

Part 5

The Role of Local Government in Achieving Social Well-Being for the Auckland Region

A report prepared for the Royal Commission on Auckland Governance

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This Report

This report to the Royal Commission on Auckland Governance (“the Commission”) responds to the brief to describe the current roles and obligations of local government in achieving social outcomes across the Auckland region, to identify what is working well and where there are opportunities to do better. This leads to the discussion requested by the Commission about the appropriate role for local government and the governance arrangements that would support a more effective approach.

The report does not consider any redistribution of responsibilities from central to local government for the delivery of social services, such as education, health, income support, child protection, and justice, as that would be beyond our brief.

The Commission has asked for a paper as a contribution to its thinking on social well-being and local government. Much more material exists than can be compressed into the space or time allotted for this analysis; the discussion is necessarily summary on some occasions. The paper draws on the submissions received by the Commission as part of the general consultation process, a targeted review of available documentation, and consultation with key stakeholders.

The views expressed in the report are the authors’ alone.

Report structure

This report is structured as follows:

- Section 1 *Context*
 - describes the legislative and policy context for local government and social well-being
 - sets out who is currently involved, their roles and activities
 - summarises current planning and priority setting mechanisms, and other linkages.
- Section 2 *Concepts* provides an overview of the concept of social well-being in the New Zealand context.
- Section 3 *Demography and Statistics*
 - provides summary demographic information and social well-being statistics for the Auckland region
 - identifies three possible priority social well-being areas/challenges, based on the statistics.

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- Section 4 *Effectiveness* reports on the perceptions of stakeholders and those making submissions of what is working well under the current arrangements, and what could be improved.
- Section 5 *Future Directions* proposes principles for redesign of the governance arrangements for the Auckland region based on the analysis of the preceding sections. It sets out two broad options for the future roles and functions of local government in improving social well-being. Questions of boundaries, and of the best split between regional and local responsibilities, are also canvassed.
- Section 6 *Recommendations* proposes principles for the future role and governance arrangements for local government in achieving social well-being in the Auckland region, and recommends a way forward.

Executive Summary

Social well-being in New Zealand has traditionally been thought of as the domain primarily of central government. Most of the State's social functions – education, health, housing, welfare, safety – were centrally funded and centrally specified.

Over the past two decades this centralist model has disappeared. Local government now has a legislated mandate to pursue social well-being; schooling and health delivery have been devolved from the centre; central government agencies increasingly see their role as collaborative, influential, focused on building on the strengths of local communities rather than dictating what should happen; the private sector is beginning to accept the challenge of corporate social responsibility; community organisations are asking to play a role in deciding on outcomes, not simply delivering outputs; and communities themselves expect to decide their own destiny.

Local government in Auckland is putting greater emphasis on processes of influence, negotiation, coordination, and collaboration with other agencies to improve social well-being for the region.

The challenges to better social outcomes are considerable – Auckland is New Zealand's most populous region, the fastest growing, and the most ethnically diverse. It is characterised by large inequalities within the region. Auckland has a disproportionate share of both decile 1 and decile 10 schools; it lags the rest of New Zealand in some key social indicators, particularly early childhood education and household overcrowding. There are large differences between cities within the Auckland region, and large differences within cities themselves. Deprivation is not only correlated by geography, but by ethnicity.

Four facts stand out about Auckland's demography: the relative youth of Auckland's population – almost 40% are under 25; the high proportion of immigrants – 35% were born overseas; the diversity of the population – 45% identify as Asian, Māori, Pacific, or "other" ethnicity; and the distinctive neighbourhood patterns for age structure and

ethnicity. Although the population at present is very young, it will in the coming decades be subject to the same broad ageing trend as the rest of the country.

Resources are considerable also, and the biggest challenge in the achievement of good social outcomes for all of Auckland's citizens is more likely to lie in ensuring resources are used in the most effective and efficient way to achieve agreed ends than in inadequate funding.

The Local Government Act 2002 ("LGA 2002") requires councils to promote "the social, economic, environmental, and cultural well-being of communities".¹ The division of well-being into four areas can lead to a view that each operates in a separate silo, and the impacts on other well-beings can be lost when decisions are made. In fact, each of the well-beings is deeply connected to the others.

Local government has the opportunity and the obligation to help every citizen realise their potential. Councils' areas of activity range across many areas that directly impact on social well-being, such as the prevention of infectious disease, regulation of gambling and alcohol outlets, and facilities for sport and physical activity. Councils also have responsibility for areas that impact indirectly, but often significantly, on social well-being. These include economic development, transport, urban design and development, environmental planning, parks and open spaces, and Resource Management Act administration.

There are important opportunities for all of these functions to contribute to improved social well-being outcomes. Not all of these opportunities are being realised at present.

Overall, stakeholders and those making submissions thought that, since the introduction of the LGA 2002, there had been greater involvement of councils in social issues, an improvement in the identification of social well-being outcomes Aucklanders are looking for, greater coordination of planning processes, and some promising examples of agreement across sectors about critical social issues.

This generally positive picture is compromised, however, by several limitations: a lack of region-wide leadership, with an absence of any clearly articulated vision and values against which to test proposed actions; few medium-term goals to force priority setting for the immediate future; an insufficient research and analytic capacity to aid decision making about priorities and actions, or to measure results; fragile coordination and "follow-up" mechanisms, and, most tellingly, a general failure by councils to use the power of their core business to improve social well-being.

Also absent is a regional strategy that spells out how Auckland's social well-being will be improved, both generally and around key issues such as child poverty, homelessness, and violence.

Māori, Pacific peoples, other ethnic groups, children and young people, older people, those with disabilities, and those with low incomes represent the majority of Auckland's citizens, yet their particular needs and interests can slip out of focus in the usual planning

¹ Local Government Act 2002, section 10(b).

and priority-setting processes. All stakeholders wrestled with the question of how to get these voices heard, with most preferring a means of bringing them into the decision-making process – a step further than consultation.

There are some underlying design and capacity issues that are limiting the effectiveness of local government’s involvement in social well-being:

- The greater articulation of the outcomes communities want and of their current concerns, which has occurred under the community outcomes processes of the LGA 2002, is not matched by readily available research, analysis, and advice to allow local authorities to make well-informed choices about the actions that are most likely to succeed.
- It is very hard to get place-specific data about the socio-demographic characteristics of communities and neighbourhoods, the social challenges they face, and the resources available to them. (The resources include their own social capital; resources provided by central and local government, such as social services, facilities, and infrastructure such as roads, public transport routes, and social housing; and those provided by the private sector, such as employment.) It is these place-based factors that illuminate what the challenges are, and what resources the community can access to meet the challenges.
- There is insufficient emphasis in current plans on practical actions – targets, timelines, and clear delivery paths.
- There are few built-in mechanisms that allow for accurate learning about what works (or does not) for Auckland plans or cross-sectoral strategies – that “check up on” what was delivered, what other resources have become available, and what the results have been. So there is little opportunity for councils and others to learn from experience and seize new opportunities.
- Local authorities use a variety of mechanisms to seek out the interests and concerns of different population groups. These are most highly developed for Māori, with mechanisms to engage with Pacific peoples also becoming common. There is little agreement across all stakeholder groups about the effectiveness of the mechanisms (with the possible exception of Rodney District’s engagement with mana whenua), and varied views on the importance of representation in its own right compared with other mechanisms.
- There are no mechanisms in play to actively seek out the needs and interests of other groups, such as children and young people, older people, people with a disability, or people on low incomes. Yet these are groups who are often vulnerable to social disadvantage.

There are two broad approaches that can be taken to improving the effectiveness of local government's involvement in social well-being:

Option 1: a collaborative approach, which

- a. maintains the current accountabilities of central and local government, but bases actions by both levels of government on a jointly agreed social well-being strategy for the Auckland region for the medium and long term, and jointly agreed critical social issues that will be priority areas for action in the medium term, and
- b. mandates collaborative action across all sectors

Option 2: a regional devolution approach, which gives a regional body (the proposed Social Issues Board), which would include the chief executives of central government social agencies, the power to make decisions on the social well-being strategy and critical social issues as above, and the power to

- a. decide on the redistribution of resources that may be necessary to make real progress on the critical issues, and
- b. set performance standards for services, and targets for changes in social well-being.

In both approaches the Social Issues Board is a direction-setting, not a service delivery, body. The critical difference between the two models is that the first is based upon collaboration across sectors and on influencing central government, and the second upon regional decision-making power, where central government agencies are part of the decision-making body. Under the first model the Auckland Sustainability Framework and the Regional Sustainability Development Forum could be embedded as the foundation for collaboration and for debating emerging issues. Under the second model the most important debates and decisions about actions would be made by the Social Issues Board.

Recommendations

It is recommended that the Royal Commission on Auckland Governance

1. *Accept* the principles for redesign of the governance arrangements for the Auckland region set out in this paper:
 - a. The achievement of social well-being needs to be thought of as a **system** involving many players.
 - b. The core elements of any new system should be formally **mandated**.
 - c. There needs to be **strong leadership and advocacy** for social issues.
 - d. There must be a decisive formulation of the issues, and **clear public articulation** in local terms.

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- e. Critical **capacities** must be built into the structure and funded: social mapping; analytical and research capacity; making sure the vision and values are driven through into action.
 - f. Critical **participation** must be built into the structure and funded: for Māori, Pacific, other ethnic groups, non-governmental organisations, children, older people, people with disabilities, and people on low incomes.
 - g. **Effective consultation** on the right issues is more important than comprehensive consultation on everything.
 - h. The core decision-making body must include all those who have **accountability** for social outcomes, and can commit resources. This means central government must be a part of the structure, not simply linked by process.
 - i. The decision-making body must be big enough to **redistribute resources** to achieve social goals. This means also that the core decision-making body should be regional, and regional boundaries in central and local government should be aligned.
 - j. **Results** must be publicly visible and verified, at the local as well as the regional level. The audit function should be formalised.
 - k. **Action** should take place as close to the ground as is feasible, and analytical and research capacity (including place-based social mapping) should serve regional, local, and issue-specific actions.
2. Agree on the common elements of the new arrangements for improving social well-being (more fully described in section 5.2):
- a. a **Minister for Auckland** responsible for being the central champion for Auckland in the government's decision-making processes, particularly during the annual budget cycle
 - b. the **regional council** being responsible for articulating the vision for Auckland's people, and the values that will guide its decisions
- (Elements a and b have broader application than the social area alone.)
- c. a **regional decision-making body (the *Social Issues Board*)** whose members would be
 - the mayor and two representatives of the chairs of each of the regional council's major committees
 - two representatives of the mayors of the local councils in the Auckland region
 - the same representative or consultative structures for Māori as is decided for the regional authority

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- the same representative or consultative structures for Pacific peoples as is decided for the regional authority
- the same representative or consultative structures for members of Auckland's other ethnic communities as is decided for the regional authority.

In Option 2 the board's membership includes the chief executives of the key central social agencies (Health, Education, Social Development, Justice, Police, and Housing New Zealand Corporation).

The functions of the Social Issues Board would include

- identifying social well-being outcomes for the Auckland region for the medium and long term
 - establishing the social well-being strategy for the Auckland region for the medium and long term, and the critical social issues that will be the priorities for action
 - setting performance standards for the services delivered under the strategy, and time-bound targets for progress on the critical social issues
 - deciding who will take what action, and how and when they will report back
 - deciding the siting of regionally significant facilities.
- d. an **analytic/research/advisory** group to support the board
 - e. an **external audit function**, to monitor and report to Parliament on performance against published intentions
 - f. **legislated common boundaries** for the Auckland region for local and central government agencies, with a timetable for achieving them.
3. *Decide* which of the two options presented in the paper is to be accepted for the membership and powers of the Social Issues Board: Option 1 (collaboration) or Option 2 (devolved regional decision making). The authors recommend Option 2.

1. Social well-being in the New Zealand context

This section sets out the legislative and policy context for social well-being in New Zealand, scopes the roles and activities of those currently involved, and describes existing planning and priority-setting mechanisms and linkages in the Auckland region.

1.1 Social well-being and local government: the legislative and policy context

Social well-being in New Zealand has traditionally been thought of as the domain primarily of central government, which has been responsible for policy setting, funding, and service delivery. There were a few exceptions – some local governments, notably Auckland and Wellington, provided social housing, and community organisations were funded to deliver services (mostly support and non-core). But most of the State’s social functions – education, health, housing, welfare, safety – were centrally funded and centrally specified.

Over the past two decades this centralist model, if it ever did exist with such clarity, has begun to dissolve. Local government now has a legislated mandate to pursue social well-being; schooling and health delivery have been devolved from the centre; central government agencies increasingly see their role as collaborative, influential, focused on building on the strengths of local communities rather than dictating what should happen; the private sector is beginning to accept the challenge of corporate social responsibility; community organisations are asking to play a role in deciding on outcomes, not simply delivering outputs; and communities themselves expect to decide their own destiny.

The importance of a place-based approach is gaining ground, and local government is putting greater emphasis on processes of influence, negotiation, coordination, and collaboration with other agencies to better achieve social well-being outcomes.

In such a fluid environment the work of the Royal Commission on Auckland Governance is pivotal in improving the social well-being of almost 1.4 million New Zealanders – a third of the country’s population. The Commission has the unique opportunity to propose the roles and functions for local government across all of the domains that affect people’s well-being, directly as well as indirectly. The challenge will be to find a role for local government that links the macrocosm of the state to the microcosm of the neighbourhood and the family.

The challenges are considerable – Auckland is not only New Zealand’s most populous region, but the fastest growing and the most ethnically diverse. Many immigrants, particularly from Pacific nations, came to New Zealand to work in industries that are no longer viable. Many others have come as refugees and migrants who struggle to find paid work, even when there is a strong demand for labour.

Auckland is characterised by large inequalities within the region. It has a disproportionate share of both decile 1 and decile 10 schools; it lags the rest of New Zealand in some key

social indicators, particularly early childhood education and household overcrowding. There are large differences between cities within the Auckland region, and large differences within cities themselves. Ethnic diversity is also significant at the suburban level, and this is often correlated with deprivation levels.

But resources are considerable also. Approximately \$4.6 billion of central government expenditure was spent in the Auckland region by the Ministry of Social Development in the 2007–08 financial year, \$43 million of which went to non-governmental organisations (“NGOs”) (rising to \$50 million in 2009); the Ministry of Health estimates it will spend more than \$3 billion in the Auckland region in 2009; Housing New Zealand Corporation owns more than 30,000 houses in the Auckland region, and plans to spend approximately \$211.5 million on capital expenditure in 2009; and the Accident Compensation Corporation’s expenditure was approximately \$475 million in 2007–08. Local authorities also spend a significant amount of money on the promotion of social well-being, albeit primarily with a broader community development emphasis. Auckland City Council, for example, spent \$224,194,000 in operating expenses and \$165,873,000 in capital expenditure for the business area of arts, community, and recreation (including community development) in 2007–08.²

The biggest challenge in the achievement of good social outcomes for all of Auckland’s citizens is more likely to lie in ensuring resources are used in the most effective and efficient way, to achieve agreed ends, than in increasing that funding.

