

Poverty, unhealthy housing and poor health in NZ children

What needs to be done?

Professor Innes Asher

Head of Department of Paediatrics: Child and Youth Health,
The University of Auckland

&

Respiratory Paediatrician,
Starship Children's Health

Health Spokesperson, Child Poverty Action Group



CHiLD
POVERTY
ACTION
GROUP



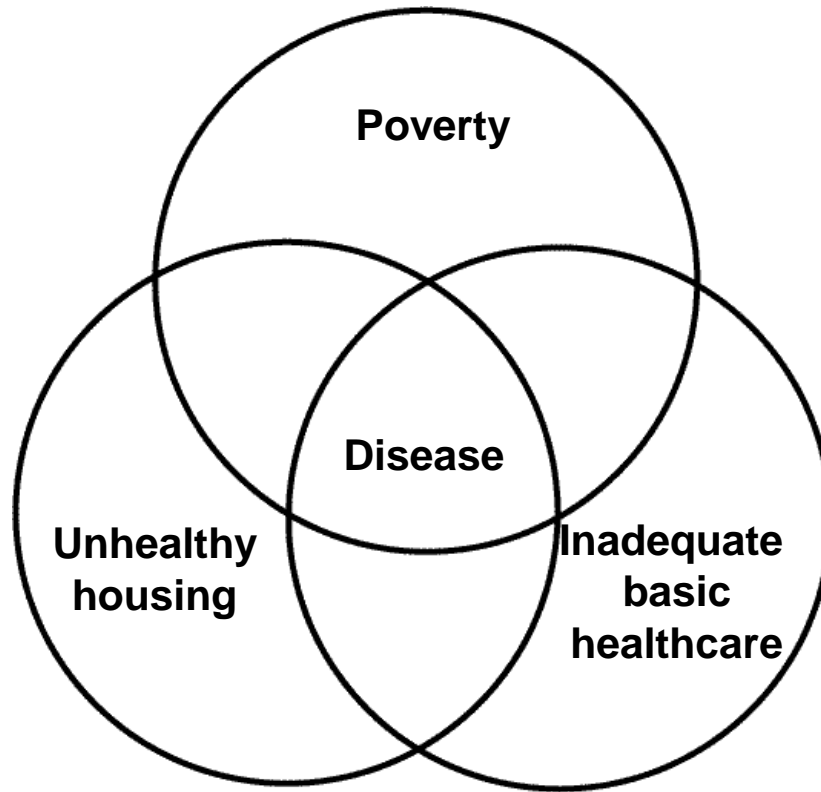
Emma-Lita Bourne (2 years) died in Aug 2014



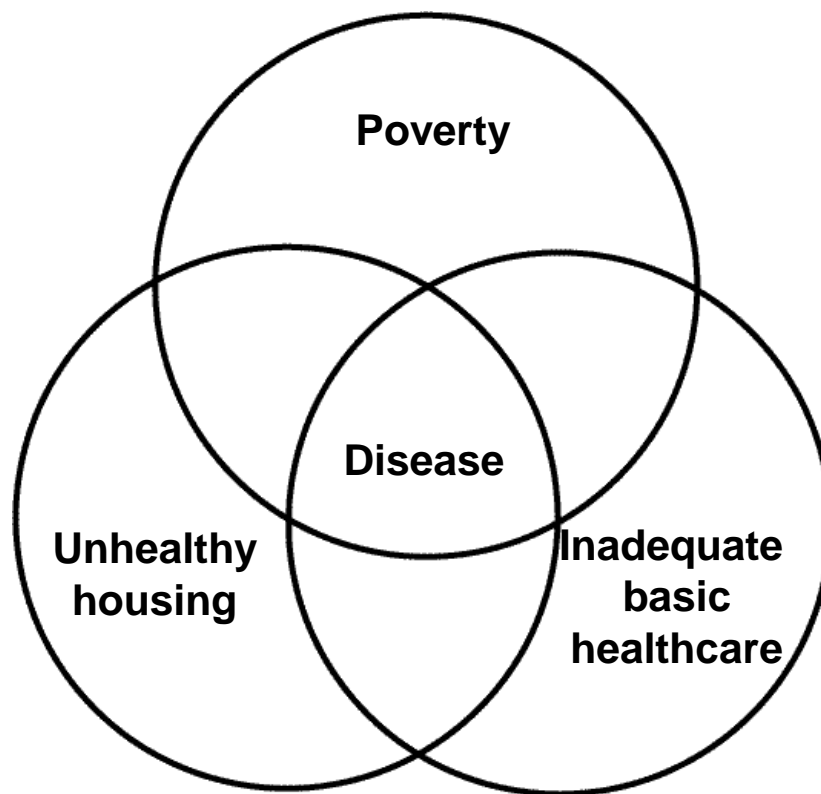
Coroner:

