

# **Care and Protection Workforce Development**

**A report from the Workforce Development Group**

**Action Area 8  
Care and Protection Blueprint**

**April 2004**

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## The Workforce Development Group

The Workforce Development Group (WDG) was established in September 2002 under the *Care and Protection Blueprint* (MSD 2003a) to identify and prioritise care and protection workforce issues that need to be addressed. This present document was written by the Ministry of Social Development on behalf of the group. It represents the general conclusions of the group's discussions over the last year, although individual members may have views that differ.

The WDG's vision for the care and protection workforce is:

*Enough professional and competent people working collaboratively for the safety and wellbeing of children, young people and their families; supported by strong leadership, effective management, sufficient resources, and professional development.*

The group includes 10 members from diverse backgrounds nominated by the care and protection community:

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The members include people from various organisations and backgrounds, although the views they brought to the group discussions were their own.

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## Executive Summary

1. Addressing care and protection workforce issues is a key area of action in the *Care and Protection Blueprint* (MSD 2003a). It contributes to the outcome of safety and security for children and young people by improving the quality of the care and protection services they receive. This report presents the views of the Workforce Development Group (WDG) on care and protection workforce issues. It recommends areas of focus for future work to address these issues.
2. The range of agencies that contribute to care and protection outcomes for children and young people is very wide, encompassing universal, targeted and specialist services to children, young people and their families. As a result, developing the wider care and protection workforce is a large undertaking.
3. Issues for the care and protection workforce that span the full range of care and protection services include:
  - developing a workforce that is responsive to the care and protection needs of Māori children and young people
  - developing a workforce that is responsive to children and young people from Pacific and other diverse ethnic/cultural groups
  - challenging negative perceptions of care and protection work.
4. Improving outcomes for all children in need of care and protection is the underlying objective of workforce development. Māori children comprise over a third of children in need of care and protection even though they make up barely a quarter of children under 17 years. It is therefore important that the care and protection community continues to focus on improving the safety of Māori children as a priority. Nevertheless, New Zealand has an ethnically diverse population, and children and young people from all ethnic and cultural groups sometimes require care and protection. In order to achieve this, the care and protection workforce as a whole needs to recognise and understand a range of cultural perspectives and practices, and how these interact with care and protection outcomes.
5. The WDG has identified as a priority issue a shortage of competent social workers who are willing to work in care and protection. Social workers are, on average, less qualified and less well paid than teachers and nurses (even after controlling for qualification level). Shortages of social workers mean that unqualified and/or inexperienced people are sometimes recruited into vacant positions in the care and protection sector.
6. In addressing the shortage of social workers, developing the quality of the workforce also needs attention.
7. The WDG has identified several factors that inhibit social work workforce capability:
  - the high proportion of social workers without qualifications
  - the inadequate preparation for care and protection social work afforded by most social work qualifications
  - the considerable variation in the quality of courses currently available for social work training.

8. Improving the capability of the social work workforce is likely to require a combination of improving remuneration and working conditions, challenging negative perceptions of care and protection work, and providing ongoing professional development opportunities for care and protection social workers. Drawing lessons from the aspirations and experiences of Māori communities, it is also likely to require attention to general and population-specific initiatives as well as initiatives that consider or link to wider developmental goals.
9. In the longer term, addressing workforce issues requires a sector-wide approach. Workforce development strategies in other sectors such as health and education will help to address issues for shared workforces that work with care and protection clients. However, in order to be effective a focus on care and protection outcomes is required across sectors. The workforce in specialist care and protection services also needs to consider care and protection outcomes in the context of children's broader wellbeing. Achieving the best possible outcomes for children and young people who are at risk of poor outcomes requires effective cross-sector communication, co-ordination and shared learning.
10. A critical step towards addressing broader workforce issues is to collect better information on the workforce and to monitor changes over time. Currently we have reasonable information on the demographics, recruitment, retention and education of Department of Child, Youth and Family Services (CYF) social workers, but information on the wider sector is dispersed and limited, making it difficult to assess the extent of workforce issues. Many of the recommended actions to move forward are about improving information on the care and protection workforce. In particular, better information is required on the workforce in community and Māori organisations, on professionals other than social workers, and on care and protection social workers outside CYF.
11. The report recommends work that could be progressed to develop the care and protection workforce, which will inform further work to address the issues identified by the WDG.

# 1. Introduction

## Purpose

12. This report examines workforce issues in the care and protection sector and recommends the next steps to address these. The report aims to promote further discussion across the wider care and protection sector and to inform the Ministry of Social Development (MSD) in developing an action plan to address care and protection workforce issues by May 2004.

## The context for care and protection workforce development

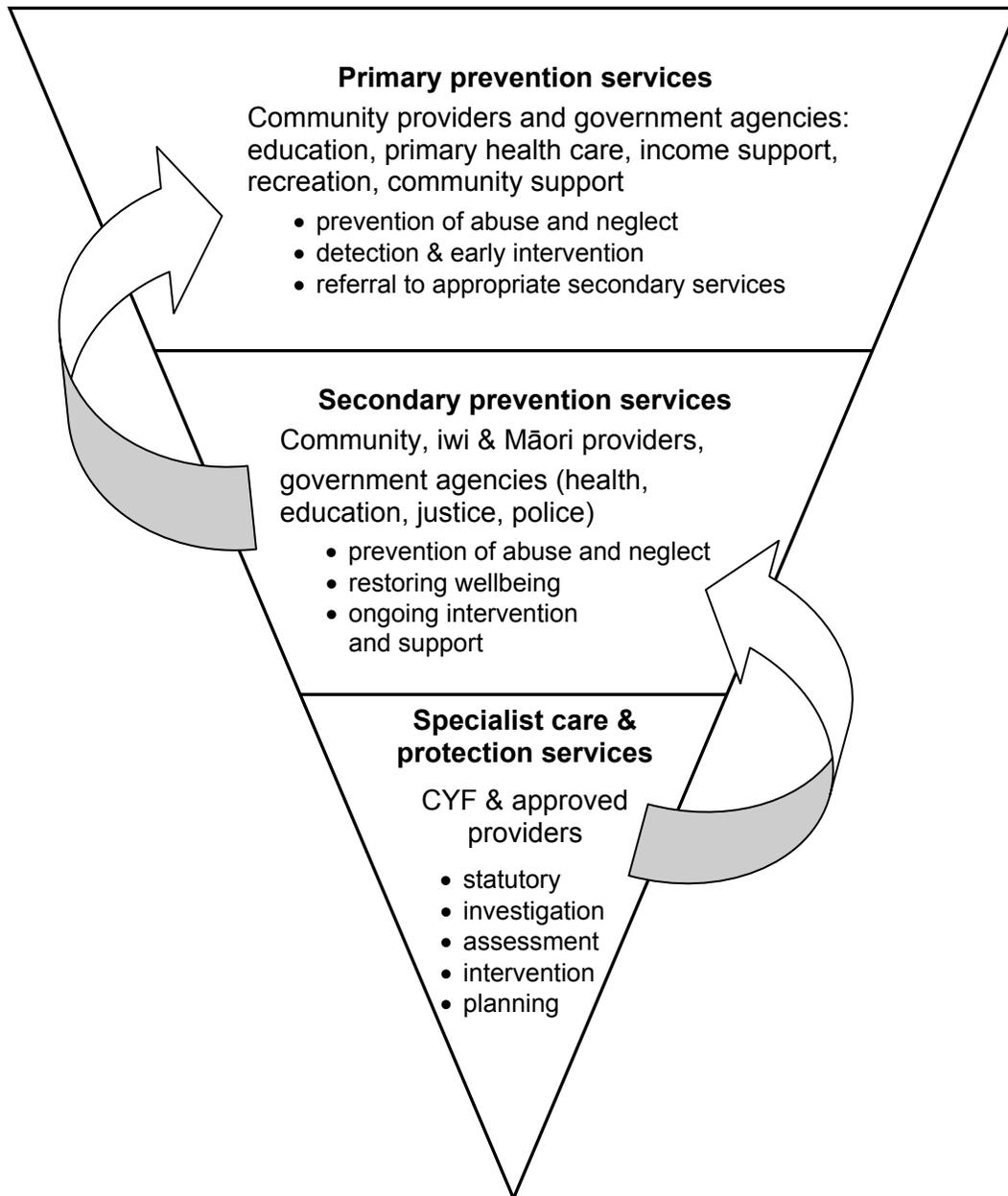
### Background

13. This report arises out of Action Area 8, "Address Workforce Issues", in the *Care and Protection Blueprint* (MSD 2003a). The *Blueprint* identified workforce issues as a barrier to providing quality, integrated care and protection services. Addressing care and protection workforce issues will improve the capacity and capability of the workforce to achieve better outcomes for children and young people.
14. Among developed countries New Zealand has the fourth highest rate of child abuse and neglect (UNICEF 2003). In 2002 the rate of Māori children assessed as abused or neglected following a notification to the Department of Child, Youth and Family Services (CYF) was 10.3 per 1,000 and the rate for non-Māori children was 5.9 per 1,000 (MSD 2003b). These figures highlight the importance of providing care and protection services that are responsive to the needs of Māori children and young people. This requires a well-prepared workforce that understands how to work effectively with Māori and other clients from diverse cultural backgrounds.
15. Professional intervention through care and protection services is challenging and highly stressful work. Achieving good outcomes for children and young people who have suffered abuse or neglect requires a highly skilled multidisciplinary workforce. The workforce needs to be well supported and to have the capacity and capability to work collaboratively to provide cross-disciplinary interventions.
16. The content of this report is based on discussions of the Workforce Development Group (WDG) over the past year. Officials from MSD facilitated discussions, researched contextual information and wrote this report of behalf of the WDG, and group members provided written comments to MSD on successive drafts of the report. The general conclusions of the group's discussions are represented, although individual members may have views that differ.
17. The WDG considers that a range of workforce pressures are contributing to instances of poor practice that place children and young people at risk. These pressures appear to be concentrated in CYF, which provides services to children and young people who are most at risk.

