

Strengthening the Early Years Sector

Research for the Rātā Foundation



**Rātā
Foundation**

ihi

Research

Social Change
& Innovation

Strengthening the Early Years Sector – Research for the Rātā Foundation

John Leonard, Dr Larissa Kus-Harbord, Hēmi Te Hēmi, Letitia Goldsmith, Dr Anne Hynds and Dr Catherine Savage.



© 2019 Ihi Research ALL RIGHTS RESERVED. Any unauthorised copy, reprint or use of this material is prohibited. No part of this content may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying, recording, or by any information storage and retrieval system without express written permission from Ihi Research.

Print and Design: Create Design Studio. www.createdesignstudio.co.nz

Acknowledgements

The research team wish to acknowledge the Early Years sector organisations and whānau who contributed to this report.

Table of Contents

Executive summary	5
Background	9
Methodological note	10
Composition and longevity	11
Clients	12
Diverse provision	12
Commonalities of Purpose	14
Strengthen the whole whānau	14
Provide whānau education and advocacy	15
Educating others and advocating for the sector	15
Funding sources	16
Barriers, enablers and opportunities	19
Barriers	19
The perspectives of ‘hard to reach’ whānau	25
Enablers	32
Opportunities	36
Key Learnings	40
References	43
Appendix 1.	45
Methodology	45

Executive summary

Rātā Foundation recognises the importance the early years of a child's life plays in setting a strong foundation for their future. Likewise Rātā recognises the important role of not-for-profit organisations working with families/whānau in the foundational first 1000 days of a child's life in enabling positive outcomes.

Rātā Foundation wishes to support the Early Years not-for-profit sector by providing opportunities to strengthen the capability of community organisations working in this sector.

Ihi Research was contracted by Rātā Foundation to undertake exploratory knowledge building research, on how the Early Years, not-for-profit sector, provides support for diverse whānau/families in the early years of a child's life. The research was enacted through kaupapa Māori principles and utilised both qualitative and quantitative methods through a two-phased approach that involved semi-structured interviews and surveys.

Three key objectives guided the research process. These were:

- 1. To gain an understanding of the Canterbury Early Years Sector, including kaupapa Māori Early Years organisations.***
- 2. To identify capacity and capability needs of individual organisations, and collectively of the sector.***
- 3. To identify opportunities and enablers to capacity and capability.***

The research process included qualitative and quantitative stages. Fourteen leaders from 10 organisations were interviewed in order to develop a survey that was distributed to the sector. A leader and a governor from thirty three organisations were invited to complete the online survey. Twelve organisations responded (12 leaders and 10 governors).

The research findings provide a snapshot of the Early Years sector in Canterbury and the current challenges and capacity and capability needs of individual organisations, and collectively of the sector. Data collection for this study focused mainly on leaders' views. Further in-depth research carried out over time with staff members (paid and unpaid), would deepen our understanding of the Early Years sector in Canterbury, its current challenges, capacity and capability needs.

In order to learn the perspectives of whānau who might be identified as 'hard to reach', three whānau members who were considered difficult to engage in Early Years initiatives, took part in individual interviews. Their participation provides an opportunity to understand the barriers and enablers of engagement from their point of view.

Highlights from the research indicate:

- The Early Years providers are diverse in size and scope. They provide a range of services to the diverse whānau they serve. Their services may be targetted (aiming to address a specific client group) or universal in nature. In this research the findings from kaupapa Māori respondents are similar to mainstream services.
- Although organisations may enact their services differently, there were several commonalities evident in interviews and apparent in survey responses. They are:
 1. Each organisation's aim is to strengthen whānau for the betterment of babies/ children.
 2. Increasing whānau capability by educating and providing advocacy for parents/ whānau.
 3. Educating others and providing advocacy for the work of the sector.
- Developing leaders, succession planning and building management skills of staff is a priority for organisations, as is building the capability of staff to demonstrate impact and evaluate their effectiveness. This will contribute to the ability of organisations to attract and maintain funding.
- Areas of highest satisfaction were strategic planning, staff care and specialist training, and accountability reporting.
- Funding comes from a range of sources. philanthropic, Lotteries/COGS and donations play a vital role in the delivery of support in the first 1000 days of a baby's life.
- Many in the sector lack continuity of funding. The capacity of Early Years organisations is limited by their ability to attract funding, with many relying on a significant proportion of funding from philanthropy, Lotteries/COGS and donations rather than from local or central government.
- Engaging hard to reach whānau is complex; effective approaches are contextual to each whānau and each situation. Common barriers identified by organisations include a lack of awareness of services; the need for time to build and maintain trusting relationships; cultural and language barriers; and, whānau having limited financial resources. In addition, organisations are not clear about iwi aspirations for whānau and pēpi in the first 1000-days.
- Providers are aware they need to increase the cultural competency of the people in their organisations but they don't prioritise this need as highly as might be expected.
- We interviewed mothers who might be considered 'hard to reach.' These young mums discussed the importance of relationships and establishing trust. Midwives can play a vital role in keeping these mothers and their pēpi engaged with the services that can support them. Services also need to be responsive, easy to communicate with, reliable, flexible, non-judgemental and welcoming. One bad experience can cause complete disengagement from all service organisations.

It is clear that barriers, enablers and opportunities are interconnected and the ability to negate a possible barrier is itself enabling. The relationship between barriers and enablers indicate

opportunities to support the sector.

The capability, capacity, commitment and effectiveness of staff are key enablers; as is having strong, effective, values based leadership. The support of the philanthropic sector and the generosity of donors is vital. Participants would like to expand their services to better meet the needs of their clients and deliver more specialised support.

There is an opportunity to develop a shared vision for children in Canterbury for organisations, iwi, local and central government. This could be a catalyst for increased collaboration, more realistic funding and result in strengthening the sector. Mapping available services may increase knowledge of available services, utilisation and aid referrals and facilitate greater access for whānau.

There is an opportunity to develop capability in the sector in targeted areas such as cultural competency (for staff engaging with Māori, Pacific nations, refugee and migrant communities); succession planning; developing the management and leadership skills of prospective leaders; and, developing organisations' ability to demonstrate and evaluate impact.

Respondents told us workshops, networking and peer learning approaches are most desired to address these capacity and capability needs.

To enable opportunities development and networks bring, release of staff to attend any events needs consideration.

This research demonstrates that while the organisations share similar intentions, they are diverse in size, scope and reach. Larger organisations have more resources, including more paid staff, to continually improve and develop their services. Smaller organisations are heavily reliant on volunteers to achieve their aspirations. This variability needs to be taken into consideration, as it is a feature of the sector.

Working with the Early Years services to improve cohesion, impact and delivery will improve access for families and whānau; opportunities for families and whānau; partnership between organisations, and with iwi and other stakeholders. This activity is likely to significantly improve the quality of Early Years provision in Canterbury.

Background

There is significant empirical evidence that highlights the importance of a child's first 1000-days of life and the types of responsive relationships that enhance healthy brain development (Fisher, 2018; Moore, Arefadib, Deery, Keyes, & West, 2017; Morton, Atatoa Carr, Grant, Berry, Mohal, & Pillai, 2015). Experiences during the first 1000-days, the period from conception until a child's second birthday, have a far-reaching impact on health, educational, and social outcomes, and on health equity (Information Team, 2018).

Organisations working with families/whanau during the vital first 1000 days period play a key role. Rātā Foundation funds a range of community organisations working in this area. Rātā Foundation is well-placed to enable capacity and capability building of organisations working with young children so that they're better able to support families/whanau in the first 1000 days.

This exploratory research sought to understand the diverse nature of Canterbury Early Years organisations and the whānau they serve. Importantly it sought to better understand the barriers, enablers and opportunities present in the sector through the voices of organisational leaders and governors.

Further, it sought the perspectives of whānau who might be identified as 'hard to reach.' These are young mothers who have, for a variety of reasons, chosen not to engage with many of the services that are available to them. Their participation provides an opportunity to understand the barriers and enablers of engagement from their point of view.

Methodological note

This research was designed to be exploratory; a full methodological description is available in Appendix 1. Fourteen Early Years leaders (from 10 organisations) were interviewed about their organisation; the barriers, enablers, their understanding of the sector and potential opportunities. The interview scripts were coded using inductive processes, which sought to identify participants' perceptions. Results from the interview analyses were then used as a basis to design a survey.

The purpose of the survey was to understand whether, and to what extent, the major themes arising from interview analysis were shared by others in the sector. The collection of survey data was conducted through online participation by Early Years leaders and governance (n=22) in April 2019. Results presented in the report are descriptive only. Due to the small sample size, the percentages are only indicative of proportions and need to be interpreted with caution.

Three young mothers, not currently supported by Early Years organisations were interviewed.

Canterbury has a diverse range of organisations providing support to whānau in the first 1000 days of a baby's life, and beyond.

Interviews

10

ORGANISATIONS

1 kaupapa Māori
1 Pasifika
8 Mainstream

14

INTERVIEWEES

Surveys

12

ORGANISATIONS

3 kaupapa Māori
9 Mainstream

22

PARTICIPANTS

10 Governance
12 Leaders

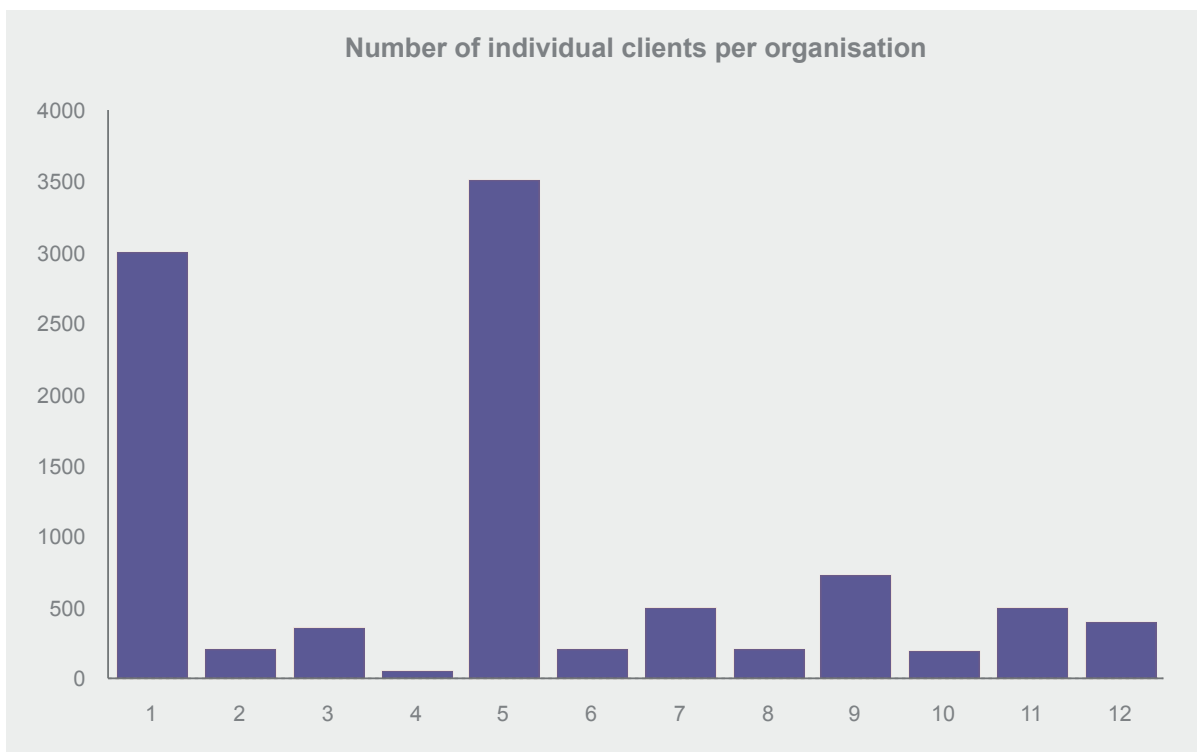
Composition and longevity

Of the organisations (n=12) that responded to the survey, 83 percent had been in existence for over 10-years. This is consistent with interview data, indicating most providers in Canterbury have a significant record of delivery over an extended period of time.

One interviewee described their service as kaupapa Māori, as did twenty-five percent of survey participants.

The number of individuals accessing organisations' services varied greatly, ranging between 46 and 3500 clients (median = 375). Figure 1 shows the relative sizes of the 12 organisations that responded to the survey.

Figure 1: Number of individuals accessing services



Consequently, there is a significant variation in the number of full-time (from 1-30), part-time (from 2-67) and volunteer staff (from 2-120) working for these organisations. It is evident that Early Years organisations rely heavily on volunteer staff.

Table 1: The number and composition of the staff within the responding organisations

	N of organisations with ...	Range (Min - Max)	Average	Median of 12 organisations
Full-time staff:	10	1 – 30	12	8
Part-time staff:	12	2 – 67	13	5
Volunteers:	11	2 – 120	39	15
Other:	1	4		0

Clients

Early Years providers serve a diverse population. This has implications in regard to the provision of culturally responsive services, this is discussed further in following sections. Table 2 shows the ethnic background of the families the organisations serve and the percentage of their clientele each ethnicity represents.

Table 2: Ethnic background of the families the organisations serve

	N of organisations serving clients with backgrounds of ...	Range (Min – Max)	Average	Median of 12 organisations
New Zealand European/ Pākehā	12	4% – 72%	43%	50%
Māori	12	10% – 88%	40%	30%
Pacific Peoples	12	2% – 34%	9%	6%
Asian	4	1% – 10%	6%	0%
Middle Eastern/Latin American/African	3	1% – 10%	6%	0%
Other	6	1% – 20%	9%	1%

Diverse provision

Over half of the responding organisations (7/12) indicated support to whānau in the first 1000-days of their tamariki/children’s lives comprised less than half of all their services. Only three organisations indicated that their services to such families make up 91-100 percent of their work. This is illustrated in Figure 2.

Figure 2: Proportion of services to whānau in the first 1000 days of a baby’s life.

