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Maori Information

Social Issues

NEW ZEALAND

Planning
Council

*Te Kaunihera Whakakaupapa
Mo Aotearoa*

NZPC

Maori Information Papers -

Paper 2: Social issues

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Acknowledgements

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This paper draws on information contained in the following Planning Council publications:

Care and Control: the Role of Institutions in New Zealand

From Birth to Death II (an overview of social trends)

Diversity and Change: Regional Populations in New Zealand

The relevance of information to planning

Information is essential for planning. It can help ascertain where you are, and where you want to go.

To avoid higgledy-piddledy decision-making, information can be used by iwi authorities to:

- (i) understand the current situation;
- (ii) set priorities for action;
- (iii) estimate the cost of a course of action; and
- (iv) monitor progress towards the achievement of goals and objectives.

Family circumstances

Introduction

Many social services, such as care of the young and the elderly, are provided within the family. Consequently, there is a close relationship between family well-being and the well-being of the individual. For instance, children who come from unstable families tend to experience behavioural and learning difficulties more frequently than other children.

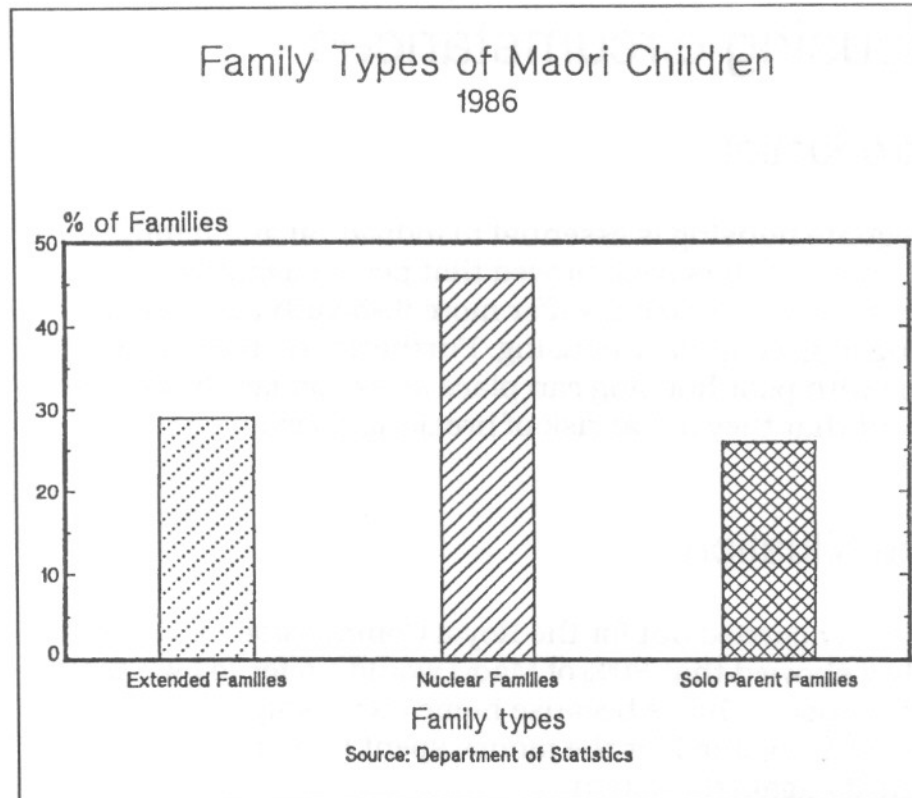
The situation

While the family circumstances of the Pakeha are mainly characterised by the 'nuclear family' (two parents and children living as an isolated unit), those of Maori are characterised by a range of family types.

The figure opposite demonstrates this diversity. In 1986:

- 28% of Maori children were being raised in extended families;
- 46% in nuclear families; and
- 26% in solo-parent families.

Also, Maori parents tend to be a lot younger than Pakeha parents and may therefore not have had time to achieve much financial security, especially in these times of high unemployment.



Implications

Social policies need to recognise the diversity of Maori family circumstances and allow for the strengths and weaknesses of different family environments. For example, extended families provide opportunities for support and learning not available to children being raised in solo-parent and nuclear families. It is therefore important to find ways of encouraging and helping families to link with their extended family members who live locally, as well as link back to their iwi base.

The recognition of iwi as a base with which government can negotiate has re-established the iwi as an entity to be reckoned with. This reawakening is not without its trauma, conflict and tensions, but all in all a very healthy sign of a rejuvenating people.

