Small steps and giant leaps at Te Aroha Noa

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Abstract

This paper explores the micro-processes involved in family change. It is part of a wider series of studies undertaken across several nations that sought to develop our understanding about the ways in which community centres contribute to individual, family and community change. The paper reports upon a case study of one family which attended Te Aroha Noa Community Services in New Zealand and uses a detailed examination of a particular incident to shed light upon the theory of change which underpinned the work of the Centre. The paper also draws upon life history material from the parents who sought assistance from Te Aroha Noa and material collected in focus group interviews with staff, volunteers, board members and other service users at the Centre. The paper concludes that because they typically provide a wide range of different types of services and are able to respond to diverse needs, community centres are ideally placed to create and sustain change momentum within families.

Key words: community centre, support relationship, parenting, change

Introduction

The exploratory study discussed in this paper sought to identify micro-processes and stages of family change. The setting for the study was a community centre (Te Aroha Noa Community Services) in Aotearoa/New Zealand. We begin with a discussion of contextual matters including nationally relevant factors as well as the community and organisational contexts that influence the nature of practice. We then consider the population served by Te Aroha Noa, the outcomes sought by the agency through its practice and give some consideration to the way in which staff at the centre articulate their theory of change. Our attention then shifts to the methods used in this small case study. Finally our attention moves to an analysis of the details of early work undertaken between Te Aroha Noa and the whanau[1] case study. We use two extracts from the dataset to help structure our discussion. Through this we attempt to highlight the small steps towards change, focusing upon the nexus between centre practice/perspective and family practice/perspective. In our discussion we trace the origins of the interactions between the whanau and the centre and the ripples of a small incident for the whanau in terms of their journey of growth and change. We suggest that the flexible and responsive orientation of community centres opens up new possibilities for change in families and that we can observe this by documenting the resolution of small incidents and listening carefully to the stories families and staff tell about the things they do together.

National context

New Zealand is a small island nation of approximately 4 million people located in the south west of the Pacific Ocean. To the south lies the great white expanse of Antartica, to the northeast lies South America and to the northwest lies Australia. Scattered to the north are the many islands of the Pacific nations. Initially settled by the magnificent seagoing Polynesian migrations, European colonists in the 18th century came to Aotearoa/New Zealand predominantly from the United Kingdom and the Republic of Ireland. More recently migrations from Asia, and to a lesser extent Europe and the African continent have all contributed to the cultural mix of our small nation.

Aotearoa/New Zealand has a constitutional founding document, the Treaty of Waitangi (Te Tiriti o Waitangi) signed by the British Crown (the colonising power) and Maori tribal chiefs. This document protects the rights of Maori (tangata whenua) and provides validation for Tauiwi (all those who have settled in New Zealand after Maori) to live in this land. The Treaty formally defines the relationship between Maori and the Crown and identifies three principles that will be used in managing this relationship. These principles are: partnership, protection and participation. The Treaty has had a troubled history, being ignored for almost 100 years by the Crown. Relatively recently however this has begun to change and there is now a Treaty settlement process between the Crown and Maori which provides for material compensation and redress primarily for land confiscations to iwi (tribal groups). Dealing with the consequences of colonisation and the loss of mana (respect) and recognition of Maori as true political partners has been more difficult.

The commitment of social and community workers in Aotearoa/New Zealand to embrace new ways of working and be challenged by alternative frameworks is part of a search for models that support families and communities. There has been a particular emphasis upon drawing on the expertise of the tangata whenua (Maori) and numerous frameworks that derive from Maori traditional practices and worldviews have been developed. The Whare Tapu Wha model (Durie, 1995) provides an alternative, holistic way of understanding health and wellbeing. This model emphasises the self as a social being with spiritual, psychological, physical and kinship dimensions. Models of practice such as this are used widely in both statutory and non-governmental organization (NGO) settings (Sanders & Munford, 2001; Walsh-Tapiata, 2002).

With the birthplace of the welfare state following World War 2 and the great depression, Aotearoa/New Zealand was often championed internationally as caring for its citizens from the 'cradle to the grave' and as a 'great place to raise kids' (Shirley, et al., 1997). This image of a safe, supportive environment for families has been challenged over the past two decades, as Aotearoa/New Zealand again led the world in the implementation of new right economic and social policies that placed an increasing emphasis upon individual rather than collective responsibility for society's most vulnerable citizens (Atwool, 1999).

