



Mahi Aroha

Carers' Strategy Action Plan **2019–2023**



**MINISTRY OF SOCIAL
DEVELOPMENT**
TE MANATŪ WHAKAHIATO ORA



NEW ZEALAND
carers
ALLIANCE





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Foreword

Carers make a significant contribution to the quality of the lives of the friends, family, whānau and aiga members they care for. Caring is at the heart of a compassionate community and underpins who we are and what we value in New Zealand-Aotearoa. Their work is not only of significant social value but also economic value to New Zealand.

Individual, family, whānau and aiga carers provide care for someone close to them who needs additional assistance with their everyday living because of a disability, health condition, illness or injury. Carers play a crucial role in enabling people to live and participate in their communities.

This Government is committed to supporting everyone who is able to be earning, learning, caring or volunteering. *Mahi Aroha – Carers' Strategy Action Plan 2019–2023* (*Mahi Aroha*) is an important part of this commitment and provides the next cross-agency action plan to support carers.

Since the launch of the Carers' Strategy in 2008, we have worked in partnership with the New Zealand Carers Alliance to ensure each Carers' Strategy Action Plan reflects the views of carers. As the third Action Plan under the Carers' Strategy, *Mahi Aroha* builds on previous work to achieve the Strategy's vision, principles and objectives.

Mahi Aroha reflects our commitment to improving the wellbeing of carers and supporting them in this valuable role. We invited public consultation on the development of this Action Plan. *Mahi Aroha* responds to what carers said mattered most to them – the need for carers to be identified, recognised and valued for their contribution; improving the ways carers can navigate the support and services available to them; supporting their wellbeing; and improving their pathways to employment and training.

We would like to thank all those who contributed to *Mahi Aroha*. First and foremost, to carers themselves: *Mahi Aroha* is the culmination of all the experiences you so generously shared. We would also like to recognise our partners in the development of the Carers' Strategy Action Plan, the New Zealand Carers Alliance.

Mahi Aroha will touch the lives of many New Zealanders. We hope this Action Plan will make the caring role easier. It reflects our commitment to government working with a wide range of organisations and individuals to ensure *Mahi Aroha* achieves significant and meaningful impacts on the lives of our carers.





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Introduction

The Carers' Strategy is a cross-agency strategy recognising the valuable contribution carers make. We know that currently one in 10 New Zealanders are carers and this number is likely to increase as the population ages and people live longer. The carer role falls inequitably across the population, with the majority of carers being women. Members of Māori and Pacific communities are also more likely to be carers.

The Carers' Strategy, launched in 2008, is supported by five-year action plans that address key priorities identified by carers and the Government. *Mahi Aroha – Carers' Strategy Action Plan 2019–2023 (Mahi Aroha)* is the third such action plan. It has been developed in partnership with the New Zealand Carers Alliance and a cross-government agency working group. Carers throughout New Zealand have made a significant contribution to its development.

Action plan for 2019 to 2023

An action plan that recognises, values, and supports carers is an investment in New Zealand's future. As more people become carers, it is important we are investing in support for carers. While the interests of carers and the people they care for are closely related, support is usually focused on the person needing care.

The demands of care often mean that carers have fewer opportunities to participate in education, paid work and social and community activities. Over time this can have a negative impact on their wellbeing and a carer's ability to continue to provide care. It can also have wider impacts on the carer's (and their family's) finances and social connectedness.

Carers told us that the significant issues have not changed from previous action plans and the work to progress these needs to continue. The ongoing issues include the need for respite, support when things are not going well, assistance with the increasing financial pressures of caring, and a desire for greater carer choice and flexibility.

Mahi Aroha includes a new focus on target populations and a family, whānau, aiga-centred approach will be part of the implementation approach.





Who is this plan for?

Mahi Aroha is for anyone who cares for a friend, family, whānau or aiga member with a disability, health condition, illness or injury who needs help with everyday living. While we recognise the importance of paid professional carers and foster carers, *Mahi Aroha* is not intended to cover these groups.

The term 'carer' is used internationally, but we recognise that it may not resonate with everyone. Words such as 'supporter' or 'manaakitanga' may better describe the way a carer sees caring as a natural part of what they do for the people they love. In this document, the term 'carer' is used to describe the diversity of individuals, families, whānau and aiga who provide this support.

In response to feedback, *Mahi Aroha* uses collective terminology (such as family, whānau, aiga and carers) as already reflected in the Carers' Strategy.

How we got here

Mahi Aroha reflects what carers told us is most important to them.