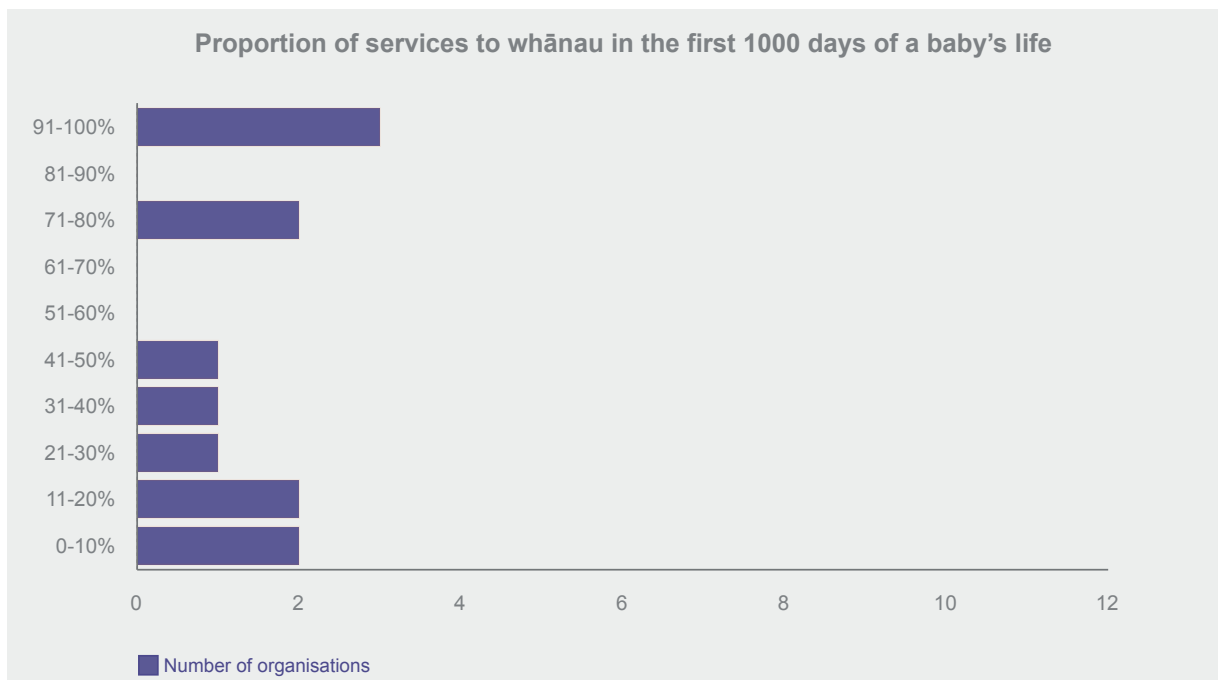
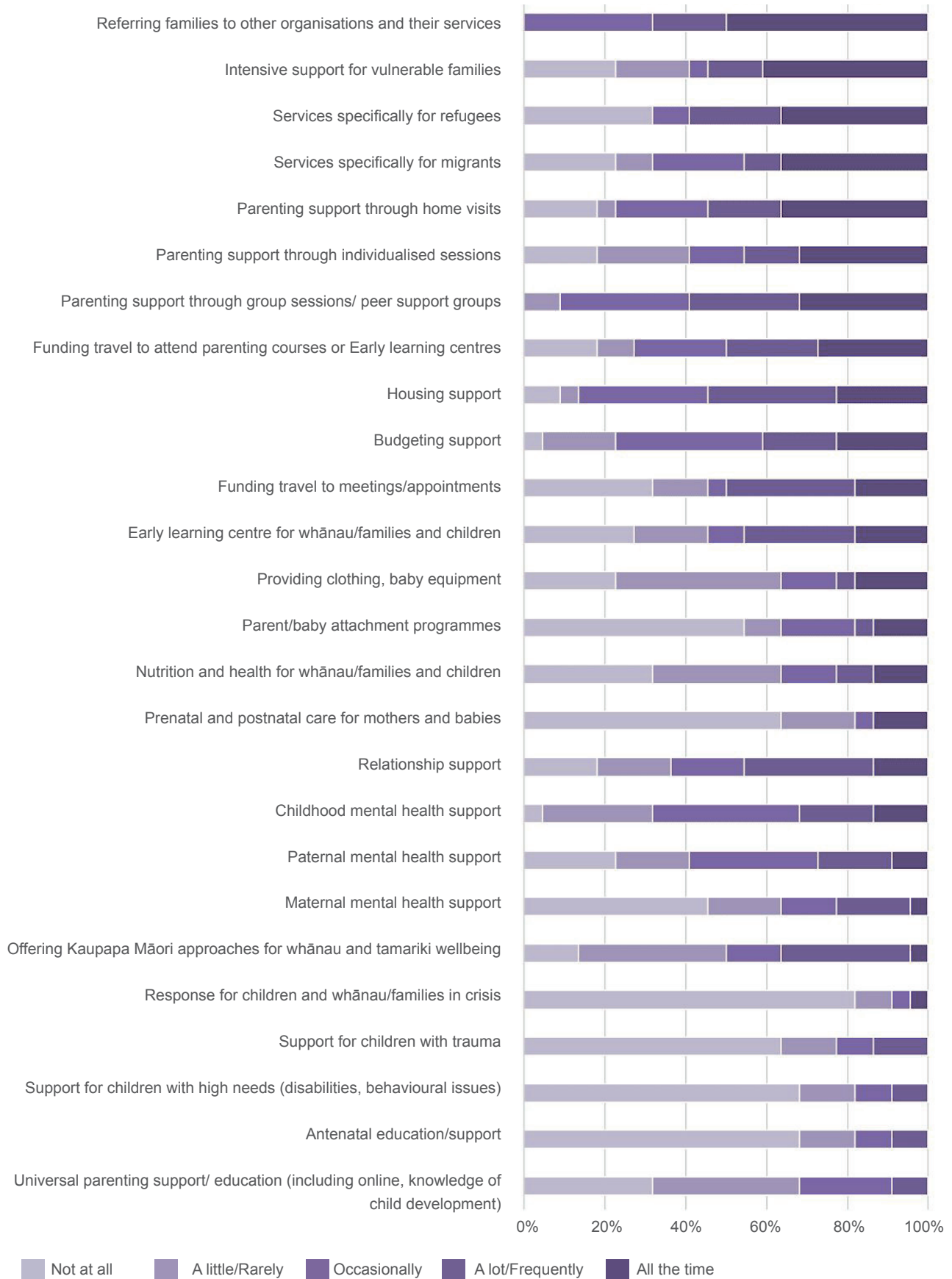


Figure 3 provides an indication of the diverse services that are provided to families/whānau by the organisations surveyed. It appears most services refer families/whānau to other organisations for support, respond to families/whānau in crisis and provide parenting support in various forms. The survey responses indicated that of these very few organisations provided support specifically for refugee and migrant families.

Figure 3: Services provided to families by organisations (average scores, N=22)



Commonalities of Purpose

Participants in both the interviews and survey were asked to describe their organisation's mission. Of the 17 responses to this question in the survey, seven were related to providing for a specific or targeted client base (e.g. children of prisoners), one was geographical and nine were universal in intent. Although organisations may enact their services differently, there were several commonalities evident in interviews and apparent in survey responses.

Strengthen the whole whānau

One commonality was each organisation's aim **to strengthen whānau for the betterment of babies/children**. Engagement and empowerment of parents/caregivers for whānau wellbeing and to support child development was common in terms of these organisations' services.

"We support babies' development – but you can only do that if you support parents/caregivers." (Interview)

"We are a Kaupapa Māori organisation and all of our work is around whānau wellbeing." (Interview)

"We are a family centred, strengths-based organisation – and our model of service is based around the assumption that if parents can be supported and upskilled to understand and support their child's development, then our role is simply to help them understand, and at the same time provide direct service." (Interview)

"Our vision is all about whānau growing together. It's that connection between child-child relationships and relationships between parents/whānau and their children. Relationships and empowerment of

parents/caregivers is another part of our vision." (Interview)

"We believe parents are the best teachers for their children. So, it's giving parents/caregivers the right support and information so they understand the choices they make in the first 1000 days of life will shape their baby's development." (Interview)

While organisations work to support the healthy development of pēpi or tamariki, they also work to increase the capability of whānau to provide a home environment that will best support their pēpi. The provision of whānau led services was most evident for the Kaupapa Māori service provider.

"We provide a holistic approach – it's Whānau Ora, providing what's best for whānau culturally – in all manner of things... so we are about Māori working for Māori." (Interview)

Some organisations provided very specific services yet maintained the common intent of working with the whole whānau to improve the lives of children in the first 1000 days.

"We are a trauma focused organisation and we work with children who have experienced trauma, and with their families. We run programmes for adults and programmes for kids. It's a flexible and broad programme. We design for the needs of the families and the kids. We look to engage parents as best we can – through understanding their children and we have programmes like Theraplay, systematic family therapy or functioning family therapy, Seasons for Growth, parents understanding about attachment and we run like a retreat where parents come in and they have people working with them for three or four-days, and then there is follow up. Whilst we work with children – you also need to work with

parents and families.” (Interview)

Provide whānau education and advocacy

Parent/whānau education and providing advocacy for parents/whānau was a common feature of services. Participants often discussed the need to strengthen whānau capability and confidence to better meet their child’s needs, through enhanced child-parent relationships and interactions. This included working with whānau to ensure more informed interactions with their child; for example, a focus on bonding and attachment.

Providing a safe, stable and secure home environment was considered essential for caring for pēpi and tamariki.

“A key part of our work is that we have a family support team made up of social workers, psychologists, and our kai whakapouwai who support the parents to support their children. So, this model works if parents or caregivers have the time, the head space and the capacity in their home life to support the children in the ways we are suggesting, so we need to remove as many barriers as we can to that. So, our families may need help with transport, with housing or financial budgeting, or sometimes grief counselling, it’s very holistic, it’s all about the relationships between the parents and their own child.” (Interview)

“Our key activities are offering free practical support to parents and families– clothing during and after pregnancy and baby wear from birth to one-year. A cloth nappy bank – empowering families to reduce waste, and financial support and to teach the community about that.” (Interview)

“Parenting can be daunting. It can be a challenge to slow down and spend time with your baby and enjoy your relationship with your baby. So, helping parents/whānau build confidence and capability to build that connection with their pēpi.” (Interview)

“We don’t want our kids to be separated from their parents. At times parents might think we (as an organisation) do a better job – because often, initially

parents might think we’ll fix them – but when you explain that it’s important to develop or strengthen those parent-child connections, relationships and attachments, they get it.” (Interview)

“A lot of what we do is provide practical support – that’s the first part, and the second (which is really the meat of our service) part of our service is parental information and that parental advocacy aspect.” (Interview).

Educating others and advocating for the sector

A number of participants explained that an important part of their mission was the **need to educate wider society** and to influence government policy about the importance of valuing parenting/caregiving and the rights of the child. There was a belief that despite evidence pointing to the importance of the Early Years sector, the funding received from government did not reflect the importance of intervention.

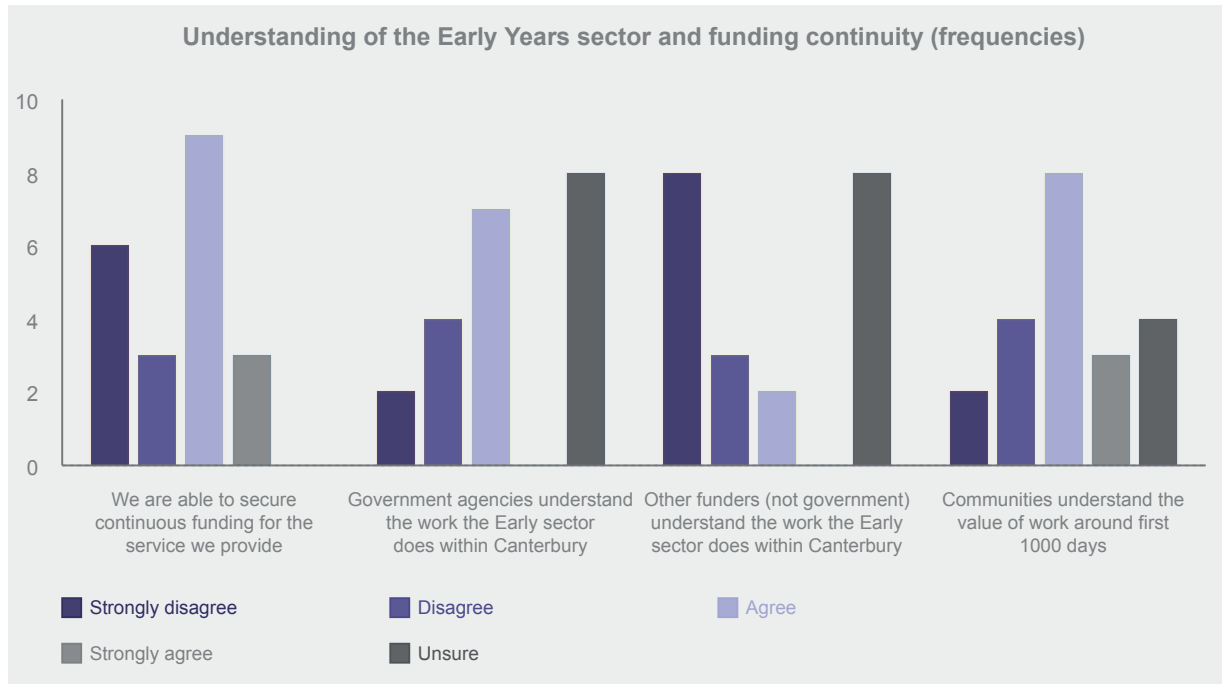
“We need better community education about the value of parenting/caregiving and its contribution to citizenship and health and wellbeing in this country.” (Interview)

“Ultimately, we don’t value children enough in NZ – we have signed up to the Universal Rights of the Child and the Rights of People with Disabilities – but we aren’t really delivering – the funding isn’t there and we know the first 1000-days is so important, but the funding isn’t there. So, we need to be doing a lot more in terms of educating others.” (Interview)

“While government, funders and the community might understand the work done to support the first 1000-days, there is a lack of understanding of the resourcing needed to maintain these services. A funding organisation [name removed] could do better at finding out the full extent of services provided in the community even if they are not funded.” (Governance survey comment)

Figure 4 demonstrates how these organisations’ surveys viewed the tension between funding and the value placed on Early Years services.

Figure 4: Understanding of the Early Years sector and funding continuity



The following section provides an overview of the funding sources of respondent organisations.

Funding sources

Organisations receive funding from a variety of sources. Figure 5 and 6 shows the spread of funding across the 12 organisations surveyed, with 10 of the 12 organisations receiving donations. While a number of organisations rely on government contracts to deliver their services, the reliance on philanthropic, Lotteries/COGS and donation contributions is noteworthy. This may reinforce the need for strong advocacy for the sector with local and central government.

It was evident that funding is viewed as a barrier to organisations operating in an optimal manner. This is discussed further in the following section.

