

# 2004

## the social report

te pūrongo oranga tangata

2004



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indicators of social wellbeing in  
New Zealand

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# Ministerial Foreword



The Government is delighted to welcome the release of *The Social Report 2004*. The social report is an annual report that monitors progress in improving the wellbeing of New Zealanders across a wide range of outcomes.

Social reporting enables us to compare wellbeing in New Zealand with wellbeing in other countries and helps to identify key issues and areas where government action may be needed. The report provides greater transparency in government and stimulates public debate on the key issues facing New Zealand society.

This year's report is based on an expanded set of indicators which allow us to examine areas of wellbeing that were not within the scope of previous reports. This includes new indicators of leisure and recreation, work/life balance, trust between New Zealanders, and contact between young people and their parents.

*The Social Report 2004* shows a steady improvement in the outcomes of New Zealanders across a wide range of areas. It is my view that recent Government policies have made an important contribution to these improvements. Moreover, announcements in the latest Budget in the areas of 'Working for Families', early childhood education, and housing, will further improve the lives of ordinary New Zealanders.

The Government is committed to investing in New Zealanders, and creating a prosperous and inclusive society in which social outcomes continue to improve. The social report is central to monitoring progress towards this commitment.

A handwritten signature in blue ink that reads "Steve Maharey". The signature is fluid and cursive, with a long horizontal stroke at the end.

**Steve Maharey**  
Minister for Social Development and Employment

# Chief Executive's Preface



*The Social Report 2004* describes the social health and wellbeing of New Zealand society. To plan where we are going in the future, we need to know where we are now, what has happened historically, and how outcomes are distributed across different communities.

Social problems have complex and interrelated causes that cut across the traditional boundaries of government agencies. By bringing together information from across these boundaries, the social report can assist government in developing integrated social policies to improve our quality of life.

The social report is a critical document to support social wellbeing. Not only does it set out a framework of outcomes across the broader social sector, it provides a measure of these outcomes to assess how well we are doing as a nation to address key social problems.

The Ministry of Social Policy produced the first social report in 2001. When *The Social Report 2003* was published, the Government agreed that the social report would become an annual publication.

*The Social Report 2004* builds on previous reports and includes an additional leisure and recreation outcome domain and a number of new indicators. The changes are the outcome of consultation with the public and other government agencies, and the availability of new social wellbeing data.

I would like to acknowledge the work undertaken by both staff from within the Ministry of Social Development and others from across government departments who have given their time and expertise to produce this report. I would also like to thank those in the wider community without whose input the social report would not have been possible.

I hope that *The Social Report 2004* is of value to a wide audience and that future reports continue to bring together an array of information to provide a wide-ranging view of New Zealand and its people.

A handwritten signature in blue ink, consisting of a large, stylized 'P' followed by a series of loops and a final flourish.

**Peter Hughes**  
Chief Executive, Ministry of Social Development



# Introduction

## The Social Report 2004

**The social report is an annual publication that monitors the wellbeing of New Zealanders**

*The Social Report 2004* uses a set of statistical indicators to monitor trends across 10 discrete outcome domains. These 10 domains together provide a picture of overall wellbeing and quality of life in New Zealand.

*The Social Report 2004* is the third in what has now become an annual series of reports on wellbeing in New Zealand and builds on the social monitoring framework first established by *The Social Report 2001*. We have added one new outcome domain to this year's report, and a number of new indicators that are based on information about how people see their own lives.

## Purpose of the social report

The social report has four key aims:

- to provide and monitor over time measures of wellbeing and quality of life that complement existing economic and environmental indicators
- to allow us to assess how New Zealand compares with other countries on measures of wellbeing
- to provide greater transparency in government and to contribute to better informed public debate
- to help identify key issues and areas where we need to take action, which can in turn help with planning and decision-making.

The report enables us to examine the current level of wellbeing in New Zealand, how this has changed over time, and how different groups in the population are faring. The social report helps us to identify adverse trends in social outcomes at an early stage. The report itself cannot illuminate what is driving these trends but can point to the need for further research and action to address them.

Government policy, as well as families, communities, businesses and international factors, influence the outcomes we report on. The cross-cutting nature of many social issues means that the social report is not a tool for evaluating the effectiveness of any one particular government policy.

## Social wellbeing

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### **Social wellbeing comprises those aspects of life that we care about as a society**

Wellbeing comes about as a result of those aspects of life that we as a society agree contribute to our individual happiness, quality of life, and welfare. To get a sense of the level of wellbeing in New Zealand and how it has changed over time, we need to identify what those aspects of life are.

Many of the constituent components of wellbeing will be common to all New Zealanders. For example, Professor Mason Durie has noted important outcomes for Māori are likely to include outcomes relevant to the rest of society such as good health and a high standard of living.<sup>1</sup> However, the needs and aspirations of different people and communities will also vary in important ways. For example, for people who get comfort and strength from their religion, an important outcome could be spiritual wellbeing, and this might mean for example, having access to a place of worship. Reflecting this diversity within the social report outcomes framework is not any easy thing to do.

The New Zealand Royal Commission on Social Policy (1988) is a useful source of research on what New Zealanders agree to constitute wellbeing and a decent quality of life. The Commission concluded that:

*[New Zealanders] have said that they need a sound base of material support including housing, health, education and worthwhile work. A good society is one which allows people to be heard, to have a say in their future, and choices in life... [they] value an atmosphere of community responsibility and an environment of security. For them, social wellbeing includes that sense of belonging that affirms their dignity and identity and allows them to function in their everyday roles.<sup>2</sup>*



**The Social Report 2004 identifies 10 components of wellbeing**

This report breaks wellbeing down into 10 discrete components. We refer to these components as ‘desired social outcomes’. The table below summarises these outcomes.

Table IN1 **The 2004 Social Report outcome domains and statements of desired outcomes**

OUTCOME DOMAIN	STATEMENT OF DESIRED OUTCOMES
<b>Health</b>	All people have the opportunity to enjoy long and healthy lives. Avoidable deaths, disease, and injuries are prevented. All people have the ability to function, participate, and live independently or appropriately supported in society.
<b>Knowledge and Skills</b>	All people have the knowledge and skills they need to participate fully in society. Lifelong learning and education are valued and supported. All people have the necessary skills to participate in a knowledge society.
<b>Paid Work</b>	All people have access to meaningful, rewarding and safe employment. An appropriate balance is maintained between paid work and other aspects of life.
<b>Economic Standard of Living</b>	New Zealand is a prosperous society, reflecting the value of both paid and unpaid work. All people have access to adequate incomes and decent, affordable housing that meets their needs. With an adequate standard of living, people are well placed to participate fully in society and to exercise choice about how to live their lives.
<b>Civil and Political Rights</b>	All people enjoy civil and political rights. Mechanisms to regulate and arbitrate people’s rights in respect of each other are trustworthy.
<b>Cultural Identity</b>	New Zealanders share a strong national identity, have a sense of belonging, and value cultural diversity. All people are able to pass different cultural traditions on to future generations. Māori culture is valued and protected.
<b>Leisure and Recreation</b>	All people are satisfied with their participation in leisure and recreation activities. All people have adequate time in which they can do what they want to do, and can access an adequate range of different opportunities for leisure and recreation.
<b>Physical Environment</b>	The natural and built environment in which people live is clean, healthy, and beautiful. All people are able to access natural areas and public spaces.
<b>Safety</b>	All people enjoy physical safety and feel secure. People are free from victimisation, abuse, violence and avoidable injury.
<b>Social Connectedness</b>	People enjoy constructive relationships with others in their families, whānau, communities, iwi and workplaces. Families support and nurture those in need of care. New Zealand is an inclusive society where people are able to access information and support.

