



**NEW ZEALAND
WORK RESEARCH INSTITUTE**

Māori Care and Support Workers

Data from the 2019 New Zealand Care Workforce Survey



AUTHOR

Katherine Ravenswood

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EXECUTIVE SUMMARY

The purpose of this report is to present the experiences of Māori care and support workers working in residential aged care, home and community support, disability support and mental health and addiction. This report is a companion report to *The New Zealand Care Workforce Survey 2019 Report* (Ravenswood et al., 2021) and *The Impact of the Pay Equity Settlement: Data from the 2019 Care Workforce Survey* (Ravenswood and Douglas, 2021) and is based on the responses from 353 of the total (n=1,784 care and support worker respondents) who identified as Māori.

Key findings of this report include:

- *Family responsibilities.* More than half of the respondents reported that their employment provided either most or all of their income (25.3% provided most of the household income with 34.4% indicating they provided all income). 62.3% of respondents spent time in unpaid care of dependent family members, including 21.0% who spent 30 hours or more per week caring for family members.
- *Training & development.* 71.3% of respondents indicated that their employer encourages them to gain the Level 2 to Level 4 Health and Wellbeing Certificates. However, only half were satisfied or totally satisfied with the opportunity to develop their abilities.
- *Pay.* Fewer than half of the respondents were satisfied (20.1%) or totally satisfied (19.1%) with their total pay. 22.8% indicated that they strongly disagreed that the rate of pay fairly reflected the skills, responsibilities and experience needed to do their job. A further 17.3% disagreed, and equal numbers (19.7%) indicated they either agreed or strongly agreed.
- *Hours of work.* Just over half (53.7%) of the support workers indicated that they were satisfied or totally satisfied with their hours of work. However, just over half also (53.4%) indicated that they would choose to increase their regular hours if given the option.
- *Time to care.* Fewer than half (19.9% agreed and 28.4% strongly agreed) of respondents agreed that they were able to spend enough time with their clients.
- *Pressure and stress.* Nearly one third of respondents agreed or strongly agreed that they "feel under pressure to work harder in my job". Similarly, nearly one third of respondents agreed or strongly agreed that "My job is more stressful than I had ever imagined".
- *Work-life balance.* Just over half of the respondents indicated that they were satisfied (21.6%) or totally satisfied (29.5%) with the flexibility to balance work and non-work commitments.
- *Satisfaction with the job itself.* Just over 70% of the respondents indicated that they were satisfied or totally satisfied with the work that they did. However, 18.1% strongly agreed and 10.3% agreed that they planned to look for other employment at some stage over the following 12 months.
- *Health and Safety.* The majority of respondents (83.1%) felt safe or very safe at work. However, of those who had had a work-related injury or illness in the previous 12 months, 57.8% reported that this had resulted in time off work.

Fewer than half (45.2%) of respondents would recommend their job to friends and family, with a further 41.5% who *might* recommend their job to friends and family.

1 Introduction

The purpose of this report is to present the experiences of Māori care and support workers working in residential aged care, home and community support, disability support and mental health and addiction. This report is a companion report to *The New Zealand Care Workforce Survey 2019 Report* (Ravenswood et al., 2021) and *The Impact of the Pay Equity Settlement: Data from the 2019 Care Workforce Survey* (Ravenswood and Douglas, 2021).

This report is based on online survey data collected in late 2019. The online software Qualtrics was used to survey the occupations of manager, nurse and care and support workers. The survey was distributed through key stakeholders in these sectors, as well as through direct dissemination to publicly available emails of employers and training providers in these sectors. In addition to these measures, the survey link was publicised through a social media campaign advertising the online survey.

Full information on the aim of the survey and respondent confidentiality was provided on the online survey in line with principles of informed consent and ethical research. In 2019, this information was also translated into te reo Māori. This particular report is based on the responses from 353 of the total (n=1,784 care and support worker respondents) who identified as Māori. Throughout this report, any significant differences between Māori care and support workers' responses and those of all care and support workers in general who responded.

In reporting on the Māori care and support workers who responded to this survey, this report intends to fill a gap in statistical information on Māori in this workforce. This is in response to research such as that underpinning the PSA's mana wāhine claim, where the lack of workforce information on Māori workers is identified as contrary to the Treaty of Waitangi (Kerr et al., 2018). That lack of information on the workforce contributes to significant policy and research gaps into the experiences of Māori in the health workforce. Indeed, research has identified that Māori are under-represented in both frontline professional health occupations (Curtis et al., 2012), and in health and disability workforce in general service (Ratima et al., 2007). Furthermore, there are pay inequities between Māori nurses employed by Māori health providers and nurses employed directly in District Health Boards, just one example of persistent inequities (Waitangi Tribunal, 2019). There is little research on the Māori care and support workforce, although there may be little difference between the work conditions of Māori support workers, and support workers overall at least with reference to the implementation of the 2017 Pay Equity Settlement (Ravenswood and Douglas, 2021). However, those results (Ravenswood & Douglas, 2021) do not reflect the experiences of Māori care and support workers towards achieving these outcomes – wāhine Māori face different and more barriers, some finding that they have fewer career opportunities and therefore a longer period in lower paid jobs than their pākehā colleagues (Te Rūnanga o ngā Toa Āwhina, n.d.).

It is important to note that while this report may contribute to information on the Māori care and support workforce, it was not designed by Māori nor draws on Māori world views (Henry & Pene, 2001; Smith, G., 1997; Smith, L.T., 2012) so must be read with these limitations in mind. However, it is hoped

that this report respects and acknowledges the time and effort of the Māori care and support workers who shared their experiences and knowledge through the survey.