The past two decades have seen a process of almost continual reform of state activity and an unprecedented pace of change. Reforms to education, welfare (including income support and child protection), health and housing policy have reshaped the way in which support is provided to families and available evidence suggests cause for concern about the impact of these widespread changes on children in particular (Blaiklock, et al., 2003). While the Aotearoa/New Zealand economy appears to be more buoyant than at any time recently (unemployment is at record low levels and the government is consistently achieving budget surpluses) 25% of the country's children are estimated to be still living in poverty and the country was recently ranked 3rd out of 27 OECD nations for child homicides (UNICEF 2003). These two statistics alone suggest cause for concern about the capacity of our society to care well for children and indicate the need for reflection upon how we go about supporting families in the important task of raising children.

A mixture of NGOs, private providers and central government provide services to children and families. Historically, central government, through the state welfare agency Child Youth

and Family Services, has been responsible for child protection investigations and youth justice work. NGOs and private providers have delivered supportive and therapeutic services and often provided out-of-family care for children under licence to the state. This division of responsibilities is currently under review and it is possible that power to investigate and report on child protection matters will at some time in the future be delivered under contract by NGOs.

While there is a significant level of activity in the NGO sector directed at supporting families with children, much of this work is delivered under contract to the state, often with only partial funding (Munford & Sanders, 1999). This means that state policies and priorities largely determine who receives support and the nature and length of any support given. NGOs can draw on private sources of funding to enable them to 'top-up' partial-funding contracts, to develop innovative services or deliver to populations not deemed by government as sufficiently needy. However, in reality the amount of private funding available across the country for such activity is very small. This means that central government policy determines the shape of the NGO sector to a considerable extent. There are no specific funding streams that support the functioning of community centres. Organisations like Te Aroha Noa that wish to adopt a community centre model must draw together funding from a variety of sources and invest time and energy in developing styles of practice that give effect to community centre principles while at the same time meeting disparate funding specifications.

The Children, Young People's and their Families Act 1989 (CYPF Act) was passed into law during the significant period of social and economic reform identified above. This legislation codified the relationship between the state and families and set the legislative framework for NGOs when it involved work on behalf of the state. The Family Group Conference (FGC) as the process for resolving care and protection and youth justice issues was formally established in the Act. The FGC is a process for mediating conflicting interests and identifying responsibilities and solutions, and its development has not been without its problems (Connolly, 1990). Responding to calls for less state involvement in the lives of families, and in many ways reflecting the increasingly individualistic orientation and emphasis on self responsibility that had characterised the reforms of the 1980s and 1990s, the CYPF Act gives significant powers to families through the FGC process. It requires that children, particularly Maori children, not be moved outside of their family network when care and protection issues arise, except as a last resort.

In some ways, the FGC represented a truncated version of processes that had been developed and used with Maori families during the 1980s and 1990s. Many NGOs still use these more comprehensive processes in daily practice. The CYPF Act also established the paramountcy principle; that the safety and interests of the child must be given absolute priority in decision-making. In practice these two principles, the paramountcy principle and placement out of the family only as a last resort, can conflict with each other, and the years since the legislation was passed have consumed much policy, practice, academic and popular debate about how to achieve these goals in practice.

Community context

Te Aroha Noa operates in a community that has a high proportion of Maori and Pacific Islands families. The locality is often described as an area of high social and economic deprivation. The community has experienced the effects of more than two decades of economic restructuring and had to address issues of material impoverishment (Munford & Sanders, 2001). Issues of culture have been prominent as the local indigenous population have worked to find ways to encourage young people to find positive role models that counterbalance the attraction of harmful activities, such as gang life and substance use. Many parents identify risks to

their children associated with these sorts of issues, and face very real challenges in trying to keep them safe.

Organisational context

Te Aroha Noa means 'unlimited love' in Maori and this name was intentionally chosen by the organisation to represent its core values. On its website, the organisation describes its mission in the following way:

> Te Aroha Noa has increasingly realised that not only must it continue to deepen its links to the wider life of the community but it must become community – 'To Turangawaewae' (A Place to Belong). A place of nurture and safety, a sanctuary, for those who may have few other people to truly support them to become who they truly want to be.

This sense that change is possible and that it emerges from within the contexts of supported relationships is an important component of the vision of the Centre; one that is consistent with the concept of the Centre as "containment". Te Aroha Noa recognises the power of spiritual journeys and the spiritual dimension of support and change was significant for our study family.