HEALTH  
KNOWLEDGE AND SKILLS  
PAID WORK  
ECONOMIC STANDARD OF LIVING  
CIVIL AND POLITICAL RIGHTS  
CULTURAL IDENTITY  
LEISURE AND RECREATION  
PHYSICAL ENVIRONMENT  
SAFETY  
SOCIAL CONNECTEDNESS

Nine of these domains were selected for use in *The Social Report 2001*. Stakeholder consultation after the publication of *The Social Report 2001* revealed general public support for the chosen domains, but also backing for a number of changes. The majority of these changes were incorporated into *The Social Report 2003* and are summarised in Appendix One. However, the most significant recommendation, the addition of a new leisure and recreation domain, could not be implemented until this year because of a lack of suitable data from which to derive indicators in this domain. We will continue to review the choice of outcome domains and indicators as part of the annual process of producing the social report each year.

The outcome domains are interconnected. Doing well or poorly in one domain is often likely to impact upon performance in another outcome domain. For example, participation in leisure and recreation is a good thing in itself, but it may also lead to improved physical and mental health, and better social networks.

## Social indicators

### Progress towards the desired outcomes within each domain is measured using a set of social indicators

Social indicators are signposts that help us to measure progress towards a desired outcome. Indicators are selected because they either directly measure the outcome of interest (for example the employment rate in the Paid Work domain), or because they are known to be a good predictor of, or are associated with, that outcome (for example, the prevalence of smoking in the Health domain).

The use of social indicators means that we can measure trends over time by reducing the sizeable body of statistical information within an outcome domain to a few key measures. For example, we use five indicators to represent the desired outcomes in the Knowledge and Skills domain. Though the indicators do not in detail describe the state of knowledge and skill acquisition in New Zealand, they identify key trends in this area.

One of the key features of a social indicator is that any change in an indicator can be interpreted as either progress towards, or a movement away from, the desired outcome. This distinguishes social indicators from some social statistics, which do not lend themselves easily to such an interpretation. For example, a change in the average age at which New Zealand women give birth to their first child, while an important social statistic, can not be said to be necessarily 'good' or 'bad' for social wellbeing.

Indicators have been selected against the following criteria. These criteria were first established in *The 2001 Social Report*.

- **relevant to the social outcome of interest** - the indicator should be the most accurate statistic for measuring both the level and extent of change in the social outcome of interest, and it should adequately reflect what it is intended to measure
- **based on broad support** - ideally there should be wide support for the indicators chosen so they won't be regularly changed
- **grounded in research** - there should be sound evidence on key influences and factors affecting outcomes

- *able to be disaggregated* - the data needs to be broken down by age, sex, socio-economic status, ethnicity, and region so we can compare outcomes for different groups
- *consistent over time* - the usefulness of indicators is related directly to the ability to track trends over time, so indicators should be temporally consistent
- *statistically sound* - the measurement of indicators needs to be methodologically rigorous
- *timely* - data needs to be collected and reported regularly and frequently to ensure that indicators are reporting up-to-date information
- *allows international comparisons* - indicators need to reflect the social goals of New Zealanders but also need to be consistent with those used in international indicator programmes so we can make comparisons.

Inevitably some indicators perform well on some criteria, and poorly against others. Trade-offs are necessary as a consequence. For example, we base most of the economic standard of living indicators on Household Economic Survey data, rather than data from the Income Survey, because it provides a more accurate measure of annual income and is hence a more relevant indicator to the outcome of interest. As a consequence however, we are only able to update these indicators on a three-yearly rather than an annual basis.

In some outcome domains, and in particular Social Connectedness and Cultural Identity, there is relatively poor quality data, and we have had to include lower quality indicators as a consequence. In other outcome domains, such as in health, where there is an abundance of good data, we have had to exclude some good indicators to ensure consistently sized sets of indicators across the domains.

**Data limitations mean that the indicators cannot be broken down by key population sub-groups**

Ideally, each indicator used in the report would be able to be broken down by sub-populations of interest, such as age, sex, ethnicity, socio-economic status, disability status, and region. In the cases of age, sex and ethnicity (subject to the caveat below), most indicators can be disaggregated. The majority of the indicators rely on data sources that do not allow us to disaggregate by socio-economic status, disability status, and region, because either they do not collect this type of information, or because they are based on sample sizes too small to permit disaggregation. More detailed information on the geographical distribution of wellbeing can be found in *The Quality of Life in Big Cities of New Zealand* report which uses alternative data sources and indicators to look at quality of life at a regional level.<sup>3</sup> The same issue also arises when it comes to breaking down data by small ethnic sub-populations.

Analysis by group highlights differences between group averages. In most cases, however, the differences between members of any one group will be much greater than differences between group averages.

It is worth noting that disaggregation by ethnicity is problematic. Definitions of ethnicity are inconsistent across data sources and change over time. In most instances, the way in which we present the data is constrained by the way in which it has been collected.

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**There are 43 indicators in this year's report, including new indicators that are based on information about how people view their own lives**

This year's report is an expanded version of the 2003 edition (a full summary of the changes that have been made to this year's report is provided in Appendix One). A number of new subjective indicators have been included that allow us to get a better sense of the more intangible, non-economic dimensions of wellbeing which can be difficult to discern using traditional social statistics.

Of the 43 indicators included in the report, 17 can not be updated this year because they are either based on surveys that are not repeated annually, or because new data was not available in time for inclusion in this report. However, there are additional disaggregations in this year's report for some of the indicators that haven't been updated.

The indicators for *The Social Report 2004* are set out below. New indicators are marked by a triangle (▲) and those that have not been updated are marked with an asterisk (\*). Technical details about how the indicators are constructed can be found in Appendix Two.