Well-functioning local government can help make sure that this money is well spent and not wasted; individuals and families get help to develop their own capacities; and civic and private sector resources enhance social as well as economic objectives.

1.2 Current actors: their roles and activities

Central and local government agencies, the private sector, and NGOs all play important roles in the achievement of social well-being. Their principal roles are sketched below to provide a context for the discussion of the role of local authorities.

Central government’s primary responsibilities for social well-being are

- to invest in the capacity of all citizens to manage their own lives and achieve their potential, primarily through the education and health systems
- to protect citizens’ civil and political rights – notably rights to personal security, equitable treatment from people and institutions, and property rights (primarily through the legal system)
- to protect citizens’ rights to a basic standard of living (primarily through the social welfare system, and through remedial health services and social housing).

2 Auckland City Council, *Annual Report 2007/2008*, p. 43.

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Central government provides the infrastructure and the services to discharge these responsibilities. Central government agencies with responsibilities for health, social development, justice, housing, and education have the primary responsibility for service delivery in these areas. There is significant private provision in the health and education sectors. Service delivery is devolved in the case of health and education services, to 21 district health boards, and to more than 2,000 school boards of trustees, all of which are elected bodies. These devolutions are well understood by other sectors, though the level at which decisions can be made and funds committed are often opaque to those outside the organisation.

Central government increasingly looks to build community capacity so communities can nurture and develop their own people.

The private sector is the engine of economic growth, and the primary provider of employment, on which individual and family well-being critically depends. Increasingly it, too, looks to develop individual and community capacity, whether through direct grants or through the funding of major philanthropic organisations.

NGOs are often the deliverers of social support services at the local level, and usually have a very close knowledge of what is going on in their “patch”. NGOs are not a homogenous group. For instance, they may focus on providing services to strengthen communities; offering mutual aid and self-help for members of organisations; researching and advocating on behalf of individuals or groups; and expressing and fostering culture and identity. Iwi and Māori organisations typically have mandates for action that stretch well beyond social well-being to economic development and the preservation and promotion of language and culture.³

Even those whose primary business is the delivery of social services vary widely, from national multimillion-dollar enterprises to very small, locally based groups. As an illustration, approximately 850 providers are funded for child, family, and young people services by the Ministry of Social Development and the Ministry of Youth Development. The majority are small (with less than five full-time employees) and often rely on volunteers. In 2008–09 approximately

- 35% of these providers received less than \$50,000 from the Ministry of Social Development
- 40% received between \$50,000 and \$200,000
- 15% received between \$200,000 and \$500,000
- 10% received more than \$500,000.⁴

What councils do in the Auckland region varies significantly according to local history, the interests of the current council, opportunities for action, and the needs profile of their communities. The point can be illustrated by considering the direct provision of housing.

3 <http://www.ocvs.govt.nz/about-the-community-and-voluntary-sector/definition-of-the-sector/index.html#Adopteddefinition2>

4 Email communication from Ministry of Social Development, November 2008.

“Social housing” is listed as a strategic asset⁵ in the LGA 2002, and changes must go through the long-term council community planning process. There are three initiatives that support social and affordable housing provision across the region:

1. Central government provides a Housing Innovation Fund,⁶ which supports councils to upgrade and increase social housing where Housing New Zealand and the private market are not meeting the needs of groups such as Māori and Pacific peoples, older people, and people with disabilities
2. The Affordable Housing: Enabling Territorial Authorities Act 2008, passed in September, gives councils new enabling powers to require developers to either include affordable housing in their developments, make payments towards the cost of providing affordable housing elsewhere, or provide land for the construction of affordable housing.
3. The Auckland Regional Affordable Housing Strategy “demonstrates a commitment by the Auckland local authorities to act in partnership with other sectors in addressing housing affordability issues. Its high level strategic direction provides a flexible framework to guide future housing initiatives across the region.”⁷

Within this framework, current initiatives by councils include the following:

1. Auckland City, in the past a major provider of social housing, is a partner along with the Auckland City Mission, the Anglican church, the ASB Trust, Housing New Zealand, and the Committee for Auckland, in developing affordable housing and social space in central Auckland. Auckland also has a scheme where eligible individuals can purchase council-owned pensioner units at 80% of market value.
2. Franklin District maintains 111 pensioner housing units.
3. Manukau City maintains 556 units for low-income older people and the policy is to upgrade but not increase the number of units. The provision of affordable housing is also “addressed through planning, urban design and transport projects, a partnership with Housing New Zealand and financial support of [Energy Efficiency and Conservation Authority]’s Snug Homes insulation project.”⁸
4. North Shore City provides information and support for tenants through clinics, and 458 units for low-income older people.

5 Section 5(1), Interpretation, defines a strategic asset as

an asset or group of assets that the local authority needs to retain if the local authority is to maintain the local authority’s capacity to achieve or promote any outcome that the local authority determines to be important to the current or future well-being of the community; and includes—

...

(b) any land or building owned by the local authority and required to maintain the local authority’s capacity to provide affordable housing as part of its social policy;

6 http://www.hnzc.co.nz/hnzc/web/councils-&-community-organisations/councils/housing-innovation-fund/housing-innovation-fund_home.htm

7 <http://www.arc.govt.nz/plans/regional-strategies/auckland-regional-affordable-housing-strategy.cfm>

8 Email communication, Manukau Council, November 2008.

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5. Papakura District maintains 71 units for older persons' housing, and is funding a home insulation project.
6. Rodney District is developing a strategy to promote partnership with central government, private sector, and third sector organisations to support affordable housing developments.
7. Waitakere City is spending \$3.3 million on housing for older adults in 2008–09, and provides Sustainable Housing Guidelines to residents. While most councils are signatories to the Regional Affordable Housing Strategy, only Waitakere City has developed its own strategy and action plan within this framework.
8. The Tamaki Transformation Programme brings together the communities of Point England, Glen Innes, and Panmure, central government agencies (including Housing New Zealand Corporation, Ministry of Social Development, and health agencies), and local government (Auckland City Council and Auckland Regional Council) to redevelop state housing, increase the supply of private housing, upgrade infrastructure, enhance and coordinate social services, and increase economic performance over the next 20 years.
9. The Hobsonville Land Company (a wholly owned subsidiary of Housing New Zealand Corporation) is managing the development of just over 3,000 houses, largely privately owned (85% including about 500 affordable homes) with the balance (up to 15%) managed by Housing New Zealand. Waitakere City is leading a marine industry cluster providing employment and economic growth opportunities (estimated 1,200–2,000 jobs).

The lack of a clear and consistent role across all local authorities (with the exception of some provision of housing for the older people) makes it complicated for NGOs, which work with many local councils, to know which are likely to support their work, and makes the private sector less likely to engage with local councils – they are more likely to connect with central government agencies, where functions are uniform and well understood.

1.3 Current planning and priority-setting mechanisms and linkages

There has been a flowering of regional planning and priority-setting mechanisms over the past decade, beginning with the identification and prioritisation of community outcomes for the “four well-beings”⁹ and long-term council community plans (“LTCCPS”)¹⁰, which require local authorities to undertake a more structured process, which explicitly involves the community and other stakeholders, than was the case in the past. LTCCPs should

- identify the outcomes (in the areas of social, economic, environmental, and cultural well-being) that the local community seeks

9 Local Government Act 2002, section 91.

10 Local Government Act 2002, section 93.

- establish local authority work programmes to achieve the outcomes
- identify who else will contribute to the outcomes and how the local authority will work with those entities
- assess the resources (financial, physical, human, etc) the local authority requires to deliver its work programmes.

Each LTCCP is underpinned by an annual plan, which sets out more short-term issues and programmes. Each of the seven local authorities, and the ARC, is required to go through these processes, and monitor progress against the identified outcomes and plans. The evidence suggests that the results of such a plethora of planning mechanisms are generalised outcomes statements, rather than sharply delineated desired results, and priorities that tend not to focus on the most marginalised neighbourhoods, people, or population groups.

The planning and prioritising mechanisms of the LGA 2002 are overlaid with a series of regional-wide plans and strategies. The ARC lists on its website the following policy statements and strategies that impact on social well-being:

- the Auckland Regional Policy Statement (in place since 1999 and under review)
- the Regional Land Transport Strategy (2006 to 2016, and under review to extend for next 30 years)
- the Auckland Regional Physical Activity and Sport Strategy 2005 to 2010
- the Auckland Regional Economic Development Strategy 2002, progressed by implementing the actions specified in the Metro Project Action Plan, launched in 2006
- the Regional Open Space Strategy, launched in 2005
- the Regional Growth Strategy, adopted by all councils in 1999
- the Auckland Regional Affordable Housing Strategy, a “core component” of the Auckland Growth Strategy, developed in 1999
- the Auckland Regional Business Land Strategy (a subset of the Regional Growth Strategy).

The Regional Response to Climate Change and a Regional Energy Strategy are being developed, as is a State of the Environment Report.

The potential for so many plans to pull in different directions was one of the reasons for the creation in 2007 of the Auckland Sustainability Framework, which “aims to help our region secure a better quality of life, and create a sustainable future socially, culturally, economically and environmentally.”¹¹

11 [http://www.aucklandoneplan.org.nz/subsites/fms/OnePlan/Supporting%20Documents/ASF/Auckland %20Sustainability%20Framework.pdf](http://www.aucklandoneplan.org.nz/subsites/fms/OnePlan/Supporting%20Documents/ASF/Auckland%20Sustainability%20Framework.pdf)

This framework was endorsed by the Regional Growth Forum in September 2007 as the region's overarching sustainability framework, and will be used to align existing and future regional strategies and projects as well as providing a means to adapt "business as usual", such as LTCCPs. The Auckland Sustainability Framework and its implementation plan, *One Plan*, for the first time look to integrate action across the four well-beings, and to bring social well-being to the fore. The first of the eight "shifts in thinking, planning, action and investment" listed in the framework is "Put people at the centre of thinking and action".¹² Some stakeholders commented, however, that the focus on people and the emphasis on social issues were late-running additions in the framework's development.

2. Concepts of social well-being in New Zealand

2.1 The Social Report

The most widely used publication about social well-being in New Zealand, the Ministry of Social Development's *Social Report*¹³ identifies well-being as "those aspects of life that society collectively agrees are important for a person's happiness, quality of life and welfare". The report does not distinguish between "social well-being" and "well-being" – the terms are used interchangeably. The domains relate to individuals' and families' characteristics: there is no information, for example, on the distribution of early childhood centres; rather, there is information about the rate at which people access early childhood services. The *Social Report 2008* identifies 10 discrete components of well-being:

- health
- knowledge and skills
- paid work
- economic standard of living
- civil and political rights
- cultural identity
- leisure and recreation
- physical environment
- safety
- social connectedness.

As the *Social Report* notes: "The outcome domains are interconnected. Doing well or poorly in one domain is often likely to impact on performance in another outcome

¹² Auckland Regional Council, *Auckland Sustainability Framework: An Agenda for the Future*, 2007, p. 13 (available at <http://www.arc.govt.nz/auckland/sustainability/auckland-sustainability-framework.cfm>).

¹³ <http://socialreport.msd.govt.nz/introduction/social-wellbeing.html>

domain. For example, participation in leisure and recreation is a good thing in itself, but it may also lead to improved physical and mental health, and better social networks.”¹⁴ This typification of the domains as interconnected, rather than having a primary causal direction, marks the *Social Report*’s approach out from many other well-being concepts, which often positions income as the primary determinant of well-being, and health as its primary component.

Each of the domains in the *Social Report* has a “desired outcome statement”, which together form a full picture of social well-being in New Zealand.¹⁵ They are listed below.

Health	Everybody has the opportunity to enjoy a long and healthy life. Avoidable deaths, disease and injuries are prevented. Everybody has the ability to function, participate and live independently or appropriately supported in society.
Knowledge and skills	Everybody has the knowledge and skills needed to participate fully in society. Lifelong learning and education are valued and supported.
Paid work	Everybody has access to meaningful, rewarding and safe employment. An appropriate balance is maintained between paid work and other aspects of life.
Civil and political rights	Everybody enjoys civil and political rights. Mechanisms to regulate and arbitrate people’s rights in respect of each other are trustworthy.
Cultural identity	New Zealanders share a strong national identity, have a sense of belonging and value cultural diversity. Everybody is able to pass their cultural traditions on to future generations. Māori culture is valued and protected.
Leisure and recreation	Everybody is satisfied with their participation in leisure and recreation activities. They have sufficient time to do what they want to do and can access an adequate range of opportunities for leisure and recreation.
Physical environment	The natural and built environment in which people live is clean, healthy and beautiful. Everybody is able to access natural areas and public spaces.
Safety	Everybody enjoys physical safety and feels secure. People are free from victimisation, abuse, violence and avoidable injury.
Social connectedness	People enjoy constructive relationships with others in their families, whānau, communities, iwi and workplaces. Families support and nurture those in need of care. New Zealand is an inclusive society where people are able to access information and support.

14 Ibid., p. 4.

15 Ibid., pp. 8–9.

2.2 Public health and social well-being

These domains are essentially the same as those that have been developed in the health sector, where definitions and approaches to public health have changed considerably in the past three decades. Early understanding of public health put regulatory control, disease prevention, and public education as the most important actions, and local government's public health role reflected this.

The Ottawa Charter, developed by the World Health Organization in 1986, considerably broadened the scope of public health by acknowledging the importance of adequate housing, a liveable income, employment, educational opportunities, a sense of belonging and being valued, and a sense of control over life. Again, work and commentators in the public health arena emphasise the interconnectedness of these domains – see, for example, the WHO's recent report on the social determinants of health.¹⁶ A recent New Zealand paper describes the developing understanding of public health, and the role local authorities play:

Local authorities were originally created to ensure that the basic public health needs of communities, such as clean water and safe disposal of sewage and rubbish were met. Councils also played a key role in setting and enforcing public health standards, controlling the private provision of services such as housing and food premises.¹⁷ Both traditionally and currently, Council's regulatory responsibilities for public health are included in many pieces of legislation such as the Health Act, the Building Act, the Food Amendment Act, the Resource Management Act, the Hazardous Substances and New Organisms Act. Such roles and responsibilities are at the heart of "old" public health - where regulatory controls, disease prevention and health sector focused promotion services were key. Compared with many other places in the world (e.g. United Kingdom, Australia), local government in New Zealand has (both historically and currently) had a much more limited role in public health.