Te Aroha Noa has worked in this community for nearly twenty years and has an enduring presence. It grew out of a Pakeha church and currently operates on a semi-autonomous basis, with a bi-cultural (Maori and Non-Maori) governance board composed of church and community members. Te Aroha Noa is one of a number of not-for-profit organisations providing care, support and educational programmes for parents and children in the Palmerston North community. Christian values inform its work but Christian faith is not required for either staff or users. However, for many families, particularly Maori and Pacific Islands people, spiritual origins are important and can be a point of significant connection.

Program/outcomes/population served

Te Aroha Noa began its life in the late 1980s by providing individual and family counselling to the families living in the immediate neighbourhood. During the 1990s it added a range of group and individual parenting programmes and it also began a playgroup and a community shop. The playgroup has been of great significance to both the organisation and the community, and it was the first point of contact for our whanau. Starting from a crowded base in a back room at a local church, the childcare activities have now grown into a fully licensed early childhood facility, opened in winter 2004. This new facility now houses traditional day care and early learning activities, such as playgroups, it provides opportunities for parents to work with a range of children as parent-educators and also to gain formal early childhood qualifications.

In addition to the early learning programme, the organisation now offers a range of therapeutic and family development programmes, including a transition to school programme called HIPPY (Home Interaction Programme for Parents and Youngsters). It has recently begun offering literacy programmes, and it is developing an out-reach community development programme as well. These services are available for the whole community, but are often accessed by families who have first come to the early childhood service. Te Aroha Noa focuses on providing comprehensive support to family groups that have children aged under 13 years. These family groups may be small units of parent(s) and one or more children, but equally their work can draw in larger networks of extended kin and other social network members.

The programme outcomes sought by Te Aroha Noa are aimed at increasing family capacity to care, development of problem-solving skills, enhanced community capacity through nurturing the development of community leaders, and increased strength of social networks as individuals and family groups become more able to help and support each other. These kinds of diffuse outcomes are sought through the provision of a wide range of intervention types and a seamless delivery process that enables parents, children and staff to work together collaboratively, each bringing both resources and needs to the table.

Nature/framework/theory of change

The organisation uses strengths principles (Munford & Sanders, 1999) and the empowerment work of Friere (1985) forms an important part of its orientation to engaging with families and communities. Staff are clear that they are not the solution to family issues. They provide opportunities and support for people to find their own ways through the challenges they face. In a community that has few material resources, finding novel ways of solving resource issues is a focus of the work, and staff work extensively with other agencies, marshalling diverse providers to help families to meet their own needs. Te Aroha Noa has developed a particular way of working with family groups that incorporates cultural frameworks (such as indigenous models of practice) and recognises that limited material resources will impact on family life. Te Aroha Noa adopts family or whanau meetings as one way of working collaboratively with (sometimes conflicting) parties to build solutions. The work done with families and individuals feeds into the building of strong community networks that can be harnessed on a sustained basis to ensure that locally-based support is available to families. The development of a self-determining community that is able to look after its own is a key focus. The theory of change developed at Te Aroha Noa is inclusive; it focuses simultaneously on the immediate issue at the same time as it opens up new possibilities that may not have been able to be envisioned prior to contact with the agency.

Methods

The data upon which this paper is based is drawn from a small case study of work undertaken at Te Aroha Noa. The research strategies used included in-depth interviews with parents and staff, observations of centre practice and two focus groups that brought together staff, members of the governing body, volunteers and parents to reflect upon the nature of practice at Te Aroha Noa. The computer software programme QSR Nvivo was used to facilitate the analysis of these different types of data. Interviews used a narrative approach and sought to create opportunities for participant and interviewer to negotiate shared understandings of the nature of support and to have equal influence on the way in which topics were discussed. The interviews involved one whanau involving three sisters and their children. The focus groups and observations explored a wide range of experiences of the care provided at Te Aroha Noa and this material was then used to interrogate and provide analytical depth for the data collected in the interviews.

Key findings

This section is structured around one narrative extract from an interview with one of the sisters and a summary extract of a 'critical incident' recounted to us by another sister. We also

draw on material from worker interviews, the focus groups and observations to help us understand what these two segments tell us about the culture of care (Warren-Adamson & Lightburn, 2004, p. 222) and how they help us develop ideas that might contribute to a theory of change (Chaskin, 2004).