2 Participant demographics

2.1 Gender, age and location

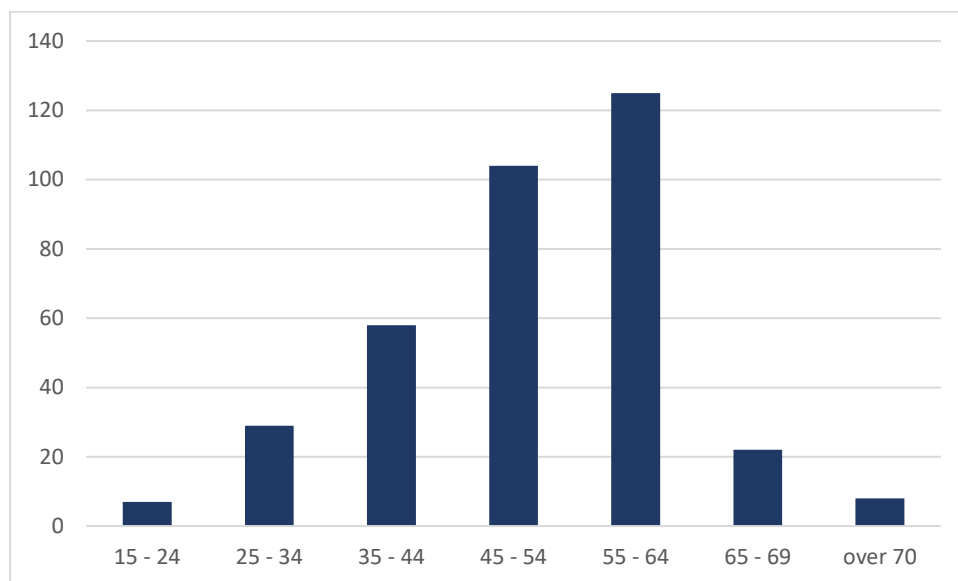
A total of 353 responses (19.8% of all care and support workers who responded) were received from care or support workers who identified as Māori—their responses form the basis of this report. The total Māori population of New Zealand in 2021 was estimated to be 17.1% of the total population (Statistics NZ, 2021). A smaller number of Māori respondents worked in residential aged care than in home and community support, disability support and mental health and addiction (see Table 1 below). This is a similar spread of responses by sector when compared with the total care and support workers', with the exception of mental health and addiction support (26.6% of Māori respondents compared to 19.3% overall respondents) and home and community support (32.0% of Māori respondents compared to 39.1% overall respondents).

Table 1. Number of respondents by sector

Primary work area	Care or support worker
Residential aged care	51
Home support	113
Disability support	95
Mental health and addiction support	94
Total	353

The majority of respondents were female (87.8%) with 11.3% identifying as male and a small proportion identifying as gender diverse (0.8%). Almost two-thirds of respondents were aged between 35 and 64 years with 29.5% in the 45–54 year bracket and 35.4% aged 55–64 years (See Figure 1 below). Very small numbers were in the youngest and oldest age brackets, with 2.0% and 2.3% for 15–24 years and 70+ years respectively. Respondents were largely from the North Island (86.0%), in particular Auckland (10.8%), Hamilton (10.0%) and other North Island towns (40.2%).

Figure 1. Number of respondents by age



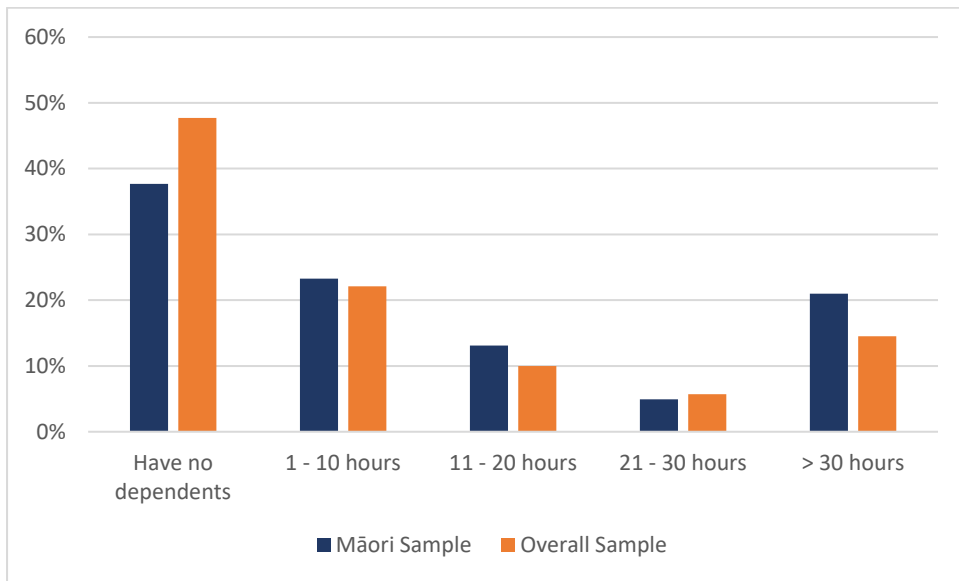
2.2 Household and family care responsibilities

When asked about the provision of income for their household or family, slightly more than half of respondents indicated that their employment provided either most or all of their income (25.3% provided most of the household income with 34.4% indicating they provided all income). This is similar to the responses from all care and support workers overall. A total of 308 Māori support workers responded to this question.

When asked whether they had more than one paid job, only a small proportion (14.0%) indicated that this was the case (from 308 responses). Those who reported having more than one job worked a wide range of hours, with approximately three-quarters of the sample working less than 20 hours at their additional job. Ten percent of respondents (10.3%) indicated that their second job involved working more than 30 hours.