Housing circumstances

Introduction

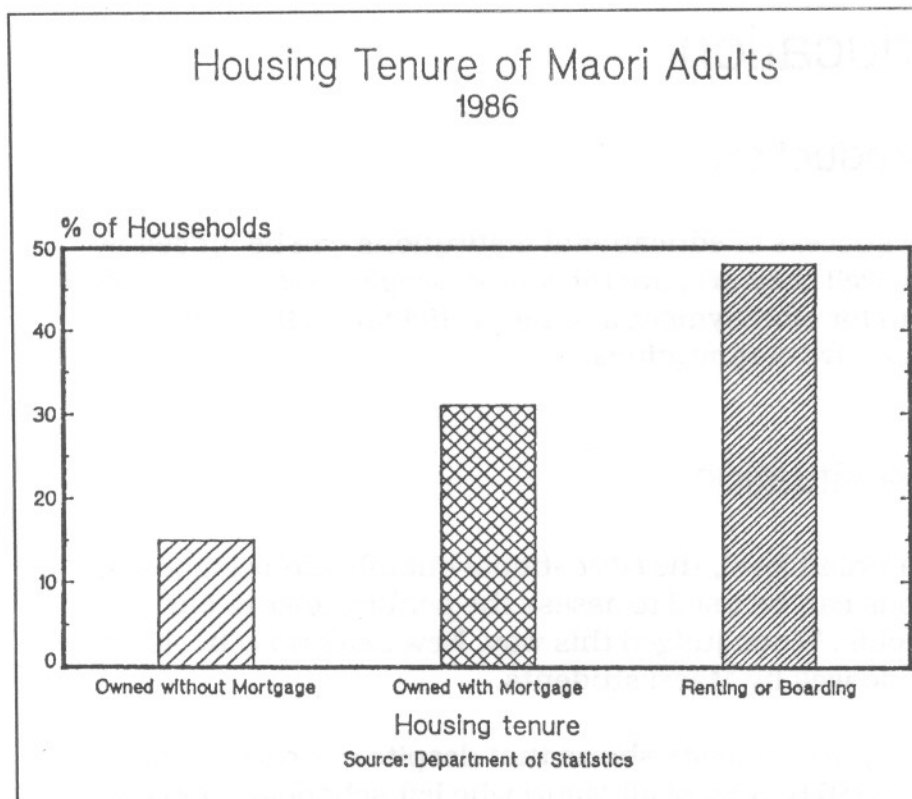
Adequate housing is essential to individual and family well-being. It has been proved that people living in sub-standard housing suffer more ill-health than those living in good quality housing. Furthermore, having to cope with poor housing can place stress on families to the extent that they are at risk of breaking apart.

The situation

A survey carried out for the Royal Commission on Social Policy showed that 80% of Maori would prefer to own their own houses. This is because home ownership represents something gained for the money spent and provides security against eviction.

Despite this strong preference, most Maori do not own the house in which they live. The figure opposite shows that in 1986:

- only 13% of Maori lived in houses they owned mortgage-free;
- 34% lived in houses they owned but with a mortgage;
- and most (48%) lived in houses they rented.



Implications

More flexible housing policies — and more flexible financial arrangements — are required to make it possible for Maori to own their own homes.

In some cases, this might only involve the size of houses. Public housing bodies could consider building homes large enough to house an extended family. And members of extended families could consider pooling resources to buy or build homes to house them all.

Another option is to own the house, but lease the land. This cuts down the initial capital required. The land could always be bought at a later date.

A further possibility is to extend the papakainga concept to towns.