Figure 5: Types of funding received by number of organisations

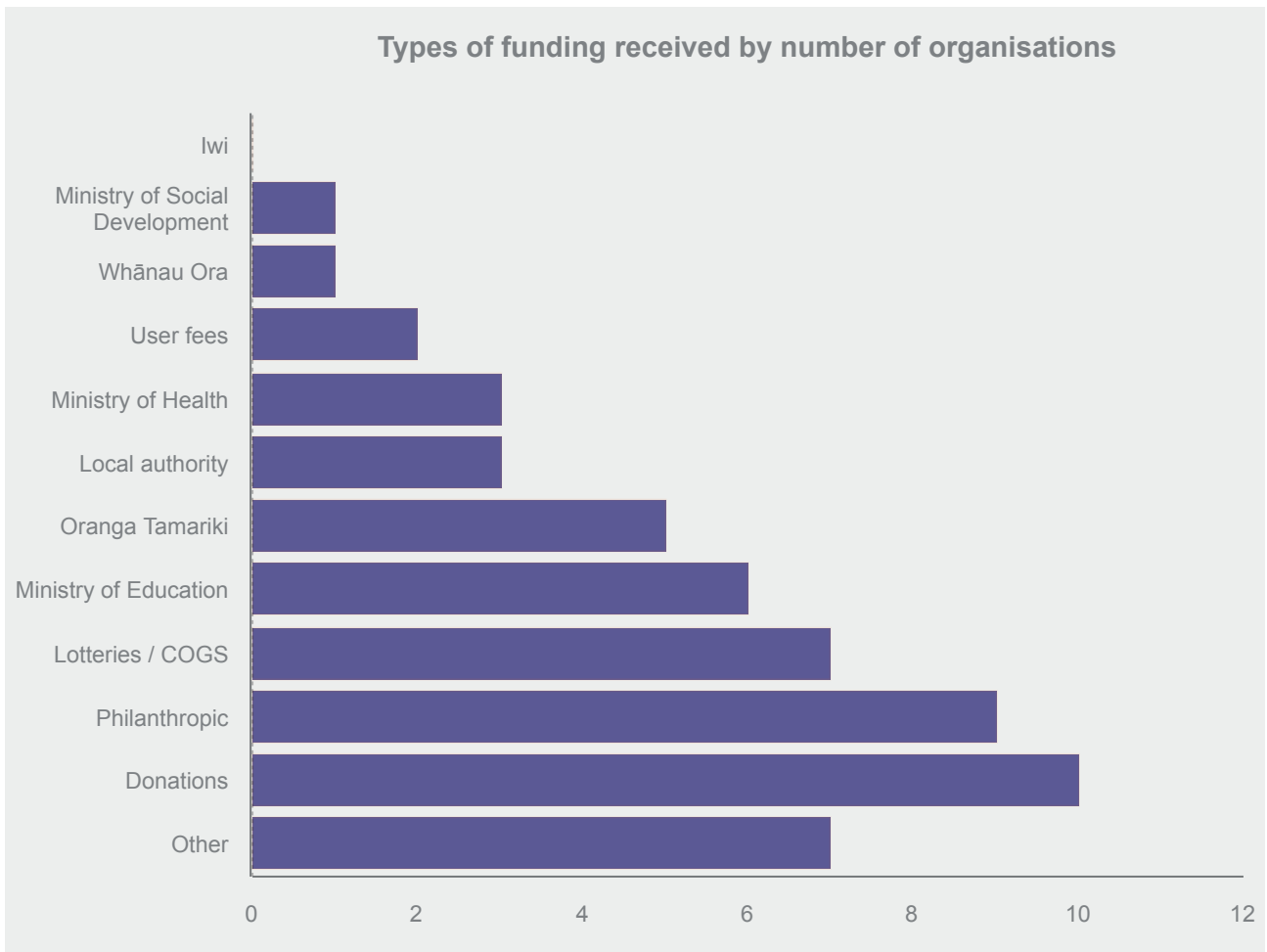
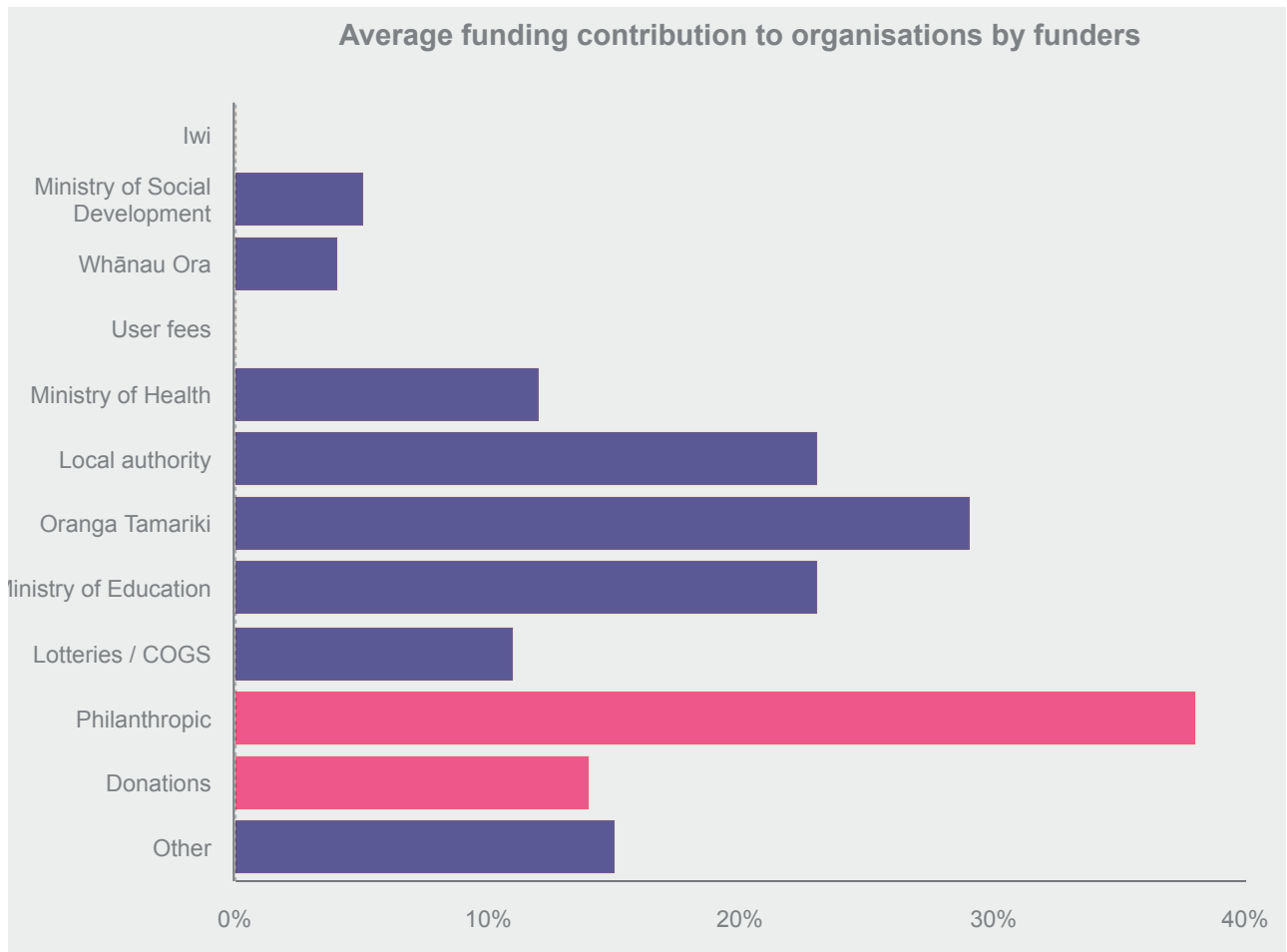


Figure 6: Average funding contribution to organisations by funders



Key points from this section

1. Although organisations may enact their services differently, there were several **commonalities** evident in interviews and apparent in survey responses. They are:
 - Each organisation's aim is to strengthen whānau for the betterment of babies/children.
 - Increasing whānau capability by educating and providing advocacy for parents/whānau.
 - Educating others and providing advocacy for the work of the sector.
2. The Early Years sector organisations that responded to this research **are diverse** in size, financial resource, approach and purpose. This is necessary to respond to the diverse communities they serve.
3. Funding comes from a range of sources. Philanthropic, Lotteries/COGS and donations play a vital role in the delivery of support in the first 1000 days of a baby's life.

Barriers, enablers and opportunities



Barriers, enablers and opportunities are interconnected.

This section explores the barriers and enablers to success described by participants in this research and the opportunities identified through analysis of interview and survey data. The three (barriers, enablers and opportunities) are inextricably linked.

Barriers

Leaders, through the interviews and surveys and governance members through the survey identified several barriers for their organisations.

Levels of funding

Funding impacts directly on service provision and the reach and scope of organisations. It also had a significant impact on the capacity and capability of organisations. As this leader says:

"Funding is the critical factor in us achieving our desired outcomes." (Leader survey comment)

Interview analysis emphasised that **funding directly impacts on the capacity and capabilities of organisations.**

Some were very large organisations, which had national reach and drew in a lot more funding than smaller ones.

"Our organisation is across the country." (Interview)

"We have about 70 staff – and we have an evidence-based programme. So, we have several sites across New Zealand, and we have a national presence." (Interview)

The size and funding of the organisation had implications for organisational capacity, in terms of the distribution of services and ability of organisations to work with whānau who may find it difficult to travel and access services.

Importantly, **size and funding had implications for staffing and for professional development available to staff**, including ongoing supervision and mentoring opportunities. Creating an organisational culture that valued and strengthened staff capabilities was key to providing effective services to whānau according to this participant:

“There is always a need around the strengthening of capability of staff – that’s just what you need to do as an organisation. Everything from professional boundaries – and how to write clinical notes. It’s important for us that we create and maintain a culture where you don’t lose staff – create a culture that enables them to grow. And we are big enough to allow them to build up, providing them with opportunities for continual development. But you need to have the funding to do that- we have grown from 42 to 70 full-time staff.” (Interview)

Other organisations appeared to rely heavily on volunteers.

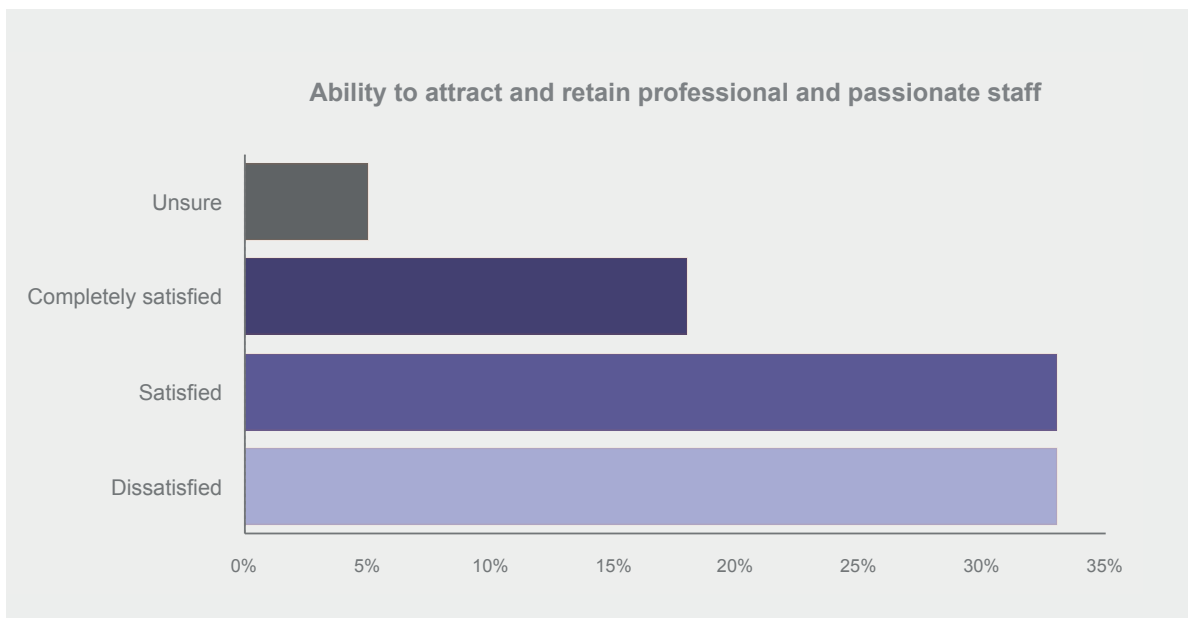
“We have a lot of amazing volunteers – and that is important because we only have two part-time paid staff.” (Interview)

The size of the organisation could influence the services available, particularly for whānau

who struggled financially. For example, a larger organisation could fund travel (one was able to provide airfares or provide petrol vouchers) so whānau could access their services regardless of their location or financial situation. This was not common however, and most organisations discussed the need to make careful financial decisions, focus on core work and noted the lack of flexibility allowed by tight contracting.

Leaders spoke about the **impact of ‘funding differentials’**. This manifested in several forms. There were differences between how they were funded through their contracts, and how government organisations were funded. Consequently, organisations may be unable to provide comparable pay to government agencies, despite the fact that they are delivering government contracts. There could be funding differentials which meant some staff were paid at different rates to others. Paying for trained, professional/clinical staff was expensive, and the cost of living had increased (along with some wages) however, funding had not (and in some instances had been cut). Being able to attract and retain professional and passionate staff was of concern to a number of survey respondents as demonstrated in Figure 6.