## The care and protection system

18. Parents, families and communities have the primary responsibility for keeping children and young people safe. Care and protection is required when the usual ways of keeping children and young people safe break down. A fundamental goal of care and protection is to restore children and young people to safe and stable care arrangements. Government, community and iwi organisations contribute to this goal in the context of the wider family support sector (see Figure 1).

**Figure 1: Roles of the wider care and protection sector**



### Primary prevention services

19. All children and young people interact with primary services such as health care and education for children. Children from low-income families also benefit from family income support services. Although children's safety is not the main focus of primary services, they play an important role in the prevention, detection and early intervention of abuse and neglect.

### Secondary prevention services

20. Secondary services are targeted at children, young people and families who are identified as being at risk of poor outcomes. The care and protection outcomes at this level are prevention of abuse and neglect, and restoration of wellbeing. To achieve these outcomes children and families require an appropriate and timely mix of services, thus preventing the need for specialist services.

### Specialist care and protection services

21. The goal of specialist services is to support children, young people and families in times of acute need to provide safe and stable care arrangements for children and young people. Clients are referred to appropriate secondary services to prevent the future need for specialist services. CYF is the government agency with statutory responsibility for providing specialist services and also has contracts with approved community and iwi providers. The primary functions of specialist services are to receive a notification, assess the situation, work with family and other key people in planning how to keep the child safe and well, then manage and review the implementation of that plan.
22. Care and protection services are required when a child or young person is believed to be at risk due to:
  - physical, emotional or sexual abuse
  - violence or conflict between their caregivers
  - emotional or physical neglect
  - their behaviour being beyond their own, or their caregiver's, control
  - lack of stable or adequate care.<sup>1</sup>
23. The formal care and protection system operates under the authority and principles of the Children, Young Persons, and Their Families Act 1989 (CYPF Act). The Act, which applies to children and youth up to the age of 17, has two major divisions: care and protection and youth justice. Two important guiding principles are:
  - the interests of the child or young person are paramount (section 6)
  - the family should participate in decision making and be empowered to care for its children and young people (section 5).

### **Inter-agency co-operation and collaboration**

24. Government intervenes where the usual ways of keeping children and young people safe and secure break down. Several agencies give effect to the government's responsibility, with CYF at the core. CYF manages statutory care and protection services as defined by legislation, including the CYPF Act, the Adoption Act 1955 and the Guardianship Act 1968. Government is currently

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<sup>1</sup> Summarised from the Children, Young Persons, and Their Families Act 1989.

considering the Care of Children Bill, which will replace the Guardianship Act and strengthen the focus on ensuring the best interests and welfare of the child.

25. Any strategy to develop the care and protection workforce will need to address the needs of CYF as an employer. CYF is the largest single employer of care and protection social workers. In addition, the WDG notes that difficulties recruiting and retaining competent social workers appear to be concentrated in CYF. There are likely to be synergies and overlaps between CYF's workforce capability strategy and *Care and Protection Blueprint* work to address workforce issues. Achieving good outcomes for the care and protection workforce is more likely if these work strands support each other. Discussions are under way between MSD and CYF to achieve this alignment.
26. The interdependencies between CYF and the broader care and protection and family services sector are significant. CYF is dependent on a strong sector to function well and to reduce the demand for statutory services. Likewise, a strong CYF is a critical part of a healthy overall service continuum. All agencies require organisational structures and processes that support information sharing and cross-agency case management approaches to working with children, young people and their families.
27. The recently released report by the Children's Commissioner (2003) on the deaths of the Aplin children in 2001 re-emphasises the need for government agencies to work across organisational boundaries to protect children at risk of abuse and neglect. Collaborative service delivery requires people working directly with children, young people and their families to have certain skills and to focus on outcomes for children and young people. Managers in organisations also require specific capabilities to facilitate cross-agency relationships, and planning and delivery models. It is important to keep these skills in mind when planning for workforce development.
28. Beyond specialist care and protection services, other sectors with key roles are:
  - education sector – supporting the learning of children with disabilities and behavioural problems, helping children to develop protective skills, and identifying and assessing children requiring further interventions
  - Family Court – determining if a need for care and protection exists, making orders and reviewing orders
  - family violence services (eg, Women's Refuge, assessment, referral and intervention for families at risk)
  - health sector (including mental health) – providing services to children, young people and their families to address the effects of harm, or to prevent future harm
  - joint service provision to families (eg, Family Start and Early Start programmes)
  - NGOs / iwi / Māori organisations – providing services to address the effects of harm, or prevent future harm
  - police – responding to emergencies, investigating and prosecuting cases of abuse.

## Implications of the CYF Baseline Review

29. The *First Principles Baseline Review of CYF* (the Baseline Review) was completed in October 2003. Cabinet accepted the recommendations of the review, including that:
- the focus of CYF is to be the safety and security of children and young people, and protecting the community from young offenders
  - CYF needs to better manage demand for services by working with clients in more depth to resolve issues and prevent rework
  - CYF is funded to employ 112 additional full-time social workers, supervisors and co-ordinators over the next two years
  - social workers need to increase their focus on arranging permanent care for children and young people
  - social worker recruitment, retention and training are to be addressed in a Social Work Workforce Capability Development Strategy, to be completed in April 2004.
30. Implementing the *Baseline Review* has implications for the wider care and protection workforce. In the short term the demand for competent and qualified social workers, already in short supply, will increase substantially. If more social workers are attracted to CYF this may create shortages in other parts of the sector, unless the overall supply of social workers is also increased. The recruitment of social workers into CYF also places significant demands on CYF to meet induction and training requirements.
31. In the longer term the *Baseline Review* is likely to benefit the workforce. CYF will address resourcing and systemic issues that will improve the quality of the working environment. Imperatives to focus effort on core business and increase the number of social workers will help to improve practice standards by enabling social workers to work through issues with clients in greater depth. Having more time to focus on individual cases will assist social workers to see the broader picture of clients' individual circumstances and cross-agency requirements. This is expected to reduce demand for core care and protection services over time by reducing renotifications and subsequent reworking of cases, which would have benefits across the sector.

## The scope of this report

32. The care and protection community is broadly defined in the *Care and Protection Blueprint* to include any individual, government, or non-government organisation that contributes in some way to preventing and addressing child abuse and neglect. The care and protection workforce is a subset of this community. It includes people working as social workers, whānau workers, youth workers, psychologists, counsellors, child therapists and psychiatrists. Voluntary workers also have an important role in children's care and protection outcomes, particularly caregivers who look after children and young people in their own homes on a temporary or permanent basis.
33. Achieving positive care and protection outcomes requires the attention of workforces across primary, secondary and specialist services. Professionals

working in primary through to specialist services require increasing levels of specific care and protection skills to work with children and young people and their families. At the broadest level, all professionals who work with children, young people and families need to be aware of the risk factors and indicators of abuse and neglect, and of the appropriate action to take when they suspect that children are at risk. In addition, professionals across services need to share information to build a complete picture of the risk factors in children and young people's lives. Workforce issues in primary services (eg, health and education) will be picked up by other sector workforce strategies and initiatives.

34. In this report the WDG has focused on workforce issues for social workers working in specialist services (see Figure 1). Social workers are the largest occupational group in specialist care and protection services and are critical to the overall effectiveness of the sector. Currently, the shortage of social workers is a priority for the care and protection workforce. Social worker shortages have implications for the whole workforce by limiting the efficacy of services to children, young people and their families/whānau.
35. Many of the issues facing the social work workforce also impact on the wider care and protection workforce. For example, good social work support is the most important factor in retaining caregivers of children and young people.<sup>2</sup> Building healthy organisational environments will benefit all employees. Developing a culturally responsive workforce and challenging negative public perceptions are discussed in section 3. Addressing these and other issues for social workers will go some of the way towards developing the wider workforce. The WDG acknowledges that further work is required to identify and develop solutions for wider workforce issues. This is discussed further in section 2.
36. Due to the paucity of consistent data available across the wider care and protection workforce, this report is largely descriptive in nature. Some of the key recommendations are about addressing these information gaps.

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<sup>2</sup> Based on findings from a CYF consultation with carers in 2002.

## 2. Workforce issues for the Care and Protection sector

37. This section discusses the following broad issues for the care and protection workforce:
- developing a workforce that is responsive to the care and protection needs of Māori children and young people
  - developing a workforce that is responsive to children and young people from Pacific and other diverse ethnic/cultural groups
  - challenging negative perceptions of care and protection work
  - issues for occupational groups other than social workers.