In developing *Mahi Aroha* we reviewed the existing evidence about carers' experiences and examined the feedback from the previous two action plans. We invited public consultation on a draft action plan via a series of targeted workshops, hui and talanoa, written submissions, and input to an online survey. We wanted to hear from carers about whether we had got the Action Plan right – whether its actions reflected what mattered most to them, and if there were any issues that we had missed.

A summary of the submissions we received as part of this consultation process is available on the Ministry of Social Development (MSD) website www.msd.govt.nz/carers.



A new focus on population groups

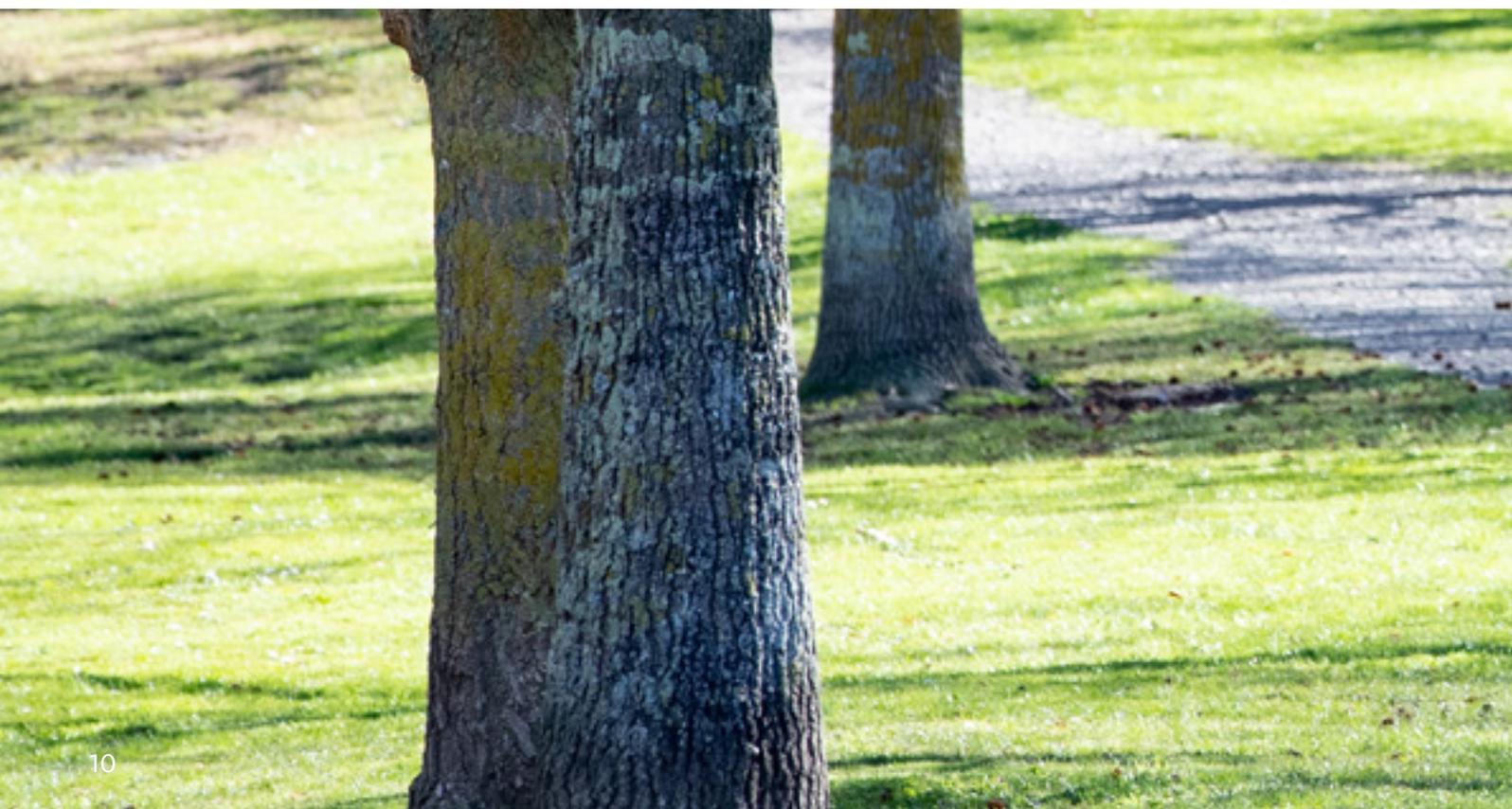
Mahi Aroha is for all those providing care, with the exception of professional and foster carers. While much of the experience of care is similar for all carers, *Mahi Aroha* has an additional focus on four target population groups: carers who are Māori, Pacific, young (aged up to 25 years) and older (aged 65 years and older). This recognises the particular needs of these groups of carers. This population focus helps us to continue to support all carers while also recognising the diversity of our carer population and the different supports that carers may need.