Respondents were also asked how much time they spent in unpaid care of dependent family members (this included children, disabled or elderly relatives). A total of 305 Māori support workers responded to this question. The largest grouping reported having no dependents (37.7%). This is a lower proportion of respondents with no dependents than was found amongst all care and support workers in the survey (47.7% of all care and support workers). Of the remaining respondents, 23.3% spent 1–10 hours per week, 13.1% spent 11–20 hours per week, 4.9% spent 21–30 hours per week and 21.0% spent more than 30 hours caring for dependent family. Considerably more Māori care and support workers (21.0%) than care and support workers overall (14.5%) spent 30 hours or more caring for dependents.

Figure 2. Comparison of care for dependents of Māori vs overall sample of care and support workers



3 Job Characteristics

This section provides information on key characteristics of the job and work that respondents do. In particular, it provides information on hours of work and shifts (including the length and type of shifts, hours of work per week, unpaid hours of work, guaranteed hours of work, and underemployment); hourly pay; employment status (for example, permanent full-time etc) and technology usage.

3.1 Hours of work and shifts

The survey asked respondents to provide details of their shift type and shortest shift length from the previous week. There were 332 and 320 responses to each of these questions respectively. The majority of those responding (45.5%) indicated that they worked a regular day shift, although rotating shifts (18.7%) and split shifts (13.9%) were also frequently mentioned. Approximately one-third indicated that their shortest shift was 8–10 hours (31.9%), however there was quite a spread in the responses to this question with 14.1% working less than one hour, 23.1% working 2–4 hours, 21.6% working 5–7 hours and 9.4% working 11 or more hours.

In addition to details regarding their shift type and length, respondents were also asked about the number of hours they worked (both paid and unpaid) and whether they were guaranteed a minimum number of hours. Just over half of Māori support workers worked 40 hours or more with 33.3% indicating that they worked between 40–49 hours and 23.5% working 30–39 hours. A reasonable percentage (15.8%) worked in excess of 50 hours per week. Almost all respondents were guaranteed a minimum number of hours per week (88.8%).

When asked whether they were expected to work additional hours which were not paid, 331 Māori support workers chose to respond. The majority were never asked to work unpaid hours (55.6%), while approximately one-quarter (26.9%) were asked to work unpaid 'sometimes'.

3.2 Hourly pay and employment status

Respondents were asked to provide details regarding their hourly wage and employment status, with 330 choosing to do so. When asked about their employment status, the majority indicated they were in permanent positions, with 64.2% in permanent full-time roles (compared to 58.9% of all care and support workers) and 30.0% in permanent part-time positions (slightly lower than the 33.6% of care and support workers in general).

At the time of data collection, in September 2019, the adult minimum wage was \$17.70. The majority of Māori support workers were paid at least several dollars per hour above this, with only 4.5% earning in the lowest wage band of \$17.70–\$20.49 per hour. A third of respondents were paid in the next two highest wage bands, with 13.6% being paid \$20.50–\$21.49 and 16.1% paid \$21.50–\$22.99. The

majority however (nearly two-thirds) were paid over \$23.00 per hour, with 30.3% receiving \$23.00–\$25.49 per hour, 27.3% receiving \$25.50 and a smaller percentage (8.2%) being paid more than \$25.50 per hour.

3.3 Smartphone usage and provision

As technological advances mean that smart phones (or similar devices) are more frequently required to log hours, accept shifts, record care and so on, respondents were asked if they were required to use smartphones in the course of their work, and then what, if any, smart phone provision was provided by their employer. A total of 330 people responded to this question, with two-thirds (66.4%) indicating that they were required to use a smartphone or tablet at work.

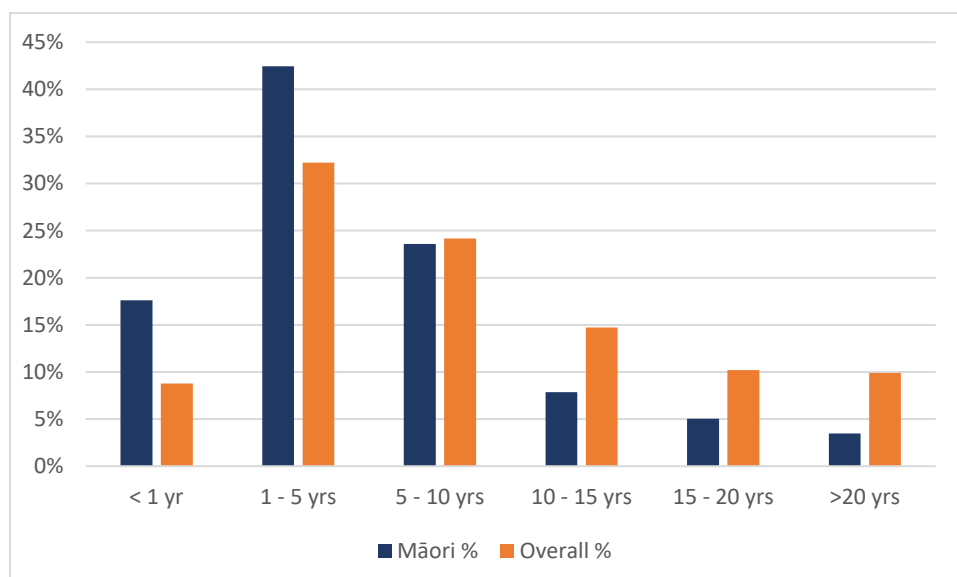
Of those who were required to use a smartphone or similar device, 66.2% of Māori support workers indicated that their work provided the device, with a slightly lower percentage of 52.1% indicating that their employer paid for the data plan.

4 Experience and skills, training and professional development

4.1 Experience

Respondents were asked to provide details regarding length of their experience with their current provider, along with their total length of experience in each sector. A total of 318 responses were provided for this question. Approximately two-fifths (42.5%) indicated they had been with their current provider for 1–5 years. Just under one-fifth had been with their current provider for less than 1 year (17.6%) and nearly one-quarter (23.6%) indicated a length of service between 5–10 years.

