

UNDERSTANDING CHILD POVERTY AND ITS IMPACT ON THE HOLISTIC WELLBEING AND EDUCATION OF CHILDREN IN NEW ZEALAND: WHAT EVERY EARLY CHILDHOOD TEACHER SHOULD KNOW.

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Abstract: This paper critically reflects on the issue of child poverty and its impact on the holistic wellbeing of children in New Zealand. It highlights the importance of looking into the diverse educational needs of children in early childhood education. It explains how social inequality, oppression, hegemony and discourse of power contribute to child poverty in New Zealand. Furthermore, possible effects of poverty are identified and discussed in relation to the tenets of hauora through Durie's (1994) Whare Tapa Wha model of mental health.

Keywords: child poverty, deprivation, inequality, identity, stress, exclusion, hauora

Introduction

The issue of poverty is an economic, political and social one and therefore several complexities are associated with its definition. In the context of New Zealand, poverty is in the form of relative or material disadvantage, which is mostly measured through the availability of resources to an individual in comparison with others in the population (see Children's Commissioner, 2011). In 1982, 14% of New Zealand children lived in poverty but in 2014, 22 % of New Zealand children daily live in poverty (UNICEF, 2014). The EU and OECD define poverty for more economically developed countries as an exclusion from the "minimum acceptable way of life in one's own society due to inadequate resources" (Children's Commissioner, 2011, p. 8). The United Nations Development Programme has ranked developed countries with high income inequality and New Zealand is ranked as sixth in the world (OECD, 2011).

Poverty is generally linked with low income which hugely limits the future opportunities for young children by exposing them to material deprivation and greater risk of poor health, social circumstances (abuse) and lack of educational opportunities especially access to early childhood education. In New Zealand 230,000 children are living in deprivation, most of them are living in Auckland (Keating, 2011, November 18). According to Child Poverty Monitor (2013), 285,000 (27%) of kiwi kids live in income poverty, 180,000 (17%) of kiwi kids face material hardships where they are raised without the things they need however 10 percent of kiwi kids are faced with severe hardships. Child Poverty Monitor has also documented that 3 out of 5 children in New Zealand live in persistent poverty for a long period of time. The severity of the poverty issue had also been highlighted in Collins (2012, January 18) article on wealth gap problems, based on a long-term study of 1265 children born in Christchurch in 1977, it was found that those whose families were poor in their first 10 years of life earned about \$20,000 a year less by the age of 30 than those who grew up in rich families. To this end it was found that those from the poor families were more likely to leave school without qualification, had babies before they turned 20,



commit crimes, had welfare, addiction and other mental health problems in adulthood. The findings also showed that in 2010, 26 percent of children lived in poor families that earned under 60 percent of the net median income.

Effects on Education

Collins (2012) study showed a greater link on the effects of childhood income on later educational and career achievement of young children in New Zealand. When reflecting on Bourdieu's (1977) theory of cultural reproduction and systematic exclusion the case study strongly depicts that education systems favour the cultural capital and habitus of the upper class those already in possession of forms of knowledge required for successful schooling. It also shows that children coming up through economically advantaged families have "role models" that positively impact on their lives and overall wellbeing but those children raised in poverty miss out on these important opportunities in life which hugely impacts on their success at school. New Zealand's overall school dropout rate is amongst the highest in the developed world (OECD, 2013).

Viewpoints on Poverty and Inequality

Poverty in New Zealand stems from both the colonial history of the country and migration of minority ethnic groups into the country. The distribution and ownership of resources, settlement choices and nature of jobs in terms of skills had significantly framed the ideology of dominant and subordinate groups in New Zealand, which heightened the wealth gap and later lead to classifications between rich and poor suburbs based on the standard of living of people (see Nash, 2000). The divisions in society created oppression and social inequality through market forces. According to Marx (1848) the class of 'dominant material force' in society turns to be the 'dominant intellectual force', since they own the production and distribution ideas and use ideologies to preserve their own interests by setting up levels (status) to administer society, reflecting bourgeoisie identity.