Māori carers

Māori women are more likely to be carers than women in the general carer population and they are typically younger. In addition, Māori communities have higher rates of multiple and long-term health conditions and these carers are more likely to be managing their own health conditions as well. Māori may not consider themselves to be carers, believing caring is a normal part of whānau responsibility. Māori carers may have had negative experiences with services that were culturally unsafe or unresponsive to the needs of caring for whānau. This can all influence whether, or how, they access support.

Pacific carers

Pacific carers are often younger than those in the general carer population and may not identify as carers. In Pacific communities, care is typically provided within aiga and families. Carers may find services culturally unsafe or unresponsive to their needs, or the needs of those for whom they are caring. Negative experiences with services may mean Pacific carers feel reluctant to access support. Pacific communities experience poorer health than the general population, meaning Pacific carers are more likely to be dealing with their own health conditions alongside their caring role.



Young carers

Young carers may not want to draw attention to themselves, which makes determining the number of young carers difficult. As a result, young carers do not always access the support they need. Caring can impact on their participation in school and study, their transition into paid employment, and the usual things children and young people do. This can have significant impacts on their opportunities in later life.

Older carers

Older carers are particularly vulnerable to social isolation. Most older carers are looking after a partner or spouse. In this population group the proportion of men providing care to their partner/spouse as they age is increasing. The demands of older carers' reduces their ability to take part in social activities, which can result in a lack of social connectedness. They may also be managing their own health conditions and require support themselves, alongside dealing with the demands of being a carer.



Continuing with the focus and objectives

Consistent with this Government's focus on wellbeing, *Mahi Aroha* uses a 'wellbeing approach'. Its focus areas and objectives incorporate the Treasury Living Standards Framework wellbeing domains¹ and the capability dimensions of the Whānau Rangatiratanga Framework.² These include cultural identity, sustainability of Te Ao Māori, social connections, knowledge and skills, human resource potential, and income.

The objectives of *Mahi Aroha* align with the objectives of the Carers' Strategy which are that:

- the work carers do will be identified and more recognised
- carers will be better supported with improved knowledge and information about caring
- carers will be better supported to access culturally safe and appropriate services
- carers will be able to take a break from their care role
- the health and wellbeing of carers will be improved
- carers will have adequate financial assistance to cover the costs of the care role
- carers will have options and choices for remaining in employment and/or seeking employment, if they want to
- carers' pathways to employment will be supported.

How *Mahi Aroha* works towards these objectives is set out in the following sections.



1 <https://treasury.govt.nz/information-and-services/nz-economy/living-standards/our-living-standards-framework>
2 <https://thehub.sia.govt.nz/assets/Uploads/Whanau-rangatiratanga-frameworks-summary.pdf>





Recognition

Recognising carers and their contributions

Recognising is the first of the four focus areas of *Mahi Aroha*. It aims to ensure that carers are recognised, valued and acknowledged for the important work they do.

Many carers we heard from emphasised the importance of recognition. Some felt their role as carers was not valued and that they had no voice. They asked to be trusted, supported and heard. Recognition was about being valued for their contribution to society, with others understanding the nature of their caring role. They wanted to be supported, no matter who they were caring for.

“I think ‘recognising carers and their contributions’, is the most important and overarching action step. It implies [imminent action] and significant change for caregivers. Please press on with this.”

Submission

“For me, it’s about recognition, trust, choice and – ultimately – empowerment.”

Workshop participant



Objective: **The work carers do will be identified and more recognised.**

Action 1.1

Promote recognition of carers by government, employers, and the community as a distinct group with specific needs and whose contributions are valued.

Lead agency: Ministry of Social Development

We will work to identify ways for carers to be better recognised and supported, within communities, workplaces and schools, through mechanisms such as legislation and policy.

The focus will be on increasing the understanding of what is possible to promote recognition of carers. This includes reviewing existing legislation and policies, exploring specific carers' legislation in other countries, and expanding on existing work to promote flexible working in workplaces.

Action 1.2

Raise awareness of carers and how they can be supported.

Leads: Ministry of Social Development and New Zealand Carers Alliance

We will explore opportunities to raise awareness of carers and how they can be supported, for example a campaign on improving New Zealanders' understanding of what it is to be a carer and encouraging those who are looking after a loved one, a friend or someone in need, to realise they may be eligible for the supports and services designed to assist them at work, school and in the community.