Table IN2 The 2004 Social Report indicators

<b>Health</b>	<ul style="list-style-type: none"> <li>1. Health expectancy</li> <li>2. Life expectancy</li> <li>3. Disability requiring assistance*</li> <li>4. Suicide</li> <li>5. Prevalence of cigarette smoking</li> <li>6. Obesity* (new information on child obesity is provided)</li> </ul>	KNOWLEDGE AND SKILLS
<b>Knowledge and Skills</b>	<ul style="list-style-type: none"> <li>7. Participation in early childhood education</li> <li>8. School leavers with higher qualifications</li> <li>9. Educational attainment of the adult population</li> <li>10. Adult literacy skills in English*</li> <li>11. Participation in tertiary education</li> </ul>	PAID WORK
<b>Paid Work</b>	<ul style="list-style-type: none"> <li>12. Unemployment</li> <li>13. Employment</li> <li>14. Average hourly earnings▲</li> <li>15. Workplace injury claims*</li> <li>16. Satisfaction with work/life balance</li> </ul>	ECONOMIC STANDARD OF LIVING
<b>Economic Standard of Living</b>	<ul style="list-style-type: none"> <li>17. Market income per person</li> <li>18. Income inequality*</li> <li>19. Population with low incomes*</li> <li>20. Population with low living standards*</li> <li>21. Housing affordability*</li> <li>22. Household crowding*</li> </ul>	CIVIL AND POLITICAL RIGHTS
<b>Civil and Political Rights</b>	<ul style="list-style-type: none"> <li>23. Voter turnout*</li> <li>24. Representation of women in government*</li> <li>25. Perceived discrimination</li> <li>26. Absence of corruption▲</li> </ul>	CIVIL AND POLITICAL RIGHTS
<b>Cultural Identity</b>	<ul style="list-style-type: none"> <li>27. Local content on New Zealand television</li> <li>28. Māori language speakers*</li> <li>29. Language retention▲</li> </ul>	CULTURAL IDENTITY
<b>Leisure and Recreation</b>	<ul style="list-style-type: none"> <li>30. Satisfaction with leisure▲</li> <li>31. Participation in sport and active leisure▲</li> <li>32. Experience of cultural activities*</li> </ul>	LEISURE AND RECREATION
<b>Physical Environment</b>	<ul style="list-style-type: none"> <li>33. Air quality</li> <li>34. Drinking water quality</li> </ul>	LEISURE AND RECREATION
<b>Safety</b>	<ul style="list-style-type: none"> <li>35. Child abuse and neglect</li> <li>36. Criminal victimisation*</li> <li>37. Perceptions of safety*</li> <li>38. Road casualties</li> </ul>	SAFETY
<b>Social Connectedness</b>	<ul style="list-style-type: none"> <li>39. Telephone and internet access in the home*</li> <li>40. Regular contact with family/friends*</li> <li>41. Trust in others▲</li> <li>42. Proportion of the population experiencing loneliness▲</li> <li>43. Contact between young people and their parents▲</li> </ul>	PHYSICAL ENVIRONMENT

## Structure of the report

The remainder of this report is divided into three sections. The first, the People section, provides background and contextual information on the size and composition of the New Zealand population.

The second section is the core of the report and is organised around the 10 outcome domains listed earlier. Within each outcome domain, there is a two-page summary for each indicator.

The final section, the Conclusion, looks across the report to provide an overview of social wellbeing in New Zealand. It summarises the current level of social wellbeing, and how this has changed over time. It compares New Zealand's performance with other OECD countries to identify areas where we perform well or where there is scope for improvement.

## The future

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**A comprehensive social survey programme will enable us to develop new indicators and to update more of the current set of indicators annually**

Statistics New Zealand has undertaken a major review of its social statistics programme which should in the long term lead to the more regular collection of a wider set of social statistics. The Ministry of Social Development is also undertaking a joint quality of life survey with local government which should support the alignment of outcomes and indicators between local government reporting and the social report.

*We welcome your feedback and comment*

As previously noted, we now produce the social report on an annual basis. Work will continue to refine the desired social outcomes and indicators, and we welcome your feedback and suggestions as to how you think this might be done. Comments can be made to:

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The social report monitors outcomes for the New Zealand population. This section contains background information on the size and characteristics of the population to provide a context for the indicators that follow.

# People

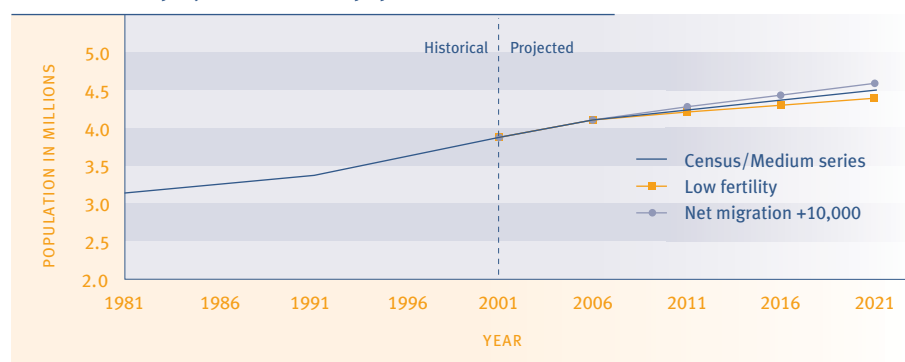
## Population size and growth

New Zealand's resident population reached 4 million in April 2003 and was estimated to be 4.04 million at the end of December 2003.

During the 2003 year, the population grew by 63,000 or 1.6 percent, the same rate of growth as in 2002. These estimated growth rates were relatively high compared with most years since 1991.

Under medium population projection assumptions, the population is expected to grow by an average of 1.2 percent per year up to 2006, reflecting significant net migration gains during this period. Assuming net migration of 5,000 people per year after that, the growth rate is then expected to slow gradually to 0.6 percent per year during the decade following 2010. Such a growth rate would add around half a million people to the population by 2021.

Figure P1 **Historical and projected resident population, 1981-2021**



Source: Statistics New Zealand

Note: All three projections assume medium mortality. The medium projection series assumes medium fertility and a long-term annual net migration gain of 5,000

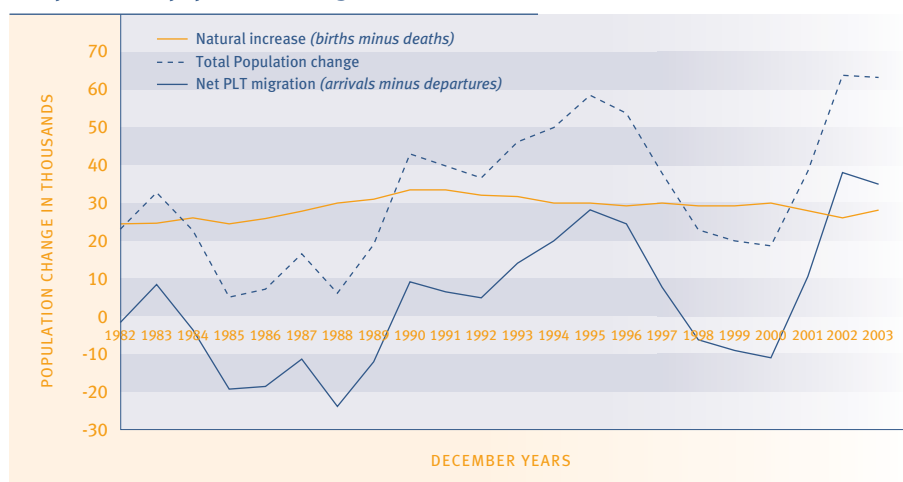
## Components of population change

Changes in population size are driven by two key factors: natural increase (births minus deaths) and net annual migration.

Births exceeded deaths by 28,100 in the December 2003 year, an increase from 26,000 in 2002. Historically, natural increase has been the main component of population growth in New Zealand, but its contribution is slowly declining as the population ages and fertility declines.

The number of people coming to live in New Zealand in 2003 exceeded those leaving the country to live elsewhere by 34,900, a slightly smaller net migration gain than in 2002 (38,200). In the December 2002 and 2003 years, the net gain from permanent and long-term migration accounted for 60 and 55 percent, respectively, of population growth.

