For many, New Zealand is a great place to live. We have a good quality of life, relative safety and security and an innovative mind set. Yet we also have some of the highest levels of child poverty and suicide in the developed world and we know that some people in our society are being persistently left behind. The gap between those who have and those who do not is concerning. While we may be proud of our social security net as a country, current modes of social service delivery are no longer fit for purpose to ensure all New Zealanders have the same opportunities – particularly those individuals and families with high and complex needs.

As we continue our State of the State series exploring wellbeing, this article examines the role of social services in building social capital for New Zealand families and explores how we could make systemic enhancements for those in need of additional support.

By Anne Molineux & Adithi Pandit

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The vast majority (83%) of Kiwi families have stable and secure lives, a comparatively high quality of life and are able to achieve their aspirations. They are able to access the services and support they require within the current system.

A very small number of families (3%) live in a state characterised by chronic crises – with a low quality of life, and in circumstances that prevent them from achieving their aspirations. These families typically have a range of high and complex needs, and are clients of multiple social service agencies. They are unable to access the services and support they require within the current system.

A small percentage of families (14%) live in precarious circumstances where their family’s fortunes could change at any moment. These families are mostly able to access the services and support they require within the current system, but need support to access or maintain access to services.
Social and human wellbeing in New Zealand

According to the OECD, New Zealand is in the top third of the least deprived OECD countries in 13 out of 18 indicators of deprivation.¹

The majority of New Zealand families are able to provide safe and stable homes and achieve financial progress here. These families are able to successfully navigate public and social services to ensure they receive healthcare, education and superannuation, and their needs are largely able to be met by the existing system.

However, for a cohort of families who experience ongoing disadvantage, the current system is not meeting their needs. In many cases these families have been experiencing poor life outcomes for generations, with colonialism, displacement and systemic bias having a compounding role. The current system is typified by agencies operating largely independently to provide services to individuals who meet their eligibility criteria. It is unable to respond effectively to families with complex and cross-cutting needs.

Deloitte’s Social Impact Practice has looked at a range of social service delivery models, including New Zealand’s own Whānau Ora and Strengthening Families approaches, that have the potential to improve the lives of families, with a particular focus on families in crisis.

Many reviews of social services systems start by looking at how the system should be restructured to meet the needs of families in crisis. Instead, we have looked at the characteristics of families whose needs are being met by the current system and focus on how families in crisis can be better supported to attain those characteristics.

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A snapshot of New Zealand families²

The vast majority (83%) of Kiwi families have stable and secure lives, a comparatively high quality of life and are able to achieve their aspirations. They are able to access any services and support they require within the current system.

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A very small number of families (3%) live in a state characterised by chronic crises – with a low quality of life, and in circumstances that prevent them from achieving their aspirations. These families typically have a range of high and complex needs, and are clients of multiple social service agencies. They are unable to access the services and support they require within the current system.

Current models of social service delivery

In our current social services system numerous government and non-governmental agencies offer services that are more like “products” – relatively standardised in their accessibility and specification, with little emphasis on tailoring to the individual or delivering a client experience. The client’s needs are understood mainly in relation to the scope of the product rather than what they need more holistically as a person.

Each agency focuses on delivering their products without much reference to the interplay between them. The products themselves are largely ‘one size fits all’ with some tailoring around the margins for larger customer segments.

It is left to individuals and families to navigate between the different agencies to access products to meet their needs and to resolve any service gaps or issues.

Families that are secure have the capacity and capability to analyse and organise their needs to align with the system. However, for families that are in crisis or at risk, the inability of the system to meet their needs in one domain can spill over into their ability to make use of the products and services from other parts of the system. For example, a lack of clean, dry, safe housing impacts children’s ability to learn, the parents’ ability to maintain employment and the family’s need for healthcare.
A strategy to build resilience and wellbeing

We have identified three shifts in social service delivery – representing increasingly systemic levels of reform – that would achieve these objectives.

1. **Family-by-family**
   - Supports families to navigate the system effectively to meet their needs

2. **Guaranteed Minimum Income**
   - Provides families with discretionary purchasing power to backfill for products they cannot obtain

3. **Family-centric policy**
   - The system is aligned to recognise and meet the needs of families, not just individuals

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**Moving to position of security**

**At-risk:** families and communities need support to access or maintain access to services

**Building resilience**

**Secure:** families and communities can navigate, access and use services independently

**In crisis:** families and communities need different services and supports

Working differently with families who are in crisis and at-risk to move to a position of security

Building resilience in families and communities to remain secure despite shocks
The further from a position of security that a family finds itself, the greater support is required to stabilise and move to a position of security.