Cold, damp house contributed to her death from pneumonia

New Zealand's triple jeopardy for child health



New Zealand's triple jeopardy for child health



**Thank you
NZ First for
leading on
free GP visits
for children**

A 3 month old baby with bronchiolitis



A 14 year old with asthma



Bronchiectasis (scarred dilated airways)



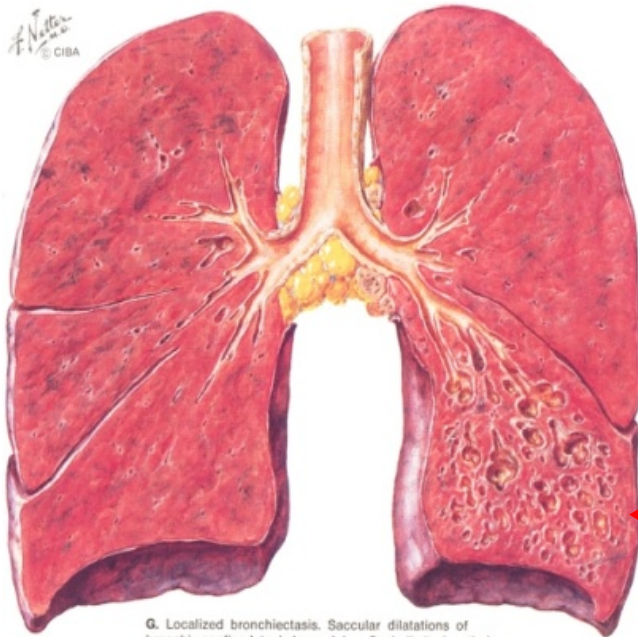
Child with
bronchiectasis



May die as a teenager or young adult
or too sick to work

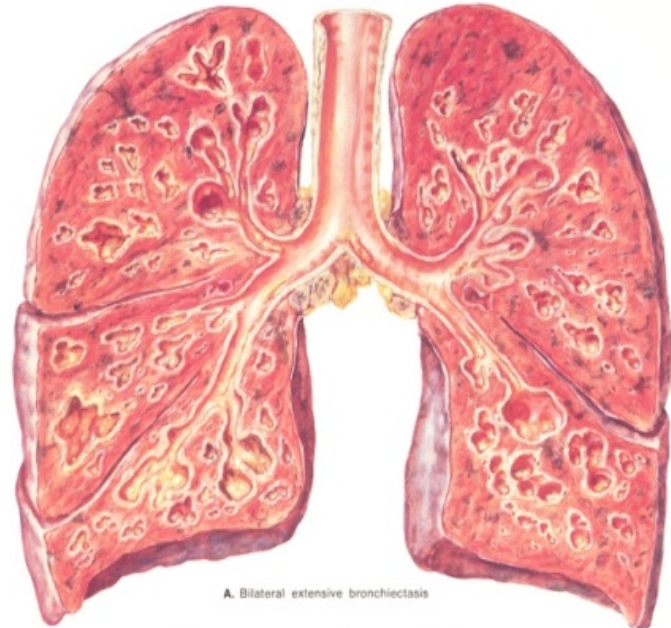
Bronchiectasis (scarred dilated airways)