### Developing a workforce that is responsive to the care and protection needs of Māori children and young people

38. It is important that the care and protection community continues to focus on improving the safety of Māori children as a priority. Māori children comprise over a third of children in need of care and protection even though they make up barely a quarter of children under 17 years. Māori children who require care and protection deserve the best services possible, just as all children do.
39. The Treaty of Waitangi provides the constitutional framework for the relationship between the Crown and Māori. Service and workforce development occurs within this framework and should reflect the duties and rights of both Māori and the Crown as Treaty partners. To some extent the CYPF Act has embedded the principles of the Treaty in care and protection practice through the value it attaches to the role of whānau in determining the best interests of the child. However, *Pūao-te-ata-tū* – the 1988 report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare, and arguably the definitive policy statement on responsiveness to Māori, has not met the expectations of many Māori.
40. *Te Pounamu* (CYF 2001) sets a strategic framework for improving CYF and community providers' responsiveness to Māori children. It provides a context for workforce development focused on the needs of Māori clients. The outcome focus of *Te Pounamu* is that all Māori children are safe. To achieve this outcome the capability of CYF and providers needs to be improved. An implementation plan for *Te Pounamu* is still to be completed.

### Workforce development models

41. Consistent with the rights and duties established through the Treaty, there are four complementary approaches to developing a responsive workforce:
- the Māori development model
  - the kaupapa Māori or “by-Māori for-Māori” services model
  - the Māori workforce development model
  - the generic workforce development model.

#### The Māori development model

42. The Māori development model is not strictly a workforce development model. It focuses on supporting and developing Māori institutions to take charge of Māori affairs, consistent with the duty on the Crown to preserve and promote rangatiratanga.<sup>3</sup> In a care and protection context, this could involve developing Māori social service providers (eg, Iwi Social Services), or Māori purchasing organisations that co-ordinate social service delivery to Māori, such as He Oranga Pounamu. As a workforce development model, this approach focuses more on developing governance, management and administration skills. This model underlies Action Area 1 of the *Care and Protection Blueprint*, which is about developing Māori leadership and involvement in the care and protection community.

#### The kaupapa Māori model

43. The kaupapa Māori model focuses on developing services from within a Māori world view. Services of this nature will reflect local community values and expectations in order to engage more effectively with the client population. As a workforce development model, kaupapa Māori services provide “safe” professional environments for protecting and promoting Māori service concepts and methods. Kaupapa Māori services are likely to flourish within a Māori development context but, due to the diversity of Māori realities, will not always be the most appropriate response to the needs of a Māori child.

#### The Māori workforce development model

44. This model emphasises the need to develop Māori as workers within the care and protection sector, regardless of the practice model they follow (ie, kaupapa Māori or other models). Similar to the Māori development and kaupapa Māori approaches, it recognises that responsive services will be partially dependent, at least, on a strong Māori presence in the sector at all levels of the workforce. Therefore, the deliberate development of Māori workers is required if there are significant gaps in the representation of Māori perspectives and values in some or part of that workforce.
45. The Māori workforce development approach has been adopted in the mental health sector. Te Rau Matatini is a national Māori mental health development organisation funded by the Ministry of Health. Its objective is for Māori mental health consumers to have access to a competent Māori workforce. The organisation contributes to Māori mental health workforce policy development at a national and regional level, expanding the Māori mental health workforce, and promoting rewarding career opportunities in mental health for Māori. If successful, this strategy will also benefit Māori care and protection clients who have mental health needs, or whose parents or caregivers do. Te Rau Matatini have developed outcome measures and evaluation protocols to assess the effectiveness of this approach.

#### The generic workforce development model

46. Generic workforce development is about developing the skills and knowledge of all people working in care and protection to understand and work more effectively with

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<sup>3</sup> “The advancement of Māori people, as Māori, and the protection of the environment for future generations” (Durie 1998, p. 5).

Māori clients. Working with Māori is a core business for the care and protection workforce. While Māori are already well represented in the care and protection workforce, it is not practical, possible or in some cases necessary to have a Māori social worker for every Māori client. Developing a generic workforce that is responsive to the needs of Māori can be achieved through appropriate selection, training and supervision of care and protection workers. This approach is appropriate for all care and protection professionals working in mainstream services.

47. The generic workforce development approach was taken in Illinois in the United States to train practitioners who work with Native American clients (Mindell et al 2003). It included identifying the necessary knowledge, skills, and experience and developing curricula that could be delivered to social work practitioners and interns in a variety of forums.

### ***Applying the models***

48. Census data indicates that just under a quarter of social workers are Māori, compared to 12% of Māori in the working-age population. We do not have good sector-wide information on Māori representation in community organisations. However, within CYF, a quarter (24.7%) of managerial, policy and service delivery employees are Māori, including 12% of senior management.<sup>4</sup>
49. Although well represented in the social work workforce, Māori are under-represented in many other specialist workforces. A report released by the Health Workforce Advisory Committee (2001) showed that in the mental health workforce only 6% of registered nurses, less than 2% of psychiatrists, 1.3% of clinical psychologists and 0.6% of occupational therapists were Māori. These specialists are a shared workforce, because children and young people who require care and protection often require mental health services as well. For example, roughly one-third of youth services clients will have a moderate to severe mental health disorder.<sup>5</sup>
50. This situation is a concern for two reasons. Firstly, it suggests that many core professions are at risk of not understanding their Māori clients as well as they do their non-Māori clients, which may impact on the quality of the service they can provide. Secondly, from a Māori development perspective, Māori workers seem to be concentrated in the lower status, lower qualified and lower paid professions.
51. This situation illustrates the clear need for any strategy to develop a workforce that is responsive to the diverse needs of Māori children, young people and whānau to involve supporting and resourcing a combination of kaupapa Māori services, Māori workforce development and generic workforce development. Ongoing evaluation of each approach is required to refine and improve the skills of professionals and the quality of services received by Māori clients.
52. Leadership and management within organisations are pivotal to the development of structures and processes that are appropriate to and supportive of Māori practitioners and clients. In order to attract and retain Māori professionals in the workforce, leaders and managers of organisations need to provide professional

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<sup>4</sup> As of June 2003, data from CYF, Human Resources.

<sup>5</sup> CYF commissioned research, reported in Wells & Smith (2000).

development opportunities and appropriate cultural support for Māori working in their organisations.

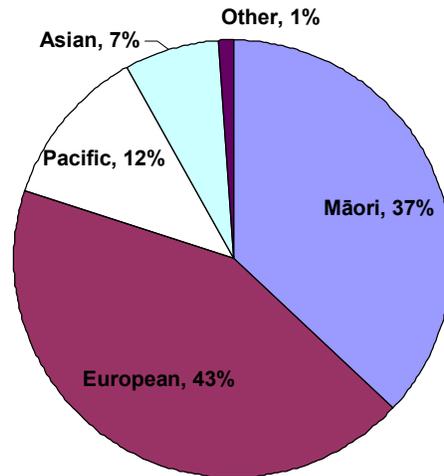
**Recommended actions to move forward developing a workforce that is responsive to Māori children and young people**

1. Review, revamp and resurrect *Pūao-te-ata-tū*.
2. Develop better information on the range of strategies and initiatives under way across the sector to improve the responsiveness of the care and protection workforce to Māori clients, as well as evaluations of them.
3. Develop better information on Māori representation across professions and levels of seniority in the wider care and protection workforce.
4. Contribute a workforce development perspective to the implementation of *Te Pounamu*.
5. Link with other government strategies, in particular the *Care and Protection Blueprint* and *Te Rito* (MSD 2002), to ensure services that contribute to care and protection outcomes are responsive to Māori children and young people.

**Developing a workforce that is responsive to children and young people from Pacific and other diverse ethnic/cultural groups**

53. New Zealand has an ethnically diverse population, and children and young people from all ethnic and cultural groups sometimes require care and protection (see Figure 2). Improving outcomes for all children in need of care and protection is the underlying objective of workforce development. In order to achieve this, the care and protection workforce as a whole needs to recognise a range of cultural perspectives and practices, and how these interact with care and protection outcomes.
54. Care and protection services need to be flexible enough to cater for clients' personal circumstances, including their cultural background. A workforce that reflects the cultural diversity of the communities it serves helps to achieve this objective. Good practice requires training and ongoing supervision for all employees that will help them to understand the diverse cultural backgrounds of their clients. Further work is required to determine whether there are particular issues in addressing the responsiveness of the care and protection workforce to children and young people from other ethnic/cultural groups.

**Figure 2: Estimated ethnicity of care and protection clients<sup>6</sup>**



### **Pacific workforce development**

55. Pacific peoples are from diverse communities and cultural backgrounds, so flexibility in approaches is required to meet the needs of Pacific children, young people and their families. Models for increasing responsiveness to Māori can also be applied to improving the responsiveness of the workforce to Pacific children and young people who require care and protection. This can be achieved through:
- Pacific capacity building
  - strengthening services provided to Pacific peoples by Pacific providers
  - Pacific workforce development
  - generic workforce development.
56. Pacific peoples are represented in the social work workforce in similar proportions to the total working-age population.<sup>7</sup> Within CYF, Pacific people make up 10.4% of the workforce, although only 2.4% of senior managers are Pacific people. This is a concern as it indicates that professional development opportunities and role models for Pacific peoples may be limited in care and protection practice, at least within mainstream services. Information on the Pacific peoples workforce working in community agencies and in professions outside of social work is limited.
57. The retention and development of existing Pacific practitioners and trainees is a priority for addressing Pacific peoples' under-representation in senior management roles. This requires professional development opportunities and practices that recognise diverse cultural perspectives. Networks among Pacific providers are

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<sup>6</sup> Ethnicity figures are a best estimate based on the following sources: Māori proportion from CYF Business Reporting Team (June 2003); Pacific proportion from *The Social Report* (MSD 2003); Asian and Other based on 2001 Census data on ethnicity of population 0–16 years, assuming that rates of abuse for Asian and other ethnicity children are proportional to representation in the population under 17 years.