Figure P2 **Components of population change, 1982 to 2003**



Source: Statistics New Zealand

Almost 70 percent of New Zealand nationals returning home in 2003 after a long-term absence came from either the United Kingdom or Australia. These two countries were also the most popular destinations for New Zealand citizens departing for a permanent or long-term absence.

The net inflow of non-New Zealand citizens more than doubled between 2000 and 2002 (from 26,600 to 54,900), before falling to 46,100 in 2003. The main contributing countries in 2003 were China (11,300), the United Kingdom (8,400), India (5,500), Japan (2,400), Australia (2,200), Fiji (1,900) and South Africa (1,600). Auckland is the destination of the largest group of new migrants.

## Fertility

Provisional fertility rates for the year 2003 indicate that New Zealand women average 1.96 births per woman. This figure is about 7 percent below the level required by any population to replace itself without migration (2.10 births per woman). Sub-replacement fertility is a feature of most developed countries, including Australia (1.7 births per woman), Canada (1.6), Denmark (1.7), England and Wales (1.7), France (1.9), the Netherlands (1.7) and Sweden (1.6), but not the United States (2.12 in 2001). The comparatively high rate in New Zealand reflects the higher fertility rates of Māori (2.55 births per woman in 2003) and Pacific women (2.94 in 2000-02), who make up a fifth (22 percent) of women in the reproductive ages.

Since 1992, the median age of women giving birth has risen from 28 to 30 years (half were older, half were younger). The median age of Māori women giving birth is younger but is also increasing (from 25 years in 1996 to 26 years in 2003).

New Zealand has a relatively high rate of childbearing at young ages compared with other developed countries, but the trend has been downward in recent years. The birth rate for young adolescents under 18 years was 18.0 per 1,000 females aged 15-17 years in 1996 and 14.8 per 1,000 in 2003. The rate for young Māori is higher but has fallen faster over the same period (from 48.3 to 39.4 births per 1,000 15-17-year-old females). The birth rate for Pacific females under 18 years declined from 28.2 to 22.9 per 1,000 between 1996 and 2001.<sup>4</sup>

## Distribution of the population

Over three-quarters (76 percent) of the population live in the North Island, and nearly a third (32 percent) in the Auckland region.

Reflecting the impact of migration, growth in the population of the Auckland region accounted for just over two-thirds (68 percent) of the total population growth over the period between the 1996 and 2001 censuses.

The Māori population is heavily concentrated in the North Island (88 percent), but only 24 percent of Māori live in the Auckland region.

The New Zealand population is highly urbanised. At the 2001 Census, 86 percent of the population were living in an urban area. This includes 71 percent living in main urban areas (population 30,000 or more), 6 percent living in secondary urban areas (10,000-30,000) and 8 percent living in minor urban areas (1,000-10,000).

There are marked ethnic differences in urbanisation, with the vast majority of Pacific, Asian and Other ethnic groups living in main urban areas and very few in rural areas.

Table P1 **Urban and rural residence (%), by ethnic group, 2001**

	European	Māori	Pacific	Asian	Other	Total
Main urban area (30,000+)	69	64	92	94	92	71
Secondary urban area (10,000-29,999)	7	7	3	2	2	6
Minor urban area (1,000-9,999)	9	13	2	2	2	8
Total urban	84	84	98	98	97	86
Rural	16	16	2	2	3	14
Total	100	100	100	100	100	100

Source: Statistics New Zealand, 2001 Census, Ethnic Groups, Table 5a

## Ethnic composition of the population

The New Zealand population is becoming more ethnically diverse.

While the European ethnic group category still has the largest share (80 percent), the number of people identifying as European increased by only 3 percent between 1991 and 2001. Over the same period, the number who identified as Māori increased by 21 percent, the Pacific peoples ethnic group increased by 39 percent, and the number of Asian people increased by 138 percent.

Table P2 **Ethnic distribution of the population, 1991, 2001**

Ethnic group	1991	%	2001	%
European	2,783,025	83.2	2,868,009	80.0
Māori	434,847	13.0	526,281	14.7
Pacific peoples	167,070	5.0	231,801	6.5
Asian	99,756	3.0	237,459	6.6
Other	6,693	0.2	24,924	0.7
Total with ethnicity specified	3,345,813	104.3	3,586,731	108.5

Source: Statistics New Zealand, 2001 census, National Summary, Table 8

Note: The ethnic data in this table allows up to three responses per person. Where a person reported more than one ethnic group, they have been counted in each applicable group. Totals therefore do not add up to 100 percent

In 2001, Māori made up 14.7 percent of the usually resident population compared with 13 percent in 1991. More people said they belonged to an Asian ethnic group than a Pacific peoples ethnic group in 2001 (6.6 percent, compared with 6.5 percent for Pacific peoples). Ethnic groups other than European, Māori, Asian or Pacific made up 0.7 percent of the population in 2001. By 2021, the Māori share of the population is projected to be 17 percent, the Pacific share 9 percent, and the Asian share 13 percent.

Ethnic diversity varies by age: among those under 25 years in 2001, 22 percent were Māori, 10 percent were Pacific peoples, 8 percent Asian and 1 percent other ethnic groups. Among those aged 65 and over, Māori made up 4 percent, Pacific people and Asians each made up 2 percent, and other ethnic groups 0.2 percent.

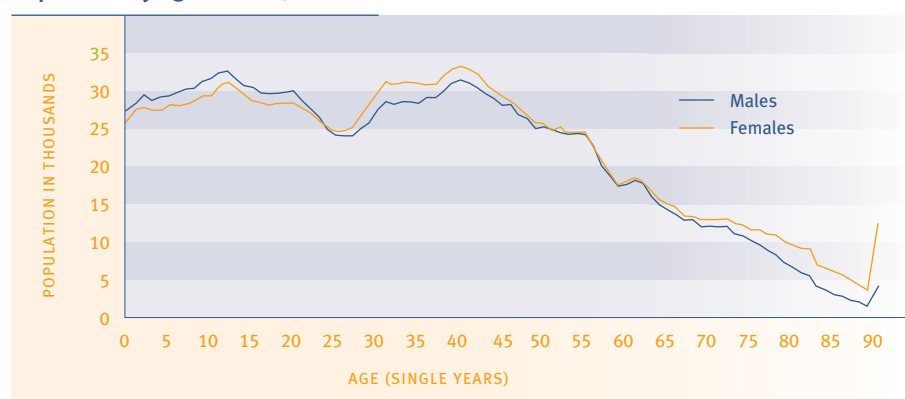
The number of people with multiple ethnic identities is increasing. In 2001, 91 percent of the population identified with one ethnic group, down from 95 percent in 1991. Having multiple ethnic identities is particularly common among Māori. Of those who said they belong to the Māori ethnic group in 2001, 44 percent identified with at least one other ethnic group. Younger people are far more likely to be identified with more than one ethnic group than older people. Birth registration data for 2001 shows that about one in five babies was identified with more than one ethnic group, compared to one in 10 mothers.<sup>5</sup>

The figures for the ethnic distribution used in this section are based on the number of people identifying with each ethnicity. Because people can identify with more than one ethnicity, the total number may be greater than the size of the population. Elsewhere in the report, the approach to measuring ethnicity varies with the data source used.