- Caused by repeated or severe pneumonia
- In NZ is 8-9 times commoner than UK and Finland



G. Localized bronchiectasis. Saccular dilations of bronchi, confined to l. lower lobe. Such limited pathology may be amenable to surgery

Normal lungs with
bronchiectasis
on bottom right



A. Bilateral extensive bronchiectasis

Bronchiectasis
all areas of the lungs

Bronchiectasis sputum

One cough produces
blob of sputum
(pus-like phlegm)



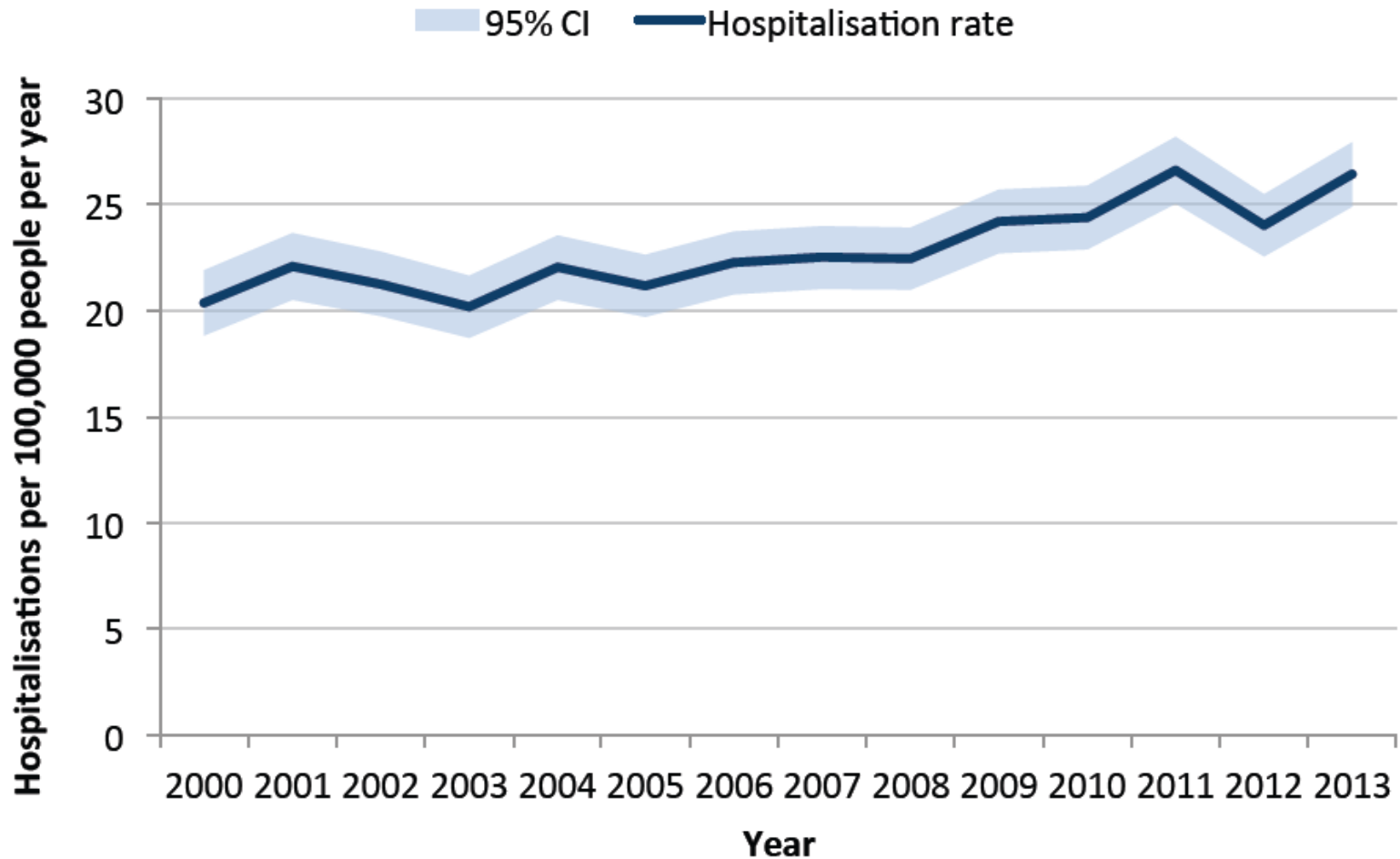
\$1 coin

Child produces a cup of sputum over one day



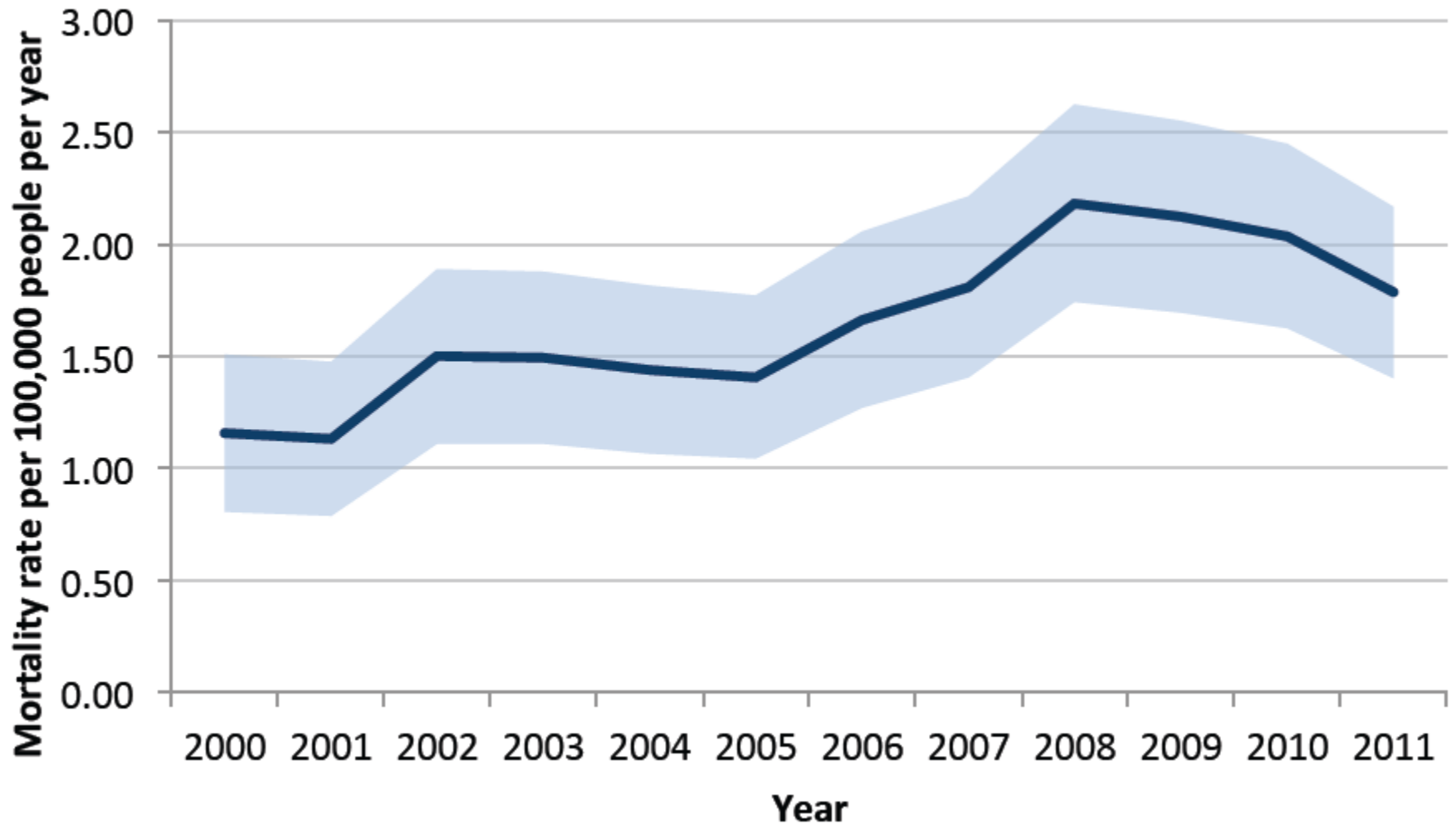
