

# Hear our voices!

Grandparent whanau caregivers have their say

Report on the GRG (NZ) Trust research 2016



Study of 1100+ grandparents and 1300+ grandchildren undertaken between March and May 2016. Large (160 question) online and telephone survey.

Thanks to funders the Lotteries Community Sector Research Fund.

Thanks to the University of Canterbury for ethical support and use of survey software.

The research was carried out by a team from Pukeko Research Ltd with support from Grandparents Raising Grandchildren (NZ) Trust.

This is a 'first cut' report – far more to come!

## Who are the grandparent carers – 2013 census

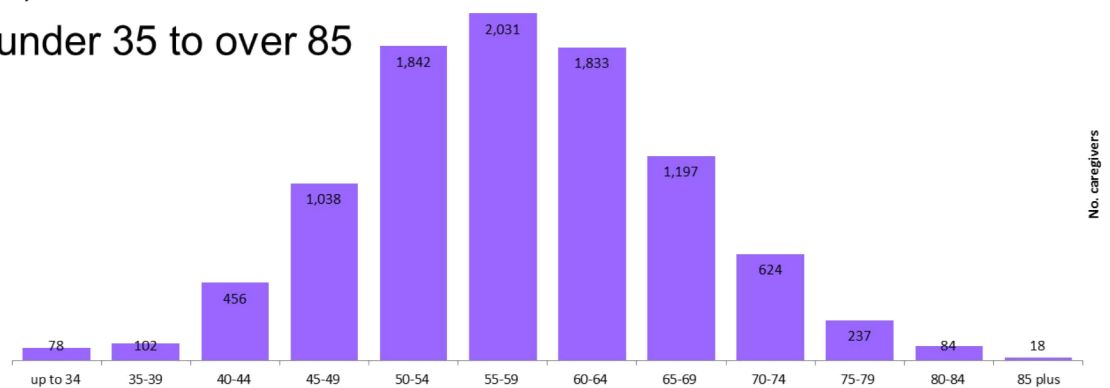
9543 grandparent families as parents

6432 couples and 3111 single grandparent families

Most live in Northland, Auckland, Waikato, the Bay of Plenty and the remainder of the North Island

45% pākehā, 43% Māori and 13% Pasifika

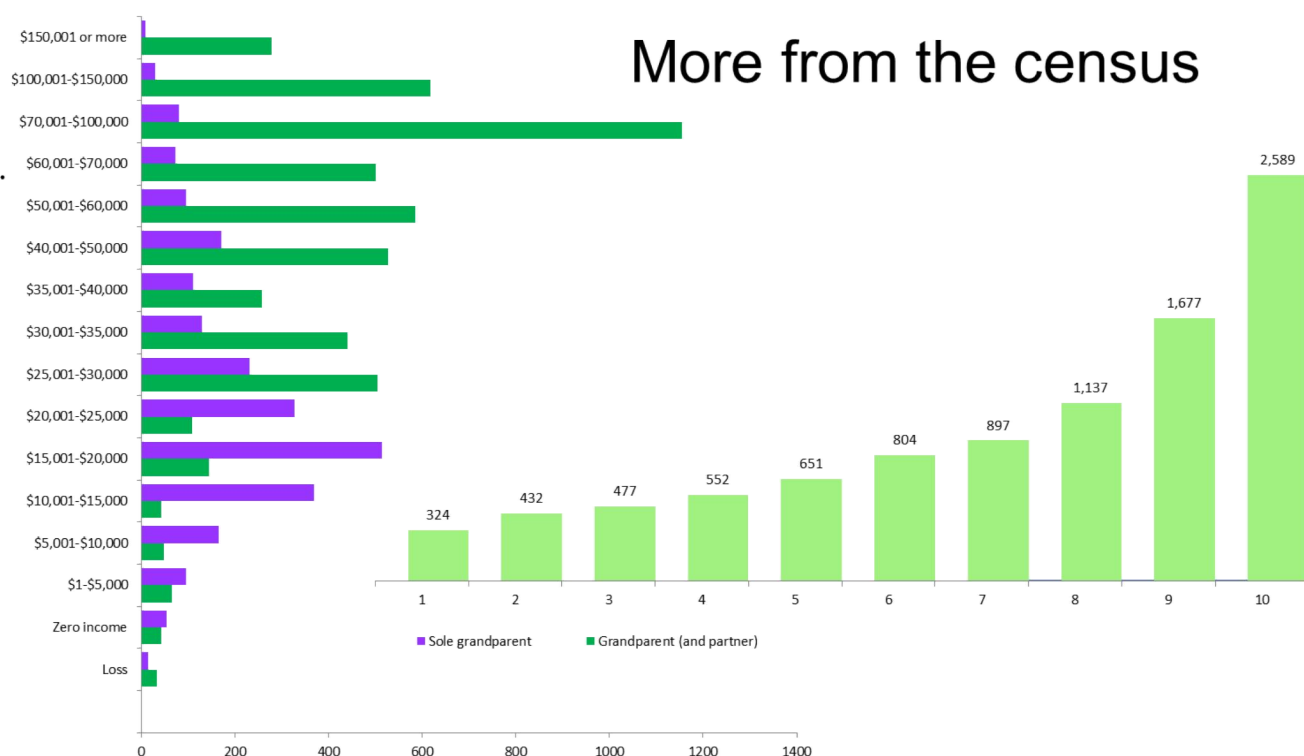
Aged from under 35 to over 85



For the first time ever in 2013, the Census asked questions about grandparent carers. Notable was the wide age distribution, the different family formations, the overrepresented

Māori population and their residence primarily in the northern half of the North Island.