<sup>7</sup> NZ Census 2001. Working-age population is the population aged 16–64.

vital to share learning between professionals and provide support to people working in these services.

58. Addressing workforce issues that contribute to providing appropriate services to Pacific children needs to build on previous work such as *Lali, Pātē, Nafa: Strategy for Pacific Islands Employment and Service Delivery* (Lali), produced by the former Department of Social Welfare in 1994. The issues raised in Lali and the strategies proposed to address them are as relevant today as they were then.
59. The WDG endorses implementing CYF's *Pacific Responsiveness Plan* (2002b) to improve the responsiveness of the care and protection sector to Pacific children. To ensure that Pacific children are safe and to strengthen Pacific families there are three strategies:
  - improving social work practice so that CYF can deliver a better service to Pacific clients
  - building the capability of our professional workforce to support better outcomes
  - collaborating with Pacific communities to support a strong Pacific provider sector.
60. Each strategy provides a framework for actions that include:
  - incorporating Pacific values and approaches into the strength-based, outcomes-focused practice model of CYF
  - increasing recruitment of Pacific staff in selected locations where Pacific communities are concentrated
  - targeting Pacific staff for management development training, with the goal of 6% Pacific staff in management by 2005 and 9% by 2010
  - improving the qualification levels of Pacific social workers.

**Recommended actions to move forward developing a workforce that is responsive to children and young people from Pacific and other ethnic/cultural groups**

6. Link with other areas of the *Care and Protection Blueprint* and *Te Rito*, in particular, to ensure services that contribute to care and protection outcomes are responsive to children and young people from Pacific and other ethnic/cultural communities.
7. Promote and support the implementation of CYF's *Pacific Responsiveness Plan* (2002b).
8. Improve understanding of the particular workforce issues facing Pacific peoples and other ethnic/cultural groups.
9. Collect information on Pacific peoples' representation in the care and protection workforce across professions, levels of seniority and community agencies.
10. Align further care and protection workforce development work with the Pacific Peoples Workforce Development Strategy and Pacific capacity-building work by the Ministry of Pacific Island Affairs.

## Challenging negative perceptions of care and protection work

61. The WDG has identified negative perceptions of the care and protection sector as a barrier to attracting and retaining people in the workforce. These perceptions are concerning because they may:
  - affect worker recruitment and retention
  - cause families to lack confidence in care and protection services and prevent them from seeking help, or co-operating in care and protection processes
  - inhibit people from reporting abuse
  - affect the resourcing of services.
62. Anecdotally the WDG has identified relatively common perceptions that:
  - the current workforce does not work co-operatively to provide an effective continuum of services
  - care and protection is essentially the responsibility of CYF
  - the workforce is not sufficiently responsive and often lacks competence.
63. The public receives a relatively narrow and negatively skewed view of care and protection through the media. Attention is focused on CYF relating to child deaths, instances of poor practice, high staff turnover, staff stress and burnout, and unallocated cases. News of successful cases and positive developments in the sector is seldom reported. As a result the public lack information about children who are well cared for, the complexity of care and protection work, and the potential rewards. In addition, perceptions often conflict depending on the perspective of the viewer. For example, CYF are sometimes criticised for placing too much emphasis on maintaining family/whānau links at the expense of child safety. Conversely, the view is also expressed that CYF are too quick to remove children and fail to place sufficient emphasis on supporting families/whānau to care for their own children.
64. The public, professionals in other sectors, funders and the workforce itself require good information about the positive aspects and developments in the care and protection sector. Promoting a broader view of what care and protection work involves would also help: it is about building strengths in families and communities, not just remedial work when things go wrong.
65. Monitoring the perceptions of different groups over time is needed to support work to improve perceptions of care and protection work. This requires understanding what the current perceptions of different audiences are, as well as the basis of these perceptions. For example, are perceptions well founded or simply based on insufficient information? The rationale for improving perceptions of the care and protection workforce varies from one audience to another, so it is likely that more than one strategy will be required to effectively address negative perceptions.
66. Current perceptions are not formed solely on the basis of media information. Some people have expressed negative views based on their experience of poor practice during interactions with the care and protection system. Addressing and challenging issues of poor practice is critical to countering negative perceptions. We need an organisational culture that acknowledges mistakes, learns from them and works to address the underlying issues that lead to instances of poor practice.

67. Publicising the improvements in practice and workplace environments that existing initiatives aim to bring about can help address negative perceptions. For example:
- implementing recommendations from the *CYF Baseline Review*
  - CYF's Everyday Communities initiative provides a vehicle for communicating with the public and enhancing awareness
  - the *Care and Protection Blueprint* has a number of action areas that have the potential to influence perceptions, such as promoting good practice
  - the Social Workers Registration Board will have a specific responsibility to promote the profession of social work.

**Recommended actions to move forward challenging negative perceptions of care and protection work**

11. Collect baseline data on perceptions of care and protection work and monitor these over time.
12. Identify the potential for existing strategies to publicise the improvements they aim to bring about in the care and protection sector.
13. Address and challenge issues of poor practice by linking with other *Blueprint* action areas.

**Issues for occupational groups other than social workers**

68. To function effectively the care and protection workforce relies on the skills and dedication of a diverse range of people. In the longer term, developing the capacity and capability of the care and protection workforce will require addressing issues for professionals other than social workers. Workforce issues for caregivers, whānau workers and specialists are discussed briefly in this section. The WDG acknowledges that this discussion is incomplete and that further work is required to identify and develop strategies for addressing wider workforce issues. The mental health sector has developed strategies to address workforce issues for a range of professionals by using a workforce development framework. The framework identifies factors relating to mental health work, workplaces and workers, identifies five strategic objectives, and develops initiatives under these objectives. This model may serve as a useful model for further work to develop the care and protection workforce in the longer term (Ministry of Health 2002).

**Caregivers**

69. Caregivers are a voluntary workforce with a critical role in achieving good outcomes for children and young people requiring care and protection. In order to retain caregivers it is important to acknowledge and support their work of caring for children.
70. Overseas findings show that the strongest factor in retaining caregivers is a positive and supportive relationship with social workers (CYF 2002a). The importance of social work support was confirmed in New Zealand by a nationwide consultation CYF held with caregivers in 2002. Social workers support caregivers by facilitating good communication between service providers and caregivers.

They also provide caregivers with information about the child in care, how to access services for the child, caregivers' rights and the support available. The level of caregiver support is variable, with some community care and protection organisations providing high levels of support. Social workers in these types of roles need to have reasonable case loads so that they can provide caregivers with high-quality support. The specific role of caregiver liaison social workers at CYF is to support caregivers.

71. Financial reimbursement for caregivers needs to cover the cost of caring for the child as well as the cost of any additional services the child requires. Some children and young people have higher and more complicated needs and therefore require more caregiver time and more services. Allowances to caregivers may need to be reviewed to determine whether current rates are appropriate. One option is that caregivers be paid different rates depending on the needs of the child or young person in their care.
72. An issue that has been of concern regarding carers is that several children from different agencies may be placed with one caregiver without the knowledge of the other agencies involved. An interagency multiple-placement protocol has recently been developed to address this issue for children who are placed in care in future. However, a number of children are already in care where multiple placements may not be accounted for.
73. The *Baseline Review* recommends, as a priority to reduce demand for its services, that CYF focus on moving children into permanent care. CYF is currently recruiting social workers, half (28) of whom are to focus on moving children from temporary to permanent care.
74. Identifying workforce issues for caregivers needs to focus on caregivers' roles in achieving good outcomes for children and young people, and how they can best be supported in this role. A major barrier at present is a lack of information on caregivers across the sector.
75. Addressing workforce issues for social workers is a positive first step, but the WDG recommends further work to identify and address workforce issues for carers. This could include:
  - developing a multi-agency national register of all caregivers (not just care and protection), which would include:
    - children currently in their care
    - children who have been in their care in the past
    - the specific needs of those children
    - the relevant qualifications of caregivers.
  - reviewing allowances paid to caregivers, including the option of different levels of payment for children requiring higher levels of care, and ongoing support for people who have children placed with them permanently.

### **Whānau workers**

76. Whānau workers are a distinct occupational group from social workers, although much of the work they do is similar, including the role they play in achieving good outcomes for children, young people and their whānau. Whānau work is based on a different practice model from social work and there are specific training courses available in the discipline. Recognition of whānau work as a professional

occupation requires the establishment of qualifications and assessment criteria along the lines of those currently being developed for social workers.

### **Other professionals**

77. Other professionals such as psychologists, speech–language therapists, child therapists, counsellors, psychiatrists and special education teachers belong to a shared workforce with health and education sectors. Links with the mental health and special education workforces are particularly relevant as children with care and protection needs often also require these services. Therefore, workforce strategies and initiatives in these sectors will contribute to better outcomes for many care and protection clients. The care and protection ‘Investment Strategy’<sup>8</sup> recommends that children’s need for cross-agency services are identified early, services are co-ordinated, and the roles of agencies are clear.

<p><b>Recommended action to move forward addressing issues for occupations other than social workers</b></p>
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- |   |
|---|
| <ol style="list-style-type: none"><li>14. MSD undertake further work to identify issues for the wider care and protection workforce, including work to identify and address issues for caregivers and whānau workers across the care and protection sector.</li></ol> |
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<sup>8</sup> Action Area 7 from the *Care and Protection Blueprint* (MSD 2003).