> "We came to Te Aroha Noa because they were the best place to look after our babies. When we first came to the city I went around all the early childhood centres and watched how they were with the babies, and man it was awful. There was shouting and babies crying and no way were our babies going to those places. ... Then I came into playgroup and Karina (senior teacher) she just stood up with this big smile on her face and welcomed us in. ... We have a lot of babies in this family, and so we will be using early childhood for a long time, we need to find the right place for us. ... I also get support over custody with my youngest sister's son. I care for him and now she thinks she is ready to have custody back, but she ain't. And so we are trying to sort that out... A woman down the street who also comes here, they hadn't seen her for a while, and asked me if I had seen her. I hadn't, they actually went around there, just to make sure that she was ok, she didn't have to call in, they made the effort to make sure. I don't think any other organisation would do that, you know, go out looking for work, make the effort, actually care enough to notice when you hadn't seen someone." [Kahu, oldest sister]

Early learning centres provide important neutral spaces for parents to begin to test out agencies and their capacity to respond to their real needs (Warren-Adamson & Lightburn, 2004, pp. 218-9). Parents who are struggling with the challenges of daily life can seek solace in certain types of early childhood learning environments, such as that provided by Te Aroha Noa. When early learning is combined with other types of support, such as family development, positive help-seeking activities of parents are facilitated because they can begin to attend to their own needs while they find care for their children. Kahu was clear that the way staff worked with the babies was a critical determinant in her selection of Te Aroha Noa as the place that could be trusted to care for her nephews and nieces. Te Aroha Noa belonged in the community and welcomed community members as valued partners. It provided for the care and developmental needs of children at the same time as it attended to the complex and dynamic needs of parents and whanau/families.

The workers recognised that the early learning facility was a key gateway for parents and had invested time and energy in developing it, both in order to provide local children with high quality early learning experiences, but also in order to provide a safe route for parents into the centre. Working from a Frierian base, the workers saw beyond the troubles the parents presented to the centre. While acknowledging the troubles, they also talked of the strengths and courage they saw, the successes, the movement and responsiveness to new ways of thinking about old troubles. Worker interviews touched upon the notion of containment developed by our colleagues elsewhere (Warren-Adamson & Lightburn, 2004, p. 220). Containment seems an important aspect of the way in which community centres are able to work with families.

Kahu observed the way that centre staff kept families in mind; they noticed when they had not seen someone for a while, and worried if they were alright. This concern was different to the surveillance sometimes experienced by families when they come into contact with statutory agencies; it was a genuine concern with what might have happened and if support was required. Staff from the centre would make an effort to follow up on these concerns with families/whanau, to make sure they were safe. What Kahu learned from this was that the centre could be relied upon and that her presence and that of her whanau was important to Te Aroha Noa. The care extended beyond a social service encounter. This seemed to suggest that the culture of care at Te Aroha Noa was qualitatively different to that experienced in other agencies.

To explore the way in which change can unfold, we examine a summary extract of a 'critical incident' recounted to us by one of the other sisters involved in the study:

"It is Friday and Bruce receives a call from Irihapeti, she is very distraught, embarrassed and angry. Pene, her oldest son, 7 years of age, was found at school with a can of his father's beer and the school has rung and asked her to come and take him home for the day and to attend a meeting on Monday with him to discuss what is to be done. Hurt and angry feelings and a sense of overpowering powerlessness tumble down the phone. Irihapeti is angry at her husband for leaving the beer where it could be so easily found, humiliated at being called by the school and made to feel like a failed parent who allows young children to drink alcohol. She is angry at her son for doing this stupid thing, angry and hurt at herself for feeling these feelings. She expresses a sense of rage at the way she is spoken to by staff at the school, that somehow this small event can trigger such a huge reaction and create a sense that her son might be abandoned by the education system. She now faces the weekend with all this unresolved. Yet, another voice is there that says quietly, 'children do dumb things', but Irihapeti is unable to bring this small voice to the front and allow it to drive her response to the school."