Figure 3. Length of experience with provider/service



Respondents were also asked to provide their total length of service (regardless of employer) in each sector: residential care (n= 219), home support (n = 205), disability support (n = 210) and mental health and addiction (n = 217). Across all four sectors, the most common length of service was 1–5 years with 18.7% of residential care workers, 32.2% of home support workers, 26.2% of disability support workers and 20.7% of workers in mental health and addiction services. Of note however, 41.5% of respondents indicated that they had never worked in the mental health and addiction sector. All four sectors also consistently showed 5–10 years as the next most common length of service with 17.4% of residential care workers, 15.6% of home support workers, 17.6% of disability support workers and 11.1% of those working in mental health and addiction services.

4.2 Skills

Respondents were asked on a 5-point scale (strongly disagree to strongly agree) whether they had the skills and abilities that they needed to do their job, and whether they used many of these skills in their current job (n = 294 responses per question). Both questions showed high levels of agreements with 24.1% agreeing and 61.2% strongly agreeing that they had the skills needed, and 21.4% agreeing and 67.7% strongly agreeing that they used these skills in their job.

4.3 Training and professional development

The survey investigated whether support workers had undertaken any training or professional development (provided by their employer) during the last 12 months. A total of 313 Māori support workers answered this question. Approximately one-quarter (26.4%) had not received any training. A small percentage (6.3%) were provided with training, but this was outside of work time and unpaid. The remainder were trained either during work time (43.1%) or were paid for the training outside of their regular working hours (24.2%).

In relation to the training provided, respondents were asked to elaborate on the aims of the training they had undertaken (a total of 288 people responded). Multiple selections could be made from the following options (percentages for each are also included):

- To help you get started in your job (14.2%)
- To improve or update your skills in your current job (67.0%)
- To maintain professional status and/or meet occupational standards (40.3%)
- To prepare you for promotion or a future job (6.9%)
- To develop your skills generally (43.4%)
- Health and safety (50.3%)
- To develop your leadership skills (18.4%)
- To meet the provider's accreditation requirements (35.1%)
- Other (6.6%)

As can be seen above, training was typically provided for the purpose of improving/updating skills or for health and safety.

When asked about their level of satisfaction with opportunities to develop their abilities, half of those responding (50.1%) indicated they were either satisfied or totally satisfied. Almost one-quarter were neutral in relation to this question (23.0%), with smaller numbers reporting they were dissatisfied (13.9%) or totally dissatisfied (12.9%). A total of 287 chose to respond to this particular question.

Perceptions of the adequacy of training in their workplace suggested mixed feelings amongst Māori support workers. A total of 289 rated their satisfaction on a 5-point scale (strongly disagree to strongly agree). Approximately one-quarter were neutral (24.6%) with 17.3% and 31.1% agreeing and strongly

agreeing that adequate training was available in their workplace. Just over one-quarter were in disagreement with this question (15.2% disagreeing and 11.8% strongly disagreeing).

4.4 Qualifications and formal study

Respondents were asked to indicate whether they were studying for a work-related qualification with one-quarter (24.9%) of those responding to this question indicating that they were (n = 313). When asked if they would like to undertake further work-related study, almost three-quarters (72.0%) indicated that they were interested in this (n = 318).

Employer support for study towards further qualifications was investigated by asking what types of support were provided. A total of 300 respondents answered this particular question. The most common type of support provided was group sessions in the workplace (41.0%), followed by paid study time (33.0%). Approximately one-quarter (24.7%) had tuition fees paid for them by their employer, and smaller percentages received a peer mentor or study buddy (13.3%) or literacy support (10.7%). One-quarter (24.7%) indicated that their employer did not provide any support for study towards qualifications.

Respondents were also specifically asked if their employer encouraged and supported them to gain the Level 2 to Level 4 Health and Wellbeing Certificates. Of the 307 Māori support workers who responded to this question, 71.3% indicated that this was the case, slightly lower than the 72.5% of total care and support worker respondents (Ravenswood & Douglas, 2021). This is important to note, because employers are required under the Care and Support Workers (Pay Equity) 2017 Act to "take all reasonably practicable steps to ensure" that their care and support workers can work towards achieving the Level 2 through to Level 4 qualifications.

Respondents were asked to indicate all the qualifications that they hold, with a total of 313 people responding. The survey allowed for multiple qualifications to be selected. The majority of respondents held a Health and Wellbeing Certificate (or equivalent), spread across Level 2 (31.0%), Level 3 (40.6%) and Level 4 (30.4%). Smaller numbers indicated they held a nursing qualification, with 1.9% holding a nursing diploma and 0.3% holding a nursing degree. A range of other qualifications were held by the sample including other undergraduate diploma/certificate (13.7%), other undergraduate degree (8.3%), and other postgraduate qualification (2.9%). Approximately one-tenth of the group (10.5%) indicated that they did not have any formal qualifications.

5 The Work Environment

This section presents information from questions that asked about:

- job security
- satisfaction with pay and hours of work
- time, work pressure and flexibility of hours
- workplace relations
- job satisfaction and quitting intentions

5.1 Job Security

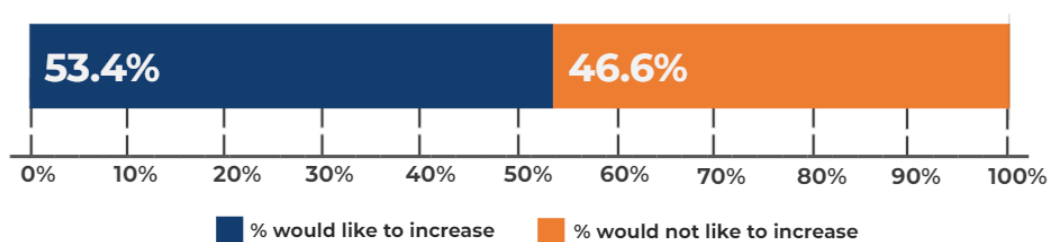
When asked to rate their job security, mixed satisfaction levels were evident, although just over half of Māori support workers indicated they were either satisfied with their job security (22.5%) or totally satisfied (29.7%). Around one-quarter were neutral (24.6%), with smaller percentages expressing dissatisfaction (11.9% were dissatisfied and 11.3% totally dissatisfied). A total of 293 Māori support workers chose to rate their satisfaction for this question.