Education

Introduction

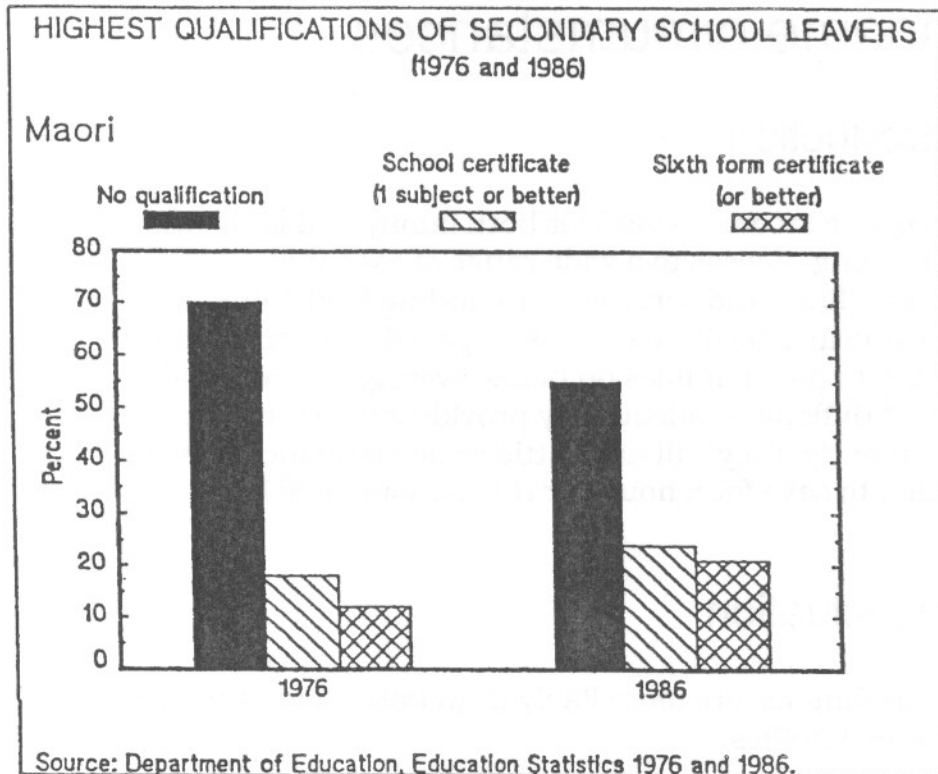
The success of educational institutions can be judged by how well they prepare the young people passing through them for employment and for participation in their respective communities.

The situation

At a broad level, the educational qualifications gained by pupils can be used to assess the performance of our schools. When judged this way, New Zealand schools do not do well by Maori students.

The figure opposite shows that despite improvements since 1976, 55% of all Maori who left school in 1986 had **no** academic qualification whatsoever.

By contrast, around 50% of all Pakeha school-leavers had achieved sixth form certificate or better.



Implications

The potential of kohanga reo to reverse the trends noted above needs to be encouraged. In particular, it is important that primary and secondary schools be responsive to the needs of those coming through from the kohanga. The kurakaupapa Maori initiative also needs to be encouraged.

For iwi, there is a clear case for them getting more involved in schools in order to influence their future direction. This includes being available for the teaching of Maoritanga and iwitanga in schools as well as on the marae.

Income circumstances

Introduction

Adequate income is vital for both family and individual well-being. Access to a wide range of essential commodities and services — including food, housing, clothing and health care — is largely dependent upon the ability to pay. Families on below average incomes today find it difficult to adequately provide for their members. Frequently, they will have little or no spare income with which to save for a house or the occasional holiday.

The situation

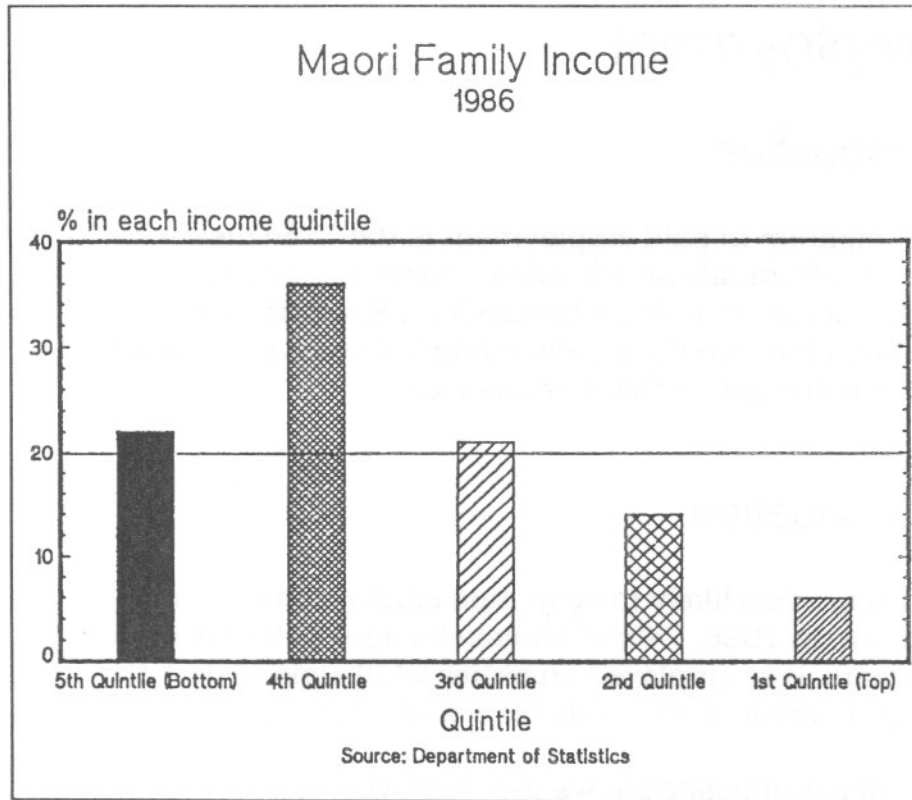
Maori families are more likely than Pakeha ones to be low income families.