## Age and sex structure of the population

Just over half the New Zealand population (51 percent) is female. Males outnumber females among children and youth, but females predominate among adults, particularly from the late twenties to the mid-forties, and from the late fifties onwards. More males are born than females, but male youth have higher mortality rates than females. The imbalance in the middle years is an outcome of sex differences in net migration (there were more males than females in the net migration loss in the three years before the 2001 Census, and more females than males in the net migration gain of the previous five years). At older ages it reflects the higher mortality rates of males.

Figure P3 **Population by age and sex, 2002**



Source: Statistics New Zealand

The New Zealand population is ageing: the median age of the population was 35 years in 2001, and is expected to rise to 38 years by 2011, and to 40 years by 2021.<sup>6</sup>

The proportion of the population under 15 years of age has declined from 26 percent in 1982 to 22 percent in 2002 and is expected to fall to 19 percent by 2012. The population aged 65 and over has increased from 10 percent of the total population in 1982 to 12 percent in 2002. This figure is projected to reach 14 percent by 2012, assuming medium fertility, medium mortality, and long-term an annual net migration gain of 5,000.

Population ageing within the working age group will be partly offset over the next decade by the entry of the 'baby blip' - the relatively large generation of babies born around 1990 - into the young adult age groups. By 2012, the 15-24 age group is expected to be 16 percent larger than it was in 2002. Over the same period, there will be a slight decline in the number of people aged 25-44, and an increase of 26 percent in the population aged 45-64 years. By 2012, 45-64-year-olds will make up 39 percent of the working age population, compared with 34 percent in 2002.

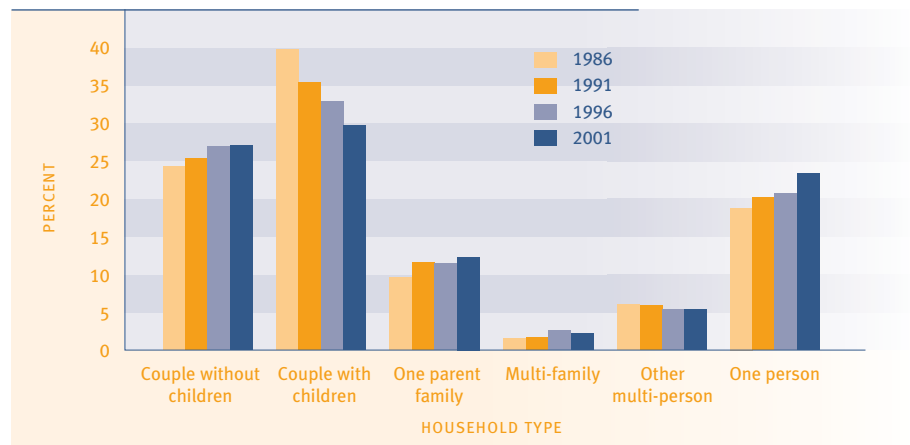
Age structure varies by ethnic group. In 2001, the European ethnic group population was the oldest, with a median age of 37 years, followed by Asians (28 years), other ethnic groups (26 years), Māori (22 years) and Pacific peoples (21 years). By 2021, half of all Māori will be older than 27 years, and half of all Pacific peoples older than 24 years. Over the same period, the median age of European and Asian New Zealanders is expected to have risen to 44 years and 36 years, respectively.<sup>7</sup>

## Households

A household may contain a single person living alone, or two or more people who usually live together and share facilities, either as families (couples, parents with children), or groups of individuals flatting together. There were 1.3 million households in New Zealand in 2001, an increase of 23 percent over the number recorded in 1986.

Twenty-seven percent of households contained couples without children in 2001, 30 percent contained two-parent families with children, 12 percent were one-parent family households, 2 percent contained more than one family, 5 percent comprised a group of individuals, and 23 percent were one-person households.

Figure P4 **Distribution of households, by household type, 1986-2001**



Source: Statistics New Zealand

Couple-only and one-person households are the fastest growing household types and are projected to increase the most over the next 15 years. Population ageing is the major factor behind both of these changes. But declining fertility and the closing gap between male and female life expectancy are also contributing to the rising number of couples without children, while delayed marriage, divorce and changing lifestyle preferences are contributing to the growing number of one-person households.



## Families with children

In 2001, there were 591,700 families with children living within New Zealand households, 81 percent of which contained dependent children (aged under 18 years and not in full-time employment).

The number of families with dependent children increased by 6.6 percent in the decade to 2001, compared with just 1.5 percent in the previous decade. The most significant change in families in the past two decades has been the shift from two-parent to one-parent families. This was more pronounced in the 1980s, when the share of one-parent families increased from 14 to 24 percent, than in the 1990s, when it rose to 29 percent. One-parent families are expected to continue to increase, but at a slower rate. Family projections based on trends since 1986 suggest that by 2021, one-parent families are likely to make up around 35 percent of all families with dependent children. For many of these families there will be parents living in another household who are actively involved in the care and upbringing of the children.

Table P3 **Families with dependent children, by family type, 1976 to 2001**

	1976	1981	1986	1991	1996	2001
	<b>Number</b>					
Two-parent family	398,772	380,886	363,489	339,681	346,086	339,159
One-parent family	46,296	62,280	82,632	110,055	126,585	140,178
Mother only	39,153	52,938	71,388	92,028	107,394	117,018
Father only	7,143	9,342	11,244	18,024	19,191	23,163
Total families	445,068	443,166	446,121	449,736	472,671	479,337
	<b>Percentage distribution</b>					
Two-parent family	89.6	85.9	81.5	75.5	73.2	70.8
One-parent family	10.4	14.1	18.5	24.5	26.8	29.2
Mother only	8.8	11.9	16.0	20.5	22.7	24.4
Father only	1.6	2.1	2.5	4.0	4.1	4.8
Total families	100.0	100.0	100.0	100.0	100.0	100.0

Sources: Statistics New Zealand, published and unpublished census data

Note: The census definition of child dependency has changed over time. From 1996, a dependent child is a person aged less than 18 years who is not in full-time employment. For earlier years, a dependent child is a person under 16 years or aged 16-18 and still at school

New Zealand has a relatively high proportion of families with children under 18 headed by sole parents, second only to the United States (31 percent in 2001) and higher than the United Kingdom (22 percent), Australia and Canada (both 21 percent).

## Disabled New Zealanders

One in five New Zealanders experiences disability.<sup>8</sup> The New Zealand Disability Survey found that 743,800 New Zealanders had some level of disability in 2001. This included an estimated 107,200 Māori and 28,100 Pacific people with a disability.

The vast majority (96 percent) of adults with disabilities live in households. The remaining 4 percent (27,300) live in residential facilities. Provisional data suggests an estimated 88,100 New Zealanders living in households have a severe disability requiring daily assistance. A further 317,000 New Zealanders living in households have a moderate disability, requiring some type of assistive equipment and/or regular help with certain household tasks.<sup>9</sup>

Disability increases with age. The prevalence of disability ranges from 11 percent of children (0-14 years), to 54 percent of people aged 65 years and over.