Objective: **Carers will be better supported with improved knowledge and information about caring.**

Action 1.3

Create a fund to research the needs of carers, including:

- research on young, older, Māori, and Pacific carers
- research into the barriers and impact for carers who work
- research into the incidence and impact of family violence for carers.

Lead agency: Ministry of Social Development

We are aware there are specific populations of carers who we need to know more about. Research will provide a better understanding of carers' needs, as well as the barriers and situations they face. This information is critical to providing better support.

We will seek to create a research fund to better understand the needs of carers – especially Māori, Pacific, young and older carers. In particular, we will focus on those who do not necessarily identify with the term 'carer'. The work will prioritise kaupapa Māori approaches and utilise the Kapasa framework³ to commission new research.

The research will explore the key barriers and impacts of current care leave entitlements for carers who work. The results may inform investment in, and design of, future services and support for carers.

During our engagement with carers, we heard that carers are experiencing family violence. To understand the full extent of what carers are experiencing we will look at the incidence and impact of family violence for carers.

Action 1.4

Improve data about carers through:

- opportunities to use existing data collection tools
- supporting work to develop a tool to help identify young carers.

Leads: Ministry of Social Development and New Zealand Carers Alliance

Accurate information and data about carers can be difficult to access due to the complex nature of care. We will work with existing data collection mechanisms to build a more robust and accurate supply of information on carers. These mechanisms include the Census, New Zealand Disability Survey, New Zealand General Social Survey, New Zealand Time Use Survey, and New Zealand Household Labour Force Survey.

The New Zealand Carers Alliance has begun identifying young carers using a United Kingdom survey – *Multidimensional Assessment of Caring Activities* that has been adapted for the New Zealand context. This information will help gain a better understanding of trends and issues for young carers and support service development and decision making.

This data will be key to informing the way services and supports are provided to carers.

Action 1.5

Support the inclusion of young carers in policy development.

Leads: Carers New Zealand and Ministry of Social Development

We will support the work of Carers New Zealand as they work with Young Carers New Zealand to establish a Young Carers Leadership Team. It is important to hear the voices of young carers so that government agencies can support them better, as well as their families, whānau and aiga.

3 <https://www.mpp.govt.nz/assets/Uploads/Kapasa2017-A3-Pullout-WEB2.pdf>



Navigating

Ensuring carers receive support and services

This focus area centres on how we can better support carers to navigate systems and services, ensuring they receive the support and services they need.

During consultation, carers identified 'navigation' as an area where improvement was necessary. There was a common sentiment that the burden was on the carer to 'do the work' to find the services to which they were entitled.

“This is a critically important area, the challenges for a family trying to find any information is massive. It desperately needs centralising and communication. It is so, so hard to find what you need and who can help. This should be the first priority! Clear policies and guidelines along with where to get help. Again, a centralised hub is key.”

Survey respondent

“It shouldn't be about me, who's burned out after 15 years of caring, having to go from place to place to find things ... I'm almost done. It should be them, they should be helping me.”

Workshop participant

“It's like there are two jobs – the caring and then the logistics. And they're both such a struggle.”

Workshop participant

It can be hard for carers to know where to go to find out what support services are available. Actions in this area aim to ensure services are more culturally safe and appropriate; carers can access this support, respite and assistance; and the way information is shared is improved.



Objective: **Carers will be better supported to access culturally safe and appropriate services.**

Action 2.1

Identify and assess best-practice options for supporting people and their carers with the management of continence.

Lead agency: Ministry of Health

Managing bladder and bowel continence is a common health problem for those being cared for. Access to continence services is an under-reported and growing issue, particularly for women aged 40–60. For many, this issue is associated with stress and stigma. Managing continence is a priority concern for those who experience difficulties with it, as well as for those caring for them.

The costs of incontinence can be a significant burden to families, the health system, and society as a whole. These include productivity impacts (eg time off work, or not being able to work) the cost of products, the need for formal care and the environmental effects (ie disposal).

We will identify and assess best practice options for supporting people and their carers with the management of continence.

Action 2.2

Strengthen navigation across all parts of the care and support system (including health, welfare, and the Accident Compensation Corporation [ACC]) to ensure carers are aware of, and supported to access, available assistance for themselves and those they care for. This includes:

- improving information sharing through the National Health Information Platform (NHIP)
- updating A Guide for Carers.