The income situation of Maori families is shown in the figure opposite. As you can see, there are too many Maori families in the bottom income-groups and too few in the top income-groups.

If income distribution for Maori was the same as for the total population, we would expect 20% of Maori families to be in each of the five income-groups (or quintiles).

Instead, for example:

- 36% of Maori families are in the second-to-bottom income-group, nearly twice as many as for the population as a whole;
- only 6% of Maori families are in the top income-group, compared with 20% of families in the population as a whole.



Implications

The key to adequate income is paid employment. This is discussed on the pages following.

Employment

Introduction

Participation in paid employment is the main means by which individuals and families receive the income necessary to provide for themselves. Exclusion from paid employment usually means reliance upon a state benefit and a resultant low level of income.

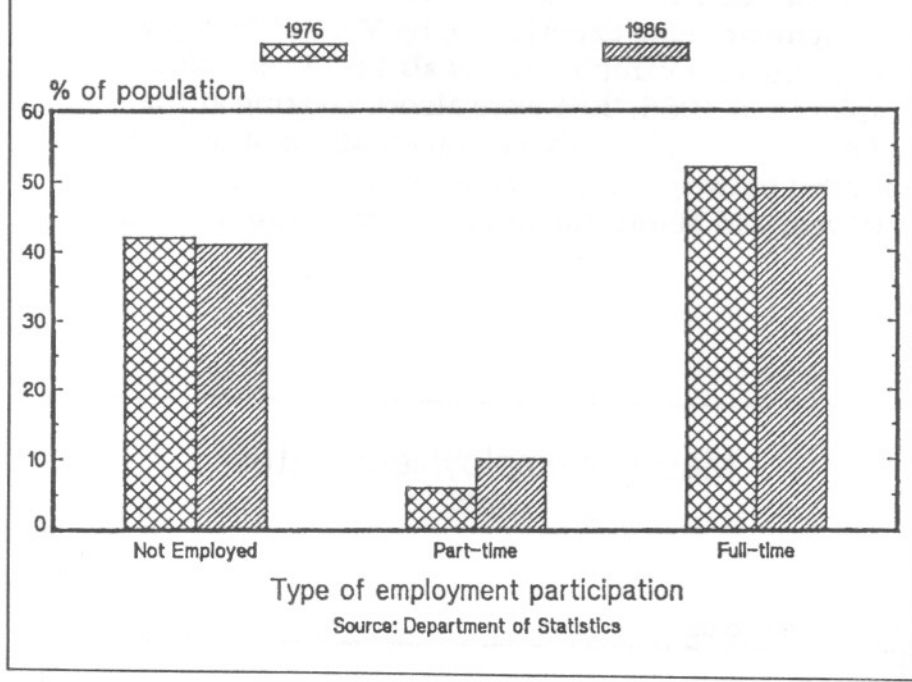
The situation

Maori are less likely to be in paid employment than Pakeha. In 1986, 74% of all Pakeha aged between 15 and 60 years were employed on either a full-time or part-time basis, compared with only 59% of all Maori.

The figure opposite shows the employment participation of Maori at the time of the 1976 and 1986 Censuses. As you can see, the proportion of Maori aged between 15 and 60 years in full-time employment declined during those years from 52% to 49%.

Over the same period the proportion working part-time increased by 3%. The overall effect was a slight drop in the numbers of Maori not employed at all. This is essentially because more women have entered paid work over that time.

Employment Participation of Maori Aged 15-59 1976 & 1986



The other side of the coin is unemployment, which is briefly outlined on the following page.