## More from the census

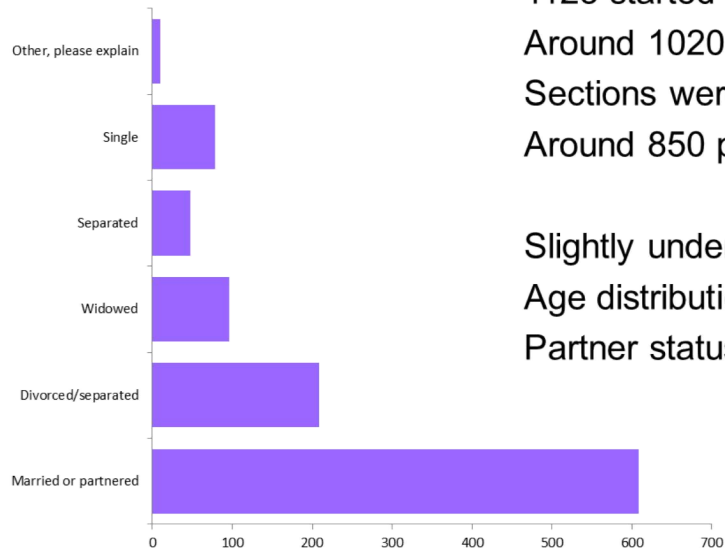


There is a bi-modal distribution of incomes.

Sole grandparent families have much lower incomes, on average, than two grandparent families.

As well around two-thirds of such families are clustered in 40% of deprivation deciles – 6-10 - meaning that many of the families are below the accepted poverty line.

## A marathon study



1123 started the survey

Around 1020 completed the first part

Sections were completed for 1324 children

Around 850 people completed the final part

Slightly under-represented Maori –36%

Age distribution almost identical to census

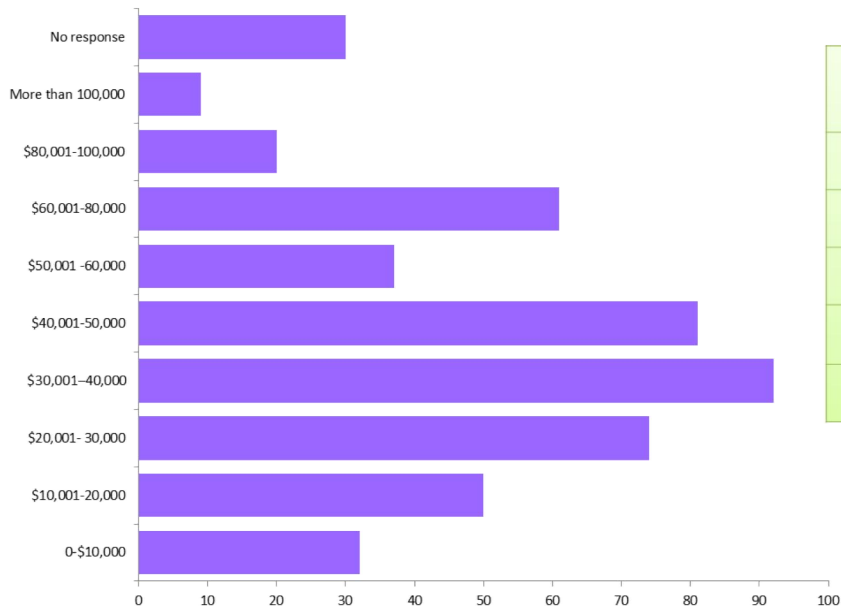
Partner status similar to census

Our survey was really long and some people did not complete. Nevertheless, we think this is the largest study of its kind every completed.

In this first report we are skimming over the surface with the main findings.

Other reports will follow over the next few months: the family court experiences of the families, a report on the Māori participants, alcohol abuse and drug addiction, reasons for coming into care, family stories and a report on the 44 great-grandparent families included here.

### Income and employment status



Employment status	No. (%)
Yes, I am employed	415 (40%)
Yes, I am self-employed	80 (8%)
No, I am not in paid work	380 (37%)
No, I am retired	165 (16%)
Total	1040

Modal income \$30-40,000 of participants.

48% are employed or self-employed

Many changed their employment status when they took on their grandchildren.

“Changed the whole pattern and lifestyle. Now had to take up all the responsibilities of a parent. We are great grandparents.”

## Changing work to meet child needs

Many increased or reduced hours of work to meet challenges of children

Changing hours – 141 reduced, 19 increased hours

Giving up work – 26 retired

Taking on different positions – 67 changed type of work. 2 took on an extra job.

Barriers

24 partners were out of the workforce due to health including heart disease, accident injury, COPD, cancer, stroke, muscular dystrophy and other disabilities.

“I stepped down from being a Principal”

“He has been sick and unable to work for the past 12 years. Our moko have significant issues where they need an adult at home 24/7. One has an intellectual disability and the other attends kura but is ADHD, behaviour and possibly bipolar”.

“I changed hours around. Still 40 but start at 8.30 to get kids to school. Half hour lunch instead of one. After school care for one. Other is 14.”

941 grandparent families in study cared for 1763 children, 83 families have no children in their care.

Number of children	No. families	% families
1	485	51.54
2	260	27.63
3	115	12.22
4	43	4.57
5	22	2.34
6	4	0.43
7	4	0.43
8	3	0.32
9	3	0.32
10	0	0.00
11	0	0.00
12	0	0.00
13	1	0.11
14	0	0.00
15 or more	1	0.11

Many have an extended whanau structure. Other people living with the grandparent families include:

Elderly boarder helps pay the mortgage (is 89)