Several important factors that help us understand the nature of community centre practice and the way in which it facilitates change are apparent from this extract. While dealing with the immediate problem presented by Pene's actions was important, for both parent and child, Irihapeti reminded us in her interviews, that in addition to this 'presenting' problem, choosing to seek support from Bruce would inevitably involve her in doing other, deeper work on personal and family issues. Irihapeti knew that contacting Bruce would draw her into other circles of work and reflection *'it is never just about what I come to him for help with'* she said *'somehow he always makes it about everything else as well'*. Bruce was clear about this too, he saw any incident as holding enormous potential for change. He saw beyond his role as a facilitator of immediate problem-solving. Responding to individual incidents provided the raw material for capacity building, new learning and enhanced resilience. These were the long-term outcomes upon which Te Aroha Noa was focused. Being able to work on both these levels was possible because of the strong relationship that had been built by Te Aroha Noa staff with Irihapeti. Her confidence that they would respond to her call for help grew out of this relationship, it was a safe place to come for support.

The community centre has the distinct advantage in situations like this of being able to array resources and supports around parents and their children, so that a tailored response to the particularities of each situation becomes possible. Holding this together is the theory of change to which the organisation as a whole subscribes. This ensures that the parts contribute to the whole.

The immediate situation required a focus on the school and Bruce worked with Irihapeti around defining a range of responses she could take, and then identifying the ways in which Te Aroha Noa could work to assist her in this. Work was also done with Pene, so that he was drawn into the solution and was not just the focus of the problem. Over a period of weeks, he came to Te Aroha Noa to participate in the afterschool programme and this enabled him to build his own relationships with those staff that worked directly with school-aged children. He was thus supported to author his own story about this incident and about himself. Through the work with Pene and with Irihapeti, new definitions of Pene began to emerge; these were strong positive definitions that could stand in contrast to the 'embarrassing incident'. We observed that work on developing new sorts of identities could be harnessed to underpin new types of relationships, at the school, for instance. Both Irihapeti and Pene returned to the school context in different positions.

In having to deal with the school hierarchy over this embarrassing incident, Irihapeti had felt publicly exposed. The contact with the school was then set in a deeply troubling emotional context for Irihapeti; it was never going to be a simple matter of working out a response to child behaviour in isolation. She felt humiliated by his actions; her own struggles were exposed upon which others could pass judgement. In this context, this relatively minor incident became overwhelming. In contrast to her experiences at Te Aroha Noa, the school had already felt unwelcoming; it seemed to shut her out and not see a space for Pene. Through this inci-

dent, the fragile sense of whanau Irihapeti held collapsed, and this single incident came to represent so much more.

While Irihapeti and her sisters initially came to Te Aroha Noa in order to access early childhood services, the support they received extended well beyond this. If the centre operated in a more traditional manner, merely responding to those issues that parents presented to them, it is unlikely that Irihapeti would have sought Bruce's assistance with the incident at school. The permeable barriers between the different sorts of services provided by Te Aroha Noa meant that trust and confidence could be developed because Irihapeti had a range of positive interactions with a range of staff at the centre.

Te Aroha Noa's practice is founded on the recognition that the pathway to support for families is not always easy to chart; presenting 'problems' may not always be the most significant; they may rather be those that families believe to be the most acceptable. Presenting problems often become the pathway into support behind which lie more long-term issues, the resolution of which will bring about deeper change. Getting to fundamental or underlying issues will take time and only happen when confidence has been established. Presenting problems provide rich opportunities for staff to do this trust-building work and to communicate to families the way in which they can go about working on deeper issues.

Early work then can seem to lack a clear direction and can move slowly as centre and family test each other out. While there was an early 'nameable' need that led the family to the centre in this case, involvement with Te Aroha Noa involved much more than this. The need for early childhood education provided the focus for early contact, a framework within which understanding of the different sorts of stories this family had accumulated about itself could be shared.

Thinking in terms of outcomes, what were the changes we observed as this story unfolded? Bruce provided some important insight for Irihapeti around Pene's behaviour and possible strategies for working with the school. Through careful talking, some of the emotion was drawn out of the situation, and this left Irihapeti more able to focus on the actions and behaviours required and distanced her from her initial emotional reaction. Te Aroha Noa gave Irihapeti a safe place to take her anger and then to find ways to move on. This helped her deal in a calm way with the school and with Pene. Bruce also went with Irihapeti to the Monday meeting at the school, but he sat in the background while Irihapeti led the discussion about what was to be done. Bruce's presence in the meeting provided some confidence for Irihapeti and it also had a defusing effect on school staff, who knew him well from his many years of involvement in the community. His presence also gave the school confidence that strategies for addressing any wider issues would be developed and that Irihapeti had access to support. Community centres in this way play an important brokerage role, offering up their credibility to other professionals such as teachers at the same time as they offer tangible support to parents.