...

Today, public health ("new" public health) is seen to be about promoting wider community well-being as well as stopping illness before it happens. It's about the health of populations and communities. It's also about taking a holistic view of health – recognising all the inter-related components that contribute to individual, family/ Waitakere and community well-being.¹⁸

Another document, the *Quality of Life in Twelve of New Zealand's Cities* 2007 report, has as its purpose to "provide information that contributes to the understanding of social, economic and environmental conditions which can be used to describe and quantify the

16 CSDH, *Closing the gap in a generation: health equity through action on the social determinants of health. Final Report of the Commission on the Social Determinants of Health*, World Health Organization, Geneva, 2008, (available at http://whqlibdoc.who.int/publications/2008/9789241563703_eng.pdf).

17 Waitakere City Council, *Greenprint Waitakere*, 1999 (available at www.waitakere.govt.nz/AbtCit/ec/pdf/grnprntpt2.pdf), as quoted in Courtney, M., *The Future Interface between Public Health and Local Government: A think piece for the National Public Health Advisory Committee*, 2004 (available at [www.phac.health.govt.nz/moh.nsf/pagescm/769/\\$File/PHandLocalgovt.doc](http://www.phac.health.govt.nz/moh.nsf/pagescm/769/$File/PHandLocalgovt.doc)).

18 Courtney, op. cit., pp. 1–2.

quality of life of those living in New Zealand’s major urban areas.”¹⁹ Five Auckland cities take part: Rodney, North Shore, Waitakere, Auckland, and Manukau.

The report adds another well-being domain to those in the *Social Report*: the built environment. Although there is no desired outcome statement, the domain covers the look and feel of the city (including residents’ sense of pride and the level of graffiti and vandalism), the amount of open space and access to it, and people’s use of public transport, including their sense of how easy and safe it is to access and use.

Given the importance of transport for accessing work, education and leisure activities, the rest of this paper uses the *Social Report*’s domains to consider social well-being in the Auckland context, and supplements them with some consideration of transport issues.

2.3 The four well-beings – social, cultural, economic, and environmental

The LGA 2002 identifies four broad dimensions of well-being that councils are to promote: “the social, economic, environmental, and cultural well-being of communities”.²⁰ The division of well-being into four areas can lead to a view that each operates in a separate silo, and the impacts on other well-beings can be lost when decisions are made. In fact, each of the well-beings is deeply connected to the others.

A growing economy is likely to create jobs; employment provides incomes for individuals and families and plays a central role in promoting their social connectedness. Incomes are correlated with health status, which in turn impacts on people’s participation in the labour market. A more qualified workforce will tend to have greater levels of productivity and be more adaptable, enabling the economy to adapt to external challenges. There are other interconnections among well-beings also – the quality of the physical environment has a substantial influence on social well-being. As an example, environmental dimensions such as clean water and air impact significantly on health status; cultural well-being, which includes the valuing of different cultures and recognition of Māori as tangata whenua, has proven to be an effective ingredient in improving the social and economic well-being of disadvantaged groups, and Māori as Treaty partners have a critical role in guarding environmental well-being. For Māori, and for most ethnic groups, cultural well-being also depends upon spiritual well-being.

The links are strongest between economic and social well-being. Rodney District’s Social Well-being Strategy, for example, identifies a vision of “an inclusive district where all people are able to participate in the social and economic life of their communities.”²¹

The different well-beings can be also in tension with each other. Economic growth can threaten environmental values and can leave groups of people vulnerable to

19 *Quality of Life in Twelve of New Zealand’s Cities*, 2007, p. 4 (available at www.bigcities.govt.nz/report.htm).

20 Local Government Act 2002, section 10(b).

21 Rodney District Council, *Rodney Social Wellbeing Strategy 2008-2011*, 2008, p. 3 (available at [www.rodney.govt.nz>YourCouncil/meetings/agendaminutes/Documents/Agenda %20Minutes%202008 June%202008/Strategy%20and%20Comm%205%20June/Item6rodney_social_wellbeing_strategy.Appx1.pdf](http://www.rodney.govt.nz>YourCouncil/meetings/agendaminutes/Documents/Agenda%20Minutes%202008%20June%202008/Strategy%20and%20Comm%205%20June/Item6rodney_social_wellbeing_strategy.Appx1.pdf)).

marginalisation and dislocation; concern for the environment can lead to limits on economic growth that reduce the creation of jobs, excluding people from the income and other benefits that flow from being in the workforce.

2.4 Local government and social well-being

The social well-being activities currently carried out by councils in the Auckland region are summarised in the table below, from the State of Public Health in the Auckland Region (“SOPHAR”) report.²²

The SOPHAR report takes an ecological approach to the determinants of health and well-being, placing determinants in four concentric circles (or levels) of influence: natural, physical, and built environment; social, economic, and cultural environment; individual behaviours; and health states/diseases across physical, mental, family, and spiritual dimensions.

The framework illustrates different levels of influence. Health states and diseases are the result of the combined effects of all the other levels of the framework. Each successive level exists within the context of the next level up: health promoting or damaging behaviour exists within a social context; communities exist within the natural and built environments. While aspects of each level may also have an effect on the higher levels (communities can have an impact on their built environment, individual behaviours can affect the natural and the social environments), in general, actions at a higher level will have effects on all the levels beneath.

Table 2.1 shows how the SOPHAR report described the determinants for each of the four levels.

This table illuminates the breadth of local authority actions that can have an effect on social well-being. As can be seen, councils’ potential areas of activity range across many areas that directly impact on social well-being, such as the prevention of infectious disease, regulation of gambling and alcohol outlets, facilities for sport and physical activity, housing and building consents (with direct provision in some cases), emergency planning and responses, environmental health, and initiatives to combat family violence and promote safer communities and refugee/migrant settlement. Councils also have responsibility for areas that impact indirectly, but often significantly, on social well-being. These areas include economic development, transport, urban design and development, environmental planning, parks and open spaces, Resource Management Act administration, and provision of infrastructure.

There are important opportunities for all of these functions to contribute to improved social well-being outcomes. Not all of these opportunities are being realised at present.

²² Auckland Regional Public Health Service, *Improving Health and Wellbeing: A Public Health Perspective for Local Authorities in the Auckland Region*, Auckland Regional Public Health Service, Auckland, 2006, pp. 32–34 (available at http://www.arphs.govt.nz/Publications_Reports/reports/sopharo6/Sopharo6.pdf).

Table 2.1: Framework categories in relation to determinants of well-being and local government activities

Framework/indicator category	Common local government activities/responsibilities
Natural, physical, and built environment	<ul style="list-style-type: none"> • Land use planning • Resource management • Environmental/hazard and waste management • Biosecurity • Transport (all modes) • Roads • Urban design and planning • Housing/building consents • Liquor licensing, gambling controls, etc • Amenities such as parks, street lighting, footpaths, shops, etc • Recreational facilities • Natural and cultural heritage
Social, economic and cultural environment	<ul style="list-style-type: none"> • Community development • Economic development • Libraries and other community facilities • Recreation programmes • Lifelong learning • Housing • Community safety and crime prevention • Injury prevention
Individual behaviours	<ul style="list-style-type: none"> • Local government not usually involved in acting directly on these determinants, although sometimes is involved in promoting healthy behaviours and specific enforcement activities, for example: <ul style="list-style-type: none"> – Enforcement of the Sale of Liquor Act – Enforcement of noise controls
Health states/diseases across physical, mental, family and spiritual dimensions	<ul style="list-style-type: none"> • Local government has a limited direct role, but could advocate for the provision and access of social and health services

3. Demography and statistics

This section summarises social well-being statistics for the Auckland region and looks briefly at the current and likely future demography for the Auckland region. These statistics are used to generate a set of four possible priority social issues for action to illustrate what actions a “data-driven” approach is likely to generate when matched with community concerns.

3.1 Social well-being outcomes for Auckland

Auckland does well in relation to other regions in New Zealand in many aspects of social well-being. The Ministry of Social Development’s *Social Report 2008* publication on regional indicators for the 16 New Zealand regions shows Auckland in the top two quintiles for life expectancy, school leavers with higher qualifications, hourly earnings, road safety, workplace safety, home internet access, drinking water quality, and language retention. Suicide rates and rates of cigarette smoking are also low.

Table 3.1 sets out the social well-being rankings for the Auckland region. Not all *Social Report* indicators are included in the regional summaries (for example, obesity and potentially hazardous drinking are not included in the health indicators). Negative results are shown in italics.

Auckland does not perform well for some poverty indicators – it is in the lowest quintile for early childhood education, household crowding, and telephone access at home. Participation in physical activity is also poor.

These data – both positive, such as high incomes and home internet access, and negative, such as high household crowding and low home telephone access – underscore the fact that Auckland is home to both the most and the least deprived neighbourhoods in New Zealand.

These neighbourhoods occur within the same local authorities. The following figure, based on the New Zealand Deprivation Index²³ makes the point vividly. It is taken from the SOPHAR report and shows that “high-deprivation score areas tend to cluster into larger neighbourhoods. In urban and suburban regional Auckland, high-deprivation score areas more frequently occur around commercial and industrial zones and areas of traditional State housing (now Housing New Zealand Corporation).”²⁴

23 The Deprivation Index measures socio-economic deprivation over geographical units as defined by Statistics New Zealand. Each unit or meshblock contains a median of 87 people in 2006. These meshblocks are then transferred to maps to provide a coloured visual representation of comparative socio-economic deprivation according to area and location. The index provides a graduated scale of deprivation based on a number of variables from Statistics New Zealand. Variables for assessment include income, home ownership, family support, employment, qualifications, living space, communication, and transport.

24 Auckland Regional Public Health Service, 2006, op. cit., p. 120.

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Table 3.1: Social well-being: Auckland’s ranking for indicators

Domain	Indicator	Auckland regional ranking (quintile)
Health	Life expectancy (male/female)	Highest/highest
	Cigarette smoking	Lowest
	Suicide	Lowest
Knowledge and skills	Participation in early childhood education	Lowest
	School leavers with higher qualifications	Second highest
	Adult educational attainment	Average
Paid work	Unemployment rate	Average
	Employment rate	Lowest
	Median hourly earnings	Highest
	Workplace injury claims	Second highest
Economic standard of living	Population with low incomes	Lowest
	Household crowding	Lowest
Civil and political rights	Voter turnout in local authority elections	Lowest
	Women in local government	Highest
Cultural identity	Māori language speakers	Second lowest
	Language retention	Highest
Leisure and recreation	Participation in physical activity (young people/adults)	Lowest/second lowest quartile
Physical environment	Drinking water quality (<i>E. coli</i> , <i>Cryptosporidium</i>)	Highest/highest
Safety	Recorded criminal offences	Average
	Road casualties (injuries/deaths)	Second highest/highest
Social connectedness	Telephone/internet access at home	Second lowest/highest
	Contact between young people and their parents (male/female)	Average/second best
Transport	Motor vehicle ownership rates	Highest rate for four of Auckland’s cities*
	Public transport: perceived:	
	• affordability	36–49 % (NZ: 55%)
	• safety	61–79% (NZ: 73%)
	• convenience	30–49% (NZ: 55%)

* North Shore, Rodney, Manukau, and Waitakere

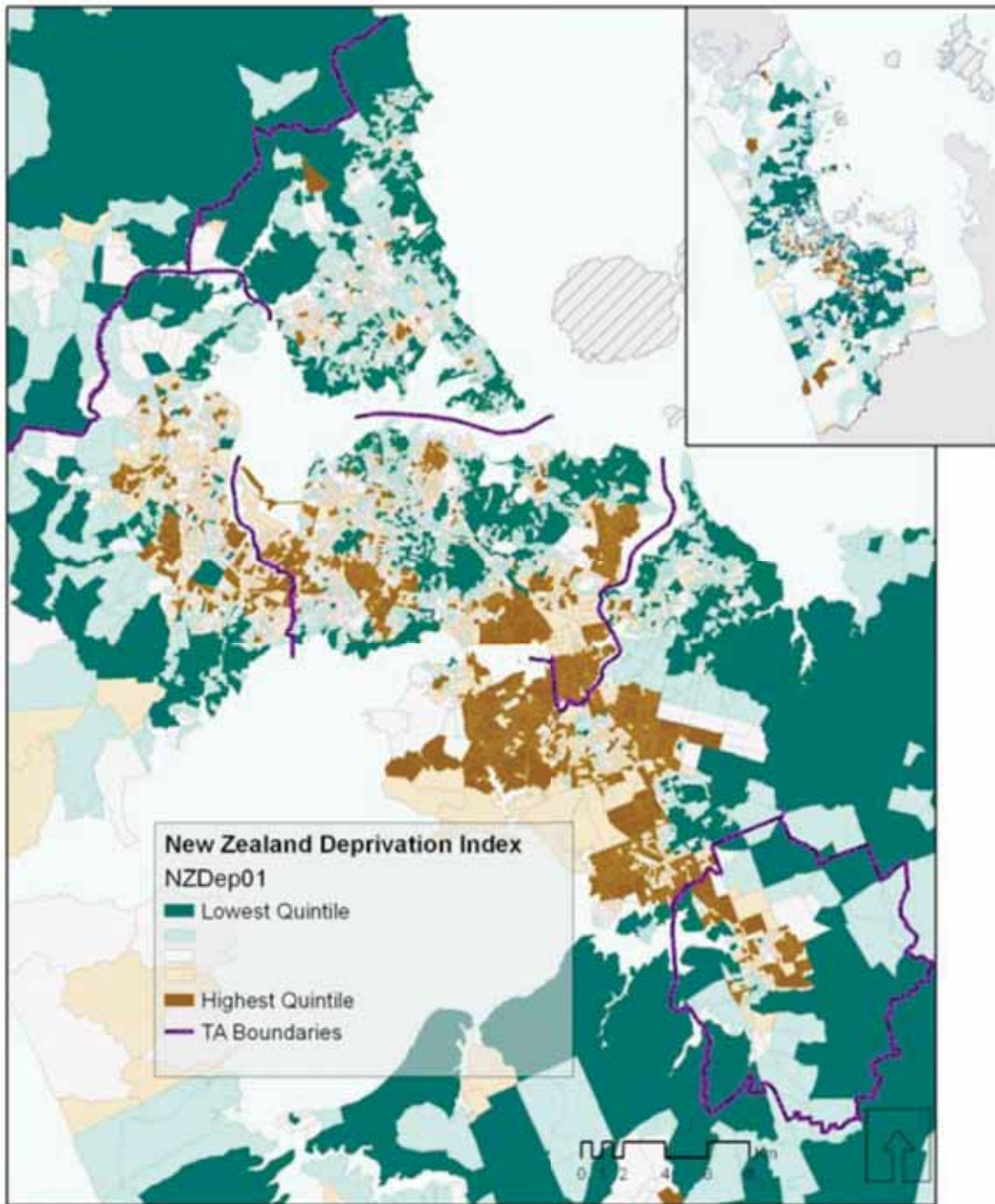


Figure 3.1 Neighbourhood deprivation scores by mesh block

Source: Auckland Regional Public Health Service, *Improving Health and Wellbeing: A Public Health Perspective for Local Authorities in the Auckland Region*, 2006, p. 119.