Two daughters - one the mother, the other not

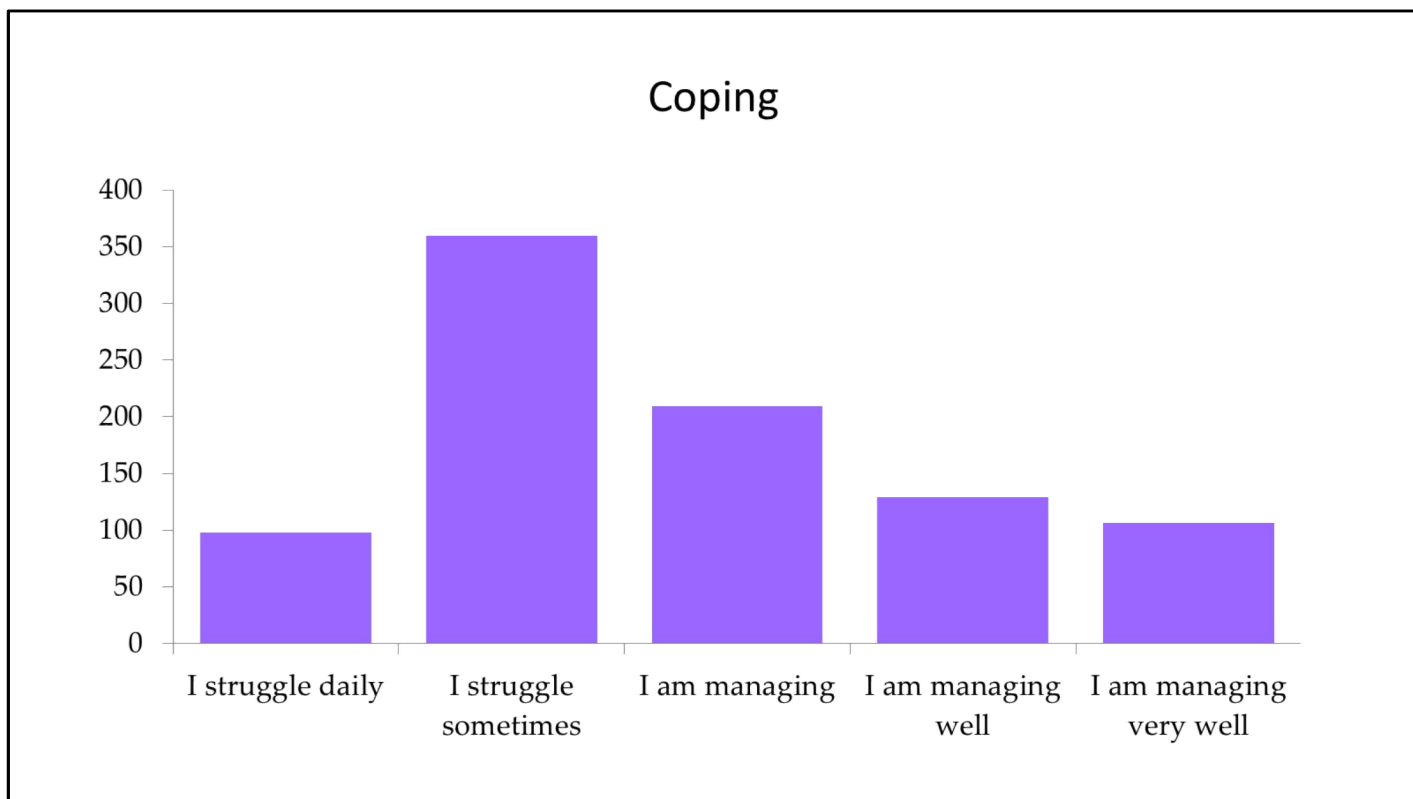
My disabled mother and my son (parent of the grandchild)

A 14 year old granddaughter which I don't claim for because her father didn't want his wages affected. They have different fathers.

Our 34 year old daughter (not parent of children) who has cancer.

3 adult transgender daughters

Granddaughter who we raised now 24 and has a baby and raises her younger brother



Themes –

“Love having the children!”

“This is not where I saw myself”

Parenting:

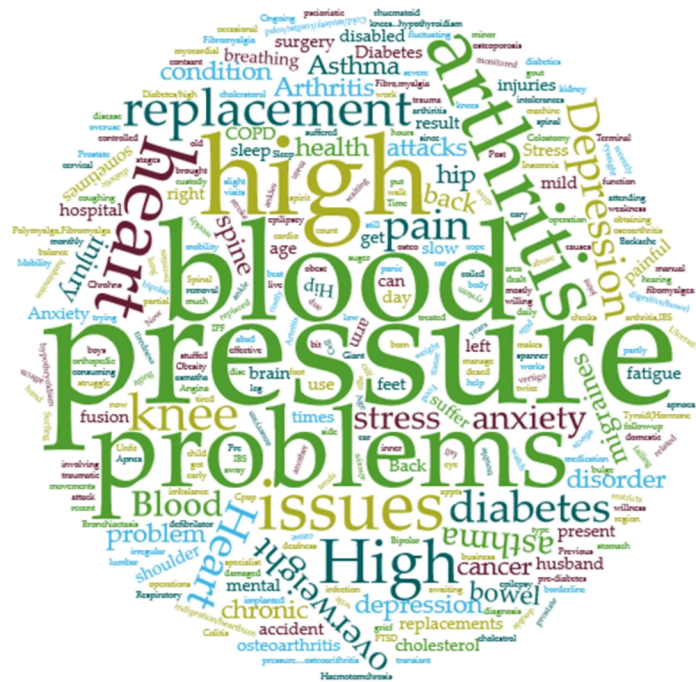
“Hard work”

“Stressful and tiring”

“I wouldn’t swap it for the world. It might be a hard road but to know my four grandchildren and three great grandchildren did not get separate living conditions has made it worthwhile. Being able to come into a whanau that they knew made the transition a lot less stressful on the children.”



# Health of carers



74% have some health problems

High blood pressure, heart disease diabetes

Breathing difficulties, lung disease

Leg and foot pain, problems, replacements

Terminal illness

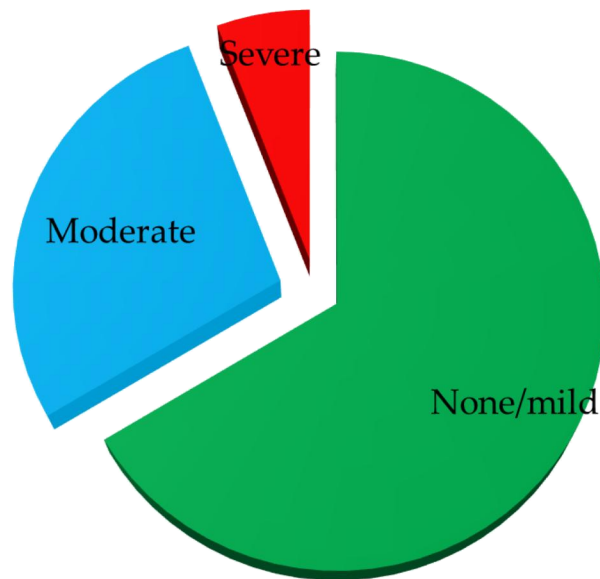
Anxiety, depression, PTSD...

