“Something’s got to change”

Insights from mothers
Ministry for Women – June 2018
Summary

The Ministry for Women interviewed 40 mothers in Whāngarei, South Auckland and Gisborne, to hear in their own words, their experiences of being on a benefit and of the social services they accessed both during pregnancy and with young children. These interviews focused on nutrition, stress levels, parenting skills and the physical environment.

Almost unanimously, these mothers told us that the benefit system is complex and changes to their benefit entitlements are hard to understand. Many said they did not know or understand what they were entitled to. They wanted clear and transparent decisions over entitlements and abatement rates that supported them and their children.

The mothers told us they want to work and for it to be good work. Having a child, they said, made them want to change their lives. Being a mother is a strong incentive to get involved in work, education or training to provide for their family, and to be a role model for their children. Having a family, they said, changed their aspirations and made them open to opportunity.

The other three key themes that emerged were:

- Mothers struggled financially which was a constant source of stress.
- Mothers’ experiences with government services were often difficult and challenging.
- Mothers dealt with physical and/or mental health concerns.

The most sustainable way to improve these mothers’ lives, and the lives of their children, is to support them fully while they are on a benefit and ensure they are getting the benefit they are entitled to receive. Once they are ready, support them into training and work with long-term prospects for good pay and employment.

However, they face significant barriers. The systems that provide support are complex and could be more straightforward. Benefits and entitlements are confusing and hard to navigate, mental health issues add to stress, as does substandard housing and a lack of childcare support. If the system is not made simpler, mothers told us they would like a champion or trusted person to help them to
navigate it. Reducing the high levels of benefit abatement could also assist mothers to transition into full-time work.

Given the motivation of these mothers to do more for their families, we need to empower and trust mothers to make the right decisions on behalf of their children and whānau, whether it’s about caring for their kids, work or how they spend their money. One of the best things government can do is make the system easier for them to understand and navigate, and invest money directly to whānau, instead of indirectly through services. For most mums, they will do the rest.
“...something’s got to change”

**Purpose**

All women need to have equal opportunities to realise their strengths and participate fully in their local communities and wider society in ways that are meaningful to them.

This report describes the experiences of mothers who receive a benefit and access social services, and tells us about what support mothers need to improve their lives and their children’s future. The report aims to help government agencies that provide this support to better understand what these mothers need, and the expectations the mothers have for themselves, their children and their families and whānau.

**Wellbeing**

The wellbeing of families and whānau is crucial for the current and future health of our communities and country. In all of their many forms, mothers play a vital role in caring for, protecting and socialising future generations.

Women make up 60 percent of minimum wage employees.¹ Relative to men, women are more likely to be under-employed, unemployed and under-utilised. Although some of these women will have access to other sources of income, such as the earnings of a partner, we are primarily concerned with women who do not.

In particular, sole parent households – 84 percent of which are headed by women – are at greater risk of being dependent on benefits for extended periods of time. Ninety percent of sole parent families have incomes below the median household income in New Zealand. In any one year it is estimated that there are 15,000 mothers and 12,500

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babies in New Zealand who are likely to need multiple social services.\(^2\)

Women who become parents at young ages, and women who are of Māori or Pacific descent, are more likely to be in this group. Although, on average, more girls than boys leave school with qualifications, a higher proportion of young women than young men are not in education, employment or training (NEET) after they leave school. Māori and Pacific girls are over-represented in this group.

Achieving breakthrough impacts for children experiencing significant adversity requires that we support the adults who care for them to transition their own lives. Two-generation approaches are seen as viable interventions to interrupt intergenerational cycles of poverty and enduring negative consequences for parents and their children.

**Our approach**

As a result, the Ministry is particularly concerned with improving the personal and economic wellbeing of sole mothers. It is these women who need improved and responsive support in order to look after their children and families.

The Ministry interviewed 40 mothers in Whangarei, South Auckland and Gisborne, both face-to-face and in focus groups.\(^3\)

The mothers who were interviewed ranged from 18 to 58 years old. Their children were aged from birth to 26 years old. There was a mix of sole, partnered and married mothers from a mix of ethnicities. Sole mothers were the largest group interviewed. The mothers had previously worked in the education sector (childcare, teaching assistant), supermarket, cleaning, process work, hospitality industry and customer services, and were currently in training and education.

More information about the methodology and the characteristics of the mothers interviewed is attached as Appendix One. A summary of the interviews – Mothers Voices – is provided as Appendix Two.


