

OIA-CE-2024-02645

21 November 2024

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Tēnā koe Rodney

Thank you for your email, received on 22 October 2024, to Oranga Tamariki—Ministry for Children (Oranga Tamariki) requesting information on the rates of forcible removal of infants from their mothers. Your request has been considered under the Official Information Act 1982 (the Act).

You have requested:

- Information on the rates of forcible removal of infants from their mothers in the first year of life in New Zealand, both nationally and by region. Outline how these differ by ethnicity. Also outline the rate of removal of infants' whist in hospital, providing numbers by hospital/region.
- Oranga Tamariki's policy on the safety management of unborn infants and efforts made to prevent forcible removal of infants before and after birth.
 Outline the policy/process related to the removal of infants in hospital, and whether families are informed of the removal before this occurs.
- Outline the risk assessment tools that are used to assess the risk of unborn infants, and what steps Oranga Tamariki has taken to try and ensure that these are not a product of racist/culturally unsafe assessments by health or social services workers.

To clarify, "forcible infant removal" is not a term that is used by Oranga Tamariki, although we understand that it is commonly used to refer to when tamariki and rangatahi come into the care of the Chief Executive of Oranga Tamariki, particularly when urgent or emergency entries to care occur.

It is expected that any decision to seek the care or custody of tamariki is made in collaboration with their whānau or family, who should be given extensive opportunities to participate in the decision-making process. Only in circumstances where tamariki may suffer serious injury, undue hardship, or risk to personal safety should this action be taken with urgency.

Section 78 of the Oranga Tamariki Act 1989 (the Act) allows for the Court to place tamariki in the interim care of Oranga Tamariki when there are immediate concerns for their safety and wellbeing. Section 48 of the Act provides Police with the authority to take urgent action to ensure the safety of tamariki and rangatahi.

Urgent or emergency action is only used to secure the safety and wellbeing of tamariki when all other intervention options have been considered. Decisions to carry out emergency actions are made through robust practice consultation with the supervisor and practice leader, using the child and family consult. Actions under section 78 of the Act must be approved by a Judge, and this is not a decision that is made solely by Oranga Tamariki. Legislative and practice requirements require us to ensure that alternatives to prevent entry to care are explored fully and all possible means of supporting the child to live safely with their parents or wider (extended) whānau or family are considered.

Further information regarding use of section 78 of the Oranga Tamariki Act 1989 to take urgent action to ensure the safety of tamariki and rangatahi can be found on the Oranga Tamariki Practice Centre here.

I have responded to each part of your request below:

Information on the rates of forcible removal of infants from their mothers in the first year of life in New Zealand, both nationally and by region. Outline how these differ by ethnicity. Also outline the rate of removal of infants' whist in hospital, providing numbers by hospital/region.

Removing a child from their parents or caregivers can be a significant and traumatic event and we work to ensure these actions are carried out in a manner that minimises trauma to the child and ensures an agreed plan for meeting their well-being needs.

Whilst in some cases it is necessary to bring infants into care from a hospital setting to ensure their immediate safety and wellbeing, Oranga Tamariki is very cautious about doing so and we explore every other option to secure safety before considering executing a custody order in a hospital setting for an infant.

Oranga Tamariki routinely monitors its practice in bringing unborn and newborn babies into care under section 78 of the Oranga Tamariki Act 1989, and we make the findings of this work publicly available on our website. I note your request seeks information about babies in their first year of life – please note that our monitoring, and the information noted below, relates specifically to section 78 entries to care for unborn and newborn babies **under 30 days old**.

The volume of section 78 orders made for unborn and newborn babies annually reduced significantly between 2016/17 and 2020/21 and has remained stable at this lower level for the past four years. This reduction in care orders is in line with, but more pronounced than, reductions in care entries across all age groups since 2016/17.

Our ongoing monitoring of practice with unborn and newborn babies has identified a number of areas in which practice improvements have been made over the last four years. These include early engagement with families and whānau, high rates of whānau searching to provide babies with every opportunity to be cared for within their family/whānau, and support services being offered or provided with a focus on preventing the need for removal of babies from their parents and/or family/whānau.