Leads: Ministry of Health, Accident Compensation Corporation, Ministry of Social Development, and New Zealand Carers Alliance

Carers told us that information can be confusing and difficult to access and sometimes does not address their needs. We want to ensure that information is clear, accessible, and relevant to carers. It is important that information is provided in a range of languages and formats, and is culturally safe and appropriate. We will look at better promotion and enhancement of existing resources, such as carer learning and online care-planning tools. We will work to ensure these resources include a Te Ao Māori and Pacific perspective.

The Ministry of Health will continue their work on improvements in information sharing through the NHIP. This will improve access to information for carers, those being cared for, health and disability providers, and other supporting agencies.

Professionals who come into contact with carers are not always aware of their carer role. This can lead to carers not being involved in the decisions and planning for the people for whom they are caring. This action will identify the key touch points for carers (for example GP visits) and develop resources and support to enable professionals to recognise people who are caring and respond appropriately to their carer-related needs.

This action will work to connect government services with community providers that have a closer role in supporting individuals and families.

We will update A Guide for Carers⁴ in line with the MSD Accessibility Charter. We will make it available in print for carers who do not have access to online information. We will explore translating the guide into other languages so it is more accessible and we can reach more people. Developing an interactive online version of the guide will also be explored.

Action 2.3

Identify whānau, aiga, and family-centred tools and initiatives to provide culturally safe and responsive approaches for Māori and Pacific carers and their whānau, aiga, and families.

Lead agency: Te Puni Kōkiri

Work under this action will use existing whānau, aiga, and family-centred mechanisms to broaden culturally responsive ways for carers and their whānau, aiga and families to be supported in their care role. This work will identify gaps and explore mechanisms to address these issues. The aim is to improve access to culturally safe services and supports across the health, welfare and ACC systems, as well as at a community level.

Objective:
Carers can take breaks from their care role.

Action 2.4

Improve the quality, accessibility and equity of services across New Zealand so carers can take breaks (including the flexible disability respite budgets – I Choose).

Leads: Ministry of Health and Accident Compensation Corporation

Taking a break is important for carers' health and wellbeing and can help address social isolation and loneliness in carers.

This action works to address the difficulty carers and their friends, families, whānau and aiga have in accessing ways to take breaks that meet their needs. This work will include exploring how to make sure services are affordable, easily available, high quality, and culturally safe and appropriate. As part of this work the Ministry of Health will introduce flexible disability respite budgets (I Choose). The Ministry of Health will also identify opportunities to support funders of respite services to focus on improvements to respite, with a focus on carers of people with dementia.

⁴ A Guide for Carers is a resource for people supporting friends, family, whānau and aiga who need help with everyday living because of a health condition, disability or injury. It includes information on a range of services and supports, including financial and non-financial help, health and wellbeing, and taking a break.



Supporting

Caring for carers and supporting their wellbeing

Supporting is the third focus area. It focuses on supporting carers, including financial support and carer wellbeing.

During consultation, carers told us that the actions under this focus area were some of the most important to them. In addition to financial support, respondents also talked about social connections, and their place in the community. Some spoke about the important role of spirituality for their wellbeing, helping them to cope with the challenges of being a carer. Consultation also highlighted that holistic support and self-care strategies that consider the 'whole person' are important to carers.

A recurring theme in the feedback was that carers were often so focused on the person they were caring for that they neglected to look after themselves. Experiences of stress and burn-out were common, with one respondent noting that carers do not have a wellbeing framework to define what it means to be well.

“One important aspect is ‘care for the carers’. If not, there will be two people needing care and two more carers needed.”

Submission

“Carers can be dangerously selfless. Their love is for the person they care for. Often they forget themselves.”

Talanoa participant

“Self-care and wellbeing... that’s what you need to be teaching. You need to teach carers how to do this and make sure they are addressing it.”

Workshop participant

“The body can live with a certain amount of stress, but I don’t think people, even carers themselves, realise how much they live with. It’s so far beyond ‘normal’ stress. You can only do that for so long before you just burn out.”

Workshop participant

“Making sure that financial and practical supports are in place so that the day-to-day lives of carers and those they care for are not only manageable but enjoyable.”

Survey respondent

Carers also mentioned other factors affecting the support that they needed. These included changes in family dynamics (for example, smaller households and increased female participation in the workforce), as well as the impacts of an ageing population.

Nowadays whānau are dispersed and not many[are] left to share care or [they] are older and need care themselves. It used to be that more whānau were around and tighter in looking after each other.

Hui feedback

Objective: The health and wellbeing of carers will be improved.