The lack of a financial buffer that would act as a lubricant between these systems – such as the money for an oil heater, for petrol money to go to the doctor or for a nutritious breakfast for the kids - keeps these families in constant need of multiple agencies.

Other buffers such as community connections can create a network of shared supports and resources but in communities with the highest prevalence of intergenerational poverty network resources are already stretched.

To effectively meet their needs within the existing social services construct, a family needs to be able to:

- **Navigate the system effectively to meet their needs** – they are able to organise their needs to align with the system
- **Resolve any service gaps** – they have some discretionary purchasing power to backfill for the products and services they cannot obtain
- **Articulate their needs in the way that agencies look for** – they use their interpersonal skills to advocate for access to products and services when required

The majority of families that are in crisis, or at risk, are unable to do at least one if not all of these things:

- Their needs are complex and overlapping, for example poor health and educational participation that results from inadequate housing and prevents the parents from maintaining employment
- A lack of discretionary purchasing power means they cannot purchase additional services that would address gaps – for example, money for a heater and electricity to reduce mould in their home
- These families often have low levels of literacy or English as a second language and they may not understand entitlements or what they can expect from agencies

A strategy to build resilience and wellbeing

While there is little doubt that the New Zealand social service system needs to change – as signalled by the wide-ranging welfare system review announcement – there is an immediate and pressing need to improve current social service delivery to better meet the needs of families in crisis.

This requires a focus on two key objectives:

1. To create a system of greater resilience that enables more families to remain secure despite shocks
2. To create the supports that move families who are currently struggling into a position of security

The further from a position of security that a family finds itself, the greater support is required to stabilise and move to a position of security. Less support is required to keep a family that is already secure in that space.

We have identified three shifts in social service delivery – representing increasingly systemic levels of reform – that would achieve these objectives.

The remainder of this article focuses on the first shift – a family-by-family model that supports families to navigate the existing system to meet their needs, and creates the supports that move families who are currently in crisis to a position of security.
Navigator models in New Zealand and elsewhere are often limited by a lack of budget and clarity on objectives, and because navigators lack decision rights within the service delivery organisations.

**Current models for integrated family supports**

New Zealand and other countries have tried a range of approaches to better integrate services to better meet the needs of families in crisis. These approaches typically fall into three categories:

**Integrated social services** create a structural one stop shop for service delivery. Approaches to integrating social services typically start with a premise of fundamentally integrating service design and delivery, but tend to result in tinkering around the edges or the introduction of new programmes on top of existing ones. For example, SmartStart (formerly Birth of a Child) is a portal for expecting and/or new parents to access the information and services they require from a number of different agencies. While feedback from customers has been positive, the services provided through SmartStart are transactional in nature, and do not have the complexity of social services.

**Navigator models** create storefront integration for services while allowing service delivery to remain disaggregated. Navigator models do not seek to change the fundamental service delivery system, but rather create a new interface for families that enable them to access the right services and supports in a manner more aligned to their needs. Navigator models in New Zealand and elsewhere are often limited by a lack of budget and clarity on objectives, and because navigators lack decision rights within the service delivery organisations. Whānau Ora is a good example of this, where navigators work closely with families and whānau to assess their specific needs and aspirations, and then connect them with the right services – but still have to work within the constraints created by mainstream government agencies.

**Commissioning models** create a budget pool or purchasing capability at a community, geography or cohort level. Commissioning models use budgets to remove barriers to service access for families in crisis. These models have shown some success in other jurisdictions. In New Zealand, Social Investment Boards have had some impact at the margins of social service delivery. However, such models do not address the full range of characteristics necessary to navigate social services effectively.

Although these models have produced some success in particular areas of social services, all have limitations, and none have been able to achieve the step change required to lift social outcomes. While these models may help families to identify and access existing products and services – they are not effective at addressing complex and overlapping needs that do not align easily to existing service catalogues.

**A strengthened family-by-family approach**

In New Zealand, an enhanced family-by-family approach could build on existing models such as Strengthening Families and Whānau Ora, by strengthening the purchasing power and agency influence of the navigator, extending the domains the navigator covers to all family related social supports, and creating more structured interfaces between the agencies and the navigator programmes.

Our comparative analysis found the greatest opportunities for enhancements in a model that has been trialled extensively in Denmark. There, it has operated as a pilot programme for 3 years, involving a rolling-cohort of 400 families from 10 local municipalities, and has now transitioned to business-as-usual.

The Danish model centres on individual cross-disciplinary plans for Denmark’s most vulnerable families, supported by funding to achieve the interventions described in each plan. Each plan describes the family’s objectives, and coordinates the interventions across the departments required to deliver on them. Ongoing measurement of objectives, outcomes and measures ensures the plan is flexible and can adapt to changing circumstances.