Manukau and Auckland City have the greatest number of small area units in Auckland that have more deprived NZDep scores (decile eight, nine, and ten). In Manukau, NZDep scores are high in areas such as Otara, Mangere, Flat Bush, Weymouth, Clendon, Wiri, Manurewa, Manukau, and Papatoetoe. In Auckland City, NZDep scores are high in areas such as

Tamaki (Point England, Glen Innes, and Panmure), Otahuhu, Mt Wellington, Oranga, and Wesley.²⁵

Socio-economic deprivation has consequences: the Ministry for Social Development's *Social Landscape* paper for the Commission says, "Health has two core dimensions; how long people live and the quality of their lives. Residents in North Shore have the highest life expectancy, and the residents of Papakura the lowest life expectancy There is an association between life expectancy and the level of deprivation in an area, which is reflected in the mortality information from the district health boards. Of the 12 largest cities²⁶, the infant mortality rates over 2000 and 2003 are highest for Manukau (6.8 per 1000 live births), and lowest for Rodney (3.4 per 1000 live births). The rates are noticeably higher for Māori and Pacific peoples across Rodney, North Shore, Waitakere, Auckland City, and Manukau (Quality of Life in Twelve of New Zealand's Cities, 2007)."²⁷

Deprivation indicators are used in the construction of funding and service delivery formulae for major central government services, such as some school and DHB funding. Despite this, patterns of social service delivery and the provision of amenities are not always systematically matched to the needs of particular areas. It has been a challenge for the current local authorities, and is likely to continue to be a challenge, that widely disparate neighbourhoods are in close proximity to each other, within the same local authority. The Salvation Army, in its submission to the Royal Commission, says

In 2006 the Ministry of Social Development published a report on the levels and distribution of social deprivation titled "*New Zealand Living Standards 2004*". This report identified a number of important results including;

- Households reliant on benefits were nearly five times more likely to be living in severe or significant hardship (58% of beneficiary households compared with 12% of working households p.102)
- Single parent households were three times more likely to be living in severe or significant hardship (42% of single parent households compared with 14% of two parent households p.103)
- More Aucklanders were likely to be living in severe or significant hardship than other New Zealanders (Aucklanders make up 38% of those living in severe or significant hardship but only 31% of New Zealand's population p.175)

... This means that to gain some understanding of the spatial distribution of poverty in Auckland we only need to consider where beneficiary and/or single parent households are likely to live.

Analysis ... shows a significant level of concentration of these households into just three suburbs

Poverty in Auckland region is largely concentrated in western Manukau City and in the south and south-east of Auckland City in a broad band extending from Glen Innes

25 Ministry of Social Development, *Social Landscape in Auckland Region*, 2008, p. 4.

26 Rodney, North Shore, Waitakere, Auckland, Manukau, Hamilton, Tauranga, Porirua, Hutt, Wellington, Christchurch, Dunedin territorial authorities (*Quality of Life in Twelve of New Zealand's Cities*, 2007).

27 Ministry of Social Development, *Social Landscape in Auckland Region*, updated 30 July 2008.

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to Manurewa. There is some evidence that this poverty is not only deeply embedded in these communities but is becoming more concentrated.

...

... the citizens of Auckland City and Manukau City can expect lower rates of crime resolution than those in North Shore and Waitakere cities. Furthermore the people of western Manukau City and Papakura–Franklin can expect to experience at least twice the rate of crime as people living in the east of Manukau or elsewhere in the region. ...

... there has been little advocacy by and on behalf of communities which have poor access to public services such as education and police protection. These problems of poor access have been apparent for some period yet Manukau City Council has not been an effective advocate for the affected communities.

... It is the Salvation Army’s opinion that the present governance arrangements in Auckland have not provided the advocacy and leadership which poor communities within the region require and deserve.²⁸

The Army takes care to acknowledge that the causes of social polarisation are not the fault of local authorities, but it makes the point that “The poor communities of Auckland have become the victims of relative[ly] indifferent local representation which has tended to neglect local social problems in favour of a broader city wide focus.” It believes that “local councils have an important role to play in being an advocate for their community and particularly for the most vulnerable people and groups within their community.”

Deprivation is correlated not only with geography but also with ethnicity, as Figure 3.2 shows.

European people are represented in all of the deciles, with a lower proportion in the more deprived deciles; Māori are more strongly represented in the deciles with high deprivation scores, and Pacific people are severely disadvantaged, with three-quarters of the population in the three most deprived deciles, and almost 40% in decile 10. These trends are not the result of geography alone, and they reinforce the point made in an article in the *New Zealand Medical Journal* in 2002 by Blakely and Pearce:

the (vast) majority of ‘deprived’ individuals according to the three classic measures of socio-economic position (income, education and occupational class) would miss out on any interventions targeted to the most deprived quintiles of small areas by deprivation.

...

if high risk groups or individuals are to be ‘targeted’ then it is unlikely that an area-based strategy *alone* [my emphasis] is most appropriate as:

- not all deprived people live in deprived areas
- area-level socio-economic effects on health are important, but probably not as important as personal socio-economic effects²⁹

28 Submission by the Social Policy & Parliamentary Unit of The Salvation Army to the Royal Commission on Auckland Governance (available at <http://www.royalcommission.govt.nz>).

29 Blakely, T. & Pearce, N., “Socio-economic position is more than just NZDep”, *New Zealand Medical Journal*, 2002, 115: 109–111, at p. 110.

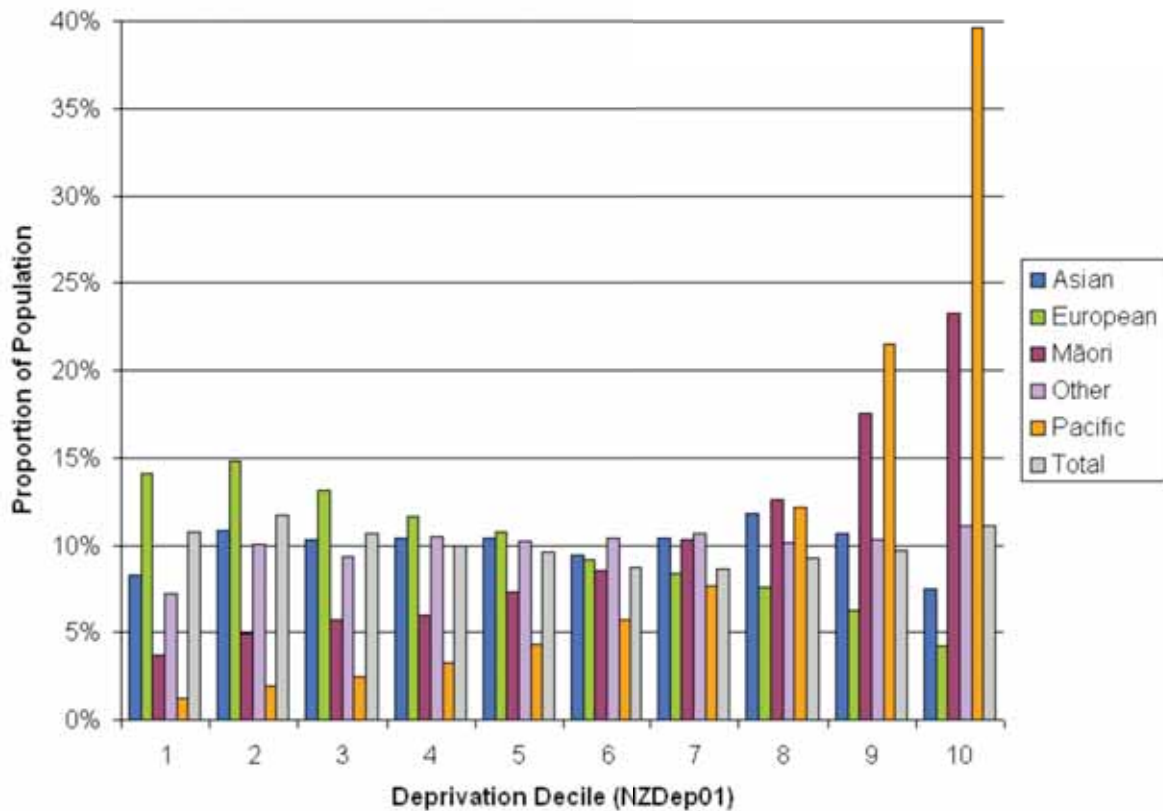


Figure 3.2 Resident population proportions by neighbourhood deprivation deciles

Source: Auckland Regional Public Health Service, *Improving Health and Wellbeing: A Public Health Perspective for Local Authorities in the Auckland Region*, 2006, p. 120.

Any redesign of local authority functions and processes must find a way to bring the needs of poor communities, disadvantaged ethnicities, and deprived individuals into the discussions about pressing social issues in the Auckland region, and give their voices prominence in decisions about what actions will be effective.

3.2 Auckland’s demography: a summary

Auckland region’s population was almost 1.4 million people in June 2006, having grown by nearly 13% since 2001. This section presents a brief overview of the population in 2006, and projections for the future. It focuses on age, migration, and diversity, in order to sketch the basic facts of the population. These data, in themselves, tell us nothing about social well-being, but they set down the immutable characteristics of the population. Socio-economic data, such as educational qualifications, health status, and standard of living, set out above, show us how successful we are in achieving good social outcomes for each of the population groups in our society.

Auckland's people in 2006: age, migration, and diversity

Age

- Auckland has a younger population than the rest of New Zealand with a high number of young Māori and Pacific youth.
- 37% of Auckland's population is under 25 years of age.
- The highest numbers of young people live in Auckland and Manukau Cities, and just over a quarter of Manukau's population is under 15 years of age.
- The Auckland region has the lowest proportion of people aged 50 years and over in New Zealand.

The future:

- By 2031 it is forecast that there will be almost as many people aged over 65 years in the Auckland region as there are under 15 years.³⁰
- By 2031, the median age in New Zealand is projected to range from 35 years in Manukau City to 56 years in Waitaki District.³¹ Papakura District will have the second youngest median age in New Zealand, with Waitakere City ranked 5th and Auckland City 9th among the 73 territorial authorities.
- The largest numerical increases in the working-age population between 2006 and 2031 are projected for the four cities in the Auckland region.
- For New Zealand overall, about 21% of the population is projected to be aged 65 years and over in 2031, up from 12% in 2006.

Migration

- 35% of the Auckland region's residents were born overseas, compared with just 16% in the rest of New Zealand.
- 40% of North Shore City residents had been born overseas and 38% each of Auckland City and Manukau City residents.
- International migration from 2001 to 2006 accounted for two-thirds of the growth in that time.
- Since 2001 Auckland has been losing more people to internal migration than it has gained.

³⁰ Ministry of Social Development, *Social Landscape in Auckland Region*, 2008, p. 2.

³¹ These and subsequent data are taken directly from Statistics New Zealand, *Subnational Population Projections: 2006 (base) – 2031, 2007* (available at <http://www.stats.govt.nz/NR/rdonlyres/F8C841BF-D427-40A4-AEC9-42FBDC6F239/0/subnationalpopulationprojections2006basehotp.pdf>).

Diversity

- 56% of the regional population identified with European ethnic groups (this does not include the new classification of New Zealander), 19% with Asian, 14% with Pacific peoples, and 11% with Māori.³²
- Two-thirds of New Zealand's Pacific peoples lived in Auckland, and 66% of the people of Asian ethnicity.
- Auckland has relatively fewer people identifying as Māori than the rest of New Zealand.
- Geographic concentration leads to a distinctive “ethnic mosaic”. European identification is highest in Rodney and Franklin Districts, and Māori identification in Papakura District. Asian ethnicities are highly significant in Auckland City.
- Diversity is most pronounced at the suburban level. Māori tend to live on the edge of, or beyond, the most urbanised parts of the region. Pacific peoples concentrate around Manukau and in the southern suburbs of Auckland. Distinctive Asian settlement patterns result in many Koreans on the North Shore, a mix of Chinese and Koreans in and around the CBD, and Chinese and Indian people concentrated from Epsom through to Sandringham, Mt Albert, and Mt Roskill. Large numbers of Taiwanese, Hong Kong, and mainland Chinese are settled in the east of the region.
- European-born residents are spread throughout the region.
- The Pacific Island and Māori groups have a significantly younger age structure than the rest of the population.
- The Asian population is younger than the European majority but older than Māori and Pacific Island groups.

Population growth

- Growth rates have been uneven within the Auckland region. Auckland City was the slowest-growing council but still accounted for a quarter of regional growth between 2001 and 2006.
- Manukau City had the highest level of growth, at 31%.³³

The future:

- Growth over the next decades will be driven by minority ethnic groups, especially Asian and Pacific Island peoples, because of their younger age structure

32 It is important to note that these ethnic populations are not mutually exclusive because people can and do identify with more than one ethnicity.

33 The rest of the data in this section are drawn from McDermott, Dr P., *Auckland's Population*, Cityscope Consultants [see Part 2 of this volume]. The paper draws on 2006 Census data from Statistics New Zealand. It also makes use of Statistics New Zealand's recent subnational population projections, and various reports on Auckland's demography.

and future immigration. This will increase Auckland's ethnic, cultural, socio-economic and geographic diversity.

Four facts stand out: the relative youth of Auckland's population – almost 40% are under 25; the high proportion of immigrants – 35% were born overseas; the diversity of the population – 46% identify as Asian, Māori, Pacific, Middle Eastern/Latin American/African, or “other” ethnicity³⁴; and the distinctive neighbourhood patterns for age structure and ethnicity.

Although the population at present is very young, it will in the coming decades be subject to the same broad ageing trend as the rest of the country.

3.3 Four critical social issues

There are three critical transition periods in the life cycle – birth and the early years, when future capacity and resilience are largely established; the transition from teenage years to adulthood; and the transition to older age, which poses different challenges in maintaining autonomy, social connectedness, and a sense of purpose.