NZ Bronchiectasis hospitalisations

All ages 2000-2013

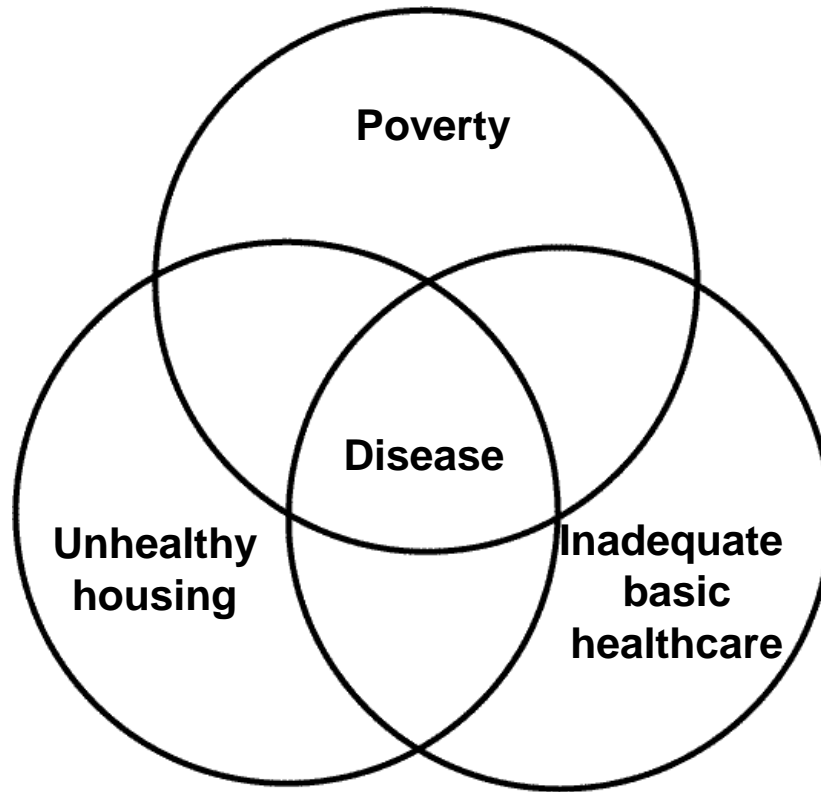


NZ Bronchiectasis deaths

All ages 2000-2013

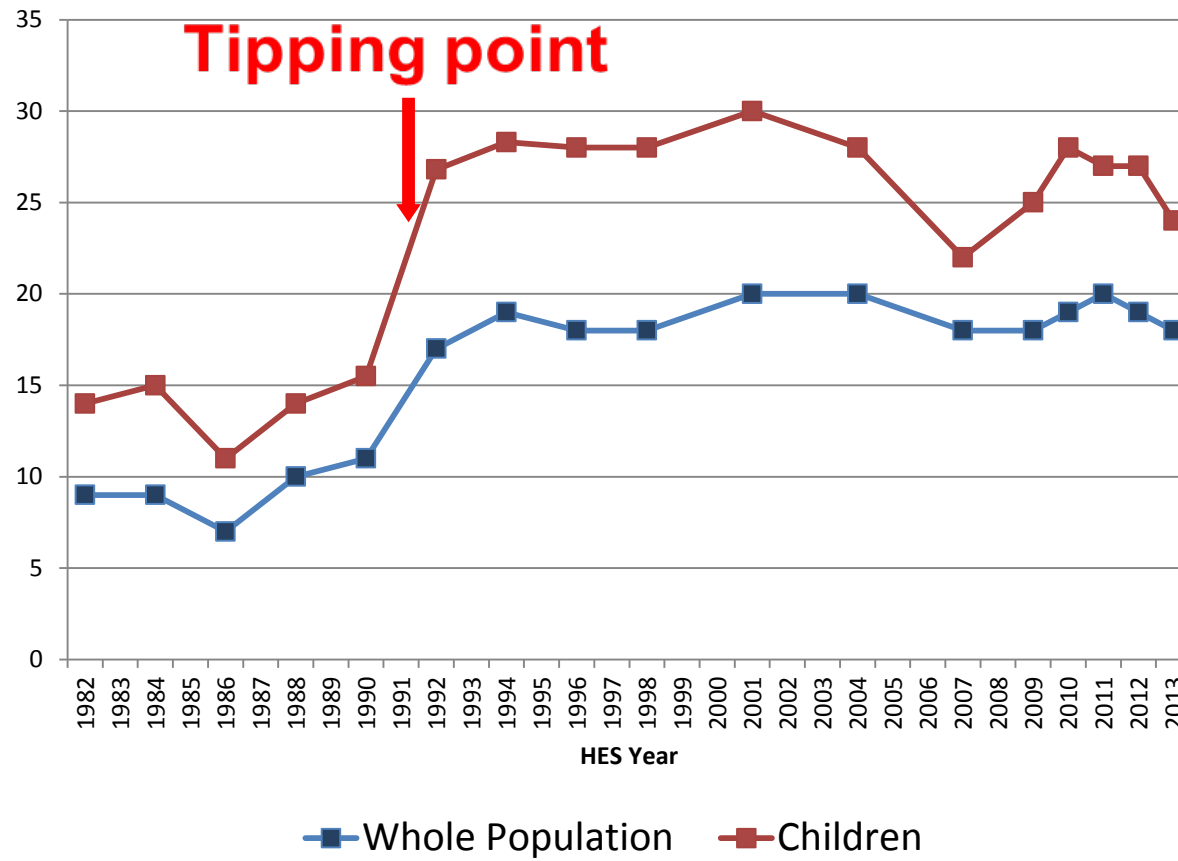


New Zealand's triple jeopardy for child health

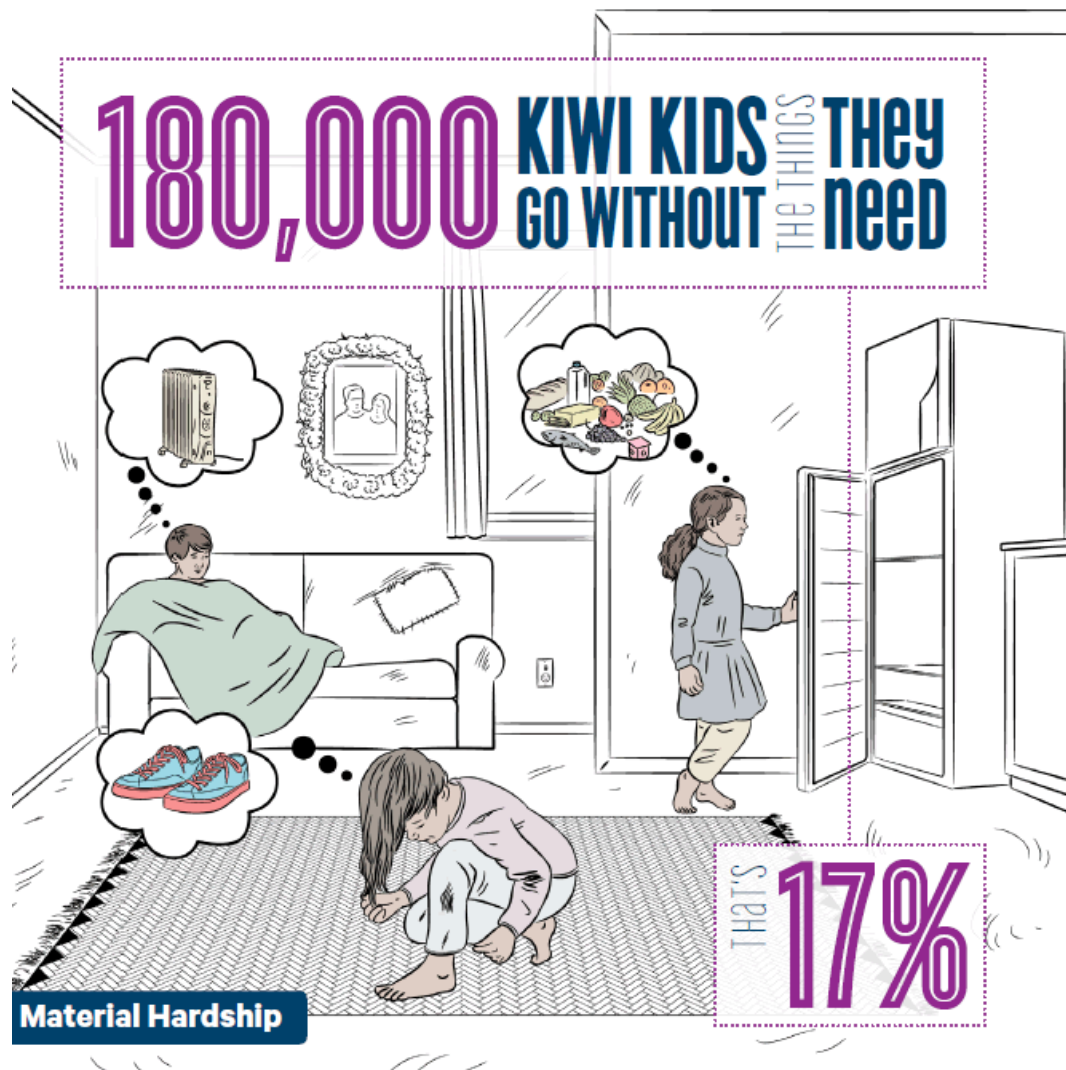


NZ Poverty: child vs whole population 1982-2013

(<60% median disposable household income after housing costs)



Material Hardship = Deprivation of essentials



Child poverty figures, under 18 yr (2013)

Child poverty figures in NZ	No. of children	% of children
Total number of children 0-17 yrs	1,060,000	100%