### **3. Developing a competent care and protection social work workforce**

#### **Issues for the social work workforce**

78. The WDG considers that the overarching social work workforce issue is that there are not enough qualified social workers who are willing and competent to work in care and protection. Factors identified as underlying the shortage and possible actions to address these are discussed in this section.
79. The capability of the care and protection social work workforce is an issue of concern for the sector. Several factors contribute to this, including:
- the high proportion of social workers without qualifications
  - most social work qualifications not adequately preparing people to work in care and protection
  - the considerable variation in the quality of courses currently available for social work training.
80. In addressing the shortage of social workers, developing the quality of the workforce also needs attention. Shortages of social workers mean that unqualified and/or inexperienced people are sometimes recruited into vacant positions in the care and protection sector. While some of those people have developed into competent social workers through their on-the-job experience and training, some have not. Addressing this situation is likely to require a combination of improving remuneration and working conditions, challenging negative perceptions of care and protection work, and providing ongoing professional development opportunities for care and protection social workers.

#### **Social worker demographics**

81. The 2001 Census records 10,404 people who identified themselves as social workers, compared to 8,172 recorded in the 1996 census. The number of people employed as social workers grew rapidly over that period, averaging 5% per year. Estimates from the profession<sup>9</sup> suggest a relatively smaller workforce of approximately 6,500 social workers employed on a full- or part-time basis. Women make up three-quarters of the social work workforce. Within CYF the proportion (75%) of employees who are women has stayed the same, and 46% of senior managers are women. The majority of social workers are New Zealand European (61%), followed by Māori (22%), Pacific people (7%) and people of other ethnicities (10%). (This compares with 76% NZ European, 12% Māori, 5% Pacific and 7% other in the total working-age<sup>10</sup> population.) The age structure of the workforce is proportional to the age structure of the working age population. The majority (58%) of the workforce are in the baby boomer cohort between the ages of 35 and 54 years, with an even spread of social workers in the age groups either side of this cohort.<sup>11</sup>

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<sup>9</sup> 2003 estimate from National Office, Aotearoa New Zealand Association of Social Workers.

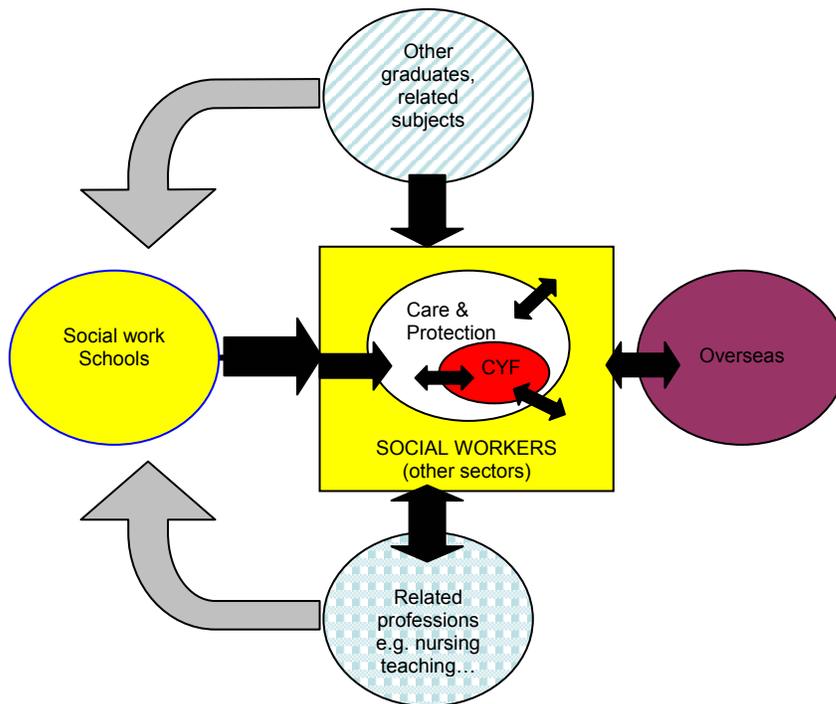
<sup>10</sup> Working-age population is defined as people aged 15 years and over.

<sup>11</sup> Based on data from the 2001 Census.

## Improving information on the supply and demand of social workers

82. Figure 3 illustrates the sources and destinations of people into, out of and within the social work workforce. Care and protection social workers can be recruited as graduates from social work schools, from other parts of the social work sector, from other professions, or from overseas. The care and protection sector competes with other sectors for a limited supply of social workers – the health sector in particular. Social workers may also be attracted to other professions and to jobs overseas due to better pay, more attractive working conditions and professional development opportunities.
83. The relative sizes of inflows, outflows, and movements within the social work workforce are not currently well understood, due to a lack of sector-wide information on social workers.

**Figure 3: The care and protection social work workforce in context**



84. Most of the information on social worker shortages comes from CYF. As a result of the *Baseline Review*, current efforts to address the shortages are focused on the department. Although CYF is the largest single employer of social workers within the care and protection sector, most care and protection social workers are employed by community organisations. A broad sector approach to workforce development is therefore crucial. However, CYF and community care and protection services are interdependent, often working with the same clients and families, which means that issues of social work capacity and capability in CYF have implications for the wider sector in a number of ways:

- attracting more people to work in CYF is likely to increase demand in other parts of the sector
- a lack of capacity in CYF increases pressure on community agencies, who are often left to “pick up the slack” when children and young people are at risk
- cross-sectoral working and information sharing require a threshold level of capacity and capability in CYF.

### **Demand for social workers**

85. Demand for social workers has increased dramatically in recent years, mainly as a result of increased government funding for social workers employed in the public sector and through contracts with private providers. Funding of care and protection services is not based directly on the demand for services, although demand does influence funding indirectly. For example, funding to CYF has increased on the basis of an increase in abuse and neglect notifications and large numbers of unallocated cases. Based on population projections and the assumption that socio-economic factors, political factors and notifications of abuse and neglect will remain fairly constant, demand for social work services is likely to be sustained at current levels in the medium term (Martin 2001).
86. Extending early intervention and prevention initiatives such as Social Workers in Schools, and family support services including Family Start and Early Start programmes, is likely to push up the demand for social workers who have skills working with children, young people and their families.
87. Currently, re-notifications are a significant source of demand in the care and protection system. In the longer term, implementing the *Baseline Review* recommendations aims to reduce demand for services across the sector by providing better-quality interventions that will lead to better outcomes for children and a reduction in repeated work for CYF and other agencies.

### **Supply of social workers**

88. There has been a limited supply-side response to the increased demand for care and protection social workers. If the required numbers of social workers are recruited into CYF as a result of the *Baseline Review*, the supply of social workers will further decrease in the immediate future. Graduates from tertiary institutes are an important stream of potential care and protection social workers. However, education data<sup>12</sup> shows a steady decline in the number of social work graduates at postgraduate, bachelor degree and diploma level from 1998 to 2000. There was a slight increase in 2001 in bachelor and diploma graduations, but numbers were still considerably lower than in 1997. Over the same period the numbers of teaching and nursing graduates increased substantially.
89. Shortages of qualified social workers are an international phenomenon. This means that social workers from New Zealand are in demand overseas and that social workers from overseas are unlikely to be readily available. On a more positive note, actions for addressing social worker shortages can be informed by approaches taken to building the child welfare workforce in other countries such as Australia, Canada, Scotland, the United Kingdom and the United States.

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<sup>12</sup> Source: Ministry of Education Data Management Unit, March 2003.

## **Addressing the lack of sector-wide information**

90. We have some information on flows of social workers into and out of CYF. Along with anecdotal evidence, this provides limited information on what is happening in the wider sector. The WDG suggests that exit interview data could contribute to our understanding of movements within the social work sector. However, exit interview data is not currently collected, collated and analysed on a consistent basis across the sector. CYF has recently introduced a new exit interview, which they are now applying on a consistent basis. Collecting better sector-wide information on the supply and demand of social workers is necessary to inform future workforce planning.

### **Recommended actions to move forward improving information on the supply and demand of social workers**

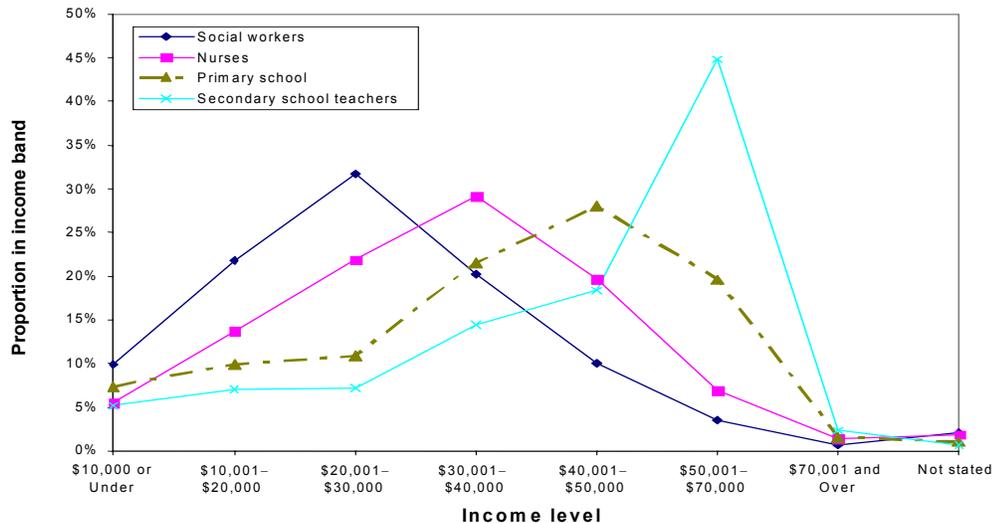
15. Collect and analyse sector-wide information on the supply and demand of social workers (ie, so that Figure 2 can be populated), starting with collection, collation and analysis of exit interview data across the sector.
16. Continue to monitor the number of graduates from social work courses and their destinations after graduating.
17. Review literature on international approaches to addressing social work workforce issues and assess the relevance of these approaches in a New Zealand context.