Our most recent review covered the 19-month period between 1 September 2022 and 31 March 2024. Over this period, a total of 72 babies under 30 days old entered the custody of Oranga Tamariki under a section 78 order. Forty-three were pēpi Māori (60 percent), 23 were of New Zealand European/Other ethnicity (32 percent), one was a Pacific pēpi (one percent) and five identified as of both Māori and Pacific ethnicity (seven percent).

At the time of the section 78 order being made, 42 of these babies (58 percent) were able to remain in the care of their parent(s) and/or family/whānau following the section 78 custody order being granted. This was notably higher for the pēpi Māori reviewed, with 32 (74 percent) of pēpi Māori remaining in the care of parent(s) and/or whānau. In only 17 cases the baby was removed from the care of their parent(s) and whānau in a hospital setting.

For further information on the findings of this monitoring work please refer to Appendix A of the Oranga Tamariki Annual Report 2023/24, which is publicly available here.

In your request you have asked Oranga Tamariki for numbers to be provided by hospital/region. Providing data in response to this part of your request cannot be done without manually reviewing individual case files, which would constitute substantial collation and have a significant, unreasonable impact on the ability of Oranga Tamariki to carry out its key responsibilities. As such, this part of your request is refused under section 18(f) of the Act as the the information requested cannot be made available without substantial collation or research.

Oranga Tamariki's policy on the safety management of unborn infants and efforts made to prevent forcible removal of infants before and after birth. Outline the policy/process related to the removal of infants in hospital, and whether families are informed of the removal before this occurs.

Quality assessment ensures our decision-making responds to the individual immediate and long-term needs of all tamariki and rangatahi we work with. Information regarding our assessment policy can be found here. Information regarding our policy for without notice applications for interim custody of tamariki or rangatahi under section 78 of the Act can be found here.

Information on how Oranga Tamariki works more generally can be found here.

When we receive a report of concern for an unborn or newborn baby, we work with families and whānau using the same processes we use for all assessments or interventions with additional considerations to strengthen our response. Information on how Oranga Tamariki works with unborn and newborn babies can be found here. Our monitoring found that in 96% of cases where a newborn baby was removed from their parents and whānau following the section 78 order, there was evidence that provisions had been made for parent(s) and whānau to spend dedicated time before baby was removed from their care.

In 92% of cases reviewed where a section 78 order was granted, there was evidence of either breastfeeding, or opportunities for skin-to-skin contact, bonding and attachment between mother and baby. In cases where this did not occur, the

circumstances included plans changing quickly post-birth requiring intervention to ensure the physical safety of baby, admission of baby to NICU (Neonatal Intensive Care Unit), and mum self-discharging from the maternity unit.

Outline the risk assessment tools that are used to assess the risk of unborn infants, and what steps Oranga Tamariki has taken to try and ensure that these are not a product of racist/culturally unsafe assessments by health or social services workers.

The Oranga Tamariki Practice Framework guides our social work practice, helps us advocate for doing the right things for tamariki, rangatahi and their whānau. The framework helps us explore what is happening in each practice encounter and guides us to consider the various and sometimes conflicting views and information we gather when making risk assessments. Further information regarding the Oranga Tamariki Practice Framework can be found here.

In addition, quality assessment ensures our decision-making responds to the individual immediate and long-term needs of all tamariki and rangatahi we work with. Information on regarding Oranga Tamariki assessments can be found here.

Oranga Tamariki may make the information contained in this letter available to the public by publishing this on our website with your personal details removed.

I trust you find this information useful. Should you have any concerns with this response, I would encourage you to raise them with Oranga Tamariki. Alternatively, you are advised of your right to also raise any concerns with the Office of the Ombudsman. Information about this is available at www.ombudsman.parliament.nz or by contacting them on 0800 802 602.

Nāku noa, nā

Nicolette Dickson

Te Tumu Tauwhiro Chief Social Worker Deputy Chief Executive Professional Practice Group