5.2 Satisfaction with pay and hours of work

Respondents were slightly less positive when asked to rate satisfaction with their total pay. A total of 298 Māori support workers rated their satisfaction for this question, with around two-fifths indicating they were satisfied with their total pay (19.1% were totally satisfied and 20.1% were satisfied). Around one-third (31.5%) rated their satisfaction neutrally, with 15.4% indicating they were dissatisfied and 13.8% totally dissatisfied. This differs from care and support workers overall, of whom 26.5% were dissatisfied or totally dissatisfied with their total pay, 29.5% neutral, and 44.0% satisfied or totally satisfied.

When asked whether the rate of pay fairly reflected the skills, responsibilities and experience needed to do their job, 22.8% indicated that they strongly disagreed that the rate of pay was fair, and 17.3% disagreeing. Around one-fifth (20.4%) responded neutrally to this question, and equal numbers (19.7%) indicated they either agreed or strongly agreed. A total of 294 Māori support workers responded to this question. This differs from care and support workers overall: 41.2% agreed or strongly agreed that their pay rate was fair, 21.1% were neutral, and 37.7% disagreed or strongly disagreed.

Figure 4. Percentage of Māori support workers who would like to increase their regular work hours



Note: n= 328.

Higher levels of satisfaction were seen in relation to the numbers of hours worked. Of the 292 support workers who responded to this question, the majority were satisfied with their hours (21.9% satisfied and 31.8% totally satisfied). Smaller numbers rated this question as neutral (22.6%), dissatisfied (12.7%) and totally dissatisfied (11.0%). The proportion of Māori support workers who were satisfied with the number of hours worked is lower than that of care and support workers overall (57.2%). When asked, just over half of Māori support workers (53.4%) indicated that they would choose to increase their regular hours if given the option (n = 328), similar to that of care and support workers overall (53.9%).

5.3 Workplace relations

This data reports respondents' experience of workplace relations, support from their team or manager, and how respondents perceive that they receive the respect and acknowledgement that they deserve for their efforts and achievements.

5.3.1 Workplace relations, support from team or service provider and recognition

Māori support workers reported relatively high levels of agreement when asked whether management and employees had good relations in the workplace. A total of 284 people responded to this question, with almost half indicating that they agreed (18.3%) or strongly agreed (26.1%) that good relations between management and employees were evident, higher than care and support workers overall (40.4% agreed or strongly agreed). Just under one-quarter of Māori support workers responded neutrally (23.2%) with equal numbers (16.2%) disagreeing or strongly disagreeing with this question.

Similar levels of satisfaction were seen in relation to the level of support received from their team or service provider. Almost half of the 287 responses to this question indicated that Māori support workers were satisfied (19.5%) or totally satisfied (28.9%) with the level of support they received. Approximately one-quarter (24.7%) were neutral with smaller percentages indicating dissatisfaction (15.0%) or total dissatisfaction (11.8%). These are lower levels of satisfaction with support received from their team or service provider than of care and support workers overall of whom 54.3% indicated that they were totally satisfied or satisfied.

Table 2. Satisfaction with support received from team/service provider

	% of Māori (n= 287)	% of Overall (n= 1,944)
Totally dissatisfied	11.8	10.8
Dissatisfied	15.0	14.9
Neutral	24.7	19.9
Satisfied	19.5	25.8
Totally satisfied	28.9	28.5
Total	100.0	100.0

Views on the level of respect and acknowledgement that workers received were also relatively positive. Respondents were asked to rate their level of agreement with the following statement, “Considering all my efforts and achievements, I receive the respect and acknowledgement I deserve”. There were 295 responses to this question, with almost half agreeing with the statement (21.0% indicating they agreed and 28.8% strongly agreeing). Approximately one-fifth (21.4%) were neutral with 14.9% disagreeing, and 13.9% strongly disagreeing.

5.3.2 Time, work pressure and flexibility

This section gathered information about whether respondents were able to spend enough time with each client, if they felt under pressure to work harder, and how satisfied they were with the flexibility available to them to balance work and non-work commitments. For each of the three questions there was a total of 292 responses.

When asked whether they were able to spend enough time with their clients, almost half of the responses to this question indicated agreement (19.9% agreed and 28.4% strongly agreed with the statement), this is a lower than care and support workers overall (27.1% strongly agreed and 23.0% agreed). Approximately one-quarter (24.7%) were neutral with smaller percentages indicating disagreement (15.1%) or strong disagreement (12.0%).

Responses to the statement, “I feel under pressure to work harder in my job” suggested a slightly more negative response. While 22.6% strongly disagreed and 19.2% disagreed with this statement, indicating that they did not feel pressure, almost one-fifth of Māori support workers (17.8%) strongly agreed and 12.7% agreed with this statement.

In relation to the flexibility to balance work and non-work commitments, respondents were largely positive. Just over half indicated satisfaction with this aspect of their employment (21.6% were satisfied and 29.5% totally satisfied). This is a little lower than the 53.8% of care and support workers overall who were satisfied or totally satisfied with the flexibility to balance work and life. Approximately one-quarter of Māori care and support workers (24.3%) were neutral with smaller percentages indicating dissatisfaction (11.0%) or total dissatisfaction (13.7%).