## **Social workers' registration**

91. The function of the Social Workers Registration Board (SWRB, established in October 2003) is to improve the quality of social work services to the public through setting standards of professional practice and accountability mechanisms. Registration will be voluntary. A task of the registration board is to set competency standards, including a minimum qualification level for social workers to meet registration criteria.
92. Registration of social workers has a number of potential risks and advantages for care and protection clients, employers and the social work workforce. The WDG is providing advice to the SWRB on issues to consider relating to care and protection social work. The recommendations include that the qualification level for registration initially be set at NZQA level 6 (diploma level), but that over a period of about 10 years the standard should be increased to a minimum qualification of a bachelor's degree in social work or equivalent.
93. In the longer term, setting the qualification level for registered social workers at degree level would put social work on a par with other professions, such as teaching and nursing. Social workers are currently less qualified and less well paid than these occupations, and raising professional standards for social workers will help to improve the status of social work as a profession. Over time this should also help to increase remuneration levels for social workers.

## Paying care and protection social workers

Figure 4: Income distributions of social workers, nurses and teachers



94. Social workers earn relatively low incomes. The average annual income of social workers is lower than that of nurses, primary school teachers and secondary school teachers. Figure 4 shows the income distributions of these four occupational groups. The median income band for social workers, which is also the most common, is between \$20,000 and \$30,000 per annum (gross). Although moderated, this pattern remains when we compare different occupational groups within the same qualification level (see Appendix). The average income of a social worker in the public sector in 2002 was approximately \$43,000, an increase of 12.7% from 2000.<sup>13</sup> This is below the public sector average at June 2002 of \$45,900. (Note that the public sector rate is for full-time employees whereas the census data for the wider sector includes part-time workers as well<sup>14</sup>).
95. Remuneration can influence the decisions of people considering social work as a career, who will compare pay rates for social workers with those of professionals in other occupations. The cost of completing a social work degree is comparable to that of completing a teaching or nursing degree, even though the remuneration is less. This is likely to discourage people from training for a career in social work and push them towards other more lucrative professions. People who take out a student loan to complete their study need to consider how long it will take them to pay the loan back when they enter the workforce.
96. CYF increased remuneration to frontline social work staff in 2001. Retention improved in the year immediately after the increase (indicated by a reduction in

<sup>13</sup> <http://www.psa.org.nz/payrates.asp> based on data from the State Services Commission Human Resource Capability Survey, 2000, 2001, 2002.

<sup>14</sup> Statistics New Zealand, Census 2001.

turnover from 15.1% in 2000/01 to 12.5% in 2001/02), but then returned to the previous level (15.8% turnover in 2002/03). This pattern indicates that although pay influences retention, the level of the increase in 2001 was not enough to compensate for work and workplace factors within CYF in recent years.

**Recommended action to move forward on the pay of care and protection social workers**

18. Identify the extent to which pay contributes to recruitment and retention issues for care and protection social workers.
19. Review the remuneration rates of care and protection social workers across the sector and compare them to other social work specialisations and human service professions.

**Recruiting care and protection social workers**

97. To address shortages of social workers in the care and protection sector more people with the right mix of skills need to be recruited into the sector. There are two aspects to this:
  - attracting more people to train as social workers
  - attracting qualified social workers into the care and protection sector.
98. Recruits could include people who have previously worked in the sector, social work graduates, social workers working in other sectors, and graduates or professionals from other disciplines related to social work (eg, teaching, nursing or psychology, see Figure 3). People who currently work in caring occupations on a paid or voluntary basis in their communities, but who are not qualified social workers, have relevant experience and are also potential recruits.
99. Implementing sound selection criteria and processes for social work training and employment are essential to recruit people who will be suited to the challenges of care and protection practice. Selecting people with attitudes, values and personal characteristics that are compatible with social work practice increases the chance that they will be suited to the job, remain in the profession, and develop into a skilled practitioner. Due to the stressful nature of care and protection work, particularly front-line practice, resilience is an important attribute to consider in the selection of social workers.
100. The pros and cons of employing people from different backgrounds need to be considered. Qualified social workers who have previously worked in care and protection have the most relevant skills and experience. In order to attract this group back, the factors influencing their decisions to leave must be examined. Anecdotal evidence suggests that high levels of stress and perceived risk, a lack of support from management and an increasing amount of administrative work contribute to care and protection social workers' decisions to leave.

## **Attracting other professionals with relevant skills**

101. People working in related areas such as nursing or teaching have experience in understanding and relating to people that is also valuable in social work. Graduates from other disciplines such as psychology or education will have knowledge and skills relevant to some aspects of social work practice (eg, human development, and theories of behaviour modification). Encouraging and supporting graduates to obtain a social work qualification helps the care and protection sector. Providing intensive postgraduate social work courses focusing on specific social work knowledge, skills, ethics and practice models would enable graduates from other disciplines to upskill to a formal social work qualification over one to two years. For example, the University of Otago, in partnership with CYF, has developed an extramural postgraduate social work course for people with social work-related degrees. Students can complete this course over two years while they are working in care and protection. This course will commence in 2004 and could serve as a useful model for the further development of postgraduate social work courses by other education providers.
102. In order to attract people to care and protection work it is necessary to first gain an understanding of what perceptions potential social work candidates currently hold of care and protection work. Exit interview data from social workers who have left care and protection organisations can provide some information on the “push” factors, but more comprehensive information is required. Market research about potential groups that could be attracted to care and protection work is the first step to designing a recruitment strategy. Such research needs to identify the “push–pull” factors for care and protection social work, compared to other social work specialisations and human services careers. It should also identify what information people considering a career in social work would like and how they would like to receive it. For example, are national campaigns along the lines of the TeachNZ campaign appropriate? Are community-based recruitment programmes likely to be successful? Or would we be better off with a combination of both? Regardless of the medium, a campaign to attract people to work in care and protection would also need to challenge the negative perceptions of the sector discussed in the previous section.
103. A campaign to attract more people to train as social workers needs buy-in from social work schools. Education providers currently report a lack of demand for social work courses as one reason why they are reducing the capacity of courses. If this is the case, then increasing demand is a prerequisite for increasing social work school capacity. Ideally a campaign to encourage people to train as social workers would be supported by social work education providers. A comprehensive campaign to increase social work enrolments could be complemented by follow-up from education providers on enquiries by potential students. This approach has been an important factor in the success of the TeachNZ campaign.
104. Individual employers are responsible for establishing relationships with social work schools in their local area. There are strong incentives for both employers and social work schools to ensure that these relationships work well. Employers often provide placements for social work students at their own cost. This is a prime opportunity for employers to attract recent graduates into their organisation. The quality of student placements strongly influences graduates’ perceptions of potential employers. Perceptions are formed on the basis of direct experience in organisations as well as by word of mouth between students. For their part, social

work schools rely on employers to provide student placements that make up a compulsory part of the course content.

105. CYF has several initiatives under way to improve linkages between social work schools and itself, including:
  - the establishment of a Field Work Educator position to improve the quality of student placements
  - the provision of flexible courses for CYF staff (eg, UNITEC's distance learning course, ACE's Friday/Saturday programme, and the University of Otago extramural postgraduate programme)
  - secondments of CYF staff to education providers to teach statutory social work.
106. To further complement a recruitment campaign, employers of social workers and the education sector could look at providing scholarships to social work students. Scholarships and bursaries could be used to target specific groups, such as Māori, Pacific peoples and mature people. Increasing the amount of government funding to social work education providers to category B level, as for other courses with a clinical component, would improve the incentives for increasing the capacity of social work courses. If the cost of courses to students dropped as a result, this would also improve incentives for people to train as social workers.
107. Encouraging social workers from overseas to migrate and work here can help to address social work shortages. Adding social workers to the Priority Occupations List of the New Zealand Immigration Service when the list is reviewed in December this year would be a way to achieve this. This would make it easier for people from other countries who are qualified social workers to obtain work permits and residence in New Zealand. Currently only medical social workers are on the priority list. Social workers from overseas will require training to prepare them to practise as social workers in New Zealand. In the interests of the care and protection sector this training should be available on a regular basis and able to be completed in a relatively short time frame. Developing criteria for social workers with international qualifications to assess competence to practise in New Zealand would be useful in this regard. The Social Workers Registration Board may consider developing such criteria.

**Recommended actions to move forward on the recruitment of care and protection social workers**

20. Survey potential recruits to identify the positive drivers for and perceived barriers to gaining a social work qualification and working in the care and protection sector.
21. Examine the “push” and “pull” factors for other human services occupations, and other social work specialisations.
22. Investigate the potential of bursaries, scholarships and higher funding of social work courses to encourage and support people to train as social workers and work in the care and protection sector.
23. Review the funding category of social work courses.
24. Add social workers to the Priority Occupations List of the New Zealand Immigration Service.