Income-poverty (<60% median after housing costs)	260,000	24%
Severe income poverty (<50% median after housing costs)	205,000	19%
Material hardship (Material Wellbeing Index)	180,000	17%
Severe income poverty AND material hardship	95,400	9%

Unhealthy housing



Key health issues

- **Crowding – private rental too expensive or unavailable**
- **Poor quality – cold, damp and mouldy**
- **Fuel – unaffordable or unhealthy**

How does unhealthy housing cause health problems?

- **Cold – viruses survive better**
 - WHO recommends house temperatures should be >17 degrees
- **Damp – encourages mould**
- **Mould – mould particles cause airway inflammation**
- **Unflued gas heaters - noxious gases cause cough and wheeze**
- **Crowding – rapid spread of infection between people**

Does making NZ homes healthy improve health? YES

- less wheezing
- fewer days off school and work
- fewer visits to GPs
- fewer hospital admissions for respiratory diseases

Howden Chapman P, et al 2007 and 2009
Jackson G. et al.2007

Steps needed to reduce unhealthy housing



- **Warrant of Fitness for all rental properties – private, State and social housing**
- **Increase the number of State houses and social housing - 1000 units per year**
- **Strengthen the State housing sector**

Steps needed to improve access to basic healthcare



- Free doctors visits 13 -17 years in and out of hours
- Free prescriptions 13-17 years
- Free GP visit in last 3 months of pregnancy

Child poverty and income

What needs to be done?

Associate Professor Susan St John

Director of the Retirement Policy and Research Centre

University of Auckland

&

Economics Spokesperson, Child Poverty Action Group



CHiLD
POVERTY
ACTION
GROUP

What do we do right for those on Super?