Bell (1997) argued that oppression restricts self development and self-determination based on prejudice ideas of the dominant group. Dominant groups have easy access to social power and privilege that turns to exhibit hierarchical relationship which disempower the subordinate group. Reason being symbols of power become institutionalized as "sovereign power" and operates as "disciplinary power" at the macro-level of the society and these symbols of power through its "discursive elements" negatively affect resource acquisition for minority groups by limiting access (See Bell, 1997; Hall, 1992).

Nutrition and poverty

According to Perry (2011) child poverty rate in New Zealand sharply rose from late 1980s and 1990s due to unemployment, low income and state benefit cuts. The main indicators of poverty that affects hauora (wellbeing) of children in New Zealand are; low income, unemployment, poor housing, high cost of nutritious food and access to health services (Children's Commissioner, 2011). Poor social and economic circumstances directly affect physical and mental health of people and the longer people live in stressful conditions the greater psychological and physiological risk they suffer (Wilkinson & Marmot, 2003). It becomes crucial to link poverty with access to nutritious food which has been a topic of interest in the media recently. Healthy food has become a topic of political debate with the rising food prices driving low wage families into poverty. Statistics show that prices for fruit and vegetables recorded the highest increase of 12.2 percent, with 9 percent increase in milk price and the general cost



of food recorded a 7.5 percent increase from 2011, which puts one in five children living in poverty in New Zealand (Mackenzie, 2012, January 17).

Resorting to cheaper substitutes heightens the risk of malnutrition and diseases in children and deteriorating health conditions might lower the life expectancy of adults living in poverty. It is crucial to note that in 2010-2000 more Maori, Pasefika and children of jobless immigrants were faced with child poverty (Otago Daily Times, 2011, August 17). One should note the ways in which unemployment, low wage and rising cost of food frame the issue of poverty for minority disadvantaged groups in New Zealand. These socio-ecological determinants of hauora/wellbeing lead to social exclusion resulting from racism, discrimination and stigmatization which hinders participation in society thus contributing to premature death (Wilkinson & Marmot, 2003). The effects of socio-ecological determinants through poverty on holistic wellbeing of children will be discussed in depth further in the writing.

Effects of Poverty on Wellbeing

Coming back to the main question on how poverty affects wellbeing of children in New Zealand? Living in poverty limits access to nutritious food which has detrimental effects on young children's development and wellbeing (Donnell, 2011, July, 27). A definition of wellbeing for most indigenous societies will reflect on the holistic nature of being in peace with social and environmental forces. Poverty puts disadvantage groups from diverse cultures into a disequilibrium state of life which fragments the interconnectedness between the dimensions of wellbeing that provided complete meaning and value into people's life (Durie, 1994). It puts people into conflict and disturbs their spiritual wellbeing which is of fundamental value to many indigenous cultures. This writing will utilize the Maori model of holistic wellbeing which shows connectedness between the five dimensions (physical, social, psychological, spiritual and roots) of hauora/wellbeing depicting Maori life (Moeau, 1997). It is important to look at how poverty affects hauora of children in New Zealand.

Identity

The concept of identity formation is multidimensional, which is dependent upon several factors such as history, social context and culture (Tatum, 2000). Children in poverty face an identity crisis which is mostly defined through two view points; on the basis of individual shortcomings and moral deficiencies and as socio-economic status and class. It is possible that poor children's identity is shaped around the disparaging societal messages about the poor, either coming to see himself or herself as morally deficient or personally flawed in some way or adopting what Erikson (1980) referred to as a negative identity (i.e., an identity based on everything that has been presented to one as undesirable, dangerous, wrong, or "bad"). Consequently, most children get trapped into "targeted identities" imposed by others which turn to shape their construction of the self concept. The construction of self concept as such leads to lowering self esteem, stability and self efficacy in adulthood, which prohibits exploring ones full potential due to doubts about self, which makes the child trapped in the cycle of poverty thus significantly impacting on all five tenets of hauora. Therefore it is important for early childhood teachers to provide "inclusive pedagogy" for learning so that the learning needs of "diverse learners" are well catered for in developing "resilience" to adversity (Wendt-Samu, 2005; Lyons, 2005; Atwool, 2006).