Figure 6: Being able to attract and retain professional and passionate staff

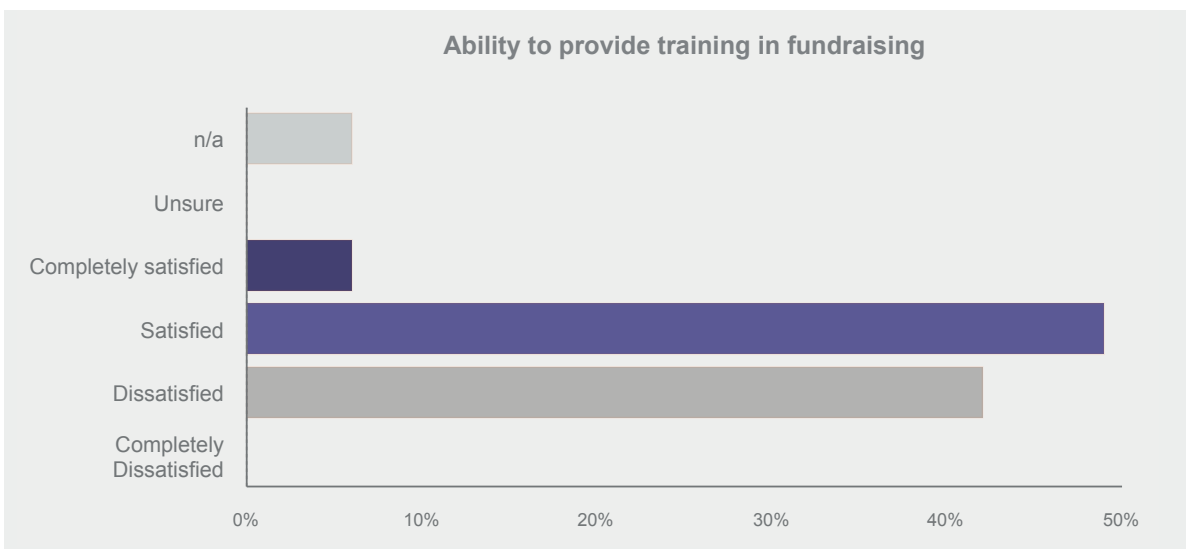


Some participants believed the size and history of Early Years sector organisations had resulted in a divisiveness in the sector. Larger organisations were perceived to more easily obtain funding (either through contracts with government agencies or through funding applications to philanthropic organisations). However, there was general agreement that there was a need for more collaboration across the Early Years sector and more 'joined up' thinking.

Gaining funding and demonstrating impact

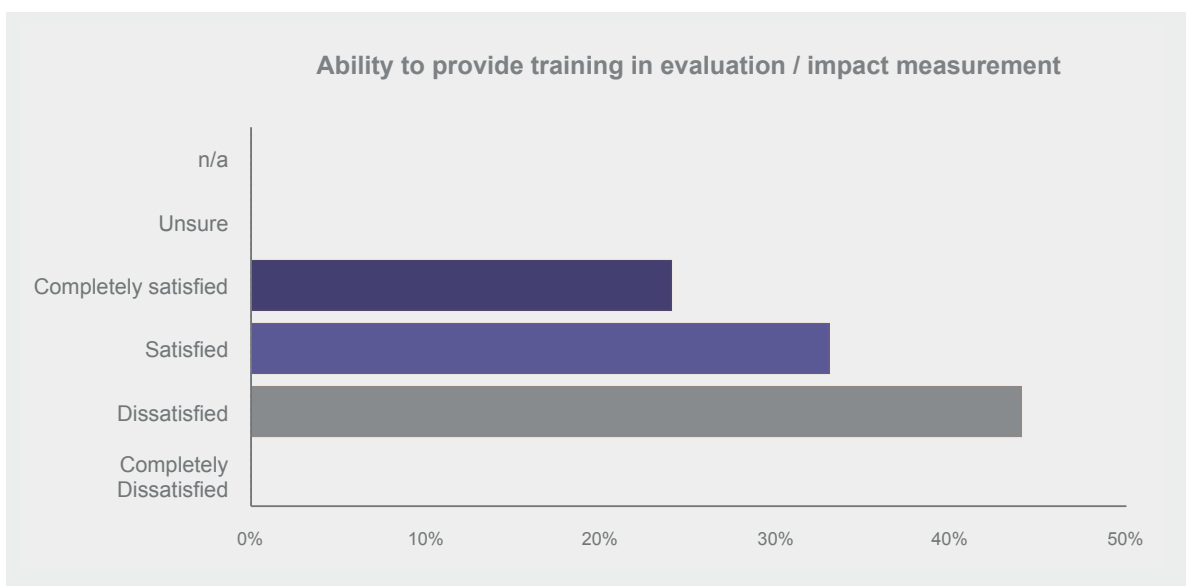
Organisations rely on accessing sufficient funding to continue to provide services. It is understandable that growing internal capability to fundraise was identified as a priority by several leaders and governors. The following figure shows that 43% of respondents were dissatisfied with the ability of their organisation to train their staff in fundraising.

Figure 7: Training in fundraising



Previous research (Savage, et.al. 2018) identified the need for organisations to be able to prove to funders that what they do has impact and makes a difference. While survey respondents were satisfied with accountability processes, Early Years organisations have conveyed a need to improve staff training in this area.

Figure 8: Training in evaluation / impact measurement



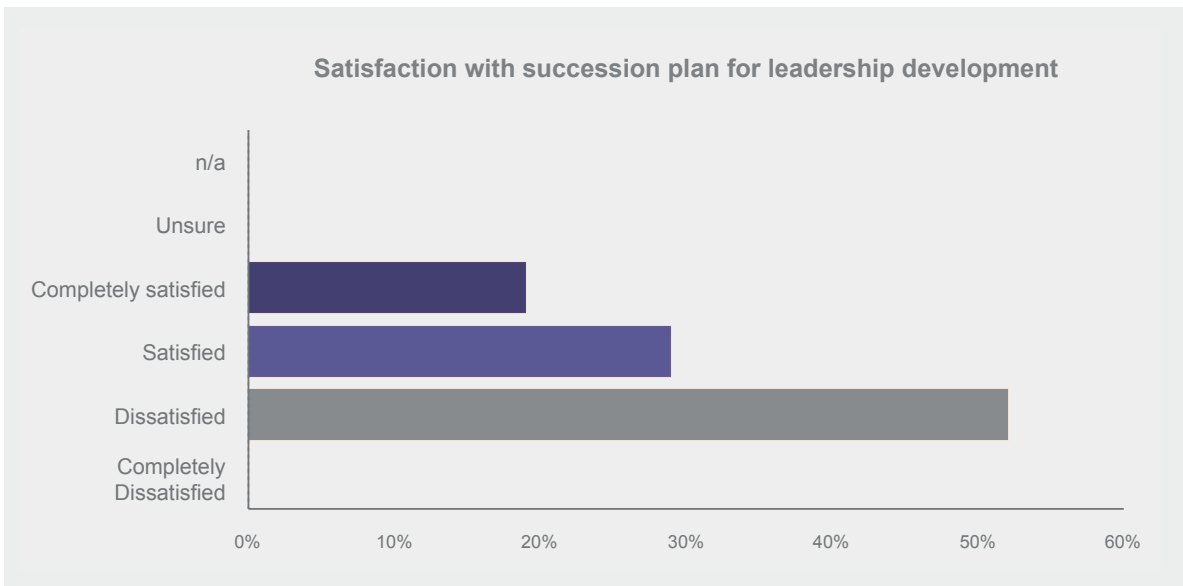
Developing leaders and succession planning

Several participants discussed moving into their leadership positions because they were good at their clinical or delivery role and the difficulties they faced adjusting from a practitioner role into management. Consequently, the importance of strengthening and utilising young leaders in the sector was highlighted. This was often considered an internal capacity issue, dependent on the availability of resources within the organisation. Succession planning was considered important for several participants.

“A number of us will be retiring in a couple of years and my key concern is really around succession planning. I think we need to do more to provide leadership opportunities for younger people in the sector.” (Interview)

Figure 9 demonstrates that over half of the survey respondents are dissatisfied with their current succession planning for leadership development, indicating this is an opportunity for development.

Figure 9: Having a succession plan for leadership development



Supporting those who had been clients of the organisation to upskill and become part of the service delivery teams was considered a key opportunity as they had ‘street-cred’ and were important role models for others. However, although these people may be viewed as key leaders, they may have police records which constrain the way they can be used within organisations.

“We have a number of young leaders here who we really want to invest in. One of the issues we have faced though, is some of our best people (those who have been through our services) may have police records which limits the way we can use them.” (Interview)

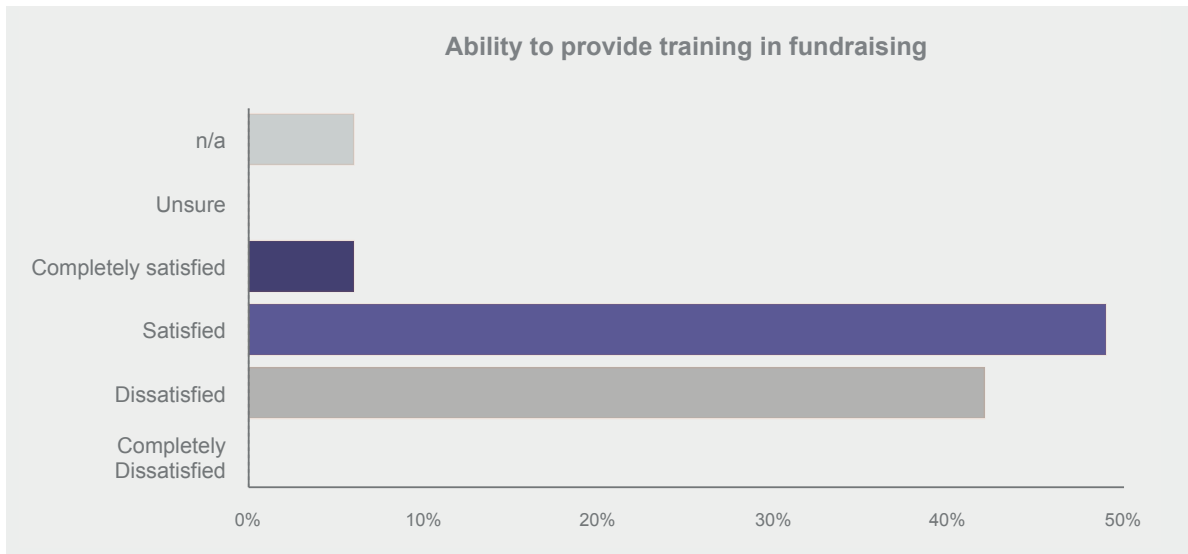
A few participants explained they had moved up through the organisation, starting as a volunteer or unpaid staff member. Their experience had ignited a passion and interest in the work and the services provided to whānau.

“I started as a volunteer with my own children. And then I became really interested in the work and went on to do my own study. I love the work.” (Interview)

In smaller organisations there was limited capability development available for team leaders and for organisation leadership to upskill. There was interest in formal leadership development work, particularly in relation to business skill and knowledge development (e.g. HR, change management, operational

management, employment law). This issue, first identified in the interview phase is supported by survey data, evidenced in Figure 10 below.

Figure 10: Training for HR/ organisational management



Engaging 'hard to reach' whānau

Qualitative survey comments indicate that barriers for Early Years are viewed as predominantly capacity rather than capability factors by the respondents. Staff capacity was linked to financial resourcing. In order to focus on building relationships with difficult to reach whānau, organisations conveyed a need for more staff or staff time. More staff or staff time, in turn, requires more financial resources.

Participants believed more needed to be done to educate funders on the time it took to develop relational trust between organisations and 'hard to reach' whānau. Having the right staff, who shared the lived experiences of these whānau was also essential; however current government policies could limit staff access to families and children.

"One of the challenges in working with 'hard to reach' whānau is that lack of recognition by funders – and we need to do more to educate them on what it takes, the amount of work it takes to reach these families. It takes a lot more time because you need to build that relationship. And then it's about having the right staff – and often the staff who work best with these whānau, they might not tick all the right boxes because they haven't been the best children themselves – some of them in the past were playing up, so they might have records, police records that limit what they can do and where they can go. Particularly when we talk about young children - in that work - it would limit a lot of my men because of their past. And it's about our sector, and particularly the contracting sector, however these staff members are the best to work with and engage those whānau, because they understand them, they have been there themselves." (Interview)

A barrier for some organisations was a lack of visibility and knowledge of their services for families who would benefit from them. Some organisations have difficulties engaging specifically targeted clients (e.g. isolated young parents). The unwillingness of some whānau/families to receive support was also perceived as a barrier to engage with these families.

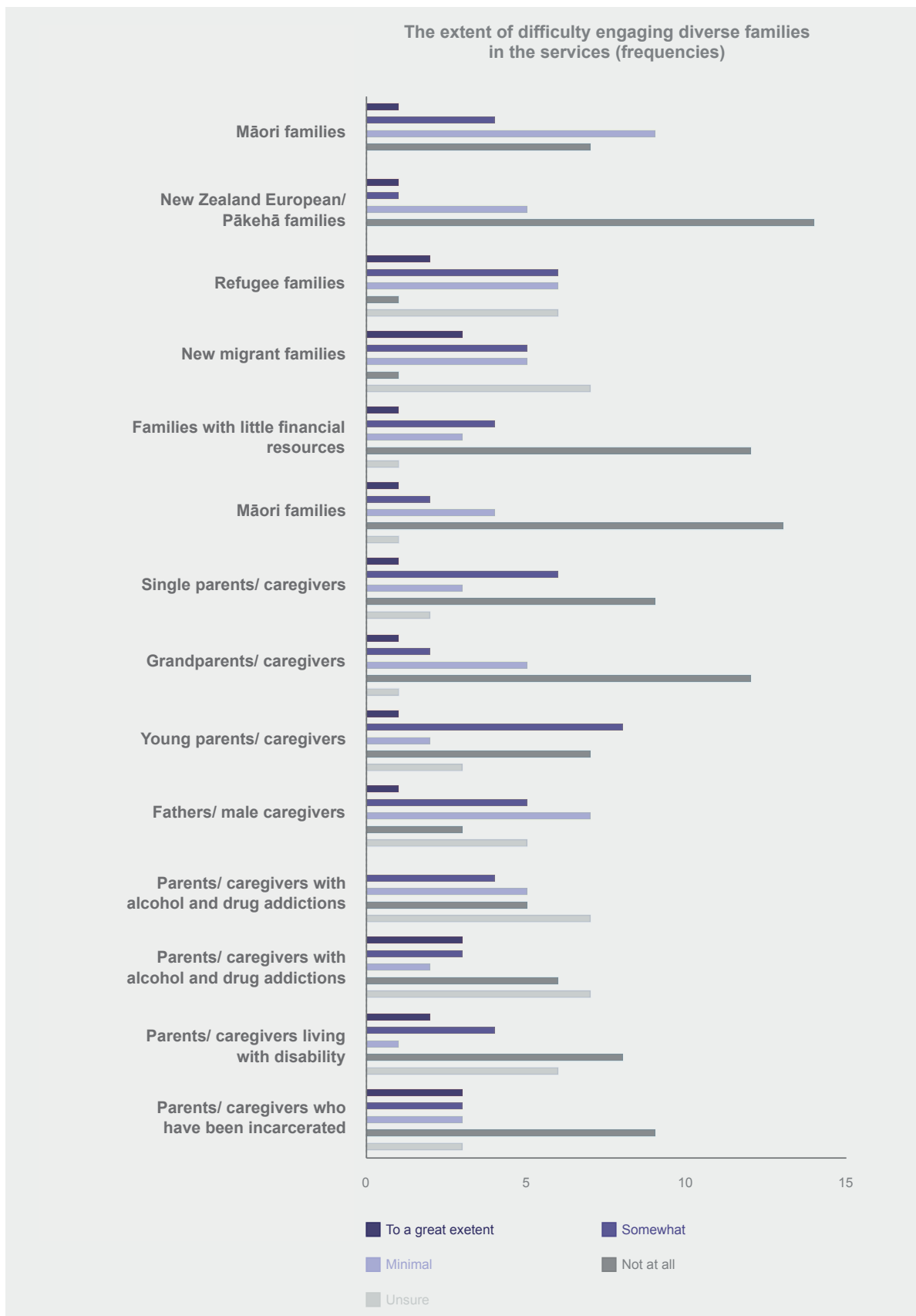
"I think we can always do better in this area. Are there enough support networks for migrant families to understand the services we provide and how they can access them? I would like to see more done in this area." (Interview)

Language barriers appear to be a factor when engaging with migrant families; this could be overcome with trained interpreters if resourcing was sufficient. As per capability barriers, some organisations mentioned

a need for more specialists (i.e. social workers, psychologists) with knowledge of kaupapa Māori, and Māori for Māori interventions.