“Spinal fusion x2 Colostomy The spirit is willing but the body is stuffed”

“Hip replacements, waiting for knee replacements, had to have bowel operation.”

“High blood pressure cholesterol and my own anxiety problems sometimes”.

## Mental wellbeing of carers – Kessler scale



The Kessler 6 scale of psychological distress is a widely used measure of non-specific mental health issues.

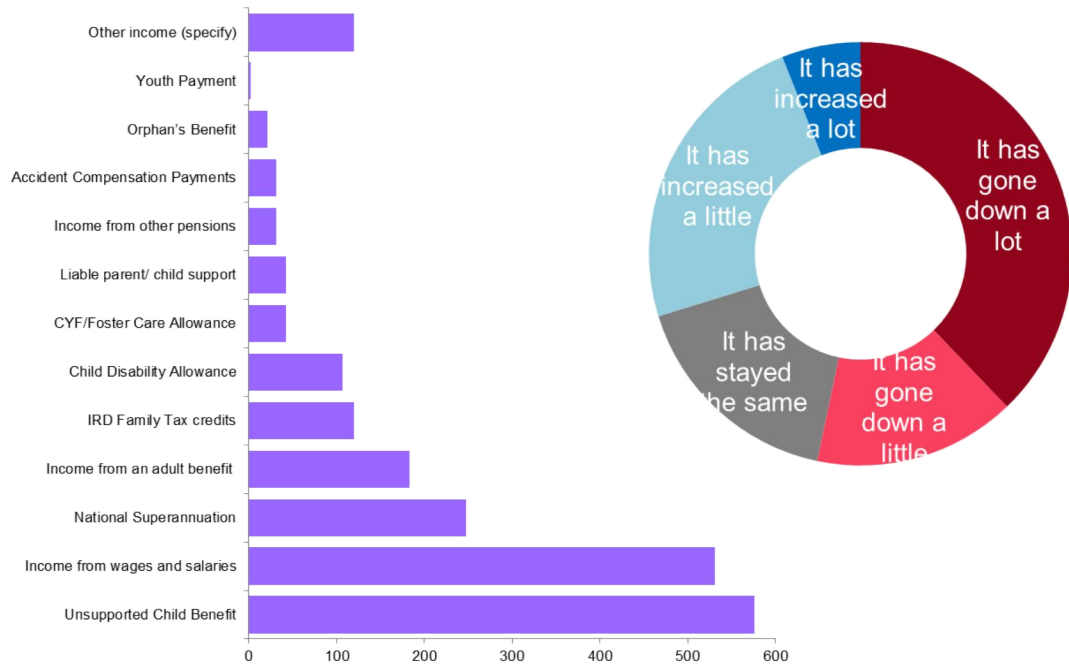
This measure is used in the NZ Health Survey for the whole population.

For those aged 55-64, which is the median age for the grandparents group, those with a reading of 12+ on the Kessler scale constituted 4.8% of the population.

The comparative figure for the survey group was much higher at 33%, with 5.8% recording severe signs of psychological distress (Kessler 22+).

In short, most have excellent mental well-being but many have difficulties with this.

## Income sources



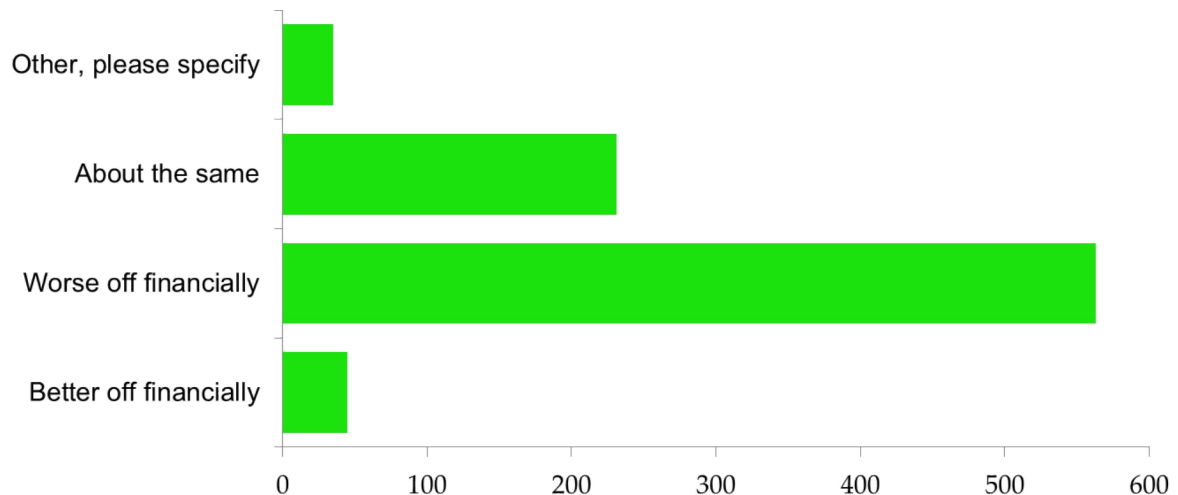
UCB received by most (this is considered below). Next is income from wages, the Super, benefit and tax credits. Over half have seen their incomes go down as a result of caring for their grandchildren.

"I used to work 2 hours per night seven nights a week on top of my 40 hours a week however since having my grandson I have given the night job up due to no childcare available"

"I was working 5 years ago then my granddaughter came into my care and I went on a benefit"

"I used to work 2 hours per night seven nights a week on top of my 40 hours a week however since having my grandson I have given the night job up due to no childcare available"

## It costs a lot to bring up grandchildren



It is therefore not surprising that taking into account income and additional expenditure that most families have seen a drop in their income.