New Zealand Superannuation

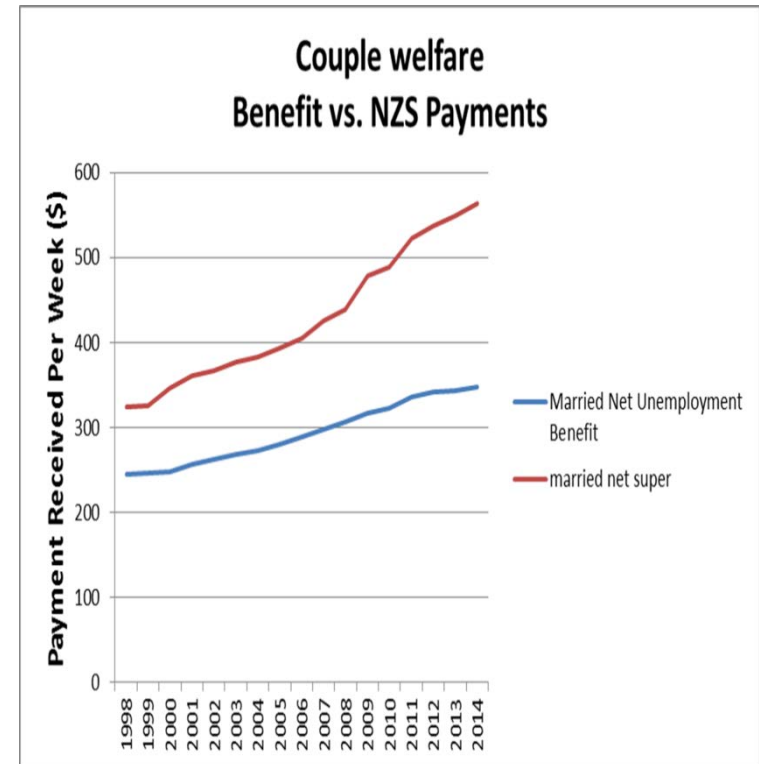
- Universal basic income floor: *result poverty low*
- Simple eligibility- inclusive wide coverage
- Based on the individual
- Not conditional on paid work
- No disincentive to earn extra
- Linked to wages
- Gold card



What do we do for the poorest families?



- Insecure and low paid work
- Inadequate benefits
 - Linked to prices
 - Complex eligibility
 - Disincentive to earn extra
 - Not Linked to wages
 - No Gold card



Working for Families



Weekly cash supplement paid to caregiver **FOR the children**

- **Extremely Complex**
- Parts highly conditional on paid work
- Can lead to stressful demands for repayment at the end of the year
- Treats 230,000 poor children as if they were undeserving
- **NOT linked to wages**, only part is linked to prices
- Spending on Working for Families has been falling

What has been the cost to 'non-deserving' families

Each year there has been a cumulative loss from poor families' balance sheets

Nearly 4 Billion 2006-2015 and rising

Who was left out of Working for Families?

Why have we not been concerned about those children left out ?



"And the wolf ate all children but it didn't matter
because they were the children of People not like us



What must be done?

“ unless the incomes of ‘workless’ households with children can be boosted significantly by one means or another, major reductions in child poverty will be extremely difficult to achieve. It is critical that policy makers grasp this fundamental point.”

What must be done?

Budget 2015: token measures only

What is needed:

- All adult benefits increased significantly
- All poor children fully included in Working for Families
- Properly index Working for Families to wages
- Make sure **all new-borns** get extra support



The Human Rights Case CPAG v the Attorney General 2002-2013



Appeal in the Court of Appeal- 2013

**Discrimination upheld
ie 270,000 children
are harmed**

**But found to be
justified?**



The Green's Bill: The Universalisation of the In Work Tax Credit 2012

Lost 61:60

Vital role of NZ First



Peter Dunne:
"I screwed up."

But the principle
of universal
treatment will not
go away