It is useful to think of critical social issues from two perspectives: the point in the life cycle where action is likely to be most effective, and the physical conditions where improvement is likely to have the most impact. Auckland's population is now, and will be in the future, younger and more diverse than anywhere else in New Zealand. The age structure alone makes the case for doing the best that can be done for those who are just being born. The efficiency of interventions to “get it right” for children, rather than remedial action for adults, adds to the case. If Auckland's young people (disproportionately Asian, Pacific, and Māori, increasingly refugees and migrants) are helped to move successfully into adulthood confident in families and careers, the ground is laid for a cohesive and prosperous future.

1 Help all children to get the best start in life

Governments in New Zealand and internationally have increasingly recognised the need for investment early in the life course to help all children and young people to reach their potential. There are many families in Auckland that have the resources, both within the family and in their neighbourhood, to give their children the best start in life. But there are also many children whose parents do not have adequate incomes, whose houses are overcrowded, whose access to health and education services is limited, and whose ability to improve their own lives and that of their children is constrained by lack of access to employment and to recreational facilities. As the data above has shown, these deprivations have strong geographical and ethnic distributions.

When local authority powers to regulate land use, make provision for affordable housing, and determine public transport are combined with central government's powers to decide

³⁴ Auckland Regional Council, *The people of the Auckland region*, 2006, p. 4 (available at http://www.arc.govt.nz/auckland/population-and-statistics/population-and-statistics_home.cfm).

on the distribution of social services such as health, education, police, and family support services, a powerful engine for change can be built.

2 Improve the transition of young people from school to work, further education, or training

The youth of Auckland will be the powerhouse of New Zealand's economy over the next decades. The largest numerical increases in the working-age population between 2006 and 2031 are projected for the four cities in the Auckland region: Manukau, Auckland, Waitakere, and North Shore. More than a third of Auckland's population is under 25, and a much greater proportion of them are non-Pākehā than is the case for the older generations.

Strategies for successful youth transitions have two dimensions:

- enhancing young people's potential, primarily through improving educational achievement and connections into paid work
- avoiding the danger and damage of involvement in youth gangs, excessive drinking, drug-taking, and teenage pregnancies.

Deprived neighbourhoods are unlikely to have sufficient resources to meet the challenges of gangs and other antisocial behaviour. Young people live, work, play, seek services, and get into trouble in different localities, but they are all within the bounds of Auckland, and solutions need to gather up all these dimensions regionally rather than locally. Youth crime occurs along transport corridors; the catchment is issue-specific, but the solutions will lie closer to home and workplaces than to the scene of the offences. NGOs working with youth at risk, especially culturally specific organisations, are often the best "way through" for young people at risk to move confidently into mainstream training or work, but the NGOs seldom have sufficient connections with the business sector to source enough diverse employment.

Young people need work, training, or study, or a combination of all three, to make a good transition to adulthood and independence. All sectors are crucial to success, and need to be well linked together. Central government and the private sector are the source of these goods, but they rely on local government land use and public transport decisions to help them locate businesses and deliver their services where they are most effective.

The Auckland region increasingly operates as a single economic area with an integrated labour market. Regional government's economic development role, which covers the entire region, can help boost job numbers and the employment prospects of the young. Tertiary education is equally important for young people's transition to paid work, as it has the potential to raise their skills, productivity, and wages. Tertiary education is expensive, both in infrastructure and in delivery, and needs to be planned and delivered coherently across the region. The Committee for Auckland sees tertiary education as an essential plank in increasing economic development:

One of those [regional economic development] strategies should be a regional tertiary strategy for the Auckland region with coverage including needs assessment

(both social and cultural needs as well as needs of current and future employers) and the optimal arrangements for developing and delivering the tertiary education services required to meet those needs.³⁵

3 Improve public transport, particularly to disadvantaged communities

Auckland has long struggled with an inadequate transport system. Residents living in the Auckland cities were much less likely than residents in the other seven cities in the *Quality of Life* report to see public transport as convenient; public transport also ranks low for affordability. Currently, rail lines are being reopened, and bus routes reconfigured. The Regional Land Transport Strategy 2005 covered the 10 years to 2016. It called for a substantial increase in public transport spending and the completion of key elements of the strategic road network, and placed new emphasis on travel demand management, in particular walking and cycling. The next-generation strategy will look again at similar issues.

The ARC³⁶ reports that people living in areas with the highest level of deprivation generally have the lowest levels of access to good public transport services. The consequence is that people in low-paid jobs (or multiple part-time jobs) drive, if they have cars, long distances from peripheral housing estates to scattered employment locations.

As well as less access to public transport, people in deprived areas have less access to cars. There is a relationship between an increase in the Deprivation Index scores (2001) and households without access to a motor vehicle, particularly for households with three or more residents.³⁷

The revamp of the Regional Land Transport Strategy is an opportunity to make sure public transport works for Auckland's people, deliberately improving social connectedness, particularly for those in deprived neighbourhoods, as well as improving people's access to work. Integrating walking and cycling into the strategy has the additional benefits of improving personal health as well as the quality of the environment.

4 Improve the quality and affordability of housing

In all the discussions with stakeholders the importance of housing – its quality and its affordability – was raised. One particularly trenchant communication said,

The poor are being 'sorted' by real estate home and rental markets into the urban periphery, where ghettoisation, youth violence and transport poverty are on the rise. Inner city affordable housing no longer exists outside fragmented pockets of state rentals.

Low density state housing in the city's inner periphery- a substantial proportion now in private hands - was supplemented by expansive low density development

35 Committee for Auckland, *The Future Governance of the Auckland Region: The place of the tertiary sector*, Submission to the Royal Commission on Auckland Governance [11086], p. iii (available at <http://www.royalcommission.govt.nz/>).

36 Auckland Regional Council, *Ensuring liveable quality in apartments in the Auckland region: Discussion of issues to be addressed in the review of the New Zealand Building Code*, ARC, Auckland, 2006.

37 Auckland Regional Public Health Service, 2006, op. cit., p. 129.

in more marginal locales, especially in South Auckland, where post war industrial development was supposed to provide stable and well paid employment. Large, indeed still increasing numbers of families with young children are regularly paying more than 30% of family income on housing (Social Report 2008). Families with only benefit income are facing after housing costs incomes of as (much) as 35% of median incomes (2007 Pockets of hardship document, MSD). Resulting crowding sees poor, Māori and especially Pacific families experiencing extremely high risks of respiratory illness relative to the rest of the population.

... Auckland is exceptional from the rest of NZ in terms of the extremity to which all these issues have gone. This exceptionalism has however not been reflected in policy and other commitments, which have if anything historically under-committed to Auckland in most aspects.³⁸

The quality and cost of housing touches all age groups. Children need warm, healthy, stable housing to thrive physically; children and young people benefit from the continuity in school enrolment that home ownership brings; adults with stable housing tend to be more knitted in to their local communities and workplaces; and older people in housing that can accommodate their changing capacities are able to “age in place” in their own homes and communities (though this is less likely with successive cohorts of older people, as fewer arrive at retirement owning their own homes, and more become vulnerable to poverty).

Housing has long been a concern in Auckland, which began developing its Regional Affordable Housing Strategy in 1999, and now has new capacities under the Affordable Housing Act 2008 to increase the supply of such housing in the region. As one central government stakeholder put it: “the policy might be fine: implementation is the key”.

Household crowding is a relatively simple measure that gives a sense of how affordable housing is in Auckland (and, by extension, a sense of its quality). “Crowding” is taken as occurring if the dwelling the household resides in needs one or more additional bedrooms, after accounting for couples, children, and other factors. Auckland does relatively poorly in measures of household crowding, scoring in the lowest quintile in the Social Report’s comparisons of New Zealand’s regions. When the figures are disaggregated they show the familiar pattern of geographic and ethnic concentrations (see Figure 3.3).

Housing reform requires coordinated action by central and local government and the private sector. Local communities, iwi, and others with a stake in the land need also to be involved. New developments such as the Hobsonville redevelopment and the Tamaki Transformation Project point the way, but action is needed across the region.

38 David Craig, Senior Lecturer/Postgraduate General Advisor, School of Sociology, University of Auckland, *Dot points on Auckland governance for Elizabeth Rowe*, email communication, 18 September 2008.

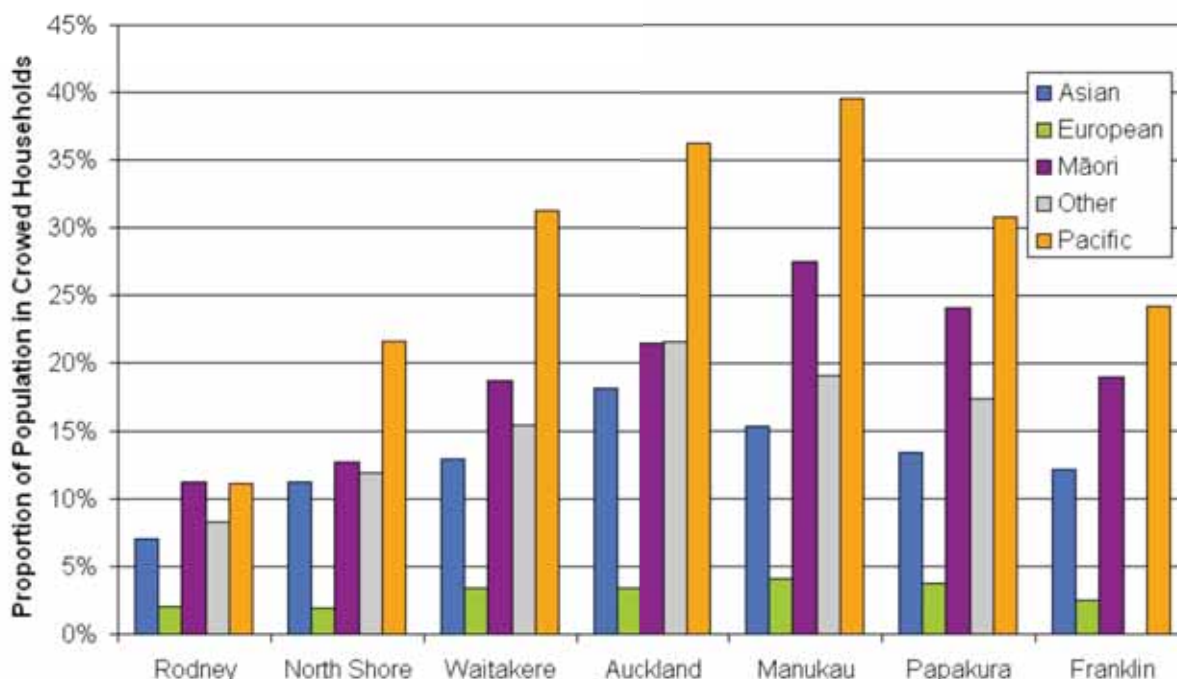


Figure 3.3 Crowding by territorial authority and ethnicity

Source: Auckland Regional Public Health Service, *Improving Health and Wellbeing: A Public Health Perspective for Local Authorities in the Auckland Region*, 2006, p. 106.

4. Effectiveness

This section reports on the perceptions of stakeholders and those who have made submissions of what is working well under the current arrangements, and what could be improved.

The analysis below of the current situation considers three dimensions of effectiveness:

1. How well do **current local government structures and processes** (legislative and practice-based) **work** to
 - clarify what social well-being outcomes Aucklanders are looking for, and what social issues they most want to fix
 - identify who is taking what action
 - provide follow-through and follow-up on actions taken and their consequences?
2. How **strong are local authorities' links** with each other and with other key players in achieving social well-being: central government, the private sector, and NGOs?
3. How well do current structures and processes (central and local government) serve **the needs and interests of different population groups and communities** in the

Auckland region – Māori, Pacific peoples, other ethnic groups, children and young people, older people, those with low incomes, and those with disabilities?

Information from meetings with stakeholders and examination of relevant submissions to the Commission are the primary source for this analysis. It is supplemented by outcomes data from the Social Report, the *Quality of Life* report, the New Zealand Deprivation Index, and a briefing for the Commission prepared by the Ministry of Social Development.

4.1 Current local government structures and processes

Overall, stakeholders and those making submissions thought there had been greater involvement of councils in social issues, an improvement in the identification of social well-being outcomes Aucklanders are looking for, greater coordination of planning processes, and some promising examples of agreement across sectors about critical social issues.

Stakeholders saw councils' greater involvement as being triggered by the requirements of the LGA 2002, and most, though not all, thought the community outcomes-setting requirements of the LGA 2002 had been beneficial in getting greater clarity about what local communities saw as most important in the social sphere.

Stakeholders nominated two councils – Manukau and Waitakere Cities – as leaders in getting social well-being onto the agenda. The impact of leadership by mayors was generally agreed as crucial in influencing the degree of council involvement and the ability to galvanise other parts of the community into action.

The Sustainability Framework was seen as a very good start in increasing the focus on social issues, though the test of its efficacy will come with its implementation.

This generally positive picture is compromised, however, by several structural and process limitations – a lack of region-wide leadership, with an absence of any clearly articulated vision and values against which to test proposed actions; few medium-term goals to force priority setting for the immediate future; an insufficient research and analytic capacity to aid decision making about priorities and actions, or to measure results; fragile coordination and “follow-up” mechanisms, and, most tellingly, a general failure by councils to use the power of their core business to improve social well-being.

Leadership, vision, and values

Stakeholders across the board spoke of the power of leadership to draw the region together and inspire action. Leadership was talked of in remarkably similar ways, from “servant leadership”, where those in power took as their criterion for decision making “what is best for the citizens of Auckland? What can we do that will see all citizens enfranchised in their city?”, to leadership as the way to “articulate the vision and a sense of hope for people”, to leaders “spelling out the values we uphold together, because that is what moves us, and makes us a society”. This is a sense of leadership as an instrument of transformation in people's lives. At present people observed effort going into branding, without there being a sense of vision, or of Auckland's identity.

Also absent is a regional strategy that spells out how Auckland’s social well-being will be improved, both generally and around key issues such as child poverty, homelessness, violence, and others. Social service providers felt current processes encourage too much focus on the “average”, rather than areas of inequality and deprivation. Some central government agencies saw “no coherence about issues, roles, or (available and useful) tools on the part of all the players”.

There was broad agreement that leadership had to be soundly based on the views of the people of Auckland, with several stakeholders clear that priorities needed to be set at the regional level, rather than being an aggregate of local views. Central government was seen as a legitimate participant in debates about strategy and priorities. There was general agreement that current structures worked against the creation of a unified regional view of priorities, supported by all sectors.

Making real change that stays on course requires connected planning, funding, and action across sectors and over longer time scales than are currently used. Medium-term goals need to be clear, to frame decisions in budgeting, planning, political processes, and force well-focused thinking about the countervailing forces that act to limit the achievement of the goals. The Sustainability Framework is starting to build this medium-term base.