“OMG stress and struggle”

“Have no money spare each week it’s a struggle”

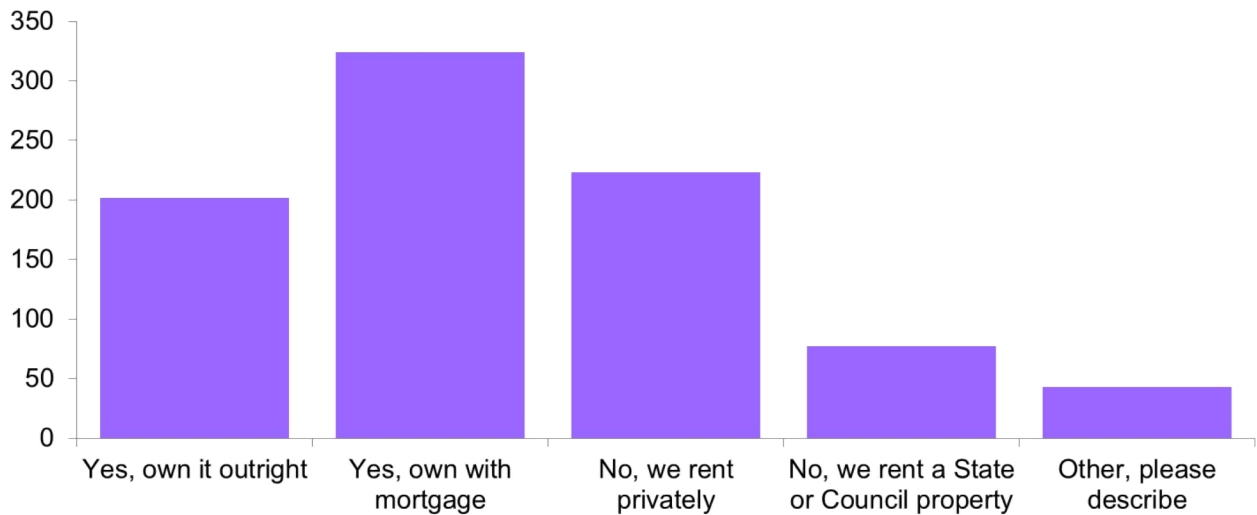
“Unable to afford to do things with the boys outside of the home”

“Pull our belts in”

“Have to be more careful in our spending”

“We had to purchase new furniture for her, clothes etc and pay large legal bills which have seriously drained our resources. We cannot deny her anything and go without ourselves in order to do that”

## Housing ownership



Those who own their own home which is large enough and meets the grandchildren's needs have a huge advantage over renters and those in space unfit for grandchildren.  
"We used to own our own home"

"We're homeless and have been on the waiting list since June 2014, so we're living with one of my daughters whom I care for her children."

"My ex partner signed the house over to me, I am very lucky in that regard."

"Living in motor home."

"Would be nice to have two bedrooms - my bed is in the lounge."

## Dealing with Work and Income

A range of views from positive to extremely negative.

Issues:

It depends on who you deal with

Staff often seem uninterested and uninformed

Many people initially turned down for help they were entitled to

Some people were really badly treated

Requirement to look for work

Organisational effectiveness

“Originally I was treated very badly. Then GRG helped me, we had a big meeting with the Officials from WINZ and was able to obtain the Unsupported Child Benefit. Now WINZ bend over backwards for me and are very helpful”

“I absolutely detest going there for support. I wonder if they are paid by a system where they do not help those that request assistance.”

“It has been horrible and degrading and they tried to not give me what I was entitled to.”

“Such a humiliating and degrading experience.”

“They do the best they can within their boundaries, but I have been told incorrect things in the past.”

## The Unsupported Child Benefit

Entitlements denied – sometimes for 15 years

Other people/ organisations / GRG told me about UCB

Incorrect information – several people told the survey they were not eligible for the UCB because they earned too much (it is not a means-tested benefit)

343 had to receive advice from other agencies before they were able to get entitlements

A number had to take advocates with them.

“When I applied for UCB I got together all my paper work and parenting court orders. I waited for a reply and got a phone call to say that I was not entitled to the benefit for the children. I had to write to Paula Bennett [Government Minister] so I could receive it. My case manager was so embarrassed that I had been turned down. The staff can be very rude and make you feel like you are bludging off them when it is government money and not their own.”

“I have given up on Work and Income as I have been told that we earn "too much" and do not qualify for support”

## Violence

118 grandparents had been physically assaulted by a child in their care, most twice or more.

Some able to deal with it themselves

Some took further action

One was in fear for her life and eventually acted:

*He was removed by the Police under 42 of the CYPF Act because of mental health concerns. I resisted calling the police for a very long time. Rang the police and they notified CYF and eventually they took him away and broke my heart.*

“Need to calm him, restrain him, he can attack me, go for cover. CFYS came most recently. They are useless and don't know what to do with him. Go to all these meetings.”

“One child is currently going through youth court on assault charges. The older child now does not use violence and has not for some time”

“Held her until she calmed down and took her to Marinoto for therapy”

“He's only a little guy right now but I can see all sorts of trouble ahead as he develops if I don't get some help and support”



## Child, Youth and Family

Most of the participants were negative about CYF. Themes:

CYF pushed the need for custody through the court then they disappeared

Meetings, hui, family group conferences...