Table P4 **Number and prevalence rate of people with disabilities (total population residing in households and residential facilities), by age group and sex, New Zealand, 2001**

Age group (years)	Male		Female		Total	
	Number	Rate (%)	Number	Rate (%)	Number	Rate (%)
0-14	54,200	13	35,700	9	90,000	11
15-44	88,600	12	114,000	14	202,600	13
45-64	115,800	27	94,800	23	210,600	25
65+	100,300	51	140,300	56	240,600	54
Total	358,900	20	384,900	20	743,800	20

Source: Statistics New Zealand (2001d) Tables 1.01a, 1.02a

Many disabled New Zealanders face barriers to full participation in society. The 2001 New Zealand Disability Survey found that 39 percent of disabled adults in households had no educational qualification, compared to 24 percent of non-disabled adults. Fifty-seven percent of 15-64 year-olds with a disability were employed, compared with 71 percent of non-disabled 15-64 year-olds. More than half (56 percent) of adults with disabilities had a gross personal income of less than \$15,000 – compared to 40 percent of non-disabled adults.<sup>10</sup>

## Gay, lesbian, bisexual and transgender communities

There is little information available about gay, lesbian, bisexual, fa'afafine, takatāpui, intersex, transgender and transsexual communities in New Zealand, or their size in relation to the total population.

Some information about same sex couples who share a residence was collected in the 1996 and 2001 population censuses. The 2001 Census recorded just over 10,000 adults living with a partner of the same sex, making up 0.6 percent of all adults living in couples. This is a larger number than the 6,500 recorded in the 1996 Census, when they made up 0.4 percent of all couples. However, it is difficult to know whether the change in numbers represents a real increase in the number of same sex couples living together, or a greater willingness on their part to report living arrangements and partnership status. According to Statistics New Zealand, it is likely that the figures understate the actual number of same-sex couples because of inconsistency in the way people have responded to the census question.

## DESIRED OUTCOMES

All people have the opportunity to enjoy long and healthy lives. Avoidable deaths, disease and injuries are prevented. All people have the ability to function, participate, and live independently or appropriately supported in society.

# Health

## INTRODUCTION

Good health is critical to wellbeing. Without it, people are less able to enjoy their lives to the fullest extent, their options are limited, and their general levels of contentment and happiness are likely to be reduced.

Good health has two core dimensions: how long people live and the quality of their lives. The desired outcomes recognise both aspects. As well as enjoying long lives, people want to be free from the pain, suffering and incapacity that injury and illness bring.

The desired outcomes also acknowledge that not all people can live fully independent lives. For some, illness or disability means they need support from families, government agencies or other networks. Getting this support is an important part of social wellbeing.

Injury and illness (both mental and physical) inhibit people's ability to participate in education, training and employment, leading to reduced economic standards of living. They can also reduce people's ability to participate in other areas of life, such as family life, socialising with friends, joining community activities and taking part in recreation and leisure pursuits, which leads to feelings of frustration and isolation.

A range of factors affect and are affected by health outcomes, including genetic predisposition, behaviour, the physical and social environment and the availability of health services. Increasing attention is being paid to the interaction between socio-economic and health outcomes. People with low incomes, poor housing and few qualifications are likely to have disproportionately poorer health.<sup>11</sup>

## INDICATORS

Six indicators are used in this chapter. Taken together, they provide an overall picture of the state of the nation's health now and the likely trends in the future. They cover both the length and quality of life and include both physical and mental health. The indicators are: health expectancy, life expectancy, disability requiring assistance, suicide, cigarette smoking and obesity.

The first four indicators are relevant to the current state of the nation's health. Together, they directly measure the desired outcomes relating to long and healthy lives, and people's ability to participate in society. The last two indicators are strong predictors of future health outcomes.

Health expectancy refers to the number of years a person can expect to live *independently*, ie free of disability needing assistance from another person or from a complex assistive device. This is a summary measure of population health integrating both the length of life (life expectancy) and the quality of life (disability requiring assistance) dimensions of health.

The next two indicators measure each dimension of health separately. Life expectancy measures the survival experience of the population: how long people live. It is an indicator of fatal health outcomes. Disability requiring assistance measures non-fatal physical health outcomes and health-related quality of life. There may be some disquiet among the disability community about the inclusion of this indicator under the Health domain and whether having functional limitations necessarily, of itself, restrict people's opportunity to live healthy lives, or to participate in society. People's ability to participate in society also depends on the extent to which they receive the supports they need to enable them to live independently, and on the physical and social environment being accessible and inclusive.

The suicide rate serves as a proxy for mental health outcomes. Though the indicator covers the suicide rate for society as a whole, it includes details of youth suicide rates. New Zealand's youth suicide rates are high by international standards.

The last two indicators are strong predictors of future health outcomes. The links between cigarette smoking and poor health are widely recognised. For example, cigarette smoking (active and passive) is a risk factor for many cancers, respiratory, and cardiovascular diseases, and has been linked with low birth weight, Sudden Infant Death Syndrome, and other adverse child health outcomes. Obesity is linked with poor health outcomes, such as increased risk of heart attacks, strokes, type 2 diabetes, and some cancers.<sup>12</sup>

# Health expectancy

## DEFINITION

The number of years a person could expect to live in good health. The particular measure of health expectancy used here is the number of years a person could expect to live *independently*, ie without any functional limitation (disability) requiring the assistance of another person or complex assistive device. Hence it is also described as independent life expectancy at birth.

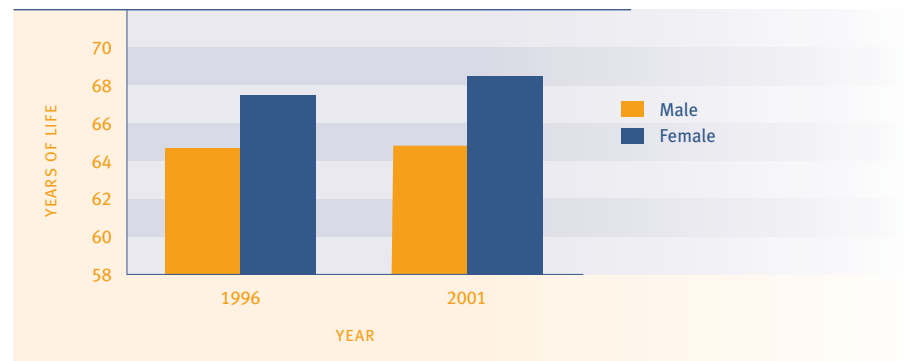
## RELEVANCE

Health expectancy is a summary measure of population health that captures both the 'quantity' and 'quality' of life dimensions of physical health. Independent life expectancy at birth is a positive measure, capturing expectations of life free from disability requiring assistance. Improvements in health expectancy reflect changes in social and economic conditions, lifestyle changes, medical advances and better access to health services.

## CURRENT LEVEL AND TRENDS

In 2001, males had an independent life expectancy at birth of 64.8 years. The figure for females was 68.5 years, a difference of 3.7 years. For the total population, independent life expectancy at birth has improved for females since 1996 but not for males (64.7 years for males and 67.5 years for females). This has resulted in an increase of almost one year in the overall sex gap in independent life expectancy at birth.