The connections from vision to action are made by the Auckland City Missioner in the Champions for Auckland submission:

Real transformation requires a shared vision for social outcomes and clarity around what social success looks like. This will require regional and cross-sector funding around key issues like education, health and poverty to achieve lasting and meaningful benefits. There needs to be more joint commissioning by the various funding and delivery partners that require and/or benefit from a particular service. The complexities and transaction costs of filtering money through a variety of organisations and government function until it reaches the front line must be simplified and reduced. The region needs a holistic strategy for social development with a clear set of outcomes set for a two, five & ten year horizon.

International best practice is acknowledging the regional leadership role for cross-cutting project initiatives³⁹

Maintaining momentum: “follow through and follow up”

Most effective interventions on social issues require action by many players in different sectors, who will each be subject to the internal priorities of their organisation and shifts in their environments. Coordination in such circumstances is likely to be fragile without strong leadership. The Auckland Regional Migrant Services’ submission makes the case:

As a regional organisation with leadership responsibility across the region to ensure good settlement outcomes for newcomers, ARMS [Auckland Regional Migrant Services] has experienced considerable challenges and frustrations

39 Champions for Auckland, *The Need for Leadership*, Submission to the Royal Commission on Auckland Governance [10964], p. 10 (available at www.royalcommission.govt.nz/).

[Implementing the] Auckland Regional Settlement Strategy and Action Plan: This is a comprehensive strategy, involving most central government departments, seven local councils and the Auckland Regional Council, as well as key community agencies. In its formulation, the Strategy was firmly embedded in a model of broad consultation, cross-agency collaboration and innovative collaborative responses to settlement needs and issues. Despite considerable buy-in from settler communities, strong support from its numerous constituent agencies, a comprehensive foundation report, and Cabinet approval, this Strategy now lacks the necessary momentum and leadership at the local council level to ensure its success. *It is the view of ARMS that a key weakness is that no one organisation at the local Auckland level “owns” this Strategy and Action Plan.* [My emphasis] ... Our experience is therefore that there is a need for a model of Auckland Regional Governance that allows for greater regional responsibility for leadership on such key social and economic initiatives.⁴⁰

The need for good data, and robust research and analytic capacity

Planning (and associated monitoring and reporting) requires a strong data and information base, available across all social domains, preferably aggregated to a regional level, and capable of being disaggregated to a neighbourhood or population level.

The SOPHAR report notes,

Reviewing the health and wellbeing of the region using key indicators that have potential significance for local government has been a difficult task and has been limited by numerous data gaps. Many of the data sources for potential indicators of health and wellbeing and their determinants derive from national surveys and collections, which do not break the data down to territorial authority level.⁴¹

The analysis for this report has also been hindered by the lack of regional and neighbourhood social data. This lack is compounded by the absence of place-specific data about the socio-demographic characteristics of communities/neighbourhoods, the social challenges they face, and the resources available to them (including social services, facilities, employment, and infrastructure such as roads, public transport routes, social housing) – all the place-based factors that illuminate what the challenges are in a particular community, and what resources the community can access to meet the challenges. In these circumstances councils and central government agencies risk overlooking and alienating local resources. Local services mapping by Family and Community Services has begun this process. These maps of services to individuals and families need to be supplemented by mapping of economic resources, employment opportunities, and transport and housing availability to build a composite picture of the social and economic landscape.

There is also limited research and analytic ability available to aid decision making about the right actions to take. As an example, a local NGO had become concerned about underage prostitution in the area where it worked, but found it difficult to discover if

40 Auckland Regional Migrant Services, Submission to the Royal Commission on Auckland Governance [10847], p. 1 (available at www.royalcommission.govt.nz/).

41 Auckland Regional Public Health Service, 2006, op. cit., p. 18.

anyone else was working on the issue, whether other places in New Zealand had already taken action, or what the literature said about effective interventions. Similar limitations exist at local authority level – robust policy capacity in the social sector tends to be concentrated in central rather than local government.

There may be a role for central government to transfer technical expertise in data capture and management, and in research and policy analysis, to the regional level. For example, Statistics New Zealand information is not aggregated on a regional basis, and central government agencies may be willing to contribute to a regional capacity to do this. Further, the major social agencies have knowledge management centres, which provide expert support to the research and policy teams, and there may be ways to share this expertise.

The power of councils’ core business to improve social well-being

Local government was highly valued by most stakeholders because of its potential to connect central government policies with local reality and to see social well-being “in the round”, and its potential to understand the consequences for individuals and families of economic decisions and planning frameworks. Despite the potential inherent in local government, few thought local authorities had yet understood the power of the decisions they make. Stakeholders cited the impact of physical design (such as the location of facilities, businesses, and open space) on the lives of their citizens as evidence of this. Many advocated “looking through a social well-being lens” as part of the normal planning process for all local body decision making.

Central agencies frequently express frustration that local authorities do not use the instruments they have to configure the urban physical environment so social well-being can be achieved. The Auckland Regional Public Health Service, for example, said in its submission:

Local authorities, through their role as place shapers and service enablers, have considerable influence over the extent to which a particular suburb or city becomes an obesogenic^[42] environment.

...

Local authorities have considerable influence over the ability of people to mitigate the impact of low income and education by accessing employment and educational opportunities. ...

The public health view of local authorities’ influence on health outcomes is somewhat wider than the view of local government itself⁴³

As with others stakeholders, mana whenua who were consulted are of the view that local authorities should always consider the social capital and the impact on participation of infrastructure decisions they take.

As examples, local authorities should use transport and the placement of facilities to encourage participation in order to open up the social landscape, discourage

42 “Obesogenic” – tends to increase the likelihood of people becoming obese.

43 Auckland Regional Public Health Service, Submission to the Royal Commission on Auckland Governance [11258], p. 6 (available at www.royalcommission.govt.nz/).

displacement, and reach those who need the services the most (for example giving fare holidays on public transport in the weekends, building public transport routes where the neediest live, and siting parks and other recreational facilities in neighbourhoods where people lack the resources to create their own leisure activities).

4.2 Local authorities' links with each other and with other key players in achieving social well-being

Local authorities have to build links with central government, the private sector and NGOs to achieve social well-being. Stakeholder responses suggest that these vary, with links between central and local government at the national level having shown the most improvement recently.

Central government

Local authorities and central government agencies both experience frustrations, but there is a sense of improvement in their relations with each other. The relationship is noticeably wider and deeper in the economic sphere than the social, with the exception of traditional public health areas. What is interesting is that central government seems to have a better grasp of the fact that economic and social outcomes are deeply interconnected, and a more active understanding that the achievement of outcomes in one social domain will depend upon actions in many other domains.

In the social context central government acts variously as policy setter, direct service provider, funder, knowledge manager, and active collaborator with local government. Few stakeholders have suggested that local government should be responsible for more direct service delivery than at present, though many share a concern that current central government policy settings that do not take account of neighbourhoods mean that services are not tailored to those who need them. Consequently, on occasions, central government can unnecessarily constrain the autonomy of local communities.

New mechanisms have been developed to improve the link between central and local government at a national level for social issues. The primary coordinating mechanism for central and local government is the Central/Local Government Forum, co-chaired by the Prime Minister and the President of Local Government New Zealand.^{44, 45}

In 2007, this forum agreed to include local government representation on any national cross-government agency groups that have been established to support a social well-being agenda, and to establish a national working party of relevant government agencies and local government to support responses to the seven priority issues identified by the metro mayors and public sector chief executives:

44 "The Forum is an opportunity to identify key issues of significance to either or both parties, agree on priorities for addressing them and monitor progress towards their resolution." <http://www.lgnz.co.nz/news/pr1080275277.html>

45 Information about the forum is drawn from information supplied by the Ministry of Social Development to the reviewer, October 2008.

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- policing and justice system
- management of alcohol and its misuse
- graffiti
- street racing
- youth gangs
- family violence
- housing.

The working group includes five metro sector local government representatives (Waitakere, Manukau, Porirua, Wellington, and Dunedin Cities). Central government agencies involved include the Ministry of Social Development, Ministry of Justice, Ministry of Education, Ministry of Health (working group members), and New Zealand Police, Housing New Zealand Corporation, Department of the Prime Minister and Cabinet, and the Ministry of Transport. A key aim for local government is to have the community outcomes process and LTCCPs influencing central government strategic priorities, funding decisions, and resource allocations.

It would be a mistake to replicate this forum in Auckland alone, as its value comes from building close links between central government's national roles and all the New Zealand metro councils. Mechanisms for Auckland must influence, rather than duplicate, the forum.

Links across councils

Links across councils in the Auckland region do not always work well. The ASB Community Trust, which granted \$10 million to large community facilities in 2007, notes,

Frequently these capital projects have a regional impact yet decisions are made by individual Territorial Local Authorities. This often results in uncoordinated and inconsistent funding or delivery of regional facilities. Many decisions appear to be made in isolation as agencies frequently operate in 'silos' and sometimes in competition with each other: this can lead to duplication of provision and services.⁴⁶

Uneven links across councils also impact on the non-government sector. The Auckland Regional Migrant Services' submission offered this perspective:

From our experience, it is clear that there are significant benefits from working regionally on issues of settlement support, greater responsiveness from business, mainstream NGOs, and also central government. Greater synergy, more effective collaboration, and more resources are available when a regional approach is adopted ARMS currently finds itself having to negotiate with 8 separate local authorities, keep informed about 8 different council plans, and work with officers from councils,

⁴⁶ ASB Community Trust, Submission to the Royal Commission on Auckland Governance [10572], p. 3 (available at www.royalcommission.govt.nz/).

all with varying levels of commitment to social and economic issues such as effective settlement and integration and maximisation of migrant talent.⁴⁷

The private sector

The private sector influences social well-being through decisions about whether and where to invest, its need for employees, and the employment provisions it gives its employees. Key players in the sector are increasingly aware that economic and social well-being are intimately connected, with organisations such as the Committee for Auckland becoming prominent in debates about the future of the region.

Although the private sector has a strong Auckland focus, and would prefer to deal with social issues on a regional basis, private sector stakeholders experienced several impediments in building good links with local authorities:

- The role of local authorities was not clear, unlike central government, whose roles were generally clear and well understood.
- There are inconsistencies in the level of interest and approach among different councils.
- Local authorities' engagement with central government was not as good as it could be.

Suggestions for improvements included the following:

- A more consistent vision of what was to be achieved would result in more consistent improvements.
- A regional body would work best if it kept its focus at the strategic level, leaving implementation to others.

These reservations and suggestions for improvement are consistent with others' views. Formal articulation of the mandate for action has been raised by some stakeholders as a way of solidifying collaborative mechanisms. The Auckland Regional Public Health Service's submission to the Commission, in supporting the Sustainability Framework, said, "It is imperative there is a strong mandate for interagency planning, preferably with some statutory framework that requires formal involvement of the key agencies"; and the Department of Labour's submission said, albeit in relation to the labour market,

Giving a stronger mandate to existing collaborative mechanisms involving government agencies, local government, NGOs and the business sector may be sufficient to improve regional decision making, and implementation at the local level ... However this approach may not be sufficient to address underlying issues where there is a need to balance differing local, regional and national imperatives.⁴⁸

47 Auckland Regional Migrant Services submission, op. cit., p. 1.

48 Department of Labour, Submission to the Royal Commission on Auckland Governance [11325], pp. 4-5 (available at www.royalcommission.govt.nz/).

Non-governmental organisations

NGOs in New Zealand have for many years played a critical role in the delivery of social services, primarily through contracts with central government agencies. NGOs' community development work, and their longstanding involvement, gives them real insight into the challenges faced by local communities, and the resources available to them. Both these factors make them potentially very valuable to local authorities in improving social well-being.

Links between local authorities and NGOs are highly dependent on the strength and continuity of the personal connections among workers. The complexities for NGOs of dealing with multiple councils that lack a unifying framework has already been noted, as has the NGOs' experience that councils vary considerably in their interest in and willingness to engage on social issues. Councils also face difficulties in deciding on the appropriate NGOs to involve, given the numbers active in some fields such as family violence. All these factors contribute to a constantly shifting network of links between NGOs and councils, which requires a considerable investment of time to maintain.

Anecdotal evidence is that local authorities increasingly use such organisations to extend their reach into communities. However, the LTCCP process is treated with some scepticism, being seen by some social service delivery agencies as having become a compliance activity, rather than something that truly involves and builds communities.

Some submissions consider the fragility of the links between the sector and local authorities to be symptomatic of a more fundamental problem:

Community Waitakere is concerned at the lack of regional cohesion within the community sector, the uneven nature of local government's relationship with the community sector in the region and the general lack of community sector visibility and voice in the region. There also remains a widespread lack of understanding and recognition of the roles the sector plays and the fundamental contribution it makes in society.⁴⁹

4.3 Serving the needs and interests of different population groups and communities in the Auckland region

Māori, Pacific peoples, and other ethnic groups, children and young people, older people, those with disabilities, and those with low incomes represent the majority of Auckland's citizens, yet their particular needs and interests can slip out of focus in the usual planning and priority-setting processes. All stakeholders wrestled with the question of how to get these voices heard, with most preferring a means of bringing them into the decision-making process – a step further than consultation.

49 Community Waitakere, Submission to the Royal Commission on Auckland Governance [10263], p. 2 (available at www.royalcommission.govt.nz/).

There was very strong support for elected bodies to reflect the diversity of the people they represent, with both Māori and Pacific attendees seeing this as a primary issue for the legitimacy of such bodies. As one said,

There have been many Māori who have tried to engage with local authorities via “democratic” elections, but unless they portray themselves as being anti-Māori they stand next to no chance of being elected. ... Having guaranteed Māori seats in Auckland local authorities would ensure a voice.

... Local government authorities market themselves very well as being the voice of the community. This can only happen if that voice includes Māori realities.⁵⁰

Many have made submissions to the Commission on the best way to achieve the participation of Māori in local democratic decision making. Many of those submissions have advocated mandatory Māori wards, or guaranteed seats.

Pacific stakeholders have also argued for guaranteed representation, on the grounds that current systems dilute Pacific voices so their issues are not heard.

The Office for Ethnic Affairs reports that the level of engagement by government (both local and central) and the level of participation by ethnic communities in decision-making processes have been highlighted by ethnic communities as important in achieving successful community.

The issue (how to ensure representation on elected boards) is not discussed here; rather, the discussion focuses on the assessment of these groups of the effectiveness of current arrangements, and ways to improve them.

Submissions concerning other groups, such as the elderly and those on low incomes, have not looked for representation, but for processes to bring their perspectives into planning processes, and into measuring effectiveness. A similar approach has been advocated for the inclusion of children’s needs and interests, and those of people with a disability.