Stress

Poverty involves exposure to multiple stressors that can have an undesirable influence on children's development. Economic deprivation often leads to stressful life events and chronic strains when compared to their non-poor counterparts. Poor children in New Zealand encounter more family turmoil, violence, instability/unpredictability in routines of daily living, chaos, and surroundings that are noisier, more crowded, and more frenetic (Donnell, 2011, July, 27). Much of the stress associated with poverty is manifested in family dynamics. Financial stress is associated with decreased family, marital conflict, discord, separation and divorce (Bennett, 2011, April, 17). Children may face lower-quality parent-child interaction leading to neglect and abuse. 52 percent of all children in states care are from abusive neglectful Maori parents (Collins, 2012, January, 26). Basically, financial stress is related to family and/or relationship stress which, ultimately, is experienced as individual stress (Bennett, 2011, April, 17). Multiple stresses is not conducive to psychological well-being or healthy child development and might be anticipated to result in a depletion of the poor child's motivational resources over time, as well as the emergence of various manifestations of socio-emotional maladjustment such as depression, anxiety, and self-medication in the form of substance abuse (Children's Commissioner, 2011).

Stigmatization and schooling

Poor children are at increased risk of receiving disparaging self-relevant information from the social environment, with poverty being viewed by many as the product of individual shortcomings and moral deficiencies rather than societal factors (Chafel, 1997). Living in poverty involves being stigmatized, marginalized, stereotyped negatively and excluded by the non-poor segment of society (McIntosh, 2005). Children living in poverty are quite cognizant of the unflattering nature of societal messages regarding the poor (Weinger, 1998). Consequently, poor children may experience feelings of shame and embarrassment and have trouble viewing themselves in a positive light (Weinger, 1998). Schools also play a central role in the stigmatization and marginalization of the poor due to "deficit theorizing" by teachers based on the images of historical, social, cultural and ideological views (Openshaw, 2007). Therefore early childhood educators need to build reciprocal relationship with disadvantaged children by employing culturally specific lens to form interaction with children (Rockel, 2002). Stigmatization affects mental and spiritual health of children and their families causing a disequilibrium state of life.

Physical Health

Poverty leads to poor health. The likelihood of a poor child being sick is 3 times higher than the rich child (Shaw, Blakely, Crampton and Atkinson, 2005). The negative impact of low income on children's health is well established. In New Zealand, a child growing up in a low-income household has on average 1.4 times higher risk of dying during childhood than a child from a high-income household (Shaw, Blakely, Crampton and Atkinson, 2005). Children born into poverty are more likely to be born prematurely, to have a low birth weight and to die before the age of one (Fletcher & Dwyer, 2008).

Children in poverty face developmental delays and illnesses such as gastroenteritis, ear infections and rheumatic fever. Cold housing also contributes to a wide range of illnesses and diseases including respiratory infections, asthma, rheumatic fever, tuberculosis, skin diseases, depression and other mental illness. As well as contributing



to the spread of infection including tuberculosis and meningococcal disease (Fletcher & Dwyer, 2008). Physical fitness is detrimental to active participation in social activities which in turn helps create positive identities in children.

Wellbeing and Belonging

The effects of poverty discussed above clearly shows detrimental outcomes on children's personal and holistic wellbeing in New Zealand. It is evident that a well self is vital for wellbeing and a safe and conducive environment that protects rights of children and families and nurtures partnership between members of the society through reciprocal relationships, and where people's culture and customs are valued, staying connected to one's roots and participation in society is appreciated, provides a sense of belonging. (Te Whariki, 1996). However, poverty possess a big challenge in fulfilling the conditions for holistic wellbeing and belonging of children of many minority groups living in improvised conditions in New Zealand today.

Conclusion

The significance of hauora was at the heart of the discussion using Whare Tapa Wha model. The severity of the issue of poverty provides an in-depth analysis on how it affects children's wellbeing and education in New Zealand. It elaborates on the complexities that persist for those children living in deprivation. The writing links different theoretical perspectives in justifying the arguments being put forward and it also highlights the importance of understanding diversity and inclusiveness so that better pedagogical practices are identified. Recent New Zealand statistics on poverty has been used to frame the discussion in this paper.

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