\(^3\) Due to the sensitive nature of what was discussed, we interviewed women who were all in education and training, as this is a known protective factor.
Emerging themes from the interviews

Four key themes emerged from the interviews and focus groups:

- Mothers universally wanted to make a better life for their children.
- Mothers struggled financially which was a constant source of stress.
- Mothers dealt with physical and/or mental health concerns, sometimes linked with intimate partner violence.
- Mothers’ experiences with government services were often difficult and challenging.

Mothers want a better life for their children

Having a child provided a catalyst for change. All mothers interviewed wanted to make a better life for their child. They had enrolled in courses, were looking to upskill or wanted to get work to support their families.

“Having ... her changed me, I had to sort out my life for her.”

“I’ve got this baby coming, something’s got to change.”

This finding was universal across all mothers and suggests that social sector efforts to help mothers should support and aid the motivation for change.

Financial struggles are a constant source of stress

Mothers told us they struggled financially and that this was a major cause of stress. They said they were stressed by constantly having to juggle a number of financial issues including debt (mostly to government agencies such as Work and Income and Housing New Zealand), housing affordability and childcare. They reported that they often had to make choices about which bills to pay.

The benefit system, they reported, is complex and changes to their benefit entitlements are hard to understand. Due to this complexity, many said they did not in fact know or understand what they were entitled to.

Furthermore, high abatement rates, we were told, function as a disincentive for mothers to come off the benefit and move into education, training or work.
More transparency around benefit entitlement and a clear user-friendly system would greatly benefit mothers who are already under financial stress. Furthermore, more realistic abatement rates and cheaper access to childcare would remove major sources of stress and clear a path towards education, work and training.

**Mothers’ health concerns relate to access**

Many of the mothers we interviewed reported that they are dealing with health issues, both physical and mental. They told us they were experiencing problems accessing specialist healthcare, especially for their children.

They told us they wanted health and social services to listen to them and provide help without judgement.

Some mothers told us that depression, anger, and behavioural issues being experienced by their children were related to the experiences of violence with their partner.

Good mental and physical health is a precondition for long-term employment, therefore better, non-judgemental access to healthcare is essential to bettering mothers’ employment outcomes.

**Experiences with government services are often difficult and challenging**

Mothers told us that their experiences with Work and Income were often difficult and challenging. They reported that entitlements were changed or stopped without notice and/or reason.

They said this made them feel confused, and judged. Not providing sufficient information about the mothers’ financial situations is disempowering.

One mother reported a culture of judgement and distrust.

*“When you get investigated you have to prove your innocence.”*

Participants reported difficulties they had navigating the government agency systems. They noted that it would be useful to have someone to ‘walk alongside them’ and support them in navigating the system, and plan appropriately when making considerable life changes.
What action is necessary to support mothers at risk of poor outcomes?

Access to the benefit support they are entitled to receive

Mothers told us they often didn’t know what they were entitled to receive and that often the benefit stopped or changed and they didn’t understand why. They found it difficult and time consuming to sort out their benefit issues.

“There was a time lag of two weeks between Work and Income and Inland Revenue (child support) being able to sort out payment issues.”

Mothers told us they felt judged because they needed support.

“I’m doing it [getting a benefit] because I have to, I’m doing it for my daughter and the more work I do the more dollars are taken off me.”

Mothers wanted to discuss their benefit situation with the same person every time.

“I don’t have a specific case worker. It’s hard to work with someone you don’t know.”

Greater access to training and employment opportunities

What emerged from the interviews is that the mothers want to improve their and their children’s lives and see access to training and employment opportunities with long-term prospects for good pay, as a way out of poverty. But there are system barriers that often prevent this from happening.

Mothers told us some of the forms of support that may help to overcome barriers to staying in training and work. These include:

- reducing the high levels of benefit abatement when they are in work
- paying for childcare when they are in education, training or work
- better flexible working arrangements.

Training would allow these mothers to get a job paying more than $15 (per hour).

“[The] minimum wage doesn’t get you far.”

“Most mums I know are going into cafe work with no future.”
Access to childcare is pivotal
Early childhood education (ECE) support has been pivotal for the mothers.

“The ECE has been the biggest support. They have taught me how to parent better, life skills, better nutrition and better eating. I have attended all of the parenting courses and helped them start a whānau committee.”

The cost of childcare, however, continues to be a major issue.

Extending 20 hours free to all under 3-year-olds would help mothers into education, training and employment.

Sole mothers often need more than 20 hours of ECE that the Government subsidises, to engage in paid work. The Ministry of Social Development’s targeted childcare subsidy is available for up to 50 hours care per week for those in work or approved training, but it is not a full payment. Sole mothers are more likely to resign, turn down or stop looking for paid work, or be unable to change usual work patterns, as a result of childcare difficulties.