5.3.3 Job satisfaction and intention to quit

When considering job satisfaction, there were very high levels of satisfaction shown amongst Māori support workers. Approximately three-fifths of respondents indicated that they were satisfied with their job “all things considered”, with one-third (33.8%) indicating they were totally satisfied and 28.0%

rating themselves as satisfied. This is lower than the 63.4% of care and support workers overall who were satisfied or very satisfied with their job. Very small numbers reported dissatisfaction (8.9%) or total dissatisfaction (3.8%). A total of 293 people responded to this question.

Similarly, high levels of satisfaction were shown for the work itself. Just over 70% of the 295 respondents indicated that they were satisfied (33.6%) or totally satisfied (36.9%) with the work that they did. Very small numbers reported dissatisfaction (8.5%) or total dissatisfaction (5.1%).

A total of 271 Māori support workers responded to the question, "I plan to look for a new job within the next 12 months". While 41.0% strongly disagreed with this statement, 18.1% strongly agreed and 10.3% agreed, indicating a high likelihood that they planned to look for other employment at some stage over the following 12 months. The remaining respondents were reasonably evenly split between the remaining response categories, with 14.4% disagreeing with the statement, 16.2% indicating they were neutral.

Respondents were also asked what the main reason would be if they decided to leave their job in the following 12 months. A total of 299 Māori support workers chose to respond to this question. Family reasons (19.7%), stress/burnout (15.7%), and employment conditions (11.7%) were the most commonly cited reasons. Pay (8.4%), retiring (8.0%), and other health-related reasons (6.7%) were also mentioned.

When asked whether they would recommend their job to friends and family, only 16.0% of respondents indicated that they would not, 42.5% indicated that they would recommend it, and 41.5% said that they would maybe recommend their job to friends and family. A total of 299 Māori support workers responded to this question.

6 Workplace Health and Safety

This section reports on findings related to health and safety. The survey asked for responses on stress, perceptions of safety at work, and how well respondents are supported with equipment and knowledge to undertake their work. Respondents were also asked about their experience of workplace related injuries and illnesses and workplace violence.

6.1 Workplace Stress

Respondents were asked to indicate whether they agreed, disagreed, or were neutral about the statement, “My job is more stressful than I had ever imagined”. A total of 291 Māori care and support workers responded. Approximately two-fifths of respondents indicated that they disagreed with this statement to some extent (23.7% strongly disagreed and 19.2% disagreed. Around one-third agreed or strongly agreed with this statement however (16.2% each for these response categories), slightly lower than the 40.1% of care and support workers overall who disagreed or strongly agreed. A total of 291 Māori support workers responded to this question.

6.2 Safety at work

In order to assess safety in the workplace respondents were asked, “How safe do you feel at work?”, with options for very unsafe, unsafe, safe and very safe. The 313 responses provided for this question indicated that by far the majority of Māori support workers felt safe (55.0%) or very safe (28.1%) in their workplace. This differs considerably from the overall responses from care and support workers, of which 61.1% felt safe or very safe at work. Of note, only 3.5% reported feeling very unsafe.

Two additional questions assessed whether support workers felt they had the tools and resources they needed to do their job safely. A total of 310 respondents answered these two questions. When asked to rate their agreement with the following statement, “I have the tools and equipment to do my job safely”, the majority indicated agreement (36.5% strongly agreed with the statement and 20.3% agreed). This is considerably higher than the overall response from care and support workers of which 26.2% agreed and 31.6% strongly agreed. Very small numbers indicated that they strongly disagreed (6.5%).

A slightly less positive response was seen for the statement “I am told everything I need to know to do my job safely”. The percentage of Māori support workers strongly agreeing with the statement was lower at 27.7%, and 19.7% indicating agreement. Around one-quarter disagreed with the statement to some extent, with 10.3% strongly disagreeing and 15.8% disagreeing. The percentage of Māori care and support workers who disagreed and strongly disagreed that they are told everything they need to know to do their job safely was a little higher than amongst care and support workers overall (8.8% strongly disagreed and 16.6% agreed).

6.3 Work-related injury or illness

Respondents were asked to identify any of the work-related injuries or illnesses that they had suffered in the last 12 months. Options included back injuries, chronic joint or muscle, cut/slash open wound, stress or other mental health condition, burns, fracture, sprain/strain, minor injury, needle stick injury, amputation, bruising or other. An option was also provided for them to indicate that they had had no injuries or illnesses. Stress or other mental health conditions were by far the most prevalent (62.0% of the 158 respondents reported this). This was followed by bruising (29.7%), back injuries (28.5%), chronic pain or muscle (25.3%), sprain/strain (20.3%) and minor injury (17.1%). Much smaller numbers were reported for cut/slash open wound (5.7%), burns (3.8%), fracture (2.5%), and needle stick injury (1.9%). Of note, one respondent reported an amputation caused by a work-related injury.

When asked to report the cause of their most recent work-related injury or illness (in the last 12 months), a wide range of causes were reported including lifting, pushing, pulling and bending (22.6%), exposure to mental stress (21.3%), fatigue (14.8%) and other (13.5%). Smaller numbers were reported for hitting, being hit or being hit or cut by person, object or vehicle (9.0%), repetitive movement (7.7%), fall or slip (7.7%), vehicle accident (1.3%), contact with a chemical or substance (1.3%) and long-term exposure to sounds (0.6%). A total of 155 Māori support workers responded to this question.

The survey also asked whether the most recent injury (in the last 12 months) had resulted in time off work. Of the 166 Māori support workers who responded to this question, 57.8% indicated that they had required time off their employment, which is somewhat higher than the 49.0% of care and support workers overall who reported that their most recent injury had resulted in time off their employment.



62.0%

of those reporting a work-related injury or illness identified stress or other mental health as a concern

&

57.8%

indicated that they had required time off their employment because of their work-related injury or illness.