## Retaining care and protection social workers

108. Retention is about supporting, valuing and developing people already in the workforce. Successful professional development of social workers is not just about attracting the right people into provider agencies. It is also about looking after them once they are there. Retention of current staff is as important as – if not more important than – recruiting new staff. It is pointless to recruit new people into the workforce if the workplace environment is such that they will not want to stay.
109. Currently CYF turnover of social workers is higher than is optimal. The WDG notes that this limits the experience level of the social work workforce and limits the department's capability. In the year to June 2003 CYF had 16% turnover of field social workers. The extent to which high turnover is a limiting factor for the wider sector is unclear. More information is required on retention rates of social workers in community agencies.
110. Low rates of retention mean a high turnover of staff, which has a number of disadvantages for clients, employers and the workforce itself. For clients, low retention means a lack of continuity in their personal contacts within organisations. For example, on average, children placed in CYF care are in care for 2.5 years, are placed with 10 different caregivers and have four different case workers (CYF 2003). This inhibits social work intervention, which requires a good client–practitioner relationship. Loss of continuity of personal contacts also inhibits co-ordination between CYF and other agencies by inhibiting communication and co-ordination between agencies at an operational level. Within organisations, high turnover leads to increased costs of recruiting and training new staff. High turnover also contributes to a loss of institutional knowledge, thus decreasing the ability of organisations to learn, and to improve the services they provide to children, young people and their families.
111. The same factors that lead to excellence in the workforce contribute to the retention of skilled people. These include ongoing professional supervision, and continued opportunities for learning and development. Safe and healthy organisational environments, appropriate remuneration, clear roles and boundaries and reasonable case loads also contribute to retaining social workers in an organisation. Through word of mouth, people working in the sector can greatly influence people considering joining the workforce. Strategies for retention will therefore complement recruitment efforts.
112. Some level of turnover is inevitable and is not necessarily a bad thing as people extend their range of practice. At a moderate level, movement of social workers within the sector can also contribute to building connections between agencies and inter-agency co-operation.

### **Recommended action to move forward on the retention of care and protection social workers**

25. Identify the extent to which high turnover is a limiting factor in the wider care and protection sector. As a first step, gather information on the retention rates of social workers in community and Māori agencies that provide care and protection services.

## Education, training and social work qualifications

### Prerequisites for competent social work practice

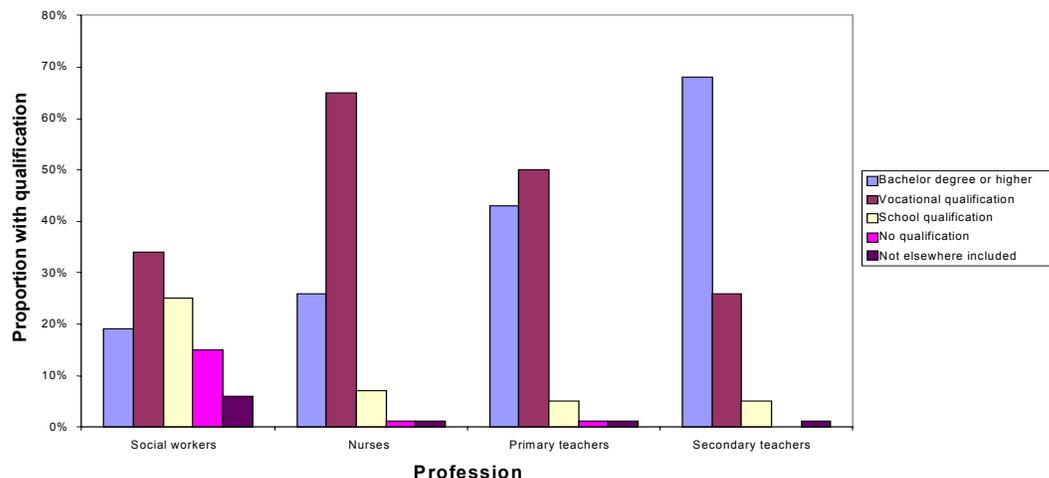
113. Social work competence is a function of people's knowledge, skills, attitudes, environment and experience. The WDG believes that holding a social work qualification is necessary for social workers. While experience on the job is important in developing competence, time out from working with clients for tertiary training/education and reflection on practice is vital for the professional development of social workers. In gaining a tertiary qualification social workers learn to:

- analyse their practice
- understand the ethical responsibilities of practice
- understand a range of intervention models
- develop an autonomous professional perspective.

114. Care and protection social workers face difficult situations in their practice, particularly those who work in the statutory area. The knowledge, skills and experience gained while working towards a qualification should prepare graduates for the realities of social work practice. As a result of tertiary training, qualified social workers are able to practise confidently using their professional judgement, rather than solely relying on agency policies.

### Current qualifications of social workers

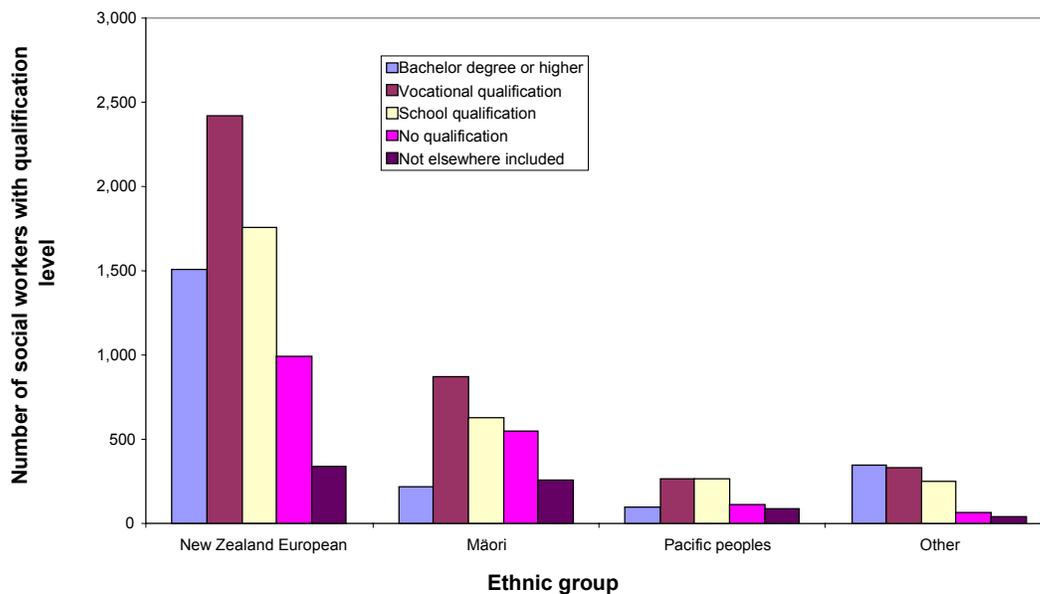
**Figure 5: Social worker qualifications compared with those of similar professions**



115. Fewer social workers have qualifications than other professionals such as nurses and teachers (see Figure 5). Census data shows that 14.6% of social workers have a recognised social work qualification (NZQA level 6 or higher), nearly a fifth have a degree qualification or higher, and a third have a vocational qualification (NZQA level 4–6) but not necessarily in social work. The proportion of social workers with qualifications remained stable from 1996 to 2001, although the number with qualifications increased from 4,173 to 5,538 over this period.

116. New Zealand European and “other” ethnicity social workers have the highest level of qualifications (see Figure 6). Over a third of other ethnicity social workers have a bachelor’s degree or higher, compared to a fifth of New Zealand Europeans, 12% of Pacific people, and 9% of Māori social workers. Approximately a third of social workers from all ethnic groups have a vocational qualification (although not necessarily to level 6, or in social work, see Table 1). Within CYF 21% of social workers are Māori, of whom 57% have a recognised qualification (NZQA level 6 or higher) in social work, compared to 56.5% for all social work staff.<sup>15</sup>

**Figure 6: Social worker qualifications, by ethnic group**



**Table 1: Proportion of ethnic groups with qualifications**

Ethnic group	Bachelor degree or higher	Vocational qualification (level 4 or above)	School qualification	No qualification	Not elsewhere included
<b>New Zealand European</b>	21%	35%	25%	14%	5%
<b>Māori</b>	9%	35%	25%	22%	10%
<b>Pacific peoples</b>	12%	32%	32%	13%	11%
<b>Other</b>	34%	32%	24%	6%	4%
<b>Total</b>	<b>19%</b>	<b>34%</b>	<b>25%</b>	<b>15%</b>	<b>6%</b>

<sup>15</sup> Data from CYF as of September 2003.