Driver licences for sole mothers in training and employment is a key enabler
Driver licences are used by employers as a qualification. Nationally, just over half of NEET young mothers cannot legally drive their child. Just one-quarter of young Māori mothers have a restricted or full licence. In Auckland, 70 percent of young mothers do not have a driver licence. A lack of driver licences adds additional barriers to training, finding and staying in work, and is a safety issue for the children and driving public.

Providing young mothers with the resources and childcare to obtain their driver licences would be hugely beneficial.

Improving service support for mothers
Mothers told us they would like a champion or trusted person to help them to navigate the complex social support system (Work and Income, Housing New Zealand, education, training and employment). They also thought access to a government website that brings together budgeting, education, training teen parent unit information, health and childcare resources could be useful.
Conclusion

The mothers we spoke with wanted more than anything to make a better life for themselves and their babies. Having a baby is a significant incentive to get into education, training or work.

Mothers are best placed to identify the support they need to improve their own economic independence. The role for agencies is to provide useful support.

What emerged from the interviews was that the most sustainable way to improve these mothers’ lives, and the lives of their children, is to ensure they have the benefit entitlement they should receive, and support them into training and work with long-term prospects for good pay and employment.

However, there are significant barriers for these mothers. The system that agencies administer to provide support could be more straightforward. Benefits and entitlements are confused and hard to navigate, mental health issues add to stress, as does substandard housing and a lack of childcare support.

Mothers told us they would like a champion or trusted person to help them to navigate the complex social support system.

These stressors add up to a situation where these mothers are not necessarily in a position to move forward into education, training or work, as they are simply trying to survive. Reducing the high levels of benefit abatement could also assist mothers to engage with part-time work which can provide not only income, but also confidence and a social network. This could help mothers transition into full-time work, education or training.

Women need to have choices and opportunities to realise their strengths and participate fully in their communities and in the wider society in ways that are meaningful to them. Providing support for mothers not only helps them to improve their lives and those of their children, but also leads to better long-term outcomes and helps to reduce the cycle of intergenerational poverty.
Methodology
This report is based on both face-to-face and focus groups with 40 mothers. See below for details of participants.

The Ministry also prepared a supporting literature review on the support needs of mothers with babies. The interviews and focus groups had structured questions focused around four key themes: nutrition; stress (and what causes it); parenting; and physical environment.

For safety reasons, due to the sensitive nature of what was discussed, we interviewed women who were all in education and training, as this is a known protective factor.

Qualitative research is valuable because of the rich insights it generates. It is exploratory and illustrative. The ability to hear mothers’ voices in their own words adds a direct connection to their lives and experiences that is unmatched by other methods.

As is the case for all qualitative research, caution should be used when generalising to the wider population, and this approach cannot illustrate prevalence. However, characteristics of the women sought for the interviews and focus groups were based on quantitative studies carried out by the Ministry for Women, SUPERU and the Ministry of Social Development.

Appendix One: Our approach

4 Available on the Ministry for Women’s website.
Characteristics of the mothers interviewed

The mothers interviewed ranged from 18 to 58 years. Their children were aged from birth to 26 years. There was a mix of sole, partnered and married mothers from a mix of ethnicities.

Sole mothers were the largest group interviewed (see below). The mothers had previously worked in the education sector (childcare, teaching assistant), supermarket, cleaning, process work, hospitality industry and customer services, and were in training and education.

Ages of children of mothers interviewed

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Ethnicity of mothers interviewed

- Māori: 14
- Cook Island: 8
- Cook Island/Māori: 1
- Cook Island/Niuean: 1
- Samoan: 2
- Māori/Samoan: 1
- Māori/Fijian: 1
- Māori/European: 2
- Tongan: 2
- Niuean: 1
- Pākehā: 6
- Indian: 1
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<td>Living with family</td>
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Appendix Two: Mothers’ voices

This appendix records the voices of these mothers and is clustered according to the number of times key issues were raised by them.

Mothers knew about good nutrition during pregnancy and for their children

One mother said she got a good sense of it [nutrition] from her mother and [her daughter] has always been a picky eater and gets anxious because people don’t get that. She said her daughter’s dad’s family dismisses her [food advice] and at 18 months gave her ‘coke and chippies’. Now that her daughter is 3 years old she admitted, though, she is more relaxed [about food].

“I know about good food in the household, try and encourage it at home, but don’t always live by it.”

However, if the money is tight then food choices can be limited. A mother said that their diet is poorer than she would like. The children eat a lot of easy meals (eg Happy Meals, eggs on toast) which makes her feel guilty.

“After rent there’s not much left. It’s hard to budget to put food on the table by the end of the week. Sometimes all that is left is noodles.”