Action 3.1

Identify and support young carers, their families, whānau and aiga to access the support they need.

Leads: Oranga Tamariki—Ministry for Children, Ministry of Social Development, Ministry of Health, and Te Puni Kōkiri

We want to better understand the needs of young carers as well as identify opportunities to support them and their families, whānau and aiga. Initially, we will complete a stocktake analysis to understand the issues and gaps. Then an implementation plan will be developed to address these.

Agencies will update their practice guidance for frontline staff with information and resources about young carers and the supports available to them.

The action will also increase the online information available to young carers.

Action 3.2

Help carers to participate in social networks, have opportunities to keep up relationships, and enjoy interests outside their caring role, with a specific focus on older carers.

Leads: New Zealand Carers Alliance and Ministry of Social Development

Carers of all ages and stages of life can become socially isolated because the time and intensity of commitment involved in caring. In particular, older carers are vulnerable to social isolation; they are more likely to be dealing with their own health conditions on top of caring, which can limit their ability to participate in social activities. This can, in turn, lead to heightened social isolation.

We will develop and implement initiatives to preserve and grow social networks, supports and connections for older carers and carers of older people. Initiatives will include both physical and virtual connections. This work aligns with one of the key areas for action in the *Better Later Life Strategy – He Oranga Kaumātua 2019–2034* and the *Healthy Ageing Strategy 2016*, to establish a joined-up approach across government and social sectors to coordinate assistance to socially isolated and other vulnerable older people.



Action 3.3

Enhance access to information, guidance and support of mental health and addictions, for carers and the services and organisations working with the families, whānau, and aiga of people who have a mental health and/or addiction issue.

Lead agency: Ministry of Health

He Ara Oranga Report of the Government Inquiry into Mental Health and Addiction has recommendations specifically for families, whānau and aiga that will be part of the Ministry of Health's work for this action.

The Ministry of Health will work with the New Zealand Carers Alliance and other government agencies to consolidate, update and disseminate information and carer guidance. The work will look at how to integrate the information sharing and partnering guidance into contracts and training across the mental health and addiction workforce.

The Ministry of Health will look at reviewing and enhancing the support options available to carers, families, whānau and aiga of people with mental health and addiction needs.

Objective:
Carers will have adequate financial assistance to cover the costs of caring.

Action 3.4

Change to health sector Funded Family Care (FFC) policies and repeal of Part 4A of the New Zealand Public Health and Disability Act 2000.

Lead agency: Ministry of Health

Funded Family Care policies allow eligible disabled people to choose to have their resident family member provide the support services that are otherwise provided by a State-funded care and support worker. The Ministry of Health Disability Support Services and District Health Boards have FFC policies.

In July 2019, the Government announced:

- the repeal of Part 4A of the New Zealand Public Health and Disability Act 2000 (Part 4A), which will allow policies to be challenged under human rights law
- an eligibility change to allow spouses and partners to provide FFC to their eligible family member and for people under the age of 18 to receive FFC
- removal of the requirement for an employment relationship between a disabled person and their family under the Ministry's FFC policy
- to raise FFC pay rates to the rates received by care and support workers.

The work for this action will include FFC policy change implementation and the legislative process to repeal Part 4A.

Action 3.5

Review policy settings for financial supports for carers including consideration of:

- Attendant Care policy (ACC)
- Individualised Funding (MoH)
- the policy settings for Funded Family Care in the medium to long-term, to ensure a coherent set of financial supports for carers (MoH)
- Supported Living Payment – Carers (MSD).

Leads: Accident Compensation Corporation, Ministry of Health and Ministry of Social Development

This action will review policy settings and work to ensure there is a coherent set of financial supports for carers. These currently include:

- ACC's Attendant Care policy including ACC's expectations of unpaid care provided by household family members, or other family members
- the Ministry of Health's Disability Support Services Individualised Funding
- the Ministry of Social Development's Supported Living Payment – Carers.

The objective is to make it easier for carers to find out about and access appropriate financial support. As part of this work, there we will investigate ways to address carers' concerns about their ability to save for retirement when caring.

Work reviewing the settings for the Supported Living Payment – Carers will take place as part of the welfare overhaul.

Action 3.6

Consider a carer payment and/or other types of improved financial support for carer wellbeing.

Lead agency: Ministry of Social Development

This action will consider introducing a new payment for carers to support their wellbeing, as part of the overhaul of the welfare system. Options for this work will be subject to Cabinet consideration.