The encounter with the school went better than Irihapeti had expected and this contributed to her capacity to address issues with Pene and to think about ways of drawing her husband into the solution. It also gave her a strong sense of success and this fed into her developing sense of confidence in her capacity to effectively parent and advocate for her children. This was a small, but significant step-on-the-way. Pene established and consolidated his position at school, the practical support from Te Aroha Noa around reading enabled him to function better in class; he began to experience success that could be harnessed throughout the school day.

As we followed this whanau we saw other changes as well; as Irihapeti's confidence in herself as a competent mother grew, she began to look at the centre as not only a place of support but also as a place to which she could make important contributions. She started to see herself in a reciprocal relationship with Bruce and the other people who contributed to the centre. Initially this focused on her assisting with the enrichment of the cultural activities of the centre; contributing to the development of protocols for formal centre activities and also assisting staff with informal cultural practices. Her growing confidence was also a stimulus for others to take the risk of coming to the centre to enlarge their visions for themselves and their children. The idea of being able to enlarge one's vision through engagement in a place like a community

centre was also picked up by several of the participants in the two focus groups. The sense that centres provide a safe haven where the new or the frightening can be tackled was a strongly repeated theme. For many this sense of intimate safety was new, and they spoke with intensity about what it felt like to allow themselves to be exposed and accept their vulnerability. While the centre provided a safe haven, participants also talked about its role in challenging parents to develop and grow. It was not simply a process of open-ended, uncritical support, but one of gently challenging parents to confront those aspects of their lives that caused difficulty for them and other members of their whanau.

Community centres – some implications for practice

Thinking about Te Aroha Noa as a specific community centre located in and responding to the needs of a particular community, we can see the importance of the Frierian notion of community-owned change processes and support as a journey of learning. The strength of community-based practice in this case example resides in Te Aroha Noa's capacity to draw on traditional social work practice principles and interventions and to locate these within a wider commitment to the strengthening of community capacity to "contain", care and nurture members. The work does not supplant those naturally occurring supports, but rather draws networks into the centre's orbit and draws the centre out into the community in a reciprocal process of ongoing engagement in a shared journey.

This wider agenda for change sees Te Aroha Noa located both in and of the community. The model of practice elaborated here requires people who are willing and able to work from a strong community-social work base and to also utilise other professional resources, such as early childhood education or adult learning. They also need to be competent at drawing in community resources in flexible combinations depending on the issues and people involved at any time.

The theory of change walks a fine line between dealing with individual needs and building solutions for the future; this is very skilled practice. It requires a strong support base for staff that includes commitment to active reflective supervision practice and a consistency of approaches at all levels, including governance, management and practice.

Community centre practice looks different than traditional social work support. It is characterised by gradual development of reciprocal relationships and longer change journeys. Brief interventions may take place, but these are usually within a context of a sustained relationship that provides a foundation upon which significant transformations occur. Community centres hold the possibility of life-long relationships where parents may adopt different roles over time; sometimes giving and sometimes receiving support. This is where the community capacity building is located.

In a community centre, everything is relevant, and seemingly minor matters can provide rich change resources. We observed the many growth and change moments in the life of the case study whanau that flowed from the relatively minor incident with the school. In considering these small steps we could see the beginnings of the giant leaps families take. Observing this, we were reminded of the importance of attending carefully to the details of family support work as we work on developing further our understanding of the ways in which change emerges from community centre practice.

Note

1. Whanau is the Maori word for family. Metge (1995) notes that this term is used to refer to any of the following groupings: a set of siblings, descendents of a relatively recent ancestor,

but not their spouses or whangai; all of the descendents of a relatively recent ancestor, and their spouses and relatives whangai who interact together on an ongoing basis; descent groups also known as hapu and iwi; a nuclear family; a group of unrelated Maori who interact on an ongoing basis; a group of people gathered for the purpose of supporting an individual or individuals; a large group of people gathered for a common purpose. In this document we are using the word in its more narrow sense to refer to groupings that act as families in the sense of parents, children and other relatives and individuals who play a significant role in the life of the young person. We also recognise that whanau has important connotations of connection to the past and the future and is a word that is often used to identify these sorts of linkages at the same time as referring to the 'family' unit.

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