Figure H1.1 Independent life expectancy at birth, by sex, 1996, 2001



Source: Ministry of Health, revised data

## ETHNIC DIFFERENCES

Only partial (0-85 years) independent life expectancy can be estimated for ethnic comparisons because of the small number of Māori aged over 85 years. These ethnic-specific statistics are not comparable with those for the total population.

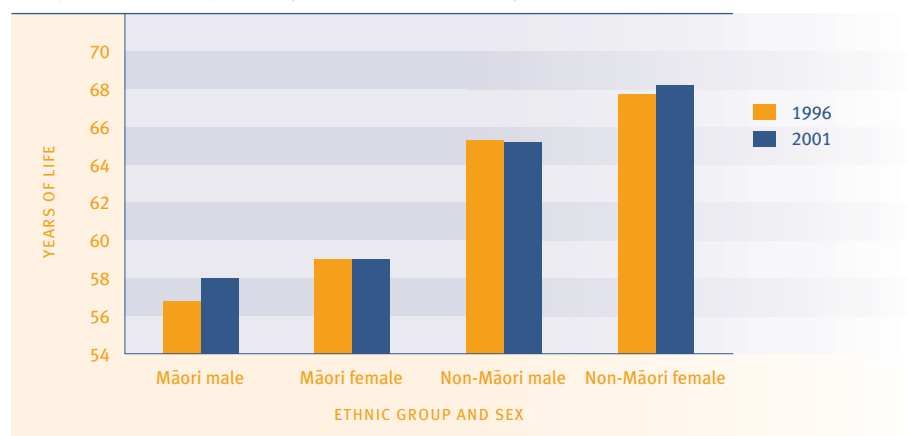
There are large differences between Māori and non-Māori in their probability of living a long and healthy life. Revised estimates for 2001 indicate a newborn Māori male had a partial (0-85 years) independent life expectancy of 58.0 years, compared to 65.2 years for a non-Māori male, a gap of 7.2 years. The difference is greater for females: a Māori female born in 2001 could expect to have a partial independent life expectancy 9.2 years less than her non-Māori counterpart (59.0 years, compared to 68.2 years for non-Māori females).



Between 1996 and 2001, partial (0-85 years) independent life expectancy improved marginally for Māori males and non-Māori females, but there was no change for non-Māori males and Māori females.

The sex gap for Māori declined between 1996 and 2001.

Figure H1.2 **Independent life expectancy, Māori, non-Māori by sex, 1996, 2001**



Source: Ministry of Health, revised data

Note: These Māori, non-Māori comparisons in independent life expectancy are based on estimates for the 0-85 year age group because of the small number of Māori over 85 years of age

## INTERNATIONAL COMPARISON

In June 2000, the World Health Organisation (WHO) introduced a new health expectancy measure, now called 'healthy life expectancy' (HLE). Unlike independent life expectancy, which uses a single disability threshold, HLE uses a continuous scale that includes all levels of disability. The necessary health state valuations required to construct this measure are not yet available for New Zealand. When these become available, the Ministry of Health intends to replace the independent life expectancy indicator with HLE.

# Life expectancy

## DEFINITION

Life expectancy at birth indicates the total number of years a person could expect to live, based on the mortality rates of the population at each age in a given year.

## RELEVANCE

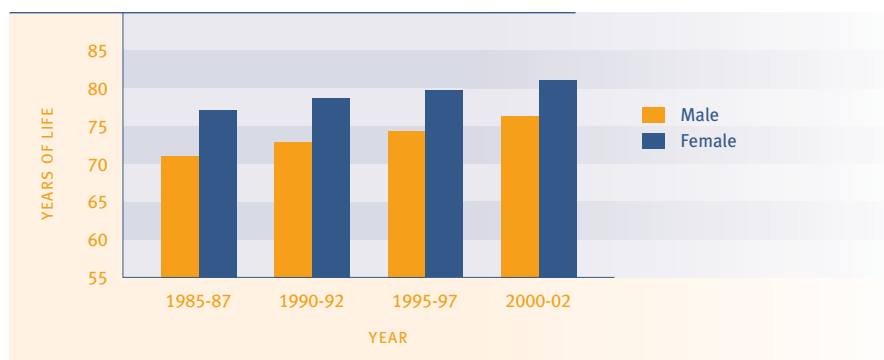
Life expectancy at birth is a key summary indicator of fatal health outcomes, ie the survival experience of the population.

## CURRENT LEVEL AND TRENDS

In the period 2000-2002, life expectancy at birth was 76.3 years for males and 81.1 years for females. Since the mid-1980s, gains in longevity have been greater for males than for females. Between 1985-1987 and 2000-2002, life expectancy at birth increased by 5.2 years for males and 4.0 years for females.

With the decline in the infant mortality rate (from 11.2 deaths per 1,000 live births in 1986 to 4.9 per 1,000 in 2003), the impact of infant death on life expectancy has fallen. The gains in life expectancy since the mid-1980s can be attributed mainly to reduced mortality in middle aged and older age groups (45-84 years). Reduced mortality rates are due to generational effects, better living standards, and improved public and personal health care.

Figure H2.1 Life expectancy at birth, by sex, 1985-87 to 2000-02



Source: Statistics New Zealand (2004)

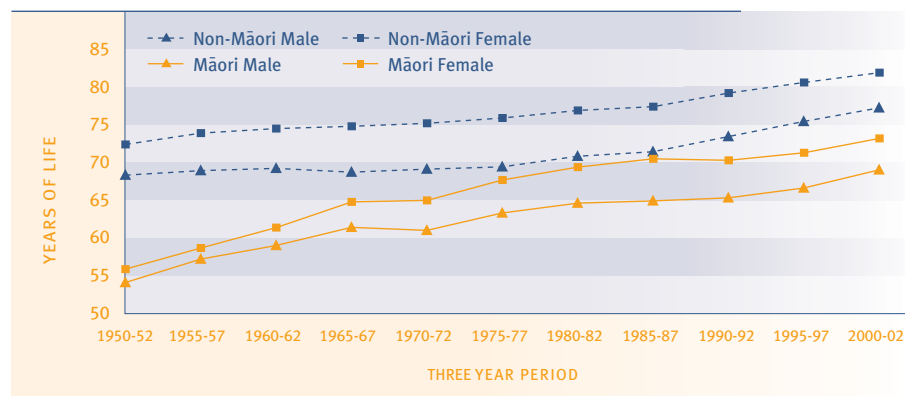
## ETHNIC DIFFERENCES

There are marked ethnic differences in life expectancy. In 2000-2002, male life expectancy at birth was 77.2 years for non-Māori and 69.0 years for Māori, a difference of 8.2 years. Female life expectancy at birth was 81.9 years for non-Māori and 73.2 years for Māori, a difference of 8.7 years.

The pace of improvement in life expectancy has varied by ethnic group. For non-Māori, there was a fairly steady increase in life expectancy at birth over the period from 1985-1987 to 2000-2002, males gaining 5.8 years and females 4.5 years overall. For Māori, there was little change during the 1980s, but a dramatic improvement in the five years to 2000-2002. While the gain in Māori life expectancy over the whole period 1985-1987 to 2000-2002 (4.1 years for males, 2.7 years for females), was less than that for non-Māori, Māori gained more than non-Māori in the most

recent five-year period. As a result, the gap in life expectancy at birth between non-Māori and Māori, which widened by 2.4 years between 1985-1987 and 1995-1997, reduced by 0.6 years in the five years to 2000-2002.