How CYF deals with vexatious complaints from parents

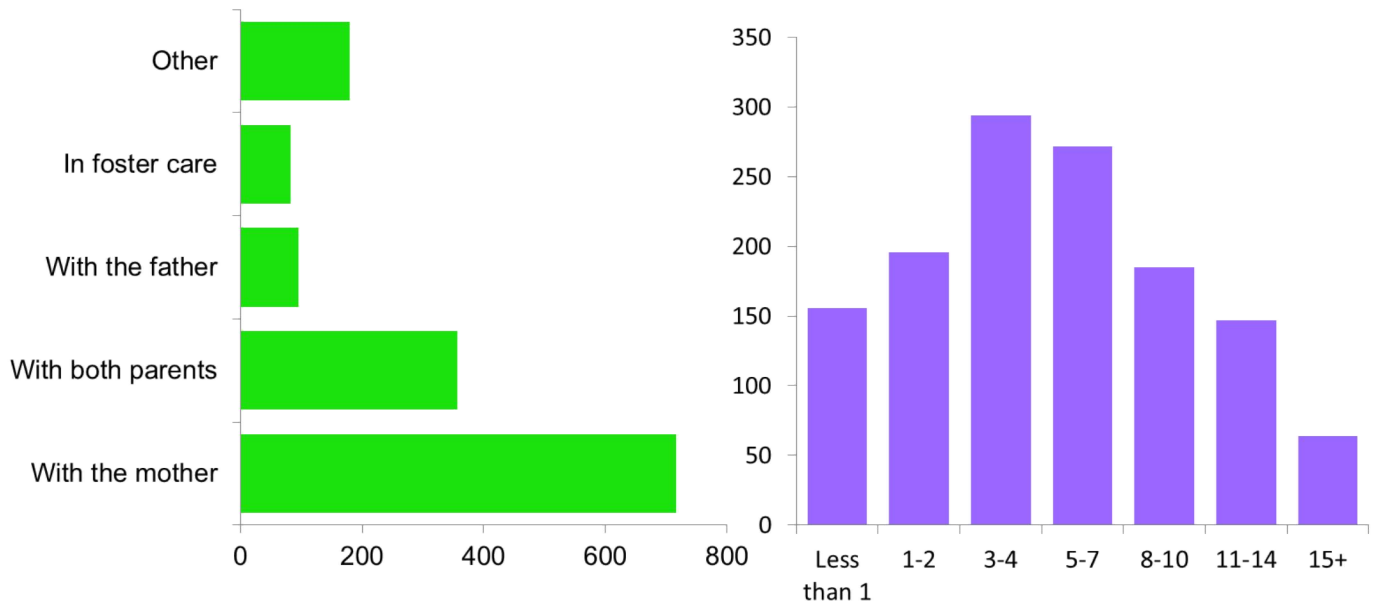
Financial controls on CYF carers

Give the money to GRG!

"CYFS could not wash their hands of us quickly enough. No support whatsoever once they had written the report that convinced the Family Court to allocate the children to my care. I asked for a FGC, but nothing was forthcoming."

"CYF was supposed to be there during her childhood but weren't. CYF sent us to family court, it cost \$17,000. We had a lot of issues but we couldn't afford to go back to court."