Balancing

Supporting paid work, study and other interests

As the final focus area in *Mahi Aroha*, balancing focuses on supporting carers who want to balance paid work, study and other opportunities with caring. Caring is a potential employment pathway and this focus area will support carers who want to follow this pathway.

Many carers welcomed the idea of improved support in this area and talked about the barriers they faced in study or work. Feedback also noted that balancing should be understood in a broader context, as other actions in the plan (such as respite and financial support) were crucial to being able to balance study and work. Carers needed time, energy and money to be able to work or study.

“These focus areas will only work if the carer can have the luxury of free time to study, or seek employment, if currently a full-time unpaid carer.”

Survey respondent

“Further training and employment is a nice idea, but who cares for the family member while the caregiver studies or works outside the home? Paying strangers to be caregivers is more expensive than paying family members. And currently, very few family members get paid for caregiving.”

Survey respondent



Objective: **Carers will have options and choices for remaining in employment and/or seeking employment, if they want to.**

Action 4.1

Launch the Carers New Zealand CareWise initiative to ensure workplaces are carer friendly and that carers are supported to stay in or return to employment when caring ends.

Lead: Carers New Zealand

This action will see the launch of the CareWise initiative to build a base of carer-friendly workplaces. The work will include the promotion of CareWise to employers and working-age carers. Human resource policies and procedures will be reviewed, so carers are identified and recognised in workplaces. The role and potential expansion of the programme will be based on an evaluation of the initial CareWise outcomes. The focus will be on carers who need to change jobs, retrain, or return to work when caring ends. The work will include support for employers with regard to carer-friendly policies, including communication, skill transition, and promotion of flexible working conditions for carers.

Objective: **Carers' pathways to employment will be supported.**

Action 4.2

Support flexible study, training and education opportunities. Explore ways to credit skills and experience towards any training, qualifications and/or employment.

Leads: Ministry of Social Development and New Zealand Carers Alliance

This action will consider ways to support carers to access learning and training, including validating and recognising their skills and capabilities. This will involve working with Tertiary Education Organisations to develop flexible and manageable learning and training pathways for the carer – an example of this is bite-sized learning modules (micro-credentials).

This work will include recognising the skills gained while caring, including transferable and intangible skills (such as communicating effectively). This creates an opportunity to improve and future-proof the employability of carers, whichever path they choose to take.

This action will be particularly valuable for carers who want to engage in part-time study or training while caring, young carers preparing for their first job or transitioning from secondary school to tertiary study, and carers seeking to retrain or upskill to return to the workforce.



The New Zealand Carers' Strategy

The Carers' Strategy was developed through a partnership between government agencies and the New Zealand Carers Alliance (a coalition of over 40 national not-for-profit organisations). Its purpose is to improve support for family, whānau, aiga and carers. The Carers' Strategy was launched in 2008 with an Action Plan covering 2008 to 2012.

The Carers' Strategy has a strategic framework with a vision and guiding principles which are carried forward into five-year action plans. The action plans contain objectives with actions that the Government will undertake to address areas of key priority identified by carers and the government agencies.



Vision

The key to the Carers' Strategy is its vision for New Zealand carers. This vision came from talking to carers and the people they deal with. It is the ultimate goal the Strategy will work towards achieving.

The Government's vision for carers in New Zealand is that: New Zealand Aotearoa is a society that values individuals, families, whānau or aiga who support others who need help with their everyday living. This will be achieved when:

- carers have choices and opportunities to participate in family life, social activities, employment and education
- carers' voices are heard in decision-making that affects them.

Caring should be something people do with pride and feel supported when they do it.

By valuing and supporting New Zealand carers, we help to develop strong healthy families who are able to help their members reach their full potential as participating members of society.

By improving choices for carers in paid employment and education, we help to address skill shortages within the economy, to improve productivity levels and to help carers to secure their present and future income and resources.

“[The Carers' Strategy needs to] commit to making a difference, supporting carers to succeed in their important role as New Zealand's largest health and social services workforce. This includes considering the impact of their role on carers' lives, the lives of those they support if carers' wellbeing is compromised, and their participation in paid work and the wider economy.”

Carers Alliance submission, August 2013

Guiding principles

The Carers' Strategy has four guiding principles to help achieve its vision for New Zealand carers. These principles will be used by government agencies to ensure the perspectives and needs of carers, their families and those close to them are considered and catered for in any activities and decision-making that affects carers. NGOs, businesses and community groups can use these principles as well, in their work with carers and those close to them.

The strategy's four guiding principles are:

- recognise diversity
- be proactive
- enable carers
- be inclusive.