## Improving the competence of care and protection social workers

117. The WDG supports the principle that the sector should only employ qualified people. Presently this is difficult to enforce. The low status of social work as a profession and the unattractiveness of care and protection social work mean that there are simply not enough qualified social workers available to meet demand. A crucial part of improving the competence and professionalism of the workforce is therefore to attract more people to work and train in the sector. Social workers will not be eligible for registration without a qualification recognised by the Social Workers Registration Board (SWRB). This will contribute to improving social workers' qualifications.
118. The WDG strongly supports introducing post-qualifying internships for practitioners, which would provide a period of practical experience for social workers to develop competence in a particular field of practice, and could constitute the practical experience requirement for social workers' registration. Two years is suggested as the length of time necessary for a practitioner to gain the range, depth and experience necessary for independent practice, although the SWRB will need to consider further the optimal length of time and conditions for internships.
119. Even when social workers are qualified, differences between the expectations of employers and of many social work schools mean that the training undertaken towards a qualification is not necessarily adequate preparation for care and protection work. In order for social workers to be properly prepared, all social work courses need to include a care and protection component. Care and protection also needs to be developed as a specialist area of study and practice. Including this component in social work education will help to raise its profile as a specialist area of practice. In addition to courses for social workers, there are advantages to running specialist care and protection courses on a multidisciplinary basis for a range of professional groups that work with care and protection clients.
120. A related issue for the training and education of social workers is how to increase the number of qualified and competent social workers in a short period of time. Training courses that recognise previous experience and qualifications as contributing towards a specific social work qualification will help to achieve this. Resourcing constraints make it difficult to back-fill positions while unqualified social workers take time out to train. Balancing the demands of study while carrying a social work caseload further adds to the pressures and stress that care and protection social workers are already under. In order to increase the level of qualifications in the current workforce, back-filling needs to be resourced. Increased funding to employ more social workers as a result of the *Baseline Review* may help CYF in this regard.
121. In 1992, based on a review of the then Children and Young Persons Service within the Department of Social Welfare, Judge Ken Mason recommended that by 2000 the proportion of social work staff with a recognised qualification be increased from 40% to 90%. Currently only 56.5% of CYF social workers have a recognised social work qualification. The department is progressing towards the target of employing only qualified social workers at a modest, but steady, pace. All social workers employed by CYF are now required to have a recognised social work qualification or a study plan in place.

122. Among community and Māori providers of care and protection services the proportion of qualified social workers is not known. Better information is required before measures can be taken to address the rate of qualified social workers across the wider care and protection sector.

**Recommended action to move forward improving the competence of care and protection social workers**

26. Include care and protection as a core component in all social work qualifications in order for the qualification to be accepted by the Social Workers Registration Board.
27. The Social Workers Registration Board implement post-qualifying internships as the practical experience requirement for social worker registration, with the option of a care and protection practice specialisation.
28. Investigate how to encourage and support training institutions to develop advanced and postgraduate education in care and protection practice.

## 4. Recommended actions to move forward in developing the care and protection workforce

This section summarises the 28 recommended actions to address care and protection workforce issues from different sections throughout the report.

### Workforce issues for the care and protection sector

#### Developing a workforce that is responsive to the care and protection needs of Māori children and young people

1. Review, revamp and resurrect *Pūao-te-ata-tū*.
2. Gather better information on the range of strategies and initiatives under way across the sector to improve the responsiveness of the care and protection workforce to Māori clients, as well as evaluations of them.
3. Gather better information on Māori representation across professions and levels of seniority in the wider care and protection workforce.
4. Contribute a workforce development perspective to the implementation of *Te Pounamu*.
5. Link with other government strategies in particular, the *Care and Protection Blueprint* and *Te Rito*, to ensure services that contribute to care and protection outcomes are responsive to Māori children and young people.

#### Developing a workforce that is responsive to children and young people from Pacific and other diverse ethnic/cultural groups

6. Link with other areas of the *Care and Protection Blueprint* and *Te Rito*, in particular to ensure services that contribute to care and protection outcomes are responsive to children and young people from Pacific and other ethnic/cultural communities.
7. Promote and support the implementation of CYF's *Pacific Responsiveness Plan* (2002b).
8. Improve understanding of the particular workforce issues facing Pacific peoples and other ethnic/cultural groups.
9. Collect information on Pacific peoples' representation in the care and protection workforce across professions, levels of seniority, and community agencies.
10. Align further care and protection workforce development work with the Pacific Peoples Workforce Development Strategy and Pacific capacity building work by the Ministry of Pacific Island Affairs.

### **Challenging negative perceptions of care and protection work**

11. Collect baseline data on perceptions of care and protection work and monitor these over time.
12. Identify the potential for existing strategies to publicise the improvements they aim to bring about in the care and protection sector.
13. Address and challenge issues of poor practice by linking with other Blueprint action areas.

### **Issues for the wider care and protection workforce**

14. MSD undertake further work to identify issues for the wider care and protection workforce, including work to identify and address issues for caregivers and whānau workers across the care and protection sector

### **Developing a competent care and protection social work workforce**

#### **Improving information on the supply and demand of social workers**

15. Collect and analyse sector-wide information on the supply and demand of social workers (ie, so that Figure 2 can be populated), starting with collection, collation and analysis of exit interview data across the sector.
16. Continue to monitor the number of graduates from social work courses and their destinations after graduating.
17. Review literature on international approaches to addressing child protection workforce issues and assess the relevance of these approaches in a New Zealand context.

#### **Paying care and protection social workers**

18. Identify the extent to which pay contributes to recruitment and retention issues for care and protection social workers.
19. Review the remuneration rates of care and protection social workers across the sector and compare them to other social work specialisations and human service professions.

#### **Recruiting care and protection social workers**

20. Survey potential recruits to identify the positive drivers for and perceived barriers to gaining a social work qualification and working in the care and protection sector.
21. Examine the “push” and “pull” factors for other human services occupations, and other social work specialisations.
22. Investigate the potential of bursaries, scholarships and higher funding of social work courses to encourage and support people to train as social workers and work in the care and protection sector.
23. Review the funding category of social work courses.

24. Add social workers to the Priority Occupations List of the New Zealand Immigration Service.

**Retaining care and protection social workers**

25. Identify the extent to which high turnover is a limiting factor in the wider care and protection sector. As a first step, gather information on the retention rates of social workers in community and Māori agencies that provide care and protection services.

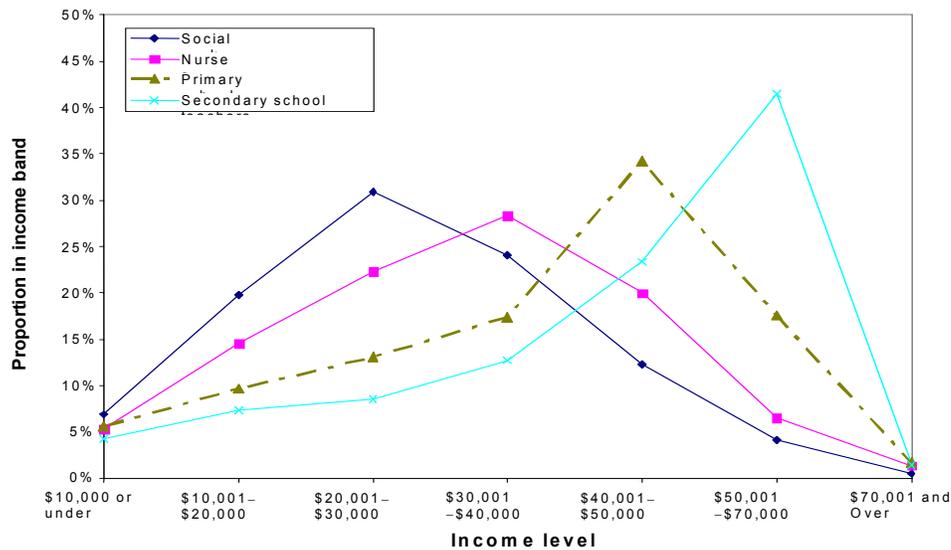
**Improving the competence of care and protection social workers**

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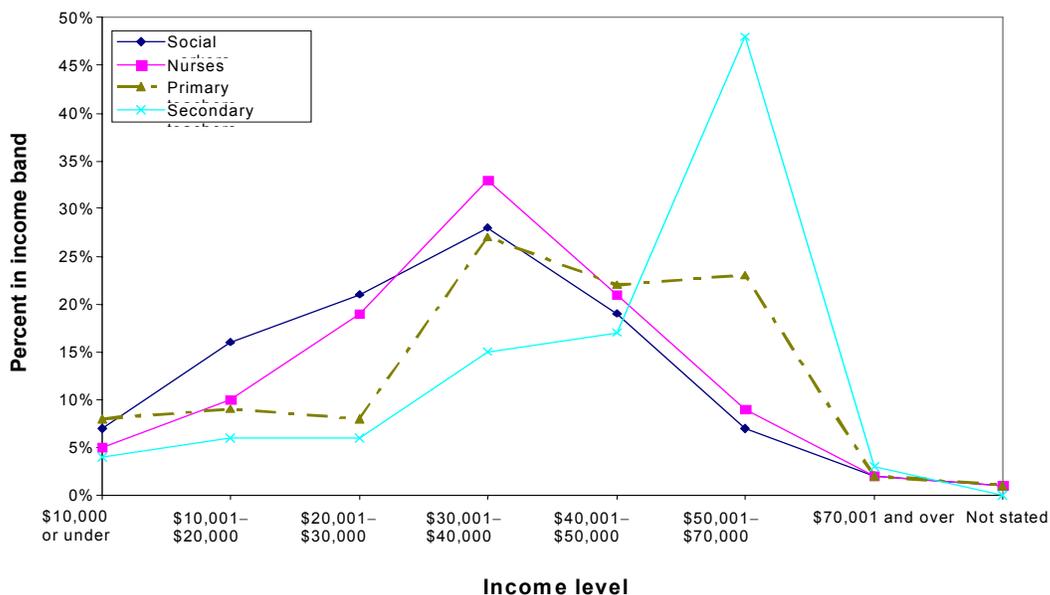
## Appendix: Income levels of social workers and other human service professionals

Social workers have lower incomes than other human service professionals even after controlling for qualification levels. Figure A1 shows the pay distributions of people with a vocational qualification (34% of social workers) and Figure A2 shows the pay distribution for professionals with a degree qualification or higher (19% of social workers).

**Figure A1: Income distribution of professionals with a vocational qualification**



**Figure A2: Income distribution for professionals with bachelor's degree or higher**



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