Figure 11 demonstrates which groups of families are considered difficult to engage. There are client groups that services have greater difficulty engaging with (e.g. new migrants, refugee families, male caregivers). The responses to this question varied significantly; the services indicated they have difficulty engaging 'to a great extent', however, there are also services which have minimal or no difficulty engaging with the same group.

Figure 11: Extent of difficulty engaging diverse families in the services



The perspectives of 'hard to reach' whānau

'Hard to reach' families/whānau included Māori and Pacific families and/or those with little financial resources, very young parents/caregivers, parents/caregivers who had alcohol and drug addictions, and/or who had spent time in prison. Parents/caregivers with disabilities and mental health issues were also identified as 'hard to reach'. Most organisations felt they needed to do more.

"We used to have connections with 'hard to reach' whānau, through PAFT, but we lost that, it's under a different organisation. We do Youth Parenting and we have just started a relationship with Corrections Services, and we could reach out a lot more. We have done more with the Dairy Women's Network because a lot of migrant workers are in that industry. So, we could do more, and we are trying to reach out to those families." (Interview)

Flexibility of services was important for addressing whānau needs, particularly those hardest to reach. Valuing, listening and responding to these whānau voices was key to ensuring effective services. The following quote demonstrates the extent to which organisations work to address potential barriers for whānau.

"We have done research on engaging these whānau, but it's about learning about engagement from a whānau perspective. It's about responding to their needs. Our Men's group come at night – so we put on One Pot Wonders, so they don't have to worry about kai. It's here for them. We want them to come in – and we always have music – and it helps to de-escalate any tensions. We pick up our Dads, so it isn't a problem if they don't have transport – so that's the big picture of engagement – it's about the little things – the manaakitanga. So, the kaupapa is more than just speaking te reo – yes, our language is beautiful, and people love hearing it – but it's our way of being – providing that aroha, it's hard to describe. It really doesn't matter if you are Māori or Pacific or non-Māori, you are treated all the same. It's our way of being – that helps us with that connection to people." (Interview)

Three young Māori mothers who were not engaged with any of the services offered by organisations in the first 1000-days were interviewed individually. These wāhine spoke about their own individual circumstances and why they had either disengaged, or chosen not to engage, with the Early Years sector.

These mothers and their children could be considered at risk or vulnerable. They had experienced physical and/or psychological abuse by the fathers of

their children. All were single parents, reliant on a benefit and two had more than one child. Those with more than one child had also not engaged in services when they had their older children.

When we asked them about why they were not engaged they gave similar reasons.

They did not want to be judged, and had felt judged either when they briefly engaged with services, or in the hospital system. At certain points, either during their pregnancy or during child birth, they felt they had not been listened to. Consequently they felt a loss of control and this impacted on their willingness to engage with others. This mother explains:

“Yep, because I was right in the end but no one was listening. I ended up having to have a caesarean section. Staff and the midwife didn’t listen, but they realised when his heartrate kept dropping. His cord was wrapped around his neck twice. I was getting frustrated - they were trying all these unnecessary processes.”

They had often been sent home quickly after the birth of their babies. One had two older children and had been sent home four-hours after the birth of her youngest child:

“I think there was just an expectation for us to leave after we had had our babies. There wasn’t as much care. I don’t know if that’s their intention, but you’ve had your baby - go. You aren’t in danger or anything, you’re not going to pass out, so just go.”

Another was not permitted to transition to her preferred maternity centre because the baby’s father had a history of violent behaviour. There was not sufficient security for her to be allowed to transfer closer to whānau/family support.

One young wahine did engage with a post-natal support service. This provider only visited once, did not respond to phone calls and the mother gave up. She felt unwilling to engage with other services because she thought it would be a waste of her time. This wahine had maintained an intermittent relationship with one support worker from a family violence organisation. When asked why she engaged with this particular support worker she stated:

“She has experienced similar challenges to me, she hasn’t had an easy life and she understands. Most of the time, I feel like people judge me and my situation and don’t understand. She’ll come visit and have a cup of tea and we can talk about lots of stuff, as well as the troubles I’ve had.”

For two of the wāhine interviewed, it appears they were unaware of the services that may have been available to them. One spoke about accessing helpline support and the desire to be engaged with services but clearly was not aware of what was available:

“There were a lot of times I questioned myself, there was a support line I used once because I was in a terrible head space, more of that would be great. I had to look that one up, if we were told about these perhaps it would have been easier. It was a couple of months after baby was born. So when the midwife was gone, there should still be

services out there.”

The three services all these mothers engaged with were their GP, their midwife and the hospital. It is evident that all three services have a role in assisting vulnerable mothers to access the organisations that are available to them to ensure their babies have the best possible start to life and they receive support as young mums.

Midwives in particular can play a vital role. They have a sustained relationship with the mothers during the pre-natal period and have an opportunity to build rapport and trust. The mother with three children had the same midwife for all three births, so had known her midwife over a number of years. Similarly, GPs have the ability to develop a trusting relationship and to know what is happening in the lives of their patients. These two medical professionals have the opportunity to play a proactive role, not just referring, but introducing services to mothers who need them, but may not make the connections themselves.

The time in maternity care after child birth presents as an opportunity for services to be introduced to the mothers and their support people. As this mother explains:

“It would have been good if services came in after he was born, it would make it easier to connect with them.”

Access and communication becomes more complicated once they return home. They can be transient and hard to contact; transport becomes an issue, especially if they don't have a car seat or know how to fit it; and other influences (such as the baby's father) may further complicate the situation. Those in violent relationships may deliberately be isolated from support by their partners.

It was clear that grandparents are an important support to these at risk mothers and their babies. This support included providing mum and baby with support immediately after the birth (often taking time off work); financial support; purchasing baby clothes, nappies, groceries, equipment and furniture; accommodation; moral and emotional support and encouragement. The support grandparents might need as they in turn support their mokopuna was not explored in this research. However, Māori made up 42 percent of grandparents raising grandchildren in the 2013 census (Gordon, 2018) and from the small sample of mothers in this research it appears likely many more provide moral, emotional and financial support. How services support and engage with Māori grandparents deserves further consideration.

Cultural competency

It is evident that staff and leaders are committed to engaging appropriately with the ethnically and culturally diverse populations that they serve. They want to provide a culturally responsive service and discussed a need to increase the cultural understanding, capability and competency present within their organisations. This was an issue **common to both mainstream organisations and kaupapa Māori providers.**

Many of the participants interviewed (including one participant from the kaupapa Māori organisation) believed more could be done to improve the cultural competency of staff. This was considered a key opportunity for improvement across the sector.

“Cultural competency is something we are constantly trying to improve on. The challenge can sometimes be if families come from cultures where disability is shameful.” (Interview)

“Although we are a kaupapa Māori organisation, we have whānau that include Pacific Island parents and caregivers, and so we also welcome these family members, and we can always be doing more in that area. Culture here, for us, is about wellbeing. And for that you need a well team. We need staff with a minimum level two te reo, but having said that, we'll provide training and it's not essential. A lot of our staff have been brought up in mainstream education – and missed the reo, so it's built in as a natural part

of being here, that development. I am a big believer – Māori for Māori, and we work with others too.” (Interview)

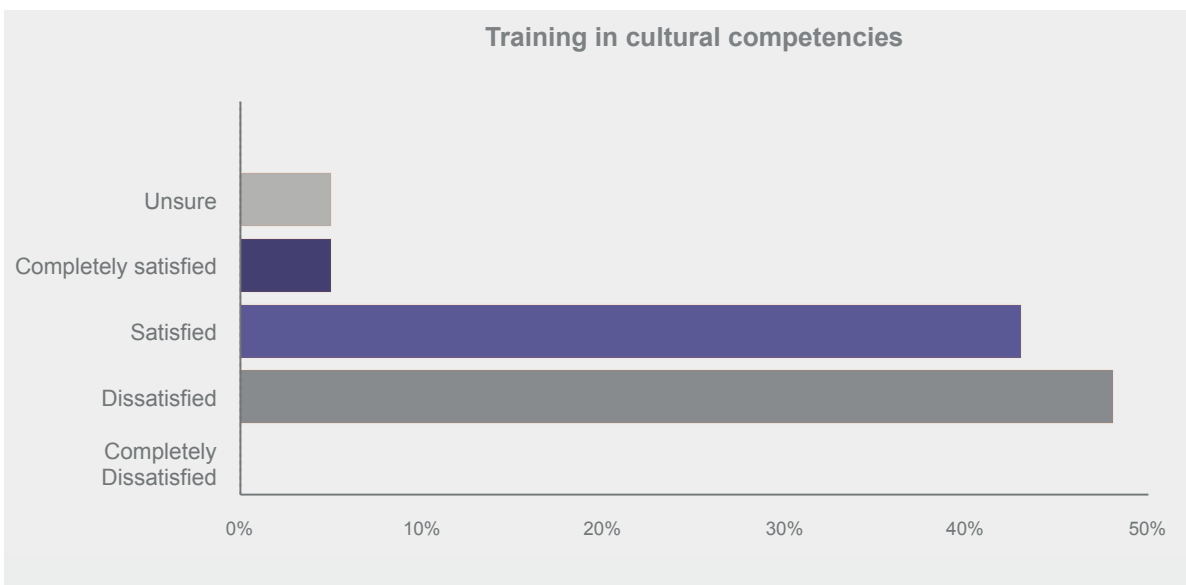
“Well our staff are predominantly Pākehā and we would love to reach out more to Māori and Pacific whānau/families.” (Interview)

Meeting the needs of culturally diverse groups, such as Māori and Pacific whānau/families, as well as refugees and migrant workers was acknowledged as an area that could be strengthened across the Early Years Sector. Interpreter support was expensive when dealing with families where the first language was not English. The involvement of communicators or interpreters added another layer of complexity as it was important to establish relational trust between service providers and the families themselves.

Participants were also aware they needed to do more to reach Pacific Island, Māori and other families who came from low socio-economic areas. The ability to reach out to families in these situations was not just cultural, but also financial as this participant explains:

“A lot of our families are Pacific Islanders, mainly Fijian and Tongan. There is a lot of need in terms of financial capability, many of our families have no financial assets, and no savings, so their ability to provide stable and secure home environments is compromised.” (Interview)

Figure 12: Training staff to enhance their cultural competencies



Leaders and governance reported the lowest levels of satisfaction with the support provided to staff to improve their cultural competency. This is broken down further in Figure 13, which shows the areas of lowest satisfaction for survey participants.

The high ‘unsure’ rate regarding the development of services that meet the aspirations of iwi may indicate that respondents are unsure of what iwi aspirations are. In November 2018, Te Rūnanga o Ngāi Tahu was the first iwi to sign a strategic partnership with Oranga Tamariki under s7AA of the Oranga Tamariki Act 1989. The partnership document states: “By working together the partners aim to enhance the impact and effectiveness of their individual efforts to achieve enduring outcomes for Ngāi Tahu tamariki, rangatahi and whānau.” This strategic partnership and Te Rūnanga o Ngāi Tahu stated vision: “Mō tātou, ā, mō kā uri ā muri ake nei – for us and our children after us” indicates the importance of the Early Years to iwi and the increasing presence of iwi in the sector and the care and protection of children in Canterbury.