6.4 Workplace violence from clients and their families

Respondents were asked to consider their experience of workplace violence. They were asked about their experiences of workplace violence received from 1) clients and clients' family; and 2) colleagues and managers. Specifically, they were asked how often they experienced the following types of violence:

- **physical violence** – for example, hitting, pushing, slapping
- **verbal aggression** – for example, swearing, yelling and shouting
- **emotional abuse** – for example, name calling, bullying and threats
- **sexual harassment** – for example, unwanted sexual attention
- **sexual violence** – for example, unwanted physical sexual contact

These questions were derived from peer-reviewed studies on workplace violence in home and community support (Hanson et al., 2015; Nakaishi et al., 2013).

Respondents were asked to rate the frequency with which they had experienced workplace violence from either clients or their families. A five-point scale was provided with response options of never, sometimes, often, most of the time and always. Separate questions asked them to consider their experiences of physical violence, verbal aggression, emotional abuse, sexual harassment and sexual violence.

Māori care and support workers indicated that they typically had not experienced physical violence (e.g. hitting, pushing, slapping) with 55.1% responding that they had 'never' experienced this type of violence. Around one-third reported experience of it 'sometimes' (32.9%) with 8% reporting it 'often'. Very small numbers reported the experience of physical violence 'most of the time' (3.7%) or always (0.3%). A total of 301 Māori care and support workers responded to this question.

Reports of verbal aggression (e.g. swearing, yelling, shouting) were more common, with almost three-quarters of the 300 respondents reporting that they had experienced this verbal aggression at least 'sometimes' (43.0% 'sometimes'; 19.0% 'often'; 6.7% 'most of the time'; 4.3% 'always').

Emotional abuse was less frequent (this included name calling, bullying and threats). From the total of 295 respondents, very small numbers reported that they experienced emotional abuse 'most of the time' (2.7%) or 'always' (2.7%) and just over half (50.2%) indicated that they had 'never' experienced this.

Sexual harassment (e.g. unwanted sexual attention, leering, comments on sexual life) and sexual violence (e.g. unwanted physical sexual contact) were the least frequently reported. With regard to sexual harassment, 81.2% reported that this had 'never' occurred (compared to 76.1% of the overall care and support worker respondents). Less than one-fifth (16.8%) reported that this had 'sometimes' occurred. Likewise, sexual violence had 'never' occurred to 93.5% of those responding to this question. Of note however, 2.0% of respondents reported the experience of sexual harassment 'most of the time' or 'always' and 0.6% reported sexual violence 'most of the time' or 'always'. A total of 292 and 289 Māori support workers responded to these two questions respectively. While a very small percentage of responses, it is sobering to note that some care and support workers experience sexual harassment and sexual violence from clients or clients' families *always*.

Table 3. Experience of violence at work from clients or their families

	Percentage of respondents who have experienced:				
	Physical violence	Verbal aggression	Emotional abuse	Sexual harassment	Sexual violence
Never	55.1	27.0	50.2	81.2	93.8
Sometimes	32.9	43.0	32.2	16.8	5.5
Often	8.0	19.0	12.2	1.7	-
Most of the time	3.7	6.7	2.7	-	0.3
Always	0.3	4.3	2.7	0.3	0.3

Note: n= 353

6.4.1 Workplace violence from colleagues or managers

The same rating scale and questions were used to assess respondents experience of violence with colleagues or managers. Both physical and sexual violence were infrequent, with most Māori support workers reporting that they had ‘never’ experienced these types of violence (93.5% and 98.0% respectively). Likewise, 96.7% of respondents indicated that they had never experienced sexual harassment from colleagues or managers. Verbal aggression and emotional abuse were more common, although this was still not widespread. Around three-quarters of respondents (73.6%) had ‘never’ experienced verbal aggression or emotional abuse from colleagues or managers. Very small numbers indicated they experienced this ‘most of the time’ or ‘always’ however (1.3% for verbal aggression and 1.6% for emotional abuse). The number of support workers responding to each of these questions varied from 300 to 306.

Table 4. Experience of violence at work from colleagues or managers

	Percentage of respondents who have experienced:				
	Physical violence	Verbal aggression	Emotional abuse	Sexual harassment	Sexual violence
Never	93.5	73.6	73.6	96.7	98.0
Sometimes	4.6	21.5	18.5	3.0	1.7
Often	0.7	3.6	6.3	-	-
Most of the time	1.0	1.0	1.3	-	-
Always	0.3	0.3	0.3	0.3	0.3

Note: n= 353

7 Conclusion

When asked about the provision of income for their household or family, slightly more than half of respondents indicated that their employment provided either most or all of the income (25.3% provided most of the household income with 34.4% indicating they provided all income). This is similar to the responses from all care and support workers overall regardless of ethnicity. A total of 308 Māori support workers responded to this question.

Respondents were also asked how much time they spent in unpaid care of dependent family members (this included children, disabled or elderly relatives). The largest grouping reported having no dependents (37.7%). This is a lower proportion of respondents with no dependents than was found amongst all care and support workers in the survey (47.7% of all care and support workers).

Considerably more Māori care and support workers (21.0%) than care and support workers overall (14.5%) spent 30 hours or more caring for dependents.

Just over half of Māori support workers worked 40 hours or more with 33.3% indicating that they worked between 40–49 hours and 23.5% working 30–39 hours. A reasonable percentage (15.8%) worked in excess of 50 hours per week. Almost all respondents were guaranteed a minimum number of hours per week (88.8%).

The majority however (nearly two-thirds) were paid over \$23.00 per hour, with 30.3% receiving \$23.00–\$25.49 per hour, 27.3% receiving \$25.50 and a smaller percentage (8.2%) being paid more than \$25.50 per hour. 16.1% paid \$21.50–\$22.99. A big majority, therefore, were earning more than the 2019 living wage of \$21.15.

Experienced workforce with only 17.6% having been with their employer for less than one year. Skilled workforce with 85.3% agreeing or strongly agreeing that they have the skills needed to do their job; and 89.1% agreeing that they used these skills in their job.