Recognise diversity

“The population of carers and those they support is extremely diverse, spanning every family and whānau, workplace, age, income, culture, and health or disability type imaginable. Their needs are unique... and one size does not fit all.”

Carers Alliance submission, August 2013

Carers exist throughout New Zealand society and vary in age, ethnicity, culture, characteristics, outlooks and needs. Actions taken under the Carers' Strategy need to recognise and acknowledge the diversity of carers' needs and aspirations to be effective. Actions need to:

- value and respect carers, the people they support and their families in terms of their cultural identity
- consider the needs of specific groups, eg young carers and Māori and Pacific carers
- acknowledge the changing and differing needs of people at different ages and at different life stages, including the key points where life changes are occurring
- be conveyed in a way that recognises carers' differing needs for, and ability to access, information
- be flexible and not overly rule-driven, meaning they are able to respond to individual circumstances for carers and those close to them.

Be proactive

“Carers often know what they don't want to happen, but don't know what other alternatives or options are available.”

Submission by a carer, September 2007

Carers need to know support is available for them when they need it. Support mechanisms need to be:

- responsive, eg information is available when carers need it and support services are put in place quickly
- easily accessible
- available to carers so they can plan ahead and prepare, rather than live from day to day.



Enable carers

“Autonomy... goes beyond the principle of empowerment. Autonomy allows each individual to choose their own most positive supports. Having chosen these supports, individuals gain strength from connecting and participating in wider groupings of family/ whānau and communities on the basis of independence.”

Submission by the Mental Health Commission, September 2007

Carers need to have choices and the freedom to develop and maintain their personal, family, whānau or aiga and community support systems. Any action taken as part of the Carers' Strategy needs to reinforce the carer's ability to tap into these support systems. Formal support systems need to be reliable and to provide real support to carers.

Be inclusive

“The whole whānau needs to be acknowledged – they are not separate [from] carers.”

Consultation Hui, July 2013

It is important to acknowledge that the needs of carers, family, whānau or aiga and the person being supported are often intertwined and, for some, the formal support system is a key part of their lives. It is also important to recognise that both the carer and the person they support have rights as well as needs and, at times, these may not be the same. The impact of policies and decision-making on the entire family, whānau or aiga unit needs to be considered as well as the impact on the person being supported.

Objectives of the strategy

The priorities identified from feedback during the Carers' Strategy consultation process have been used to identify five areas for action. These areas are central to the Strategy and are the areas where the Government will work to bring New Zealand closer to its vision for carers.

The five objectives of the Carers' Strategy are:

- provide information
- protect the health and wellbeing of carers
- enable carers to take a break
- provide financial support for carers
- provide training and pathways to employment for carers.

Measuring the success of the strategy

My experience is no one is responsible for ensuring anything happens ... It is crucial this strategy has tangible measurable outcomes and is sufficiently resourced.”

Submission by a carer, September 2007

To make sure the Carers' Strategy is doing its job successfully and moving us towards its vision for carers in New Zealand, the Government will:

- monitor progress to see how New Zealand carers are doing
- readjust the strategy's objectives to adapt to changing circumstances
- be accountable to carers and their families for delivering what the strategy says it will deliver in the five-year action plan.

A key to keeping the Strategy vibrant and effective is a partnership of commitment to the Strategy between the Government and stakeholders. These stakeholders, along with the Government, will be jointly responsible, for the success of this Strategy:

- carers
- families, whānau or aiga
- people receiving support
- the community and voluntary sector, including NGOs and advocacy organisations
- funders
- employers, unions and other workplace organisations
- crown entities, for example ACC and District Health Boards
- the wider public.



The role of monitoring, research and evaluation

International and local research on caring, combined with what carers said during the consultation period, has given the Government a solid understanding of the major issues for carers and a better knowledge of what has been done elsewhere to support them. A programme of monitoring, research and evaluation will help to build this knowledge as the Strategy is implemented.

The Government will develop a monitoring framework to measure the progress of the strategy and five-year action plan. Monitoring, research and evaluation will be key ways of keeping carers and other stakeholders up to date with how well the strategy is doing for New Zealand carers.

The Carers' Strategy monitoring, research and evaluation programme will:

- provide information to help the Government develop the strategy over time as more is learnt about the current and future needs of carers
- help the Government to understand the strategy's progress towards achieving its vision for carers, as the action plan is put into place.
- The Carers' Strategy monitoring, research and evaluation programme will include:
- ongoing programme monitoring against action plan objectives and an annual report on progress
- using existing information and research to investigate the characteristics of carers and the nature and type of problems they face.







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