Figure 13: Satisfaction with the provision of culturally responsive services



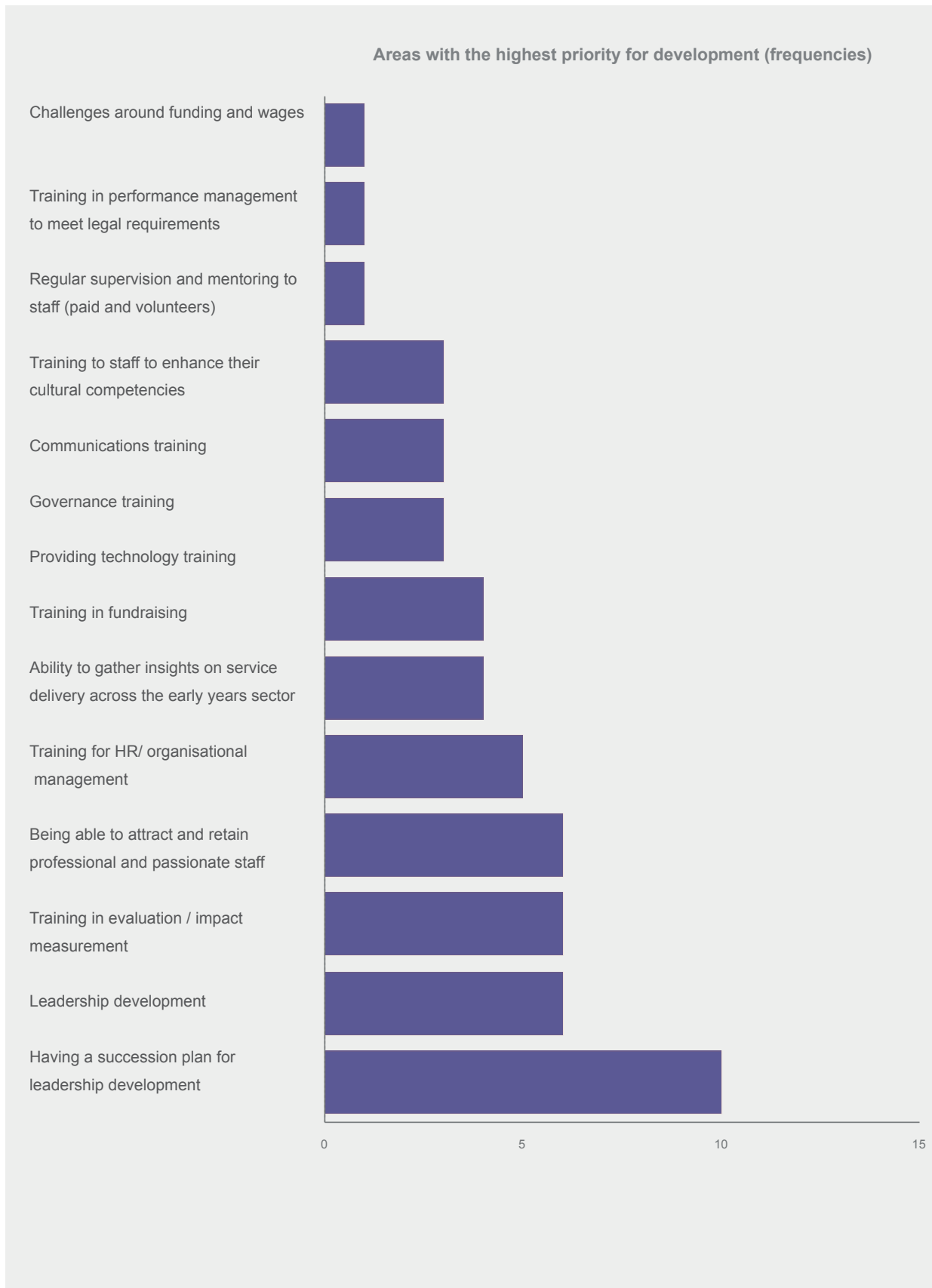
Highest priorities for development

Survey respondents were asked to nominate top three areas for development for their staff and organisation. Succession planning, leadership development, evaluation and impact measurement were the most commonly identified development needs.

Interestingly, given leaders and governance reported the lowest levels of satisfaction with the support provided to staff to improve their cultural competency (Figure 12), when asked to prioritise staff development needs, many participants did not prioritise cultural development highly.

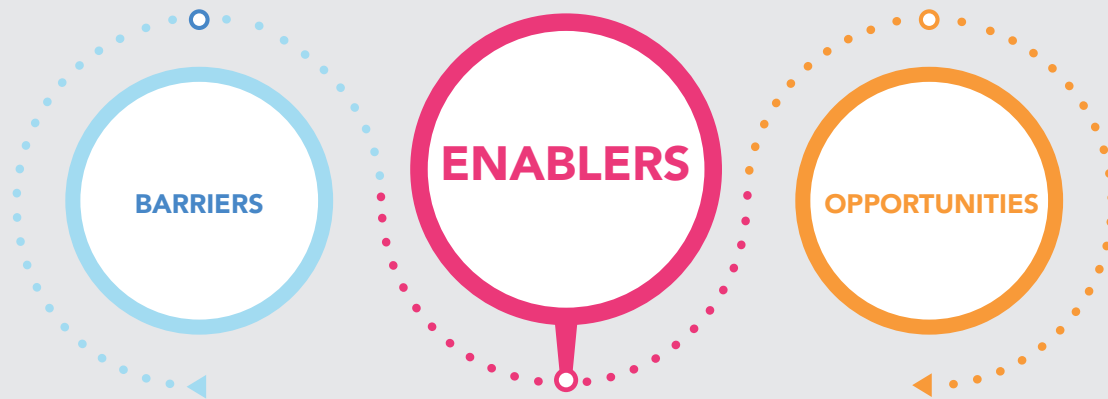
Areas of development survey respondents were satisfied with were strategic planning, staff care and specialist training, and accountability reporting.

Figure 14: Key areas with the highest priority for development



Key points from this section

1. The **capacity of Early Years organisations is limited by funding**, with many in this research relying on a significant proportion of funding from philanthropy, Lotteries/COGS and donations rather than from local or central government.
2. **Engaging hard to reach whānau is complex**; effective approaches are contextual to each whānau and each situation. Common barriers include a lack of awareness of services; the need for time to build and maintain trusting relationships; cultural and language barriers; and, whānau having limited financial resources.
3. Providers are aware they **need to increase the cultural competency** of the people in their organisations.
4. **Developing leaders, succession planning and improving management skills** of staff is a priority.
5. Improving capability to **demonstrate impact and evaluate** their effectiveness will contribute to the ability of organisations to attract funding.
6. Organisations are **not clear about iwi aspirations** for whānau and pēpi in the first 1000-days.
7. Of the organisations responding to the survey few specialised in services for **refugee and migrant families**. However, a number of organisations provide mainstream support that is available to refugee and migrant families. Respondents signalled the need to develop cultural competency in their organisations in response to Canterbury's growing diversity.



Barriers, enablers and opportunities are interconnected.

Enablers

All participants in the research were asked about factors that **enabled** their organisation to be effective. It was evident that the absence of barriers is itself an enabler. For example, a barrier might be short-term funding; its corresponding enabler would be securing long-term funding. In that regard the barriers discussed in the previous section inform discussion in regard to enablers, and in turn indicate opportunities to support organisations to increase their effectiveness and be more sustainable.

In addition, leaders and governance members who were interviewed and responded to the survey commonly identified the following enablers.

Highly capable and committed staff

Related to staff capacity and capability was the shared belief that **staff are the organisation's greatest assets (paid and unpaid staff)**. Staff strengths mentioned were: taking a strengths-based approach, demonstrating aroha, care and compassion, showing respect for whānau regardless of their circumstances, and going the extra mile. Hope was considered essential in the work. Typically, people who did this sort of work (including volunteers) were considered special – because they were motivated to work in this area, often with low pay in comparison to their peers in

other services.

“Our staff member’s ability to engage others and understand and reflect on their own practice is critical. The ability to have relationships with kids who kick holes in walls, or who are completely withdrawn is essential. Staff need to come from a heart place, aroha, and care and be compassionate. An understanding of yourself and your own bias is important and that is why ongoing mentoring and supervision is needed. The ability to work as part of a team and a passion for learning are also key.” (Interview)

“Relationship skills are absolutely needed. Acceptance is critical – many of our parents have been judged and they won’t come through our doors if they feel that. So, respect for everyone is absolute and the demonstration of that.” (Interview)

Interviewees from some of the organisations providing specific services (for example to children who had experienced trauma or who had particular disabilities) explained how it was essential that staff had specialist knowledge and expertise, and regular mentoring/supervision, aligned to best-evidence practices. They also emphasised the importance of staff having relational expertise and care.

“Here in our organisation we need people who have specific skills (for example speech language therapy, or occupational therapy) so it’s knowledge, it’s skill

and caring but it's also belief in advancing children's capacities in whatever way works for children and their families. So the kind of model that works really well is more like Playcentre, so the relationship between the child and family is much more involved – or centres that are focused on meeting individual needs, so it's not driven by the needs of the staff and their shift schedules – it's driven by the needs of the child and their whānau/family so it's the ability to provide parent-led services.” (Interview).

Values based leadership

It was evident in the interviews that the leaders of Early Years organisations have strong personal values and these values permeate the organisations they work for. They are committed to their mission and are concerned with what they are doing, and importantly, with the manner in which the work is carried out. They have genuine care and concern for their clients and for their staff. As funding is limited, the funding that is available is prioritised to delivery. Consequently professional development for existing leaders and for the development of future leaders was often sacrificed.

A supportive philanthropic sector

In the first section, Figures 5 and 6 demonstrated the important role philanthropic, Lotteries, COGS and donations plays in the funding of Early Years organisations. They are the funding sources accessed by the highest number of organisations (donations 10/12, philanthropy 9/12) and together make up, on average, 52 percent of Early Years funding. These statistics portray a philanthropic sector that understands and supports the important work undertaken supporting children and their whānau in the first 1000-days. However, this also demonstrates the gap that organisations work to close between the funding they receive from local and central government, and the funding it requires to meet the needs of the community they serve.

Key points from this section

1. **Barriers, enablers and opportunities are interconnected.** The ability to negate a possible barrier is itself enabling. The relationship between barriers and enablers indicate opportunities to support the sector.
2. Respondents identified the following as enablers:
 - The capability, capacity, commitment and **effectiveness of staff.**
 - Strong, effective, **values based leadership.**
 - The support of the **philanthropic** sector and the generosity of donors.



Barriers, enablers and opportunities are interconnected.

Opportunities

Survey respondents were asked what they would change about their services if they had their wish. Under ideal circumstances, most of the organisations would like to increase their current services and expand their reach. Organisations expressed their wish to expand their reach to specific target groups (e.g. breastfeeding mothers, pregnant women, vulnerable families with babies and young children, and children with less severe developmental delays and disabilities) and a wider population (i.e. shift workers, salaried office workers).

“Increase our operational reach to include programme delivery in shopping malls, workplaces and other spaces where we can remind and support parents from all walks of life to prioritise spending quality time with their children.” (Governance survey comment)

The areas of deeper focus included improving attachment, early language development, spending quality time with children, parenting support and intensive support to children with complicated needs. Several organisations would like to provide fully funded services to clients (including no membership fees), more free learning resources, day courses and support groups. In addition, some would like to expand free training to volunteers.

An emphasis was also given to initiatives to improve clients’ access to services such as employing a driver to assist clients; providing car seats; being able to visit homes and community venues; and opening a service site at other locations. Establishing a residential facility was suggested for supporting and educating vulnerable mothers and babies with trauma or care and protection issues.

Increasing connections between potential collaboration partners (early childhood centres, Plunket, GPs, family support service) was emphasised by some organisations.

Potential for collaborative effort

Interviewees believed that increasing or providing opportunities for collaboration across the Canterbury Early Years sector was a key opportunity for strengthening the sector.

Responses to the survey show there are some collaborative activities in place (Figure 15). However responses to the questions in Figure 16 suggest that currently there appears to be no common support mechanisms or networks to connect services across the Early Years sector (although it’s important to note the larger organisations do have national networks/mechanisms)

Figure 15: Current engagement with collaborative activities

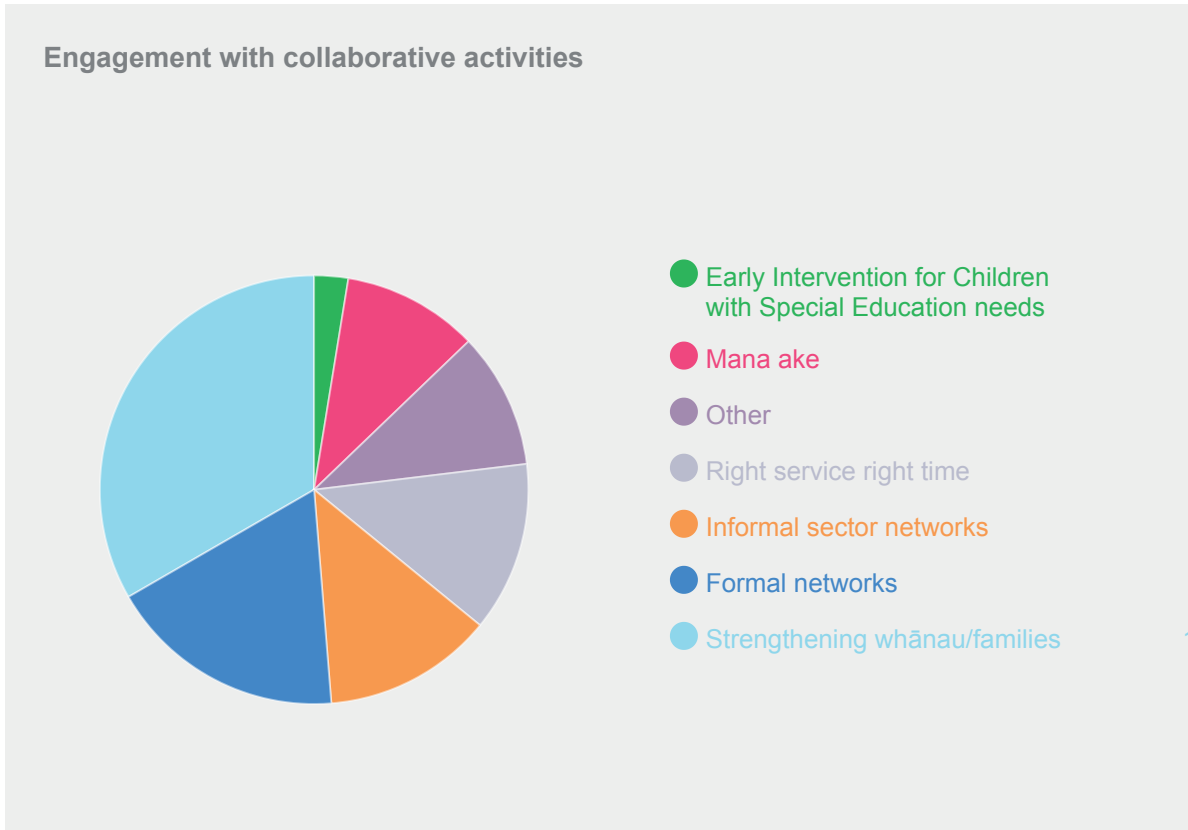
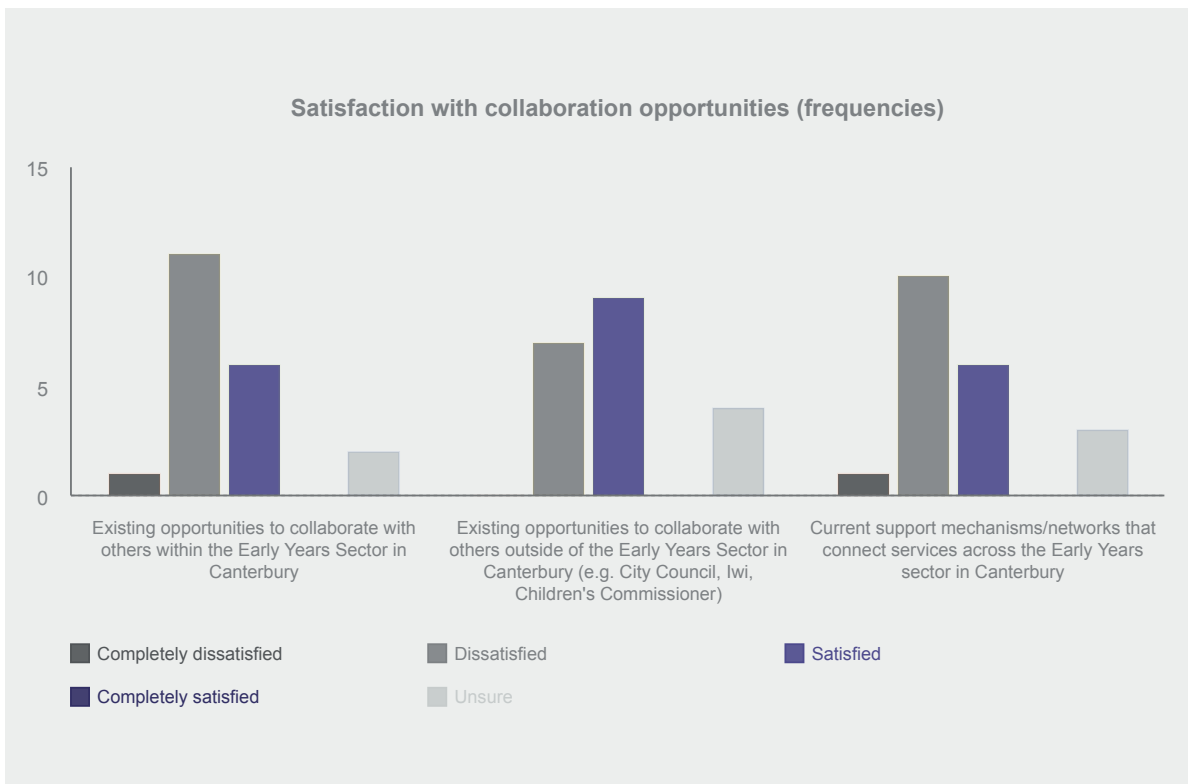