Unemployment

Of particular concern are the very high levels of youth unemployment being experienced by Maori. The figure below shows, for example, that of **all** 15-17 year-olds unemployed in 1986, 20% were Maori. Looking at the Maori population alone, this means that about 35% of Maori aged between 15 and 17 were unemployed. For 18 and 19 year-old Maori, the unemployment rate was 20%.



Implications

Iwi could help reduce the problem of unemployment by setting up collectives to carry out community projects. Ideally, these projects would combine learning skills with producing marketable commodities.

Iwi could also encourage and organise refresher, retraining or basic skills programmes, using marae or any other suitable venue and bringing in local teachers and experts.

Health

Introduction

Over the course of the last 150 years, Maori health status has improved markedly. Upon contact with Europeans, the life expectancy of the average Maori fell to about 20 years. By contrast, a Maori born today can expect to live for about 69 years if female, and about 64 years if male.

These improvements can largely be attributed to the success of a variety of public health initiatives, including the adequate provision of clean drinking water, sewage systems and disease inoculation.

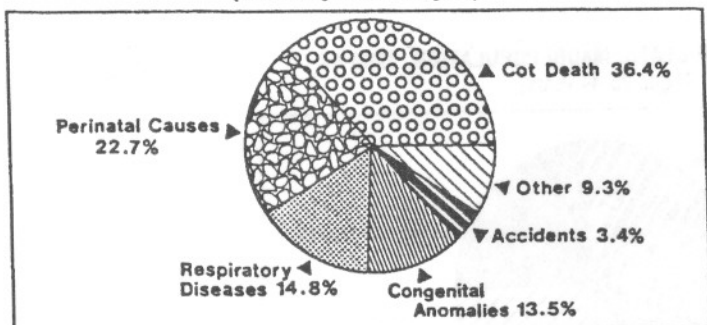
The situation

Despite the improvements, a Maori born today is three times more likely than a Pakeha to die in the first year of life; and is estimated to have a life expectancy eight years less than that of a Pakeha child.

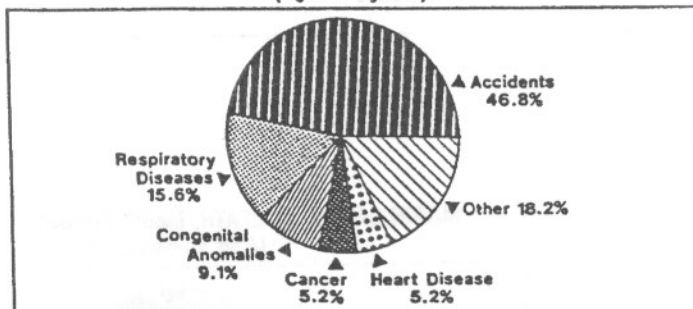
Furthermore, Maori are admitted to hospitals more frequently than Pakeha — often for reasons partially related to poverty and poor housing circumstances, such as respiratory conditions and ear infections. For example, a recent statistic shows 8,417 hospital admissions for every 10,000 Maori infants, as opposed to 3,726 admissions for every 10,000 non-Maori infants.

The figures opposite show the major causes of death for the Maori population, divided into seven age-groups.

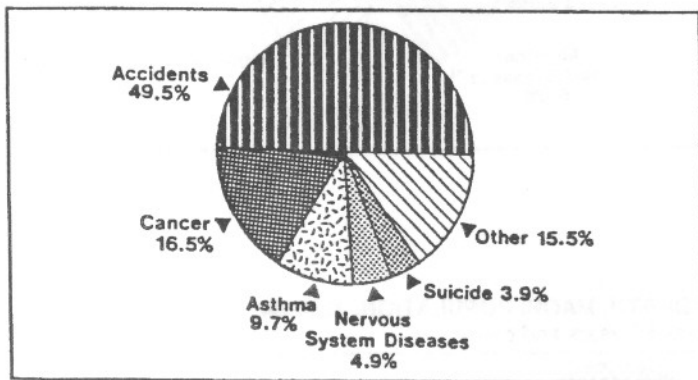
MAJOR CAUSES OF DEATH, MAORI POPULATION, 1980-84
(Infants aged under 1 year)