The mothers who were part of the focus group interviews have been taught about good eating and nutrition as part of their course. Previously they went for the cheap food but are now trying to do better.

“I take the stuff I learn here home to do with the kids. We did a paper on healthy eating and exercising, and so I took that home too.”

Mothers’ stress levels

Low income exposes families to stress. Chronic stress can impact on the development of a baby during pregnancy and after birth, and into childhood experiences of uncertainty around food and housing.
Mothers are constantly juggling many issues at the same time – money, food, study and rent

They have to make choices over what bills to pay. Food is the most discretionary item in budgets; often this is where mothers choose to go without. This causes high stress levels. One mother summed this up. Because of the shortfall in money to pay for study, rent and food she is now really trying to decide between some hard choices going forward:

“Do I continue studying [to go to do nursing study for the next three years] or do I go back on the benefit, or do I give up the kids and send them to live with their dads and have them only on the weekends so that I can do the study?”

Mothers struggled financially even when they were in a stable relationship

Mothers who were in stable relationships found it difficult to juggle the family income and pay for rent and bills; stress led to relationship breakdowns.

“At one stage my husband moved out and I went on the DPB to be able to afford to support my children.”

Many of the partners were on the minimum wage.

“My husband works but has been unemployed twice. He currently earns $17 per hour for a 40 hour week.”

Mothers are stressed by debt

All mothers we interviewed had some form of debt (eg, Work and Income and Housing New Zealand). For example, one mother has been required to pay for rat eradication at her Housing New Zealand property. Other mothers have had advances for clothing and food, and bonds for private rentals. No mother we interviewed mentioned debt with private businesses.

Dealing with Work and Income can be challenging for the mothers

Many of the mothers felt judged by Work and Income; they felt forced to find a job or take a course. They found the benefit system complex and changes to their benefit entitlements hard to understand. One mother said they made her feel undervalued. When she went to leave her ex-partner she sought help from
Work and Income but they said they couldn’t help her until she had moved out. But she couldn’t afford to move out without help. At one stage her husband moved out and she went on the DPB to be able to afford to support her children.

“WINZ stresses me out – I feel like I’m being judged – it’s not like I want free money, I’m doing it because I have to, I’m doing it for my daughter and the more work I do the more dollars are taken off me.”

“When you go in for something they look down their nose at you” [she thinks they’ve never been on benefits so they don’t know anything about their clients’ situations] “they make you feel stink.”

Mothers told us Work and Income constantly lost their information. One mother told us about her problem with Work and Income over a form. She handed in the form two months ago with her doctor’s information but when checking on its progress through the medical team she found they wanted further information from her GP which is not a requirement on the form. She feels like she’s going around in circles.

“They lost my forms and it took six weeks for them to put through her money – it was really painful.”

Work and Income didn’t tell mothers what they were entitled to – they had to work it out for themselves.

“They stopped the subsidy again … no reason … need to see them again.”

“You find out months later you could have been entitled to other benefits – they send you any changes by email and you can do a lot online but it’s confusing and I keep having to fill out forms.”

“Getting declined when I know I’m entitled to it.”

“They cut my benefit, they didn’t say why, then said it was Working for Families tax and it took me ages to get it sorted.”

The high abatement rates are a disincentive for mothers to move off the benefit. They told us about how they are penalised if they take on too much work, even on a part-time basis.
“If I work too much they take money off me.”

“When I did two extra shifts at work they took off my accommodation benefit and now I’ve got to reapply.”

Paying for childcare for study/work is a huge issue for mothers

“I had Early Learning Payment for childcare through Family Start. But when the child reached 15 months payments dropped to cover only 15 hours. I found not having the extra 5 hours hard to cope with.”

“I’ve even put down for KFC! And if I go to work I’ve got to pay for childcare and then my benefit could be affected.”

Some ECEs and schools provide support to mothers and help mitigate stress

“The ECE has been the biggest support. They have taught me how to parent better, life skills, better nutrition and good eating. I have attended all the parenting courses and helped them start a whānau committee.”

A few mothers moved children from schools because they felt the child wasn’t doing well at the particular school. One mother mentioned bullying at school and the school is not adequately dealing with it. Mothers also mentioned the cost of school holiday programmes.

“And now the older ones are at school there are holiday programme costs.”

Mothers experience high levels of mental health issues

Several women we interviewed had mental health and past addiction issues. Most had relationship breakdowns.