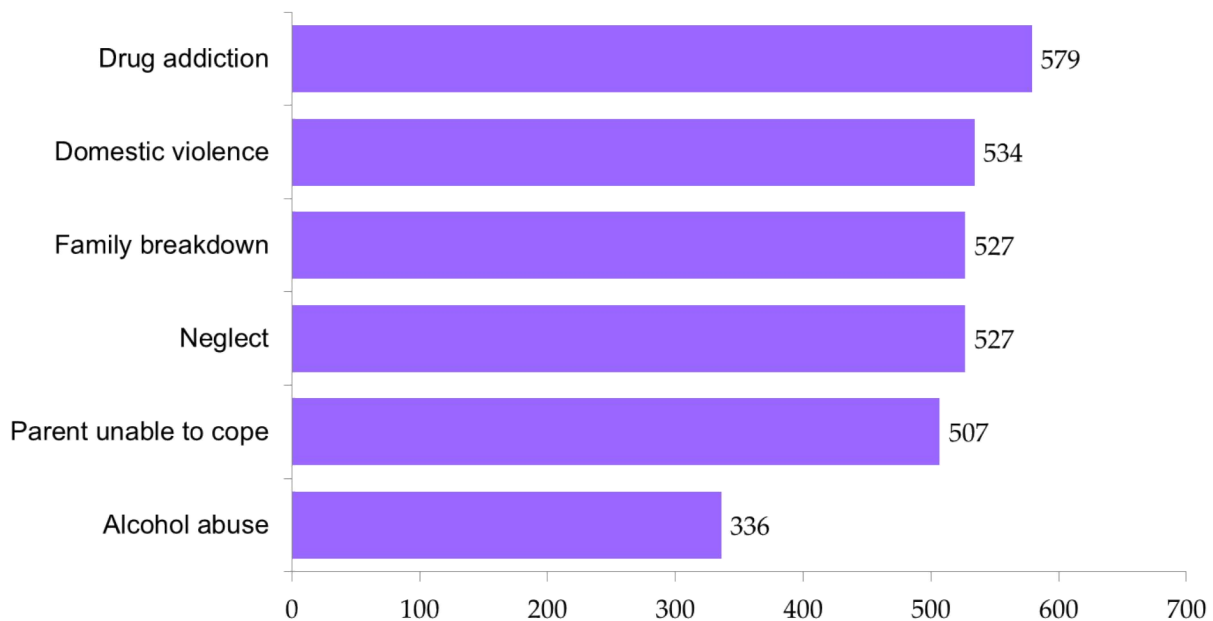
## The children



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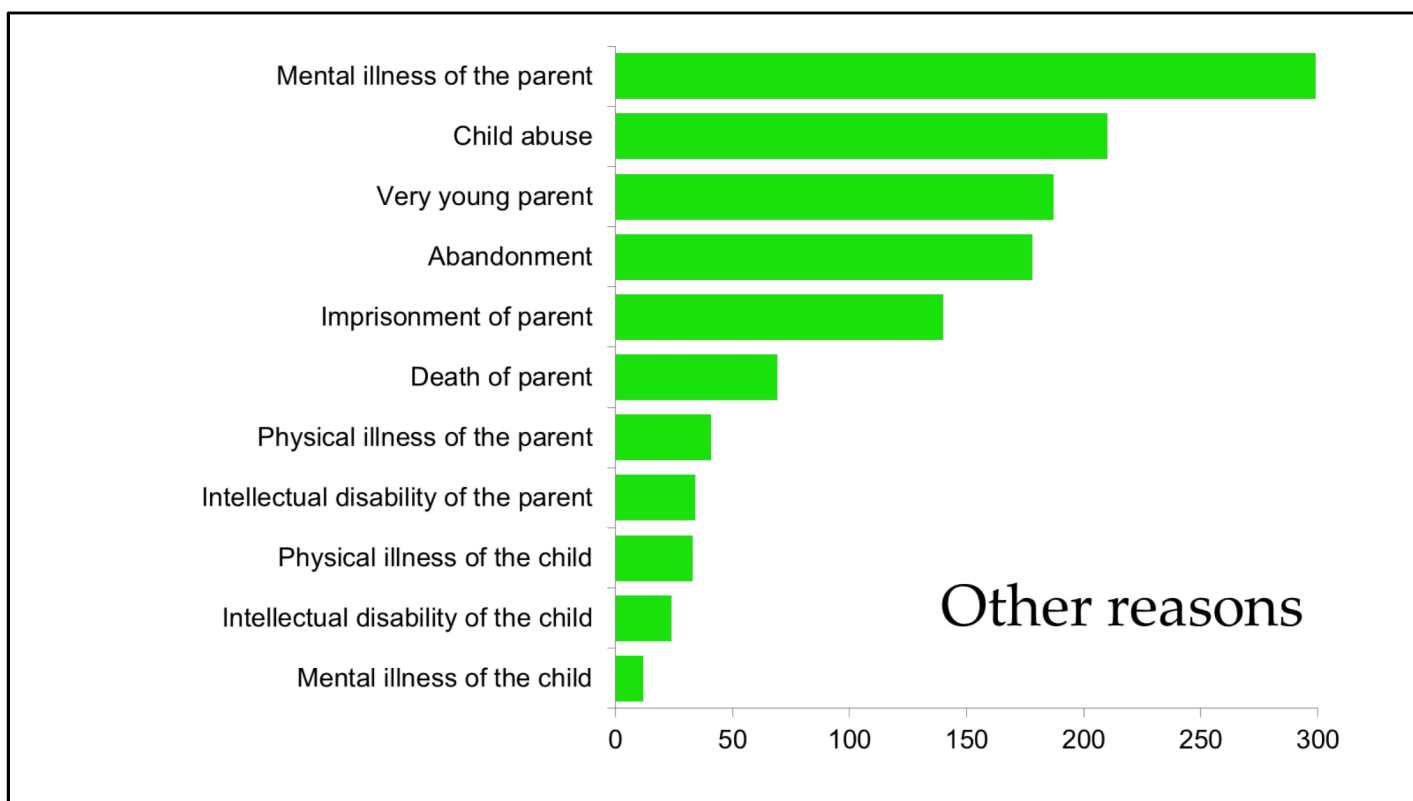
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## Top six reasons for children coming to grandparents



Out of 1270 children, nearly half had come into grandparent care as a result of a combination of drug addiction, domestic violence, family breakdown, neglect, noncoping parents and/or alcohol abuse.

Many of the children are physically or emotionally damaged have congenital problems such as FAS or are P babies.

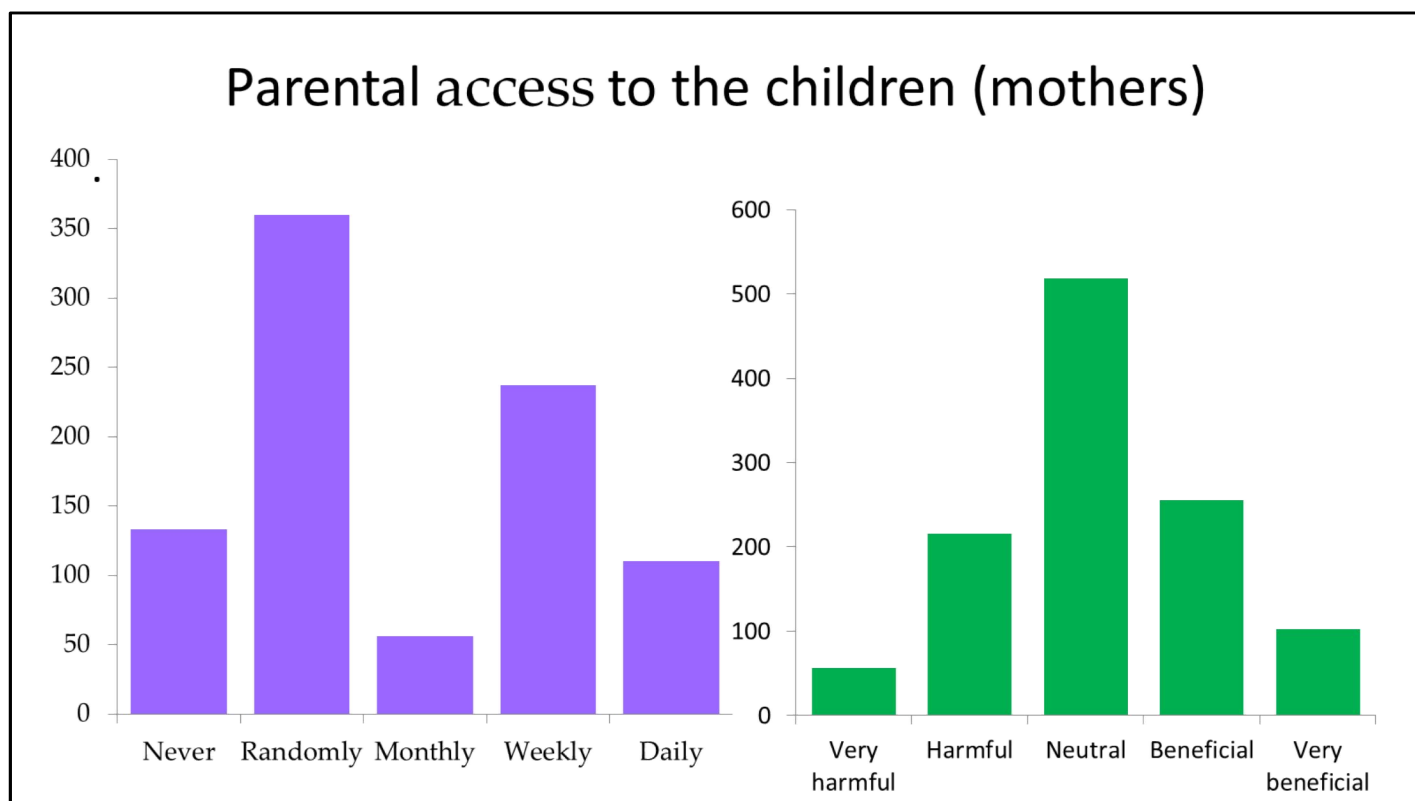


Other reasons include mental, physical illness, disability, death, imprisonment, child abuse or abandonment. Many parents were also very young.