Figure 16: Satisfaction with existing collaborative opportunities



There was willingness for more collaboration and information sharing as described by this interviewee:

"We are trying to find better ways to share our knowledge between us and the (other organisations) – so to better support one another's work for the betterment of our families, so I would love to be more involved and helping other organisations with issues around delay and disability and to learn more about the work we do – and for us to know more about complex families and support networks that are available that we might not know about." (Interview).

Whilst there was willingness, there were also acknowledgements of constraints that needed to be considered. Issues noted included providing release for staff, and paying for their time to attend any event when existing contracts were focused heavily on delivery.

"I think there is a general willingness to collaborate across the sector– but it's time and funding. Most of us are just trying to get the work done." (Interview)

A few interviewees (whilst acknowledging more collaboration was needed) were concerned that any planned activities would end up as a 'talk fest' with little follow-up or meaningful action. This had happened before and meant participants could be wary of collaborative events.

"We have had government agencies try to build collaboration before – but it's all hui and not much doey. There is often no follow-up coming out of these events." (Interview)

Some interviewees felt collaboration could result in a shared strategic vision for Christchurch – that unified groups both within the Early Years sector but also with outside agencies/partners such as the city council and government.

"I think Christchurch has real potential to do something quite revolutionary – and to emphasise the message that Christchurch really cares for its citizens. So, we could be doing something quite revolutionary in terms of really supporting our whānau/families and our tamariki/children and that

could involve work with the Christchurch Council." (Interview)

"Things like coming together to create a larger vision for Christchurch would be good - that would give you opportunity to collaborate with people. We do see other agencies as a bit competitive – but having forums where we can share a vision across the Early Childhood sector, that would be great." (Interview)

A suggestion made by a couple of organisations was 'mapping the Early Years system' across Christchurch so organisations could have a better understanding of 'who does what'. This was important for referring families to other services. There was some mention of AllRight? having done something similar around the time of the earthquakes.

"It would be good to have an up-to-date service map that outlines all of the services available to people in Christchurch for referral purposes." (Interview)

While competition is an issue for some, there were organisations that expressed a willingness to share their knowledge and expertise.

"We are committed to working on collaboration this year and have plans for a sector network event. We are certain that our service has an important point of difference and is not replicating others but feel there is a real gap in sector wide coordination that would significantly improve outcomes for families." (Governance survey comment)

"We hold considerable IP around infants and young children with developmental delays and disabilities and would welcome the opportunity to share this knowledge and practice through training and research." (Leader survey comment)

Early Years organisations have diverse strengths, skills and knowledge. There is an opportunity to learn from each other in order to upskill staff, improve cultural competencies, increase engagement with 'hard to reach' whānau, and improve the experience whānau have when engaging with services.

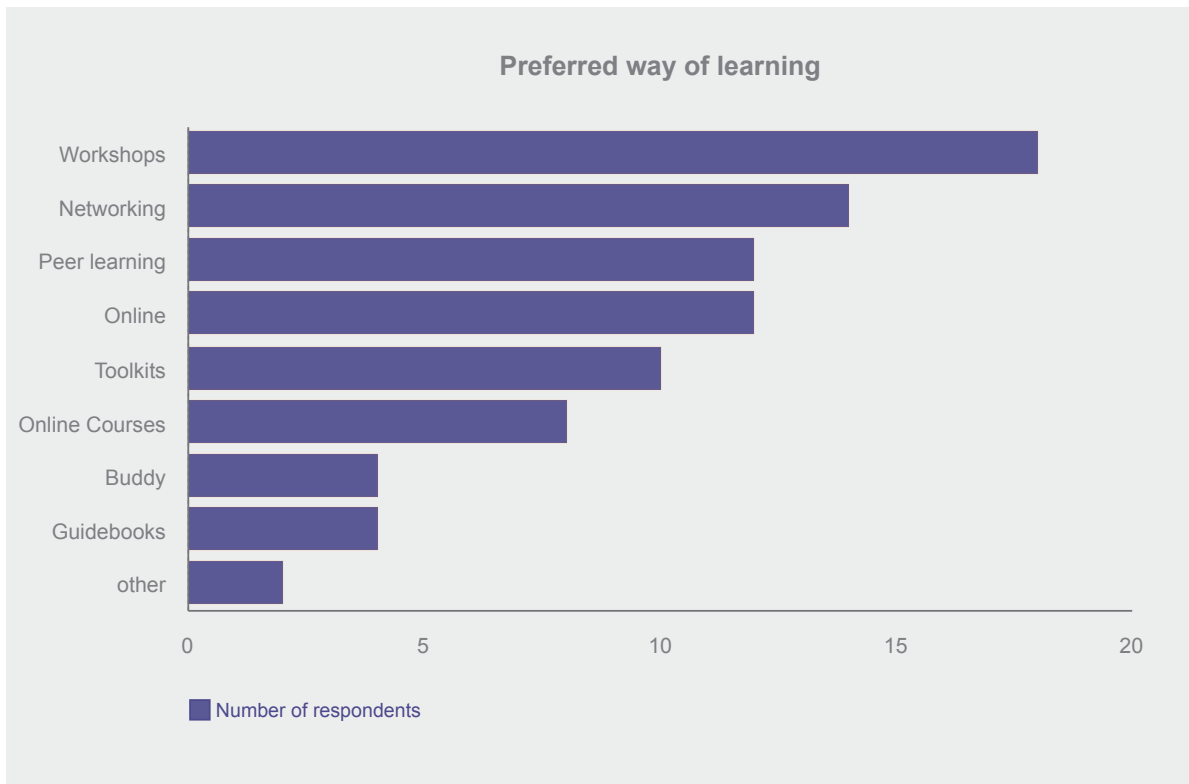
Capability building support

In addition to learning from each other, there is an opportunity for Rātā Foundation to support capability building in a number of key areas identified through interviews and survey responses. These have been identified earlier in this report as:

1. Cultural competency (for staff engaging with Māori, Pacific nations, refugee and migrant communities);
2. Succession planning; developing the management and leadership skills of prospective leaders; and, developing organisations' abilities to demonstrate and evaluate impact. This links to;
3. Fundraising and accessing funding.

In order to ascertain the method of delivery that is most likely to be successful, survey respondents were asked how they preferred to learn. The results are illustrated in Figure 17.

Figure 17. Survey respondents preferred way of learning



Key points from this section

1. There is an opportunity for Rātā Foundation to contribute to capability **development** in the sector in targeted areas such as:
 - Cultural competency (for staff engaging with Māori, Pacific nations, refugee and migrant communities);
 - succession planning; developing the management and leadership skills of prospective leaders; and,
 - developing organisations' abilities to demonstrate and evaluate impact, possibly through the development of an Early Years outcome framework. This links to;
 - fundraising and accessing funding.
2. Mapping available services may increase knowledge of available services, utilisation and aid referrals and facilitate greater access for whānau.
3. Rātā Foundation could broker the development of a **shared vision for children in Canterbury** shared by organisations, iwi, local and central government and other stakeholders (e.g. Children's Commissioner). This could be a catalyst for increased collaboration, more realistic funding and strengthen the sector.
4. **Mapping available services** may increase knowledge of available services, utilisation and aid referrals and facilitate greater access for whānau.
5. Organisations would like to **expand their services** to better meet the needs of their clients and deliver more specialised support.

Key Learnings

The findings from this research add to the knowledge generated by the Information Team, Community and Public Health, CDHB, in 2018. Their report was prepared for the Hauora Alliance examining support for South Island families/whānau in the first 1000-days. The report identified a series of actions under the Te Pae Mahutonga (Durie, 1999) health promotion model for consideration by Hauora Alliance member organisations:

Ngā Manukura (leadership)

- improving integration of existing services within and across sectors
- advocacy for increased spending on existing services and consideration of need for new services, particularly in the evidence-based areas of supporting improved parenting skills and targeted home visiting programmes
- formalising organisational ownership for the first 1000-days, including improved measurement and accountability for outcomes for the first 1000-days

Te Mana Whakahaere (autonomy)

- improving access to family planning services, pregnancy and parenting education and information, parenting skills training, and support for all parents
- encouraging and supporting community solutions that assist young parents to engage with services and support, including identifying specific opportunities to increase home visiting and/or parenting training and support services

Waiora (physical environment)

- incorporating support for improved housing conditions for parents in any new or existing services targeting the first 1000-days
- supporting initiatives to improve wider environmental conditions, such as air and water quality, known to be suboptimal in some parts of the South Island, and to have a disproportionate impact on very young children
- improving data collection on key environmental factors such as housing quality when parents engage with health and social services

Mauriora (cultural identity)

- developing services that are more culturally appropriate and inclusive
- supporting existing services to be more culturally appropriate and inclusive
- developing and supporting partnerships with iwi and cultural organisations to build family/whānau support and to connect with and support pregnant women and young families

Te Oranga (participation in society)

- reducing the impact of poverty by ensuring services engage with families with limited financial resources
- improving access to culturally appropriate and inclusive family planning, maternity care, primary care, and social services for all parents
- improving service connections and continuity across all stages of care

Toiora (healthy lifestyles)

- reducing overall smoking rates, particularly in adults of parenting age, improving smoking cessation rates for pregnant women
- improving breastfeeding rates across all communities
- educating and supporting parents to help their children eat well and be active, through pregnancy and parenting skills training and targeted home visiting programmes
- promoting environments which support healthy food choices and physical activity

(Durie, 1999, adapted by Hauora Alliance, 2018)

The purpose of this research was to investigate the organisations in Christchurch that provide services in the Early Years. The research findings concur with those of the Hauora Alliance in that:

- There is a need for integration of existing services.
- The importance of advocacy, measurement and accountability across the sector.
- There is a need to develop services that are culturally appropriate and inclusive.
- Early Years services need to be cognisant of iwi aspirations.
- There is a need to improve service connections and continuity across all stages of care.

In addition, this research identified that:

- Many organisations rely on a significant proportion of funding from philanthropy, Lotteries/COGS and donations. Organisational capability and time is required to continually seek funding.
- The funding and support for organisations is focused on service delivery rather than capability building which constrains development of the sector.
- Organisations are aware they need to increase the cultural competency of the people in their organisations, but don't prioritise this need as highly as might be expected.
- Succession planning for leadership is a priority for Early Years organisations.
- GPs and midwives are a key connectors for families into services early on.
- Early Years services report that mapping the services across the sector would increase access and capacity.

The Hauora Alliance report and this research demonstrate there is a need to create more cohesion across the available Early Years services through; mapping services, sharing expertise, shared strategic planning, and activities to support sustainability; such as succession planning, measuring impact and building staff capability. This research demonstrates that while the organisations share similar intentions, they are diverse in size, scope and reach. Larger organisations have more resources, including more paid staff, to continually improve and develop their services. Smaller organisations are heavily reliant on volunteers to achieve their aspirations. This variability needs to be taken into consideration, as it is a feature of the sector. The Hauora Alliance report noted that data on engagement with Early Years services indicated some inequities. Many

services are provided on a local basis with little data available about their reach or uptake. This report has provided some insight into this activity, reach and gaps in service.

The Hauora Alliance report notes there is no agency taking responsibility for an overview of health and social services or for ensuring best practice, co-ordination, or equitable provision of services across the first 1000-days. Many services operate in relative isolation, even within sectors such as health. This report confirms this observation.

There are opportunities to support development and improvement in the sector. The Hauora Alliance Report noted the need to:

- Address the gaps in leadership and in monitoring and accountability for services and outcomes
- Address the gaps in access to or engagement with current services
- Improve co-ordination and integration of current services (page 35).

This research further identified the need to:

- Invest in capability building, leadership succession, cultural capability development, which is not funded within delivery contracts.
- Develop a shared strategic outcome framework to improve data collection across the sector
- Mapping of the existing services to increase efficiencies and cohesion.

Working with the Early Years services to improve cohesion, impact and delivery will improve access for families and whānau, opportunities for families and whānau and partnership between organisations, and with iwi and other stakeholders. This activity is likely to significantly improve the quality of Early Years provision in Canterbury.