The family-by-family navigator could be someone who is already known to the family, and who could work with the family to develop a single plan for the family that is based on the family’s own aspirations for their wellbeing and their own definition of their family group.
Family-by-family model

**Social service agencies**
Continue to provide services as normal to majority of families and whānau

**MoH/DHB**
Hospital, addiction & disability services

**Oranga Tamariki**
Parenting support

**MSD**
Social housing & benefits

**HNZC**
Housing

**GP**
General health

**ACC**
Injury support

**MoE/ School**
Education & truancy

**IRD**

**Custom interfaces**
Agencies assign specific teams to interface with the navigators and provide direct and preferential access

**Single, powerful navigator**

Navigator from the community who can act on behalf of the family and work with them to purchase and secure services

**Family owned**
The family will be able to express their aspiration through the plan and see the roadmap as helping them achieve this

**Other providers**

Navigator has ability to select non-government service providers including private market provision

**Holistic view**

A single assessment and planning tool that is co-developed with the family and whānau. The tool must therefore cover all domains of wellbeing, and include not only needs but also aspiration.

**Single plan with budget**

A single plan co-designed with the family with budget associated with it that reflects the total desired investment in the family returning to high functioning

**Networks of influential advocates**

Navigators have access to a network of influential advocates - not establishing formal advocacy organisations (that often work hard but outside of informal power networks), but to have direct access to leaders in commerce, politics and government
Every municipality that has implemented this model has seen significant improvements in educational and workforce participation – two key measures of success – among participating families. It has achieved these outcomes while simultaneously reducing costs, finding that many of the interventions previously in place for families were operating at cross-purposes to one another.

One of the key characteristics of this model is that it focuses on the families in greatest crisis. In Denmark, these families were identified as being the families on whom the greatest amount of social services funding was spent. Participation in the programme was dependent on the family providing permission for their information to be shared among relevant agencies, which proved to have minimal effect on families’ willingness to participate.

This model supports families in crisis to attain the characteristics that enable more secure and resilient families to navigate the current system effectively. These include:

- A single powerful navigator for the family
- The budget authority to spend outside the traditional service catalogue
- Support from influential advocates who can exercise their “privilege” on behalf of the family

The evidence of success in the Danish family-by-family approach is compelling and suggests that enhancing our Whānau Ora models is a feasible and desirable path forward. It can be delivered within the existing envelope of social services budgets by spending money in a more client-led way. It delivers the benefits of social service integration for families in crisis, without requiring significant structural changes to the existing social service system. It leverages the strengths that lie in communities and families, and thus builds resilience, which reduces the likelihood of a return to dysfunction and builds social and human capital.

Taking a family-by-family approach to social service provision enables services, that are otherwise siloed and selectively available, to be wrapped into more holistic wellbeing-focused outcomes. This would allow more families to access the public and state sector services they need to achieve their aspirations, and help ensure more Kiwi families are able to experience the quality lifestyle that many in New Zealand have come to enjoy.
Taking a family-by-family approach to social service provision enables services, that are otherwise siloed and selectively available, to be wrapped into more holistic wellbeing-focused outcomes.

**Looking to the future**

In New Zealand we have relied for a long time on the willingness of those who work in the social sector to go “above and beyond” to find ways to meet the needs of their clients in spite of the current system.

Strengthening a family-by-family approach is not a panacea, and does not tackle a number of systemic issues such as hospital waiting lists, housing affordability and transport infrastructure. However, the benefits case for this model is strong, both from an evidence base and from existing business cases for social investment and integrated social services. We see the family-by-family approach as a credible and practical first step to address some of the complex, long-standing problems that create intergenerational poverty and dysfunction.

If we are to have a more significant and lasting impact on families at risk or in crisis, we need to look to systemic shifts in the social services system, and reduce our reliance on the goodwill of individuals.

In New Zealand, as we embrace a more holistic concept of wellbeing and understand the importance of community resilience, we have the opportunity to complement this targeted approach with broader supports, as suggested in two additional models we are exploring: Guaranteed Minimum Income, and Family-Centric Policy.

We will be exploring these other two models in greater depth in a report to be released later this year and we will notify subscribers to the State of the State series when it is available.
End notes


Stay tuned for more
Article 5 coming soon

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Inclusive and resilient communities
Co-creating our human and social capital

Expanding outward from a GDP economy to a wellbeing economy will require a fundamental re-think of how we measure success as a nation and the transformation of the public, private and community sectors.

By Deborah Lecot

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