

## **Q&As for the Family Violence Death Review Committee's Seventh report: A duty to care | Pūrongo tuawhitu: Me manaaki te tangata**

**Q: What are the names of the Family Violence Death Review Committee (the Committee) members?**

A:

- Dr Fiona Cram MNZM (chair), Ngāti Pāhauwera: director, Katoa Research Ltd
- Dr Jacqueline Short (deputy chair), clinical director, DAMHS Forensic and Rehabilitation Service, Te Korowai Whariki Central Regional Forensic Service
- Assoc Prof Nicola Atwool, Department of Sociology, Gender and Social Work, University of Otago
- Dianne Cooze, Ngāti Porou: Civil Aviation Authority, lived experience member
- Dr Michael Roguski, Te Āti Awa, Ngāti Tūwharetoa: director, Kaitiaki Research and Evaluation
- Stormie Waapu, Ngāti Kahungunu: barrister, Matariki Chambers
- Shayne Walker ONZM, Ngāi Tahu, Kāti Māmoe, Waitaha, Ngāti Kahungunu: senior lecturer, Department of Sociology, Gender and Social Work, University of Otago
- *Prof Mark Henaghan, Faculty of Law, University of Auckland (co-opted expert advisor – not a member but provided expert advice).*

**Q: Who produces the Committee's reports?**

A: The Health Quality & Safety Commission.

**Q: How often are the reports produced?**

A: The reports are produced approximately every two years.

**Q: What is the aim of the Committee?**

The role of the Committee is to review family violence deaths to identify strategies to reduce such deaths in the future. The Committee has a particular focus on policy and practice improvements that can reduce family violence deaths.

**Q: What is the name of the 2022 report?**

A: *Seventh report: A duty to care | Pūrongo tuawhitu: Me manaaki te tangata*

**Q: How was the content of the report sourced?**

A: The report draws on findings and recommendations from in-depth reviews conducted in 2019–21, and previous Committee reports.

**Q: What is the focus of the report?**

A: The report draws attention to the concept of a duty to care. It explores factors that have pushed Aotearoa New Zealand away from caring for people who experience family violence, reinforcing messages that no one is there to help them.

**Q: Why is the report entitled ‘A duty to care’?**

A: ‘A duty to care’ places specific focus on two areas: intra-familial violence deaths, and family violence death for disabled people. The report raises the following questions:

- Do agencies understand the impact of violence on the whole family or whānau?
- Is there a comprehensive understanding of the impact of caring for family members with long-term health or disability concerns?
- Do societal assumptions about inequitable decision-making and caregiving responsibilities place those with reduced decision-making capabilities at risk of abuse?

**Q: Why is ‘duty to care’ important?**

A: A ‘duty to care’ is related to, but distinct from, a common concept in a Western framework, which is a legal obligation to ensure the safety or wellbeing of others (*duty of care*).

In contrast, te ao Māori introduces relevant relational obligations, values and practices.

- Whakapapa creates a *duty to care* for those who are joined together by blood and common ancestry.
- Whanaungatanga extends beyond people to include the environment and spiritual realm.
- Manaakitanga (ethos of care) embodies a type of caring that is reciprocal and unqualified, based on respect and kindness. It is holistically embedded in the values of whānau, emphasising obligations and reciprocal relationships within the whānau and wider groupings.

The report uses both terms: ‘duty of care’ when referring to legal obligations of individuals and agencies; and ‘duty to care’ when describing our relational obligations to each other as humans.

**Q: Does the report look at government responses to ‘a duty to care’?**

A: The report highlights changes that need to be made by government agencies in order to fulfil their legal *duty of care* for those who are impacted by family violence. In particular, attention is paid to:

- the potential for alternative care pathways to be realised when hapori/community services and government agencies are working better together
- the impact of failing in the duty of care for disabled people
- the need for family and whānau to be valued as experts in their own lives
- the need for an ongoing duty of care for those who have been impacted by a family violence death.

**Q: How does the report conclude?**

A: The report concludes with a series of reflective questions for government agencies seeking to work as good partners with hapori/community.

**Q: What else does the report contain?**

A: The report gives an overview of three kaupapa Māori organisations and contrasts their whole-of-whānau approach with the ‘siloed’ approach delivered by government agencies. It also highlights the legislative provisions that are currently available to allow government agencies to support a locally defined and empowered duty to care.

**Q: What challenges does the report offer government agencies?**

A: For government agencies to:

- learn how to be good partners with community organisations
- move towards wellbeing instead of absence of symptoms
- take a wiser, more respectful approach to people, families, whānau and community organisations.