References

- Deverick, Z. & Guiney, H. (2016) Postnatal Depression in New Zealand: Findings from the 2015 New Mothers' Mental Health Survey. Health promotion Agency.
- Durie, M. (1999). 'Te Pae Māhutonga: a model for Māori health promotion', Health Promotion Forum of New Zealand Newsletter 49.
- Fisher, P. (2018). 'The Process of Serve and Return': <https://www.radionz.co.nz/national/programmes/sunday/audio/2018635585/prof-phil-fisher-the-process-of-serve-and-return>
- Gerhardt, S. (2004). Why love matters: How affection shapes a baby's brain. Hove, East Sussex: Brunner-Routledge.
- Gordon, L. (2018). Māori grandparents raising grandchildren. Community Research online article. <http://www.communityresearch.org.nz/wp-content/uploads/formidable/8/M--ori-grandparents-raising-grandchildren.pdf>
- Hannah, H. (2005). Mothers' representations of their child in a maternal mental health setting in New Zealand. (Unpublished master's thesis.) Massey University: Palmerston North.
- Hauora Alliance. (2018). The First 1000 Days: A South Island report for the Hauora Alliance. Accessed from <https://www.cph.co.nz/wp-content/uploads/First1000DaysReport.pdf>
- Hornstein, C., Trautmann-Villalba, P., Hohm, E., Rave, E., Wortmann -Fleischer, S., & Schwarz. (2006). Maternal bond and mother-child interaction in severe postpartum psychiatric disorders: is there a link? Archives of Women's Mental Health. Springer 2006 Sep;9(5):279-84.
- Infometrics. 1000 days to get it right for every child: The effectiveness of public investment in New Zealand children Wellington: Every Child Counts; 2011. Available from: www.hauora.co.nz/assets/files/Children/1000-days-to-get-it-right-for-every-child.pdf
- Kennedy, V., & Wehipeihana, N. (2006). A stocktake of national and international ethical guidelines on health and disability research in relation to Indigenous People (Unpublished Report), The National Ethics Advisory Committee Te Kahui Matatika o te Motu.
- Milgrom, J., Martin P.R., & Negri, L.M (1999). Treating Postnatal Depression. A Psychological Approach for Health Care Practitioners. Chichester: Wiley.
- Ministry of Health. (2011). Healthy Beginnings: Developing perinatal and infant mental health services in New Zealand. Wellington: Ministry of Health.

- Moore, T.G., Arefadib, N., Deery, A., Keyes, M. & West, S. (2017). The first thousand days: An evidence paper – summary. Parkville, Victoria: Centre for Community Child Health, Murdoch Children's Research Institute.
- Morton, S.M.B., Atatoa Carr, P.E., Grant, C.C., Berry, S.D., Mohal, J., & Pillai, A. (2015). Growing up in New Zealand: A longitudinal study of New Zealand children and their families. Vulnerability Report 2: Transitions in exposure to vulnerability in the first 1000 days of life. Auckland: Growing up in New Zealand.
- Organisation for Economic Co-operation and Development. Doing better for children: New Zealand country highlights: OECD Publishing; 2009. Available from: www.oecd.org/newzealand/43589854.pdf
- Parsons, J. (2009). Perinatal mental health of young women. *Aotearoa New Zealand Social Work*. Issue 3, p 14-24.
- Plunket. (n.d.) Research Report. 7 reasons to invest in the first 1,000 days. Sources: www.everychildcounts.org.nz; Understanding the Effects of Maltreatment on Brain Development Child Welfare Information Gateway, Children's Bureau, Administration on Children, Youth and Families, United States (www.childwelfare.gov/pubs.issue_briefs/brain_development/brain_development.pdf).
- Public Health Advisory Committee. The best start in life: Achieving effective action on child health and wellbeing Wellington: Ministry of Health; 2010. Available from: [www.moh.govt.nz/notebook/nbbooks.nsf/0/298D1D194D46C918CC2577370073D72C/\\$file/the-beststart-in-life-2010.pdf](http://www.moh.govt.nz/notebook/nbbooks.nsf/0/298D1D194D46C918CC2577370073D72C/$file/the-beststart-in-life-2010.pdf)
- Savage, C., Leonard, J., Te Hēmi, H., Hynds, A., Dallas-Katoa, W., & Goldsmith, L. (2018). Evaluation of Wave 6 Commissioning Round: Te Pūtahitanga o Te Waipounamu. Ihi Research and Development
- Silverman, D., (ed.) (1998). *Qualitative Research Theory, Method and Practice*. New Delhi, India: Sage Pub
- Scott, D. (2010). Working together to support families of vulnerable children. *Social Work Now*, (45), 20-25.

Appendix 1.

Methodology

Ihi Research was contracted by the Rātā Foundation to undertake exploratory knowledge-building research, on how the Early Years, not-for-profit sector across Canterbury provides support for diverse whānau/families in the early years of a child's life. The research was enacted through kaupapa Māori principals and utilised both qualitative and quantitative methods through a two-phased approach that involved semi-structured interviews and surveys. See the executive summary for the research objectives.

Kaupapa Māori approach

The methodology was enacted through kaupapa Māori principles. Ihi researchers followed the guiding principles for working respectfully with indigenous peoples nationally and internationally. These are articulated by Kennedy & Wehipeihana (2006, p. 1-2) and include:

- Self-determination - including the right to make decisions about all aspects of their lives. Clear benefits to those being researched.
- Acknowledgement and awareness - refers to respect and due recognition and appreciation for indigenous culture, values, customs, beliefs and rights, including an acceptance of a worldview that may not be consistent with Western ideologies. Ihi researchers have Māori whakapapa and bring their experience working with whānau in community based research.
- Cultural integrity - relates to the validity of indigenous knowledge and ways of being, and that cultural knowledge must be protected from misuse, misappropriation and must be preserved for future generations. Ihi

researchers have demonstrated cultural integrity working for Māori organisations, iwi, hapū and whānau.

- Capacity building - enabling indigenous peoples to participate actively in the research, with the aim to ultimately drive their own research. Ihi Research is committed to building capability in all aspects of its research, working collaboratively and sharing knowledge.

Relational trust is essential for stakeholder engagement and ensuring sustainable relationships within a research context. Ethical responsibilities were taken very seriously and ensured that our relationships in the community and with iwi, hapū and whānau were a priority. Ihi researchers worked to an engagement framework that ensured we worked to agreed values and principles. These were:

- Manaakitanga – acting in a caring and supporting way
- Whanaungatanga – respecting the bonds of Māoritanga and 'kinship'
- Rangatiratanga – supporting and respecting each other's authority, intelligence and mana
- Paeheretanga – creating and nurturing the linkages between each other for a common purpose

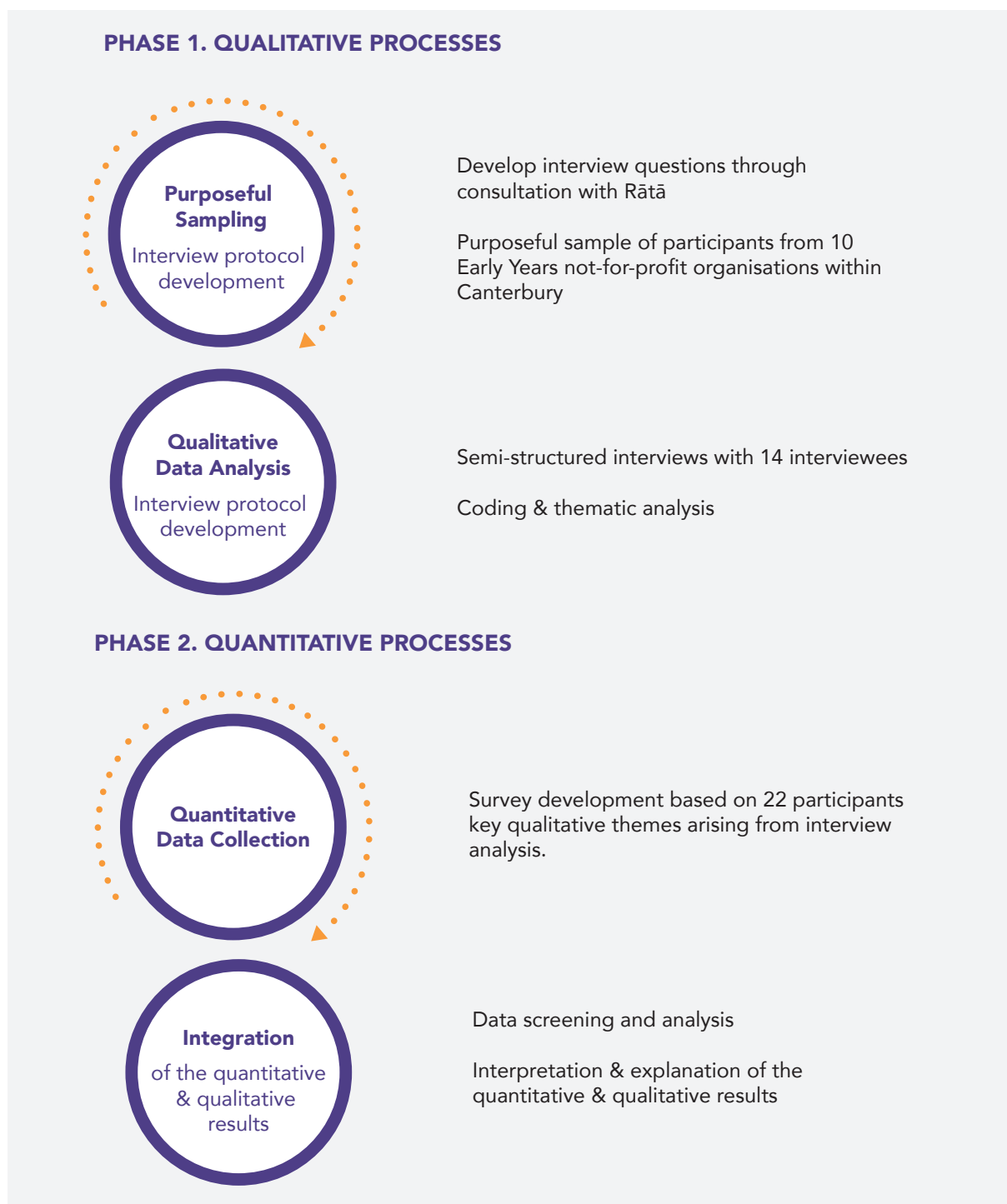
The research approach was built around whanaungatanga and underpinned all our interactions with whānau. This value demanded that Ihi researchers were connected to, and built connections with, the diverse communities we worked in for the life cycle of this evaluation. Whanaungatanga ensured that we captured,

created, nurtured, grew and protected the mātauranga shared with us during this evaluation, not for our own benefit or gain, but for the benefit of whānau/families involved. Whanaungatanga demanded that we engaged with whānau in a respectful way that was mana-enhancing, respectful of each individual and of collective mauri and whakapapa.

Methods

As identified earlier this research was exploratory. It aimed to better understand the current status of the Early Years sector across Canterbury. A mixed methods approach was undertaken that utilised qualitative and quantitative data collection and analysis through a two-phased approach involving semi-structured interviews and surveys. The following figure explains the overall research process.

Figure 1. Explanation of the research process.



Participants and process

The research process involved different participants over time. Fourteen participants from 10 Early Years sector, not-for-profit organisations within Canterbury, were interviewed. In addition three whānau members who were considered difficult to engage in Early Years initiatives, took part in individual interviews. It is very important to understand barriers and enablers to engagement from the perspective of the whānau who might benefit from the initiatives, rather than just highlighting organisational perspectives. It was also important the voice of whānau were included in the findings and recommendations.

All interviews were electronically recorded, and notes were taken at the interviews, so that main issues could be fed back to participants as part of an overall member check process.

The main themes from qualitative data were identified inductively (Silverman, 1998). This meant that categories were not imposed on the data but arrived out of data analysis to inform the overall evaluation. Results from the interview analysis were then used to design a short survey.

The purpose of the survey was to understand if the major themes arising from interview analysis were shared by Early Years organisations. Another purpose was to ascertain the challenges and barriers to engagement from the perspectives of 'hard to engage' whānau.

The survey aimed to increase understanding of the current capacity, capability and aspirations of the not-for-profit Early Years sector across Canterbury. Early Years refers to those providing support for whānau in the first 1000-days of a baby's life. That is from conception to two-years of age.

The survey participants were leaders or governance members of the organisations from the Early Years sector in Canterbury.

The online survey was distributed, and data collected from 3 April to 14 April 2019. Invitations to complete the survey were sent to 33 organisations;

responses were received from 12 organisations.

The distribution of the answers per statement includes absolute numbers for leaders and governance.

The percentages are presented for the total valid sample (N=20-22). Due to the small sample size, the percentages are only indicative of proportions and need to be interpreted with caution.

The averages were calculated for questions with 4-point or 5-point Likert scale (e.g. 1-Completely dissatisfied, 4- Completely satisfied). "Unsure" or "N/A" answers were not included in the calculation of the averages.

No statistical significance tests were conducted. Therefore, the results are descriptive and as a possible indication of certain patterns that could be followed up in the future research (e.g. possible differences between leaders and governance).

In total, 22 surveys were analysed, including 12 from leaders and 10 from governance.

The majority of participants (N=15, 68%) identified themselves as New Zealand European/Pākehā.

The majority of participants (N=15, 68%) were female.

Ten (45%) of the participants were under 55-years of age, and 12 (55%) participants were over 55-years.

Three (3/12) organisations described their services as kaupapa Māori.

Ethnicity

	N	%
Māori & New Zealand European/Pākehā	1	5%
New Zealand European/Pākehā	15	68%
Other	4	18%
Unspecified	2	9%
Total	22	

Gender

	N	%
Male	5	68%
Female	15	23%
Unspecified	2	9%
Total	22	

Age

	N	%
25-34	1	5%
35-44	5	23%
45-54	4	18%
55-64	7	32%
65+	3	14%
Unspecified	2	9%
Total	22	

Role in the organisation

	N	%
Governance	10	45%
Leader (e.g. CEO)	12	55%
Total	22	

Ethics

The study adhered to strict ethical standards ensuring informed consent and avoidance of harm to those who volunteered to take part. Written information and consent forms were provided to each participant. Care was taken to ensure that consent was voluntary and there was clear understanding as to the purpose and process of data collection, analysis and dissemination. A copy of the participant information form is provided in Appendix 2 and a copy of the participant consent form is included in Appendix 3. Consent to participate in the survey was included in the survey delivery process, which meant participants could not participate in the survey unless they provided their consent. It was essential that participants felt safe to express their individual views, so in this report all participants have been given pseudonyms to protect their identity.

Considerations

It is important to note that research findings provide a snapshot of the Early Years sector in Canterbury and the current challenges and capacity and capability needs of individual organisations, and collectively of the sector. Data collection for this study focused mainly on leaders' views. Further in-depth research carried out over time with staff members (paid and unpaid), would deepen our understanding of the Early Years sector in Canterbury and its current challenges and capacity and capability needs.