Participants between them have written 28,000 words explaining how the children came into their care and this data will be analysed separately.

Due to the range of problems that the parents have, maintaining good access and visiting is a source of stress and heartache for the grandparents and the children.

The most common access occurs randomly, and the benefits to the children varied from very harmful upwards.



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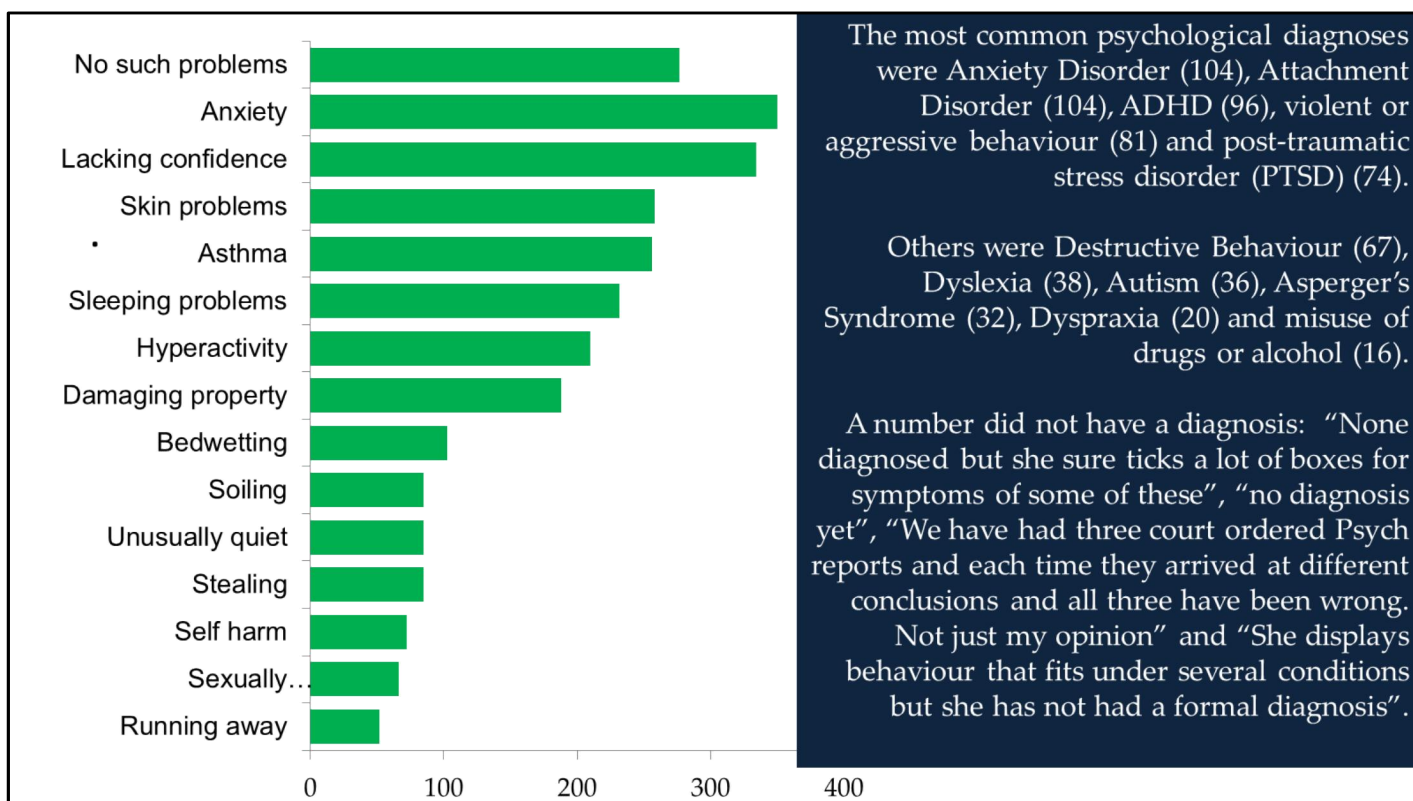
## Health of the children

	Physical	Mental	Emotional	Behavioural
<b>Never</b>	445	944	376	417
<b>Sometimes</b>	729	203	588	540
<b>About half the time</b>	53	52	166	150
<b>Most of the time</b>	26	37	90	102
<b>All of the time</b>	17	34	50	61
<b>Total</b>	1270	1270	1270	1270

Most of the children are in good physical, mental, emotional and behavioural health.

They are least likely to have mental illnesses and most likely to have behavioural or emotional problems.

Some have very severe and enduring problems.



Of health problems associated with deprivation, anxiety, lack of confidence, skin problems, asthma and sleep problems were most common.

Only a relatively small percentage had diagnosed psychological problems. In many cases, there were difficulties in getting a diagnosis, not that there was nothing wrong.

## Education

	Support to learn and achieve	Support for healthy development	Support for grandparent carers	Protects child
<b>Strongly disagree</b>	53	47	42	30
<b>Disagree</b>	82	80	55	23
<b>Neither agree nor disagree</b>	159	191	163	327
<b>Agree</b>	510	542	502	469
<b>Strongly agree</b>	449	393	491	404
<b>Total</b>	1253	1253	1253	1253

For nearly three quarters of participants, schools were viewed as supportive and effective. But some only allowed to attend school a few hours a day, or are home schooled, or in private school, or have difficult experiences at school.

The behaviour and emotional problems of the children, and disabilities, interfere with their ability to get a good education.