Māori

Māori as mana whenua and as taura here shared the view that “a lot of decisions about what goes where are currently dictated by District Plans, and a lot of barriers are created by documents that Māori don’t participate in.” Once again, transport decisions were cited as having a significant impact on social well-being, without decision makers using the opportunities they had to improve the lives of more marginalised citizens.

Current consultation structures were characterised by some as engaging Māori in ways that effectively “neutralize the Māori voice through dealing with small issues.”⁵¹ There is no strategic discussion between Maori and the local authority, and little debate about what the most important issues are that face the local authority.

50 Paul Stanley, Operations Manager, Ngaiterangi Iwi Runanga, Tauranga Moana, formerly General Manager Waipareira Trust, communication, 15 October 2008, pp. 3 and 4.

51 Paul Stanley, op. cit., p. 3.

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The question of how to ensure the right involvement of Māori as mana whenua, and as taura here, has been raised, and forcefully discussed, in the meetings held during the writing of this paper.

Mana whenua said current practices could work to obscure their proper role. They put forward the principles that should apply for deciding the appropriate roles of Māori as mana whenua and taura here:⁵²

- English is the language of law and commerce. Māori is the language of wairua. It is the responsibility of mana whenua to bring the two together – they have the kaitiaki/responsibility to do this.
- Mana whenua have responsibility for kaitiaki over people and the environment. Structures and processes must give mana whenua kaitiakitanga over the things for which they have a mandate.
- Proper representation will lead to healthy people.
- Non-Māori structures must be supportive of mana whenua, and primary engagement must be with mana whenua. Mana whenua must then decide whether and how to engage with taura here.

This would play out in practice as follows:

- Local government and mana whenua have complementary responsibilities, and these should work well together (integrating law and commerce and wairua).
- Local body representation – mana whenua must have more seats than taura here.
- There is a need to increase recognition of rohe boundaries. Currently local authorities focus only on their own patches, without realising that iwi cross the boundaries.
- Central government should devolve regulatory powers about land to mana whenua, not local government.
- Mana whenua should develop criteria and decide which issues should be placed on the agenda for discussion between council and mana whenua, and which on the general agenda – this could be discussed with council. At present issues are often put in front of the wrong people.
- Issues over which mana whenua have kaitiakitanga (e.g. whenua, forests, rivers, waters, cultural heritage) should be discussed only with mana whenua.
- For issues that involve taura here (e.g. social well-being), mana whenua should decide how to involve taura here.
- Create a template of vision, principles, and aspirations of mana whenua and overlay it on local government processes.

52 This is a summary of the discussion with mana whenua stakeholders carried out in the course of this review.

There is a model that puts this largely into practice already – in Rodney District the taumata is the iwi, and they (rather than council staff) decide whom to invite to participate in the process.

Those who are vulnerable right now are largely taura here. One stakeholder reflected both mana whenua and taura here views when he said:

Urban Māori authorities have an important role to play in the development and redevelopment of cities such as Auckland. Although it is not my intent to re-litigate the Waitangi Tribunal Case 414, it is pertinent to recognize that the Waipareira Trust itself is seen (by the Waitangi Tribunal) as a Treaty partner. This recognition further argues the importance of a clear voice coming from urban authorities.

The LGA 2002 on the other hand is imprecise about what is and which Māori should be consulted. Māori are diverse, some are connected with their Māoriness and some are not. Some know their marae, their waka and the various nuances that make up being Māori, some can only just pronounce Kia ora.

Urban Māori authorities ... are sometimes seen as lighthouses of hope for many Māori. They form an incredibly important component of adjustment and voice for the fabric of Waitakere in Tamaki makau rau.⁵³

Māori are not simply the vulnerable; Treaty settlements have given them an economic base from which they are becoming part of Auckland's economic powerhouse. Local authorities will need to work out how to work with Māori holistically, as serious economic players, as some of the most vulnerable of Auckland's citizens, and as iwi with kaitiaki responsibilities for the land on which Auckland sits.

Pacific peoples

The data in section 3.1 are a dramatic representation of the degree of socio-economic disadvantage experienced by Pacific peoples in Auckland, where 40% live in decile 10 neighbourhoods. The *Social Report 2008* notes that, when comparing the circumstances of Pacific peoples in the mid-1990s to the present, "Pacific peoples, like Māori, have experienced real gains in wellbeing over this period. While a number of these improvements have been greater than for the total New Zealand population, Pacific peoples' outcomes overall are poor compared to the total population."⁵⁴

At present many Pacific people work long hours in low-paid jobs, and any time they have left from paid work is fully taken up with family and church. There is, to them, little evidence that local government is willing to deal with the issues of most concern to them. Pacific peoples are concentrated in the poorer neighbourhoods, where there is a high concentration of liquor outlets and fast food shops, limited areas for children to play, and few transport facilities. Shop owners rarely live in the area, and treat it as simply a way to make money, contributing little to civic pride.

53 Paul Stanley, op. cit., p. 2.

54 Ministry of Social Development, *Social Report 2008*, p. 131 (available at <http://socialreport.msd.govt.nz/introduction/social-wellbeing.html>).

Pacific stakeholders considered their needs and interests were not well served by the current arrangements. Guaranteed representation for Pacific peoples was supported by most. One of the submissions from a Pacific organisation said,

[If separate wards are not created] The minority populations with potential voters who are spread across all the wards (electorates) would continue to not access or penetrate this model. This is a model of alienation, un-workable and massively inequitable.⁵⁵

There were some stakeholders who saw guaranteed representation as a useful way to start getting people involved.

Ethnic communities

Auckland's diversity is growing, and will be dominant in future years. Already almost 40% of Auckland's people were not born in New Zealand (about a third of these were born in English-speaking countries). Two-thirds of future growth will come from immigration. At the 2006 census, almost a quarter (24%) of all children under 15 years in Auckland were Pacific Island, 18.3% were Asian, and 17.6% were Māori. Growth, and diversity, must be the bedrock of planning for the future.

Ethnic communities have identified two dimensions to the relationship with local authorities: the level of engagement by the local authority in issues that concern the community (often to do with settlement, or access to mainstream services), and the ways local authorities help the communities to participate in decision making.

The experience of ethnic communities with local government has varied with different councils. Some have developed partnerships or memoranda of understanding with multi-ethnic communities. This approach has been successful when it has been combined with active measures to improve access to council services, but it is not widespread.

Communities increasingly want representation, especially the more settled communities, who increasingly want to be part of the civic structures, and are looking for ways to upskill so they can engage. Different communities are at different stages, with refugee communities strongly focused on settlement and needing considerable community development. Those who have suffered torture and trauma rely heavily on central government services – health, housing, social development, and education.

Children and young people

Auckland's population is the youngest of any region in New Zealand, and will remain so in the future. The activities of local government in managing the urban and suburban landscape have a profound effect on the lives of children and their carers, and of young people. Those who have fewer resources in their homes rely greatly on recreational facilities provided by local government, yet more than one stakeholder commented that the quality of playgrounds gave an accurate picture of whether a neighbourhood was rich or poor.

55 Waitakere Pacific Board, Submission to the Royal Commission on Auckland Governance [11273], p. 10 (available at www.royalcommission.govt.nz/).

Stakeholders were aware and appreciative of the efforts councils were already making to make facilities more widely accessible, such as dropping the admission prices for swimming pools.⁵⁶

A more systematic approach across all of councils' business was suggested by some, who thought a child impact and youth impact assessment could usefully be introduced into all planning processes. This would reduce the likelihood of unintended negative impacts from urban design and transport decisions. The Office for Children had worked with the Auckland City Council to conduct a child impact assessment for a neighbourhood housing development, pulling together information about what they wanted in their local area, but lacked the resources to replicate this across all the local authorities.

Older people

Age Concern New Zealand summarised the views of many stakeholders in its submission:

Local government ... needs to be more responsive to the needs of the increasing numbers of older people living in the cities of Auckland.

...

[Local government could respond] to their needs with affordable rates rises, affordable transport options and affordable housing.⁵⁷

Other stakeholders noted the many other areas where local authority actions directly affect the lives of older people:

- the safety of public spaces
- access to social, sporting, and recreational opportunities
- easy access to support services
- easy access to adult education communities
- inclusion of all community groups, ages, and ethnicities in decision-making processes
- sufficient accommodation to meet the needs of elderly people wanting to live on their own in a safe and communal environment
- sufficient accommodation to meet the needs of elderly people needing to go into care facilities that provide appropriate care and opportunities for positive living where residents can live safely with access to appropriate health professionals, social services, and minders/carers

56 Manukau City Council has five indoor public swimming pool complexes that are open every day: in Mangere, Otara, Pakuranga, Papatoetoe, and Manurewa. In summer outdoor pools at Papatoetoe, Otara, Mangere, and Totara Park are also open to the public free of charge.

57 Age Concern New Zealand Inc, Submission to the Royal Commission on Auckland Governance [1475], p. 2 (available at www.royalcommission.govt.nz/).

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- funding opportunities for NGO not-for-profit organisations to allow them to continue to provide services to communities.⁵⁸

Active participation of older people in decision-making was generally accepted as the best way to make sure local authorities served their needs and interests. Age Concern New Zealand commended the WHO publication *Global Age-Friendly Cities*⁵⁹ as providing many concrete, achievable actions appropriate for Auckland's development.⁶⁰

People with a disability

People with a disability are directly affected by the physical infrastructure of the places they live and work in. Most stakeholders who commented on issues for people with a disability said that access to local government services and facilities, and participation in decision making, are the mechanisms that would make the greatest difference to their quality of life, as they are for older people, and children and young people. DPA (New Zealand) – the umbrella organisation representing people with disabilities, the organisations involved in advocacy on their behalf, and service providers – puts the point:

The vision of the *New Zealand Disability Strategy* – “a society that highly values our lives and continually enhances our full participation” – will start to be fulfilled when Councils and DHBs work with disabled people and their families/whanau.

...

Consultation with disabled people and their families/whanau must happen before, during and after planning – it should not be an add-on.⁶¹

Serving the needs of different communities – a place-based approach

What is most striking about social well-being in Auckland is the spatial distribution of advantage, and disadvantage. Local authorities are uniquely placed to understand, articulate, and deal with this issue – they, of all structures, are well placed to see communities “in the round”. They are hampered by a significant lack of information. (In compiling this report it became evident that there were no maps that combined multiple sources of data to show all the challenges faced by a community, and the resources that are available to deal with them.)

Understanding the needs and interests of different population groups is necessary if central and local government are going to design effective interventions; understanding the constraints and resources of particular localities is necessary if local communities are to be empowered to take action for themselves.

58 Age Concern Counties Manukau Inc submission to the Royal Commission on Auckland Governance (available at www.royalcommission.govt.nz/).

59 World Health Organization, *Global Age-friendly Cities: A Guide*, WHO Press, Geneva, 2007 (available at www.who.int/ageing/publications/Global_age_friendly_cities_Guide_English.pdf).

60 Age Concern New Zealand Inc submission, op. cit., p. 2.

61 DPA (New Zealand), *Inclusive Communities: Guidelines about Disability for Territorial Authorities and District Health Boards*, 2007, pp. 2-3 (available at <http://www.dpa.org.nz/publications/index.html>).

4.4 Summary of stakeholder perceptions

Two issues stand out as agreed among stakeholders:

- The legislative requirements of the LGA 2002 have triggered increasing interest and involvement in social issues by local authorities, but the breadth and depth of their engagement is highly variable.
- Most local authorities do not systematically use the power of their core business – regulation of land use, provision of public transport, provision and placement of facilities – to improve the lives of their citizens, nor do they use them to improve the position of the most disadvantaged places and people in the region.

There are other common perceptions among stakeholders:

- The role of the mayor or other strong influencer is key in determining the visibility and weight given to social issues.
- A powerful articulation of vision and values (such as Waitakere’s “eco city” vision) is important as a way of unifying and galvanising a community.
- Overall, Auckland is better at planning than implementing.
- It is difficult to see how all the plans link together, and a sense of overall strategy for the people of the region is missing.
- Links with central government are “patchy but improving”; and tend to be focused around particular issues (such as the Tamaki Transformation Project or youth gangs) rather than being a systematic engagement across a broad domain. The Central/Local Government Forum is changing this at the national level, and the review of tertiary education in the Auckland region is likely to be an exception to this.
- Boundary overlaps and misalignments cause significant wastage, confusion, and paralysis.
- Current central government policy settings often do not take account of neighbourhoods, so services are not tailored to those who need them. This tended to be a more common view among NGOs than other stakeholders.

Local government has the opportunity and the obligation to help every citizen realise his or her potential. My analysis of submissions and stakeholder perceptions suggest there are some underlying design and capacity issues that are limiting the effectiveness of local government’s involvement in social well-being:

- The greater articulation of the outcomes communities want, and of their current concerns, which has occurred under the community outcomes processes of the LGA 2002, is not matched by readily available research, analysis, and advice to allow local authorities to make well-informed choices about the actions that are most likely to succeed.

- It is very hard to get place-specific data about the socio-demographic characteristics of communities/neighbourhoods, the social challenges they face, and the resources available to them. (The resources include their own social capital; resources provided by central and local government, such as social services, facilities, and infrastructure such as roads, public transport routes, and social housing; and those provided by the private sector, such as employment.) It is these place-based factors that illuminate what the challenges are, and what resources the community can access to meet the challenges.
- There is insufficient emphasis in current plans on practical actions – targets, timelines, and clear delivery paths.
- There are few built-in mechanisms that allow for accurate learning about what worked (or did not work) for Auckland plans or cross-sectoral strategies – that “check up on” what was delivered, what other resources have become available, and what the results have been – so there is little opportunity for councils and others to learn from experience and seize new opportunities.
- Local authorities use a variety of mechanisms to seek out the interests and concerns of different population groups. These are most highly developed for Māori. Mechanisms to engage with Pacific people are also becoming more common. There is little agreement across stakeholder groups about the effectiveness of the mechanisms (with the possible exception of Rodney District’s engagement with mana whenua), and varied views of the importance of representation in its own right compared with other mechanisms.
- There are no mechanisms in play to actively seek out the needs and interests of other groups, such as children and young people, older people, people with a disability, or people on low incomes. Yet these are groups who are often vulnerable to social disadvantage.

5. Future directions

This section proposes principles for redesign of the governance arrangements for the Auckland region, based on the information and analysis in the preceding sections of stakeholders’ views, demographics, concepts, and context, and on good practice in engaging and transforming communities. It sets out two broad options for the future roles and functions of local government in improving social well-being. Questions of boundaries, and of the best split between regional and local responsibilities, are also canvassed.