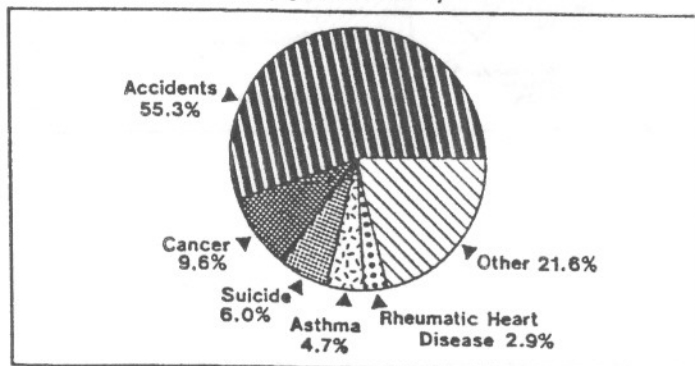
MAJOR CAUSES OF DEATH, MAORI POPULATION, 1980-84
(Ages 1-4 years)



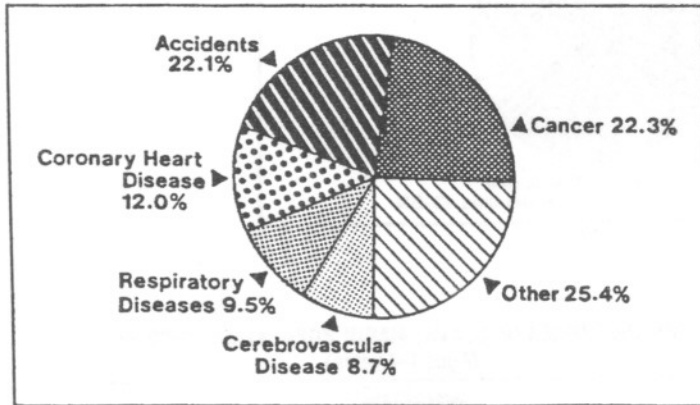
MAJOR CAUSES OF DEATH, MAORI POPULATION, 1980-84
(Ages 5-14 years)



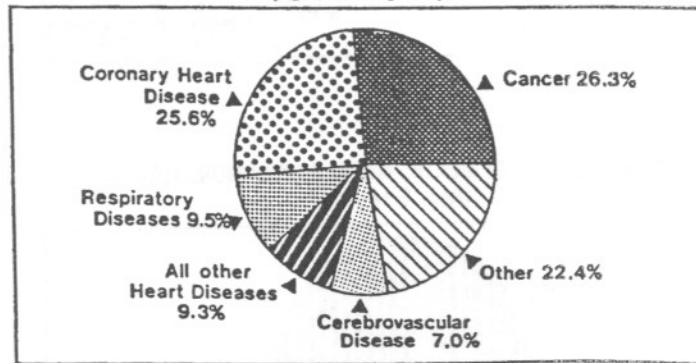
MAJOR CAUSES OF DEATH, MAORI POPULATION, 1980-84
(Ages 15-24 Years)



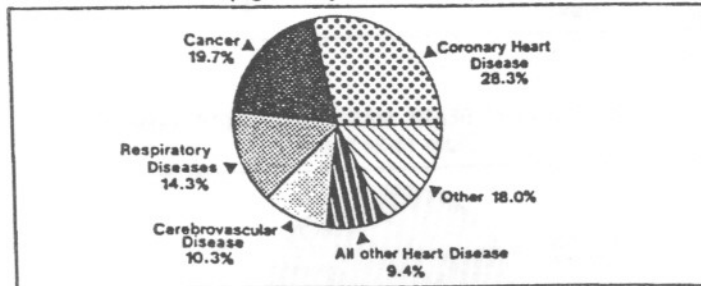
MAJOR CAUSES OF DEATH, MAORI POPULATION, 1980-84
(Ages 25-44 years)



MAJOR CAUSES OF DEATH, MAORI POPULATION, 1980-84
(Ages 45-64 years)



MAJOR CAUSES OF DEATH, MAORI POPULATION, 1980-84
(Ages 65 years and over)



Source: *Hauora: Maori Standards of Health*, Department of Health, 1988

Implications

Health is one area where people can do a lot for themselves. By devising and following fitness and diet programmes, for example, an immediate improvement could be achieved in Maori health.

More specifically, iwi could:

- set up a “wellness programme” for each marae or area, perhaps even clinics;
- have a “wellness register” of all people in their area;
- monitor programmes regularly;
- run education programmes — bring in speakers, etc;
- visit schools, kohanga, homes, marae to impress upon people the importance of good health.

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