knowledge level
  – Late presentation
  – Cost/access
Jack is a 9 year old boy well know to my general practice. He has come in very many times to us and the local A & M with a range of health issues: *asthma, eczema, chest infections, skin infections, injuries.*

Since birth he has had **TEN** hospital admissions: *bronchiolitis (baby x2) asthma (x3), broken leg, head injury, cellulitis (x2), dental abscess*
Jack is overweight, doing poorly at school, described by the school as having a learning difficulty. Furthermore the school are concerned because he is a playground bully.

His father is in jail. He has a brother and a sister and another died as an infant.

His Mum is 29 with a chronic medical condition. She has been in and out of a lot of jobs, never lasts more than a few months
Jack’s future......

- Poor health lifelong
- Obesity
- Drug and alcohol abuse
- School failure, limited occupational options
- Criminality
- Broken relationships
- Shorter life expectancy
Kevin

“I can’t sleep doctor”

- 49 years, rough sleeper
- Father drug and alcohol addiction, violent
- Left school early, semiliterate
- Strong gang affiliation till mid-life
- Multiple street drugs, P, alcohol......
- Wife and 3 kids for 10 years
  - She was scared of the gang world
  - Left him for a rich man in Australia
  - No contact with kids at all
- Starting to drink meths
- ?Iwi unsure
knowledge
What is Poverty

**Absolute poverty:** A lack of resources for the bare minimum existence.

**Relative poverty:** Exclusion from the minimum acceptable way of life in one’s own society because of inadequate resources. Often complex origins and solutions.
Child poverty is a real problem in New Zealand.
Child poverty is a real problem in New Zealand.

**Material Hardship**

155,000 NZ KIDS live in households that go without 7 or more things they need.

14% of Kiwi kids.

85,000 NZ KIDS live in households that go without 9 or more things they need.

This is a new measure of material hardship introduced into government reporting in 2015.

**List of 17 Things that Households are Going Without**

0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17

**Lesser Hardship**

**Greater Hardship**
Why does childhood poverty matter?

Poverty in childhood affects their whole life

– affecting every health outcome
– educational outcome
– secure relationships
– future jobs and income
**Who is in most hardship in NZ?**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>% in severe/significant hardship 2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children 0 – 17 years</td>
<td>23</td>
</tr>
<tr>
<td>18 – 24 years</td>
<td>15</td>
</tr>
<tr>
<td>25 – 44 years</td>
<td>16</td>
</tr>
<tr>
<td>45-64 years</td>
<td>13</td>
</tr>
<tr>
<td>65 + years</td>
<td>4</td>
</tr>
<tr>
<td>Overall</td>
<td>15</td>
</tr>
</tbody>
</table>

Adapted from: Perry B Non-income measures of material wellbeing and hardship: results from the 2008 New Zealand Living Standards Survey  MSD Wellington Dec 2009. p, 22
empathy
What does it mean to be poor?

• Your parents are stressed
• You are stressed
• You cant afford regular nutritious food
• You get sick more often
• You often live in a cold, crowded house
• Your neighbourhood has more crime
• You often have to shift house and school
• You can’t participate in hobbies, sports
‘Multiple bee stings’
anger
### Hospitalisation rates for serious bacterial infections and respiratory diseases

#### International Comparisons

<table>
<thead>
<tr>
<th>Disease</th>
<th>Other OECD Countries Relative Rate</th>
<th>NZ Relative Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rheumatic fever</td>
<td>1 (OECD)</td>
<td>13.8</td>
</tr>
<tr>
<td>Serious skin infections</td>
<td>1 (USA, Australia)</td>
<td>2</td>
</tr>
<tr>
<td>Whooping cough</td>
<td>1 (UK, USA)</td>
<td>5-10</td>
</tr>
<tr>
<td>Pneumonia</td>
<td>1 (USA)</td>
<td>5-10</td>
</tr>
<tr>
<td>Bronchiectasis</td>
<td>1 (Finland, UK)</td>
<td>8-9</td>
</tr>
</tbody>
</table>

action
But what can I do?

a spiritual desert is spreading - an interior emptiness, an unnamed fear, a quiet sense of despair.

— Pope Benedict XVI —
Child poverty is not inevitable

Child poverty has got worse in NZ since early 1990s

More children are poor in NZ than other age groups

Child poverty rates are affected by policy
Income-related child poverty rates are much higher now than in the 1980s.

Kiwi children experiencing income poverty over the last three decades compared to seniors.

Percentage of children and seniors 65+ in income poverty (after housing costs, 60% median income, relative measure).

Children's level of income poverty in 1982 = 14%

Children's level of income poverty today = 28%
Some recommendations

• Children’s rights and needs at the centre of policy
• A comprehensive national plan with actions, targets, measurable outcomes and regular reporting

Examples of specific recs:
• Universal health services for children, with targeted extra services based on assessment of further need
• A national housing plan
• A housing WOF
• Increase minimum wage and address the needs of children in low income families through well-supported benefits and tax credits
• Review social welfare benefits for adequacy
• Abolish sanctions which reduce the income of beneficiary families with children
Poverty Reduction Examples

• **Macro**
  – Structural economic change
    • Taxation
    • Social Security

• **Health**
  – Parent/child Mental Health services
  – Meningococcal B vaccination campaign
  – Reduction in costs of health care for children (still not free)
  – Housing Insulation
And in primary care?

• We care

• We empathise

• We never give up trying

• We support each other
"Worst case of compassion fatigue I've seen."
Supporting a good start..

- Good intrauterine care
- Breast feeding, healthy nutrition
- Safe environment – physical, emotional
- Consistent, supportive parenting
- Whanau support
- Good quality early childcare
- Good primary health care – access and services
- Good well child services
And what can we do better....

• Improving access to services
  – Costs
  – Opening hours
  – Waiting room
  – Outreach services, navigators, whanau ora

• Trusting relationships
  – Know our people
  – Enrolment and early engagement
  – Stable team
  – Personal touches

• Population Health approach
  – Excellent classifications and systems
    • eg code household smoking, code housing conditions
  – Audits and active precalls/recalls
    – Eg immunisation, 6 week checks

• Relationships with our local community
  – Community groups, church groups
  – Iwi contacts
  – NGOs
  – Smoking cessation programmes, Drug and Alcohol services
  – PAFT, Whanau Ora, Talking therapies............
  – Healthy housing
Being there in the moment

The small touches

Asking the difficult question
Ehara tāku toa i te toa takitahi ēngari he toa takimano e

*My strength is not mine alone, but that of many*
‘Never doubt that a small group of thoughtful committed citizens can change the world. Indeed, it is the only thing that ever has’

Margaret Mead