Some mothers told us their GPs had been supportive, referring them to mental health and addiction services (therapy and counselling, postnatal depression support groups, maternal mental health services). Sometimes it took an extreme health event to get a referral to specialist services (eg, attempted suicide), but once in the system the mothers received good support.
Some of the children also experienced severe mental health issues

Mothers prioritised their children’s health, with both positive and negative experiences. Some of the children had severe health issues (depression, autism, behavioural issues and disability). Although most GPs provided referrals to special health services, mothers still had to be strong advocates for their child to get them help they needed (children’s teams, DHB Mental Health – Child & Adolescent Service, Starship Hospital). Experiences of the health system included the cost of specialist appointments, lack of information and slow responses from the health provider.

“Specialist appointments they have been a long journey to sort out what was wrong with him – appointment after appointment.”

“If anything goes wrong I’m down to Auckland. If I don’t get a referral I’m prepared to pay.”
One mother told us she was living at her aunt’s place, sleeping in the lounge with her older boy. The midwife saw this was not good for her as she was pregnant, and wrote letters for her and got letters from her GP for Housing New Zealand. One month after the birth, she got offered a house.

“I was referred by my GP to the midwife, a Pākehā, really good, really helpful, listened to me.”

Mothers had high levels of relationship breakdowns

Many fathers had no involvement in their child’s life. One mother told us her 11-year-old’s behavioural and anger issues could have stemmed from the stress caused by her relationship breakup with her husband.

Some parents had worked out positive custody arrangements for their children.

“Their father has 50–50 custody and it didn’t go through the courts. I had no reason not to [half custody] as he is a really stable dad. We started with a three month trial and that all worked out and he has as much say in the children’s life as I do. I feel sorry for children that don’t have Dads in their lives.”

But for some mothers, their benefit decreased because the father increased his formal care of the child(ren). This was seen as positive for the children but left the mother struggling financially. One mother told us that, as her ex-partner is having her oldest son two nights a week, [mother’s] DPB has dropped by $100. She is not sure if she has enough money to cope moving forward. She also found there was a time lag of two weeks between Work and Income and Inland Revenue (child support) being able to sort out payment issues.

Some mothers experienced abuse by their ex partners. In talking about abuse, one mother said she had held on to it (the relationship) so long that it “ate her up” inside. It was important to her to clear the issue before Christmas so she could start the new year with a fresh start. She said this “set her free. [She] could let things go.”
Parenting skills

Mothers had taken parenting courses which they found useful.

“The parenting courses have been able to help me and because I’ve got older and the experiences I have had, I now understand why I react the way I do – I’ve learnt so much in the last two months.” [when referring to the Incredible Years programme and the Circle of Security]

One parent said ECE has taught her how to parent better, life skills, better nutrition and good eating. She has attended all the parenting courses and helped them start a whānau committee. Some mothers said their own parents provided them with some of the parenting skills they needed.

Physical environment

Most mothers were renting – cost and safety are issues

The Whangarei mothers were living in private rentals, while the majority of mothers in South Auckland lived in Housing New Zealand rentals. Two of the mothers had previously owned their own home and would like to buy again, but increasing house prices prevented them from doing this.

Private rental

Most of the mothers had been in their rental accommodation for at least one year. They mentioned how rents have increased significantly over the past year, which put pressure on their weekly budgets. Some talked about how supportive their landlords were.

“Landlord is very good recently providing us with a heat pump.”

Public rental

Most of the mothers had been in Housing New Zealand accommodation for at least a year; some are longer-term tenants. Prior to renting, some of the mothers had been living with relatives in overcrowded conditions. The biggest issues they mentioned were the quality and the need for safe accommodation. Poor-quality housing had an impact on their children’s and their own health. Some mothers rented Housing New Zealand accommodation even in what they considered to be unsafe areas, simply because they cannot see any other option.

One of the mothers we interviewed said she was living in her aunt’s house sleeping on the floor in the lounge with her child. She is now living in a Housing New Zealand house in South Auckland.
She said there was a quality issue with the house. It is infested with fleas, rats and cockroaches. The rats have chewed holes in the walls and cupboards, and she found rats on the babies’ beds. She raised this issue with Housing New Zealand who arranged for poison bait to be put out, but this has not solved the problem. She is now in debt to Housing New Zealand for the poison which she is struggling to repay. She asked Work and Income for help but they are unable to provide grants for this type of issue.

“I must pay my rent on time, but they don’t do their job when there is an issue.”

The mothers talked about issues they had with other tenants which made them feel unsafe.

“If neighbours are not clean and attract cockroaches then they [the cockroaches] sweep through all the houses.” [she is in a block of 10 houses]

“He [Housing New Zealand person] said, ‘It doesn’t help that the other tenants leave their rubbish outside.’”
“I just want to make money for my kids.”