5.1 Principles for the future

Some principles for redesign emerge from the analysis in the preceding sections:

1. The achievement of social well-being needs to be thought of as a **system** involving many players.
2. The core elements of any new system should be formally **mandated**.
3. There needs to be **strong leadership and advocacy** for social issues.
4. There must be a decisive formulation of the issues, and **clear public articulation** in local terms.
5. Critical **capacities** must be built into the structure and funded: social mapping; analytical and research capacity; making sure the vision and values are driven through into action.
6. Critical **participation** must be built into the structure and funded: Māori, Pacific, other ethnic groups, NGOs, children, older people, people with disabilities, and people on low incomes.
7. **Effective consultation** on the right issues is more important than comprehensive consultation on everything.
8. The core decision-making body must include all those who have **accountability** for social outcomes, and can commit resources. This means central government must be a part of the structure, not simply linked by process.
9. The decision-making body must be big enough to **redistribute resources** to achieve social goals. This means also that the core decision-making body should be regional, and regional boundaries in central and local government should be aligned.
10. **Results** must be publicly visible and verified, at the local as well as the regional level. The audit function should be formalised.
11. **Action** should take place as close to the ground as is feasible, and analytical and research capacity (including place-based social mapping) should serve regional, local, and issue-specific actions.

5.2 Broad options for roles and functions of local government

At present three serious structural gaps exist. Within local authority structures those who command the greatest resources (urban planning, land use, and transport) are not explicitly required to achieve performance targets to improve social objectives, though progress against social indicators is measured.⁶² At the central government level those

62 This conclusion is drawn from a reading of the regional plans and strategies on the Auckland Regional Council's website.

who provide social services (education, health, policing, social development) have weak incentives collectively to set and achieve explicit targets for Auckland. Across central and local government there is no overarching social well-being strategy that drives the actions of all the players, and provides a road map for the private sector.

We need to move from reliance on voluntary processes such as the Central/Local Government Forum, to robust structures with clear powers, accountabilities, and audit processes, to knit all the players into a well-functioning system.

The greatest improvements in social well-being will flow to the Auckland region when all those who have the ability to commit significant resources are at the decision-making table. This means, for the regional authority, the mayor and the chairs of the regional authority's committees, whether the committees deal with social, economic, environmental, or cultural issues. It means, for central government, the chief executives of the major social agencies, as it is their recommendations to Government that help shape national policy. The advantage of having those with authority to commit at the table will be lost if substitutes are allowed. Consistent membership will provide the opportunity to build up personal relationships and confidence among members. The experience of the Taskforce for Action on Violence Within Families⁶³ has shown the value of such personal connections.

Those, such as the business sector, whose decisions profoundly affect outcomes must also be present. Auckland is built on the land of the mana whenua; they must also have a legitimate role in the decision-making process.

Two options

There are two broad approaches that can be taken:

Option 1: a collaborative approach, which

- a. maintains the current accountabilities of central and local government, but bases actions by both levels of government on a jointly agreed social well-being strategy for the Auckland region for the medium and long term, and jointly agreed critical social issues which will be priority areas for action in the medium term, and
- b. mandates collaborative action across all sectors.

We envisage new governance which will ensure cross-sector collaboration in finding solutions. Cross-sector collaboration must be a design principle. Only a collegial effort will make sufficient impact.⁶⁴

63 Members of the task force include the Chief Executive of the Ministry of Social Development (chair), and the chief executives of the Accident Compensation Corporation, the Ministries of Education, Health, Justice, Pacific Island Affairs, Te Puni Kōkiri, Women's Affairs; the Commissioner of Police; the Chief District Court Judge and the Principal Family Court Judge; the Children's Commissioner and the Chief Families Commissioner; the Chief Executives of CCS Disability Action, Jigsaw, the National Collective of Independent Women's Refuges, Relationship Services, and the Tamaki Community Development Trust. A representative from the task force's Māori Reference Group and a representative from its Pacific Advisory Group are also members.

64 Committee for Auckland, Submission the Royal Commission on Auckland Governance [11020], p. 6 (available at www.royalcommission.govt.nz/).

- Option 2:** A regional devolution approach, which gives a regional body (the proposed Social Issues Board), which would include the chief executives of central government social agencies, the power to make decisions on the social well-being strategy and critical social issues as above, and the power to
- a. decide on the redistribution of resources that may be necessary to make real progress on the critical issues (For example, *if giving every child the best start in life* were agreed as a critical social issue, then the regional body could decide that families with newborns would have first call on services such as budgeting advice, access to State houses, early childhood education for other children in the family, parenting advice and support, and other help if needed, such as work or training opportunities), and
 - b. set performance standards for services, and targets for changes in social well-being.

In both approaches the Social Issues Board is a direction-setting, not a service delivery, body. The critical difference between the two models is that the first is based upon collaboration across sectors and on influencing central government, and the second upon regional decision-making power, where central government agencies are part of the decision-making body. Under the first model the Auckland Sustainability Framework and the Regional Sustainability Development Forum could be embedded as the foundation for collaboration and for debating emerging issues. Under the second model the most important debates and decisions about actions would be made by the Social Issues Board.

It is the review team's opinion that Option 1 is likely to be insufficient to bring the necessary coherence, accountability, and emphasis on results. Option 1 does not entrust the regional body with decision-making powers; it is the facilitator of collaboration at the regional level, and a key influence on central government policy making.

The regional body's powers would not be unfettered under Option 2. Terms of reference, approved by Cabinet and agreed with the regional authority, could give the Social Issues Board freedom to act, with a responsibility to report back to the Cabinet (and to the regional authority) before taking actions that may provide significantly different levels of social services and support to different groups of Auckland citizens.

Common elements

Other changes, to put into effect the design principles above, are common to both models:

1. a **Minister for Auckland** responsible for being the central champion for Auckland in the government's decision-making processes, particularly during the annual budget cycle.
2. the **regional council** being responsible for articulating the vision for Auckland's people, and the values that will guide their decisions.

(Points 1 and 2 have broader application than the social area alone.)

3. a **regional decision-making body (the *Social Issues Board*)** whose members would be
- the mayor and two representatives of the chairs of each of the regional council's major committees, appointed for three-year terms
(This is necessary to ensure social issues are accepted as part of the business of all facets of the regional authority's work.)
 - two representatives of the mayors of the local councils in the Auckland region
(No substitutes would be permitted.)
 - the same representative or consultative structures for Māori as mana whenau, and as taura here, as is decided by the Commission for the regional authority itself.
(As a minimum, ways to give room for both perspectives should be established.)
 - the same representative or consultative structures for Pacific peoples as is decided by the Commission for the regional authority itself
 - the same representative or consultative structures for members of Auckland's other ethnic communities as is decided by the Commission for the regional authority itself.

The Social Issues Board would review and debate achievements in social well-being, and priorities for the future, with representatives of the private sector, the philanthropic sector, and the non-government sector annually. Given the size and complexity of the sectors it may take some experimentation to find ways to do this that are worthwhile for all parties. The board may choose also to consult on specific issues.

The board would also have the ability to call in experts to assist it for a period on particular issues, for example, expert facilitators from community organisations who work with youth at risk; academics or other researchers who have expertise in place-based initiatives to simultaneously improve employment, education, and family functioning in a neighbourhood; and those with expertise in issues for migrants and refugees.

In Option 2 the board's membership includes the chief executives of the key central social agencies (Health, Education, Social Development, Justice, Police, Housing New Zealand), who would have the achievement of substantial progress on the critical social issues in Auckland as a deliverable in their performance agreements. As with other full members of the board, no substitutes would be permitted.

The Social Issues Board would be responsible for

- a. identifying social well-being outcomes for the Auckland region for the medium and long term

These should be established by community outcomes consultation processes in accordance with the LGA 2002, but with significant investment to ensure groups with common interests (such as Māori, Pacific people and other ethnic communities, children and young people, older people, and people with disabilities) have had the opportunity to contribute to the decision.

- b. the social well-being strategy for the Auckland region for the medium and long term, and the critical social issues that will be the priorities for action

Strategically significant issues will be the focus, not all issues that need attention; examples of possible areas are given in section 3.3 above. Issues should be established on the basis of current social well-being statistics for Auckland, projections for the future, and consultations that actively seek out the views of those most likely to be affected. Again, it is important to ensure that groups with common interests (such as Māori, Pacific peoples, and other ethnic communities, children and young people, older people, and people with disabilities) have had the opportunity to contribute to the decision. A special effort should be made to consult with the most deprived neighbourhoods.

There needs to be practical transparency in these processes. This does not mean publishing consultation schedules for strategic plans, but rather clear public articulation by the Social Issues Board of “what the issues are”; documentation of the processes used to inform the board’s thinking, and “plain speaking” information about what has been decided and why.

- c. performance standards for the services delivered under the strategy, and time-bound targets for progress on the critical social issues
- d. deciding who will take what action, and report-back mechanisms and timing
- e. the siting of regionally significant facilities.

The Social Issues Board’s intention in these areas would be published, and have the same degree of accountability as government agencies’ statements of intent. The statement should include outcome targets, including “floor targets” that specify a minimum achievement level for all citizens. For example, if public transport were picked as a critical social area, the board may set a target such as “no citizen will live more than 400 metres from a public bus service”.

The Social Issues Board’s terms of reference would be approved by Cabinet, and agreed by the regional authority.

- 4. support for the Social Issues Board by a small, highly skilled **analytic/research/advisory group** responsible for
 - a. the full range of social policy advice required to support the Social Issues Board, including up-to-date knowledge of place-based social action/intervention internationally

- b. socio-demographic information at the regional, sub-regional, and neighbourhood levels
- c. “social mapping”, to document the full range of challenges and resources available in areas identified for priority action
- d. a monitoring and evaluation programme, which would include a schedule of published evaluations of progress in the critical social areas

Neighbourhood level performance should be monitored to avoid pockets of non-achievement being obscured by the average.

- e. a social audit every three years, which measures social well-being and documents the accessibility of services, to inform community consultations on social outcomes, and board decisions on future critical social issues.

Care needs to be taken to avoid measuring more indicators of social well-being than necessary. An early task of the advisory group should be to establish the well-being domains the board wishes to track, and the minimum set of indicators for robust measurement.

The group would draw on the data and information collected by the regional authority, local councils, government agencies, and others, rather than collecting the information itself to carry out its work.

Central government could be invited to contribute technical and other resources to build this capacity. For example, Statistics New Zealand information is not aggregated on a regional basis, nor are there composite maps combining geographical information about facilities, social need, business location, transport corridors, social service distribution etc.

The Group would be separate from the Social Issues Board, and housed in the Regional Authority for “pay and rations”. Its data and information would be publicly available. Its work programme would be set by the Social Issues Board.

In Option 2 the body would be co-funded by central and local government.

- 5. an **external audit function**, to monitor and report to Parliament on performance against published intentions

This role could sit with the Office of the Auditor-General, who has a statutory duty to audit LTCCPs, although the audit focus is on the systems that underlie what goes into an LTCCP rather than auditing performance against community outcomes.

- 6. **legislated common boundaries** for the Auckland region for local and central government agencies, with a timetable for achieving them.

There are two issues with boundaries: first, current council boundaries may not represent true communities of interest; and second (and more frequently raised by stakeholders), there is little commonality among the boundaries of central government agencies and current councils. The first issue – that current local

council boundaries may not represent true communities of interest – is significant now, and will become more so if more decision making occurs at the local level. Aligning council boundaries with natural community areas will help build social capital, and perhaps greater engagement by citizens with their local councils, but it is the second issue that causes waste and confusion among the multiple agencies dealing with a common social issue.

6. Recommendations

It is recommended that the Royal Commission on Auckland Governance

1. *Accept* the principles for redesign of the governance arrangements for the Auckland region set out in this paper:
 - a. The achievement of social well-being needs to be thought of as a **system** involving many players.
 - b. The core elements of any new system should be formally **mandated**.
 - c. There needs to be **strong leadership and advocacy** for social issues.
 - d. There must be a decisive formulation of the issues, and **clear public articulation** in local terms.
 - e. Critical **capacities** must be built into the structure and funded: social mapping; analytical and research capacity; making sure the vision and values are driven through into action.
 - f. Critical **participation** must be built into the structure and funded: for Māori, Pacific, other ethnic groups, NGOs, children, older people, people with disabilities, and people on low incomes.
 - g. **Effective consultation** on the right issues is more important than comprehensive consultation on everything.
 - h. The core decision-making body must include all those who have **accountability** for social outcomes, and can commit resources. This means central government must be a part of the structure, not simply linked by process.
 - i. The decision-making body must be big enough to **redistribute resources** to achieve social goals. This means also that the core decision-making body should be regional, and regional boundaries in central and local government should be aligned.
 - j. **Results** must be publicly visible and verified, at the local as well as the regional level. The audit function should be formalised.

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- k. **Action** should take place as close to the ground as is feasible, and analytical and research capacity (including place-based social mapping) should serve regional, local, and issue-specific actions.
2. Agree on the common elements of the new arrangements for improving social well-being (more fully described in section 5.2):
 - a. a **Minister for Auckland** responsible for being the central champion for Auckland in the government's decision-making processes, particularly during the annual budget cycle.
 - b. the **regional council** being responsible for articulating the vision for Auckland's people, and the values that will guide their decisions.

(Elements a and b have broader application than the social area alone.)

- c. a **regional decision-making body (the Social Issues Board)** whose members would be
 - the mayor and two representatives of the chairs of each of the regional council's major committees
 - two representatives of the mayors of the local councils in the Auckland region
 - the same representative or consultative structures for Māori as is decided for the regional authority
 - the same representative or consultative structures for Pacific peoples as is decided for the regional authority
 - the same representative or consultative structures for members of Auckland's other ethnic communities as is decided for the regional authority.

In Option 2 the board's membership includes the chief executives of the key central social agencies (Health, Education, Social Development, Justice, Police, and Housing New Zealand).

The functions of the Social Issues Board would include

- identifying social well-being outcomes for the Auckland region for the medium and long term
 - establishing the social well-being strategy for the Auckland region for the medium and long term, and the critical social issues that will be the priorities for action
 - setting performance standards for the services delivered under the strategy, and time-bound targets for progress on the critical social issues
 - deciding who will take what action, and how and when they will report back
 - deciding the siting of regionally significant facilities.
- d. an **analytic/research/advisory group** to support the board.

- e. an **external audit function**, to monitor and report to Parliament on performance against published intentions
 - f. **legislated common boundaries** for the Auckland region for local and central government agencies, with a timetable for achieving them.
- 3 *Decide* which of the two options presented in the paper is to be accepted for the membership and powers of the Social Issues Board: Option 1 (collaboration) or Option 2 (devolved regional decision-making). The authors recommend Option 2.