A good proportion (67.3%) of the respondents do receive training that they are paid for or is on work time. However, 26.4% of respondents had not received any training in the prior 12 months to the survey being conducted in late 2019. Only 50.1% of respondents were satisfied or totally satisfied with opportunities to develop their abilities; and fewer than half (48.4%) agreed or strongly agreed that adequate training was available in their workplace. This is of some concern, as lack of training can hinder the development of Māori individuals in this workforce, but also have ongoing effects for the Māori and total workforce, especially when there are ongoing skills and labour shortages.

Perhaps unsurprisingly, given the responses to training, 72.0% of Māori care and support workers indicated that they would be interested in further work-related study. 71.3% of respondents responded that their employers supported them to gain the Level 2 to Level 4 Health and Wellbeing Certificates. This might contribute to the majority of respondents holding one of the Certificates. However, this means that 28.7% are not supported and encouraged to work towards these qualifications, potentially contrary to the Act. Despite this, the Māori care and support workforce is a well-qualified workforce with additional (to the Health and Wellbeing qualifications) qualifications such as: 1.9% holding a nursing diploma and 0.3% holding a nursing degree. A range of other qualifications were held by the sample including other undergraduate diploma/certificate (13.7%), other undergraduate degree

(8.3%), and other postgraduate qualification (2.9%). The 10.5% who hold no formal qualifications may need more support to work towards the Level 2 to Level 4 Health and Wellbeing Certificates.

The work environment is not optimal for Māori care and support workers: only 52.2% of respondents were satisfied or totally satisfied with their job security; 29.2% were dissatisfied or totally dissatisfied with their hourly pay and 40.1% disagreeing or strongly disagreeing that the rate of pay reflected the skills, responsibilities and experience needed to do their job. More than half (53.4%) of respondents would choose to increase their weekly hours if given the option. Furthermore, fewer than half (48.4%) of respondents indicated that they were satisfied or totally satisfied with the level of support from their team or service provider. This is lower than the 52.5% of care and support workers overall who were satisfied or totally satisfied with the level of team or service provider support (Ravenswood et al., 2021).

A quarter (25.2%) of Māori care and support workers agreed or strongly agreed to the statement “I feel under pressure to work harder in my job”, and 27.1% disagreed or strongly disagreed that they had enough time to spend with their clients. Well known reasons that contribute to feeling pressure to work harder, and a lack of time to spend with clients include understaffing, and models of care and funding that aim to minimise cost, focusing on reducing time with clients to the lowest possible.

All things considered, 61.8% responded that they were satisfied with their job overall. This is a little lower than the 63.4% of care and support workers overall who were satisfied or very satisfied with their job. Fewer than half of the respondents (42.5%) would recommend this job to their friends and family. Although this survey did not ask further questions about job satisfaction, other research on Māori employees across different industries indicates that cultural support and inclusive work environments leads to better outcomes for Māori employees and their employers such as improved work-life balance satisfaction, increased loyalty and organisational citizenship behaviours (Brougham et al, 2022). Non-Māori leaders, and organisational culture places boundaries and limits on careers of Māori professionals (Staniland et al. 2021), especially when efforts to recruit and retain Māori employees are ignorant of te ao Māori (Staniland et al., 2020).

The majority of Māori care and support workers (83.1%) felt safe or very safe at work, although just over one quarter (26.1%) disagreed or strongly disagreed that they were told everything they need to know to do their job safely. Of those who reported a work-related injury or illness in the last 12 months, the most prevalent reported was 'stress or other mental health conditions', followed by bruising and back injuries. Perhaps unsurprisingly, the most commonly identified causes were 'lifting, pushing, pulling and bending' and 'exposure to mental stress'. Of concerns is that of the Māori support workers who responded to this question, 57.8% indicated that they had required time off their employment. This is of concern in itself, but especially so in comparison to care and support workers overall of whom only 49.0% of those who experienced a work-related injury or illness required time off work.

Workplace violence is an issue of concern that is only recently been recognised in research and policy development. Although a minority of Māori care and support workers experienced workplace violence all the time, this is an issue of concern:

- almost three-quarters of the 300 respondents reported that they had experienced verbal aggression from clients (or clients' families) at least 'sometimes' (43.0% 'sometimes'; 19.0% 'often'; 6.7% 'most of the time'; 4.3% 'always');
- 16.8% reported that sexual harassment had 'sometimes' occurred;
- 0.3% of respondents reported experiencing sexual harassment 'always'.
- and 0.6% reported sexual violence 'most of the time' or 'always'.

Workplace violence perpetrated by colleagues or managers was less frequently reported than that received from clients. This survey did not capture whether racism was experienced itself, or in relation to workplace violence.

The Māori care and support workforce is skilled, experienced and qualified. However, the results of this survey indicate that there are some issues that should be addressed by employers in order to improve the retention of this workforce. For example, more opportunity to develop their abilities, more regularly weekly hours, as well as flexibility in work to accommodate personal and family life. Some systemic issues still need addressing, as indicated by dissatisfaction with the hourly pay, and insufficient time to provide care for clients. Attention to providing safe working environments is necessary as a large proportion of respondents whose recent work related injury or illness had required time off work. Additionally, reducing pressure to work harder, and reducing stress levels are important issues that need to be addressed. Although this is a highly qualified workforce, better support and increased training opportunities are important for a significant minority of these workers who may be left behind if not supported to complete Health and Wellbeing certificates. Addressing some of these issues could make this a more attractive career and decrease the proportion of Māori care and support workers who intend to leave their job and increase the proportion who would be likely to recommend the job to others.

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**NEW ZEALAND
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Auckland University of Technology, Auckland, New Zealand
work.research@aut.ac.nz | www.workresearch.aut.ac.nz