Figure H2.2 Life expectancy at birth, by ethnic group and sex 1950-52 to 2000-02



Source: Statistics New Zealand/Ministry of Health

Note: Figures for 1981-1996 have been adjusted for undercount, using Statistics New Zealand estimates for 1996

## SOCIO-ECONOMIC DIFFERENCES

There is an association between life expectancy and the level of deprivation in the area where people live. In 1998-2000, males in the least deprived 10th of small areas in New Zealand could expect to live 9.5 years longer than males in the most deprived 10th of small areas (meshblocks with median populations of at least 90 people). For females, the difference was smaller, but still substantial, at 5.6 years. These figures clearly illustrate the links between socio-economic status and health.<sup>13</sup>

## INTERNATIONAL COMPARISON

In 2000, New Zealanders' life expectancy at birth was 80.8 for females and 75.7 years for males. This was equal to the OECD median of 80.8 years for females, and close to the OECD median of 75.2 years for males. New Zealand was ranked 14th out of 27 countries for females, and ninth equal for males. New Zealand's ranking was more favourable than this in 1960 (sixth for males, seventh for females). Over the 1970s and 1980s, longevity improved faster in other OECD countries than in New Zealand. In the 1990s, faster than average gains in life expectancy in New Zealand improved its relative position. In 2000, life expectancy at birth was best for females in Japan (84.6 years) and best for males in Iceland (78.0 years). For females, life expectancy was slightly higher in Australia and Canada (both 82 years) than in New Zealand, similar in United Kingdom (80.2 years) and slightly lower in the United States (79.5 years). The pattern was similar for males: Australia (76.6 years), Canada (76.7 years), United Kingdom (75.4 years) and the United States (74.1 years).<sup>14</sup>

# Disability requiring assistance

## DEFINITION

The proportion of the population who acknowledge one or more functional limitations requiring assistance from either a person or a complex assistive device, either intermittently or on a daily basis.

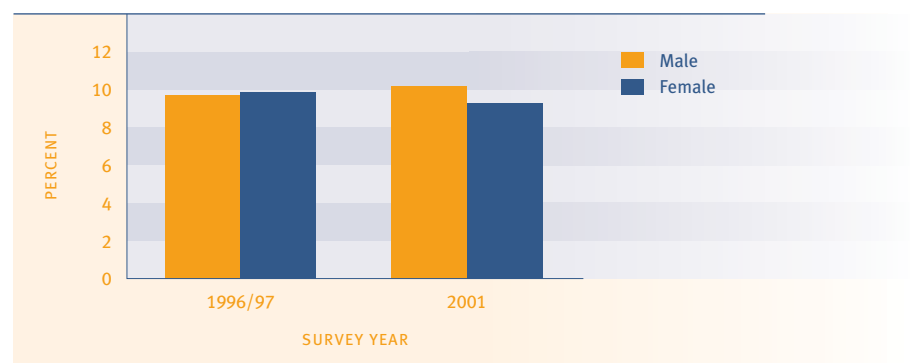
## RELEVANCE

The disability requiring assistance prevalence rate is an important summary measure of non-fatal health outcomes.

## CURRENT LEVEL AND TRENDS

In 2001, the age standardised prevalence rate of disability requiring assistance was 10.2 percent for males and 9.3 percent for females. The rate has barely changed since 1996/1997, when it was 9.7 percent for males and 9.9 percent for females.

Figure H3.1 **Disability requiring assistance prevalence rate by sex, 1996/97, 2001**



Source: Statistics New Zealand/Ministry of Health  
Note: Age-standardised to the WHO World Population

Most people who have disabilities requiring assistance need only intermittent help. In 2001, 7.8 percent of males and 7.0 percent of females had this moderate level of disability. A further 2.4 percent of males and 2.3 percent of females had a more severe level of disability requiring daily help.

## SEX DIFFERENCES

On an age-standardised basis, the prevalence of disability requiring assistance is marginally higher among males than among females. However, because rates of disability requiring assistance are higher among older age groups, where women predominate, the majority of people with disability requiring assistance are women.

## ETHNIC DIFFERENCES

Māori are more likely than non-Māori to have a functional disability requiring assistance. In 2001, the disability requiring assistance prevalence rate for males was 13.4 percent for Māori and 9.9 percent for non-Māori. Prevalence rates for females were 14.5 percent for Māori and 9 percent for non-Māori. There was almost no change in levels of disability requiring assistance for Māori from 1996-1997 to 2001.

Table H3.1 **Disability requiring assistance prevalence rate, Māori, non-Māori, by level of functional disability, 2001**

	Moderate	Severe	Total
Māori males	9.4	4.0	13.4
Māori females	9.9	4.6	14.5
Non-Māori males	7.6	2.3	9.9
Non-Māori females	6.8	2.2	9.0
Total males	7.8	2.4	10.2
Total females	7.0	2.3	9.3

Source: Ministry of Health

Note: Age-standardised to the WHO world population

Moderate = Requiring intermittent (ie non-daily) assistance

Severe = Requiring continuous or daily assistance, generally in the self-care domain

## INTERNATIONAL COMPARISON

The rate of disability requiring assistance in New Zealand appears to be higher than that reported in similar studies in Australia, Canada and the United States, although this may be influenced by differences in the collection and classification of data.<sup>15</sup>

# Suicide

## DEFINITION

The number of suicide deaths per 100,000 population.

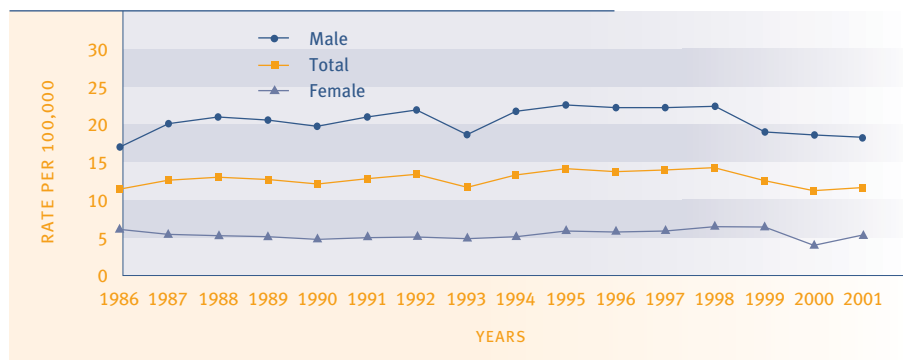
## RELEVANCE

Suicide is an indicator of mental health in the population and a major cause of death among younger adults.

## CURRENT LEVEL AND TRENDS

In 2001, 499 people died by suicide, an increase from 458 in 2000 but fewer than the 516 recorded in 1999. The age-standardised<sup>16</sup> suicide death rate was 11.7 per 100,000 in 2001, compared with 11.2 in 2000 and 12.6 in 1999. Over the 1980s and 1990s there was an upward trend in the suicide death rate, which reached a peak of 14.3 per 100,000 in 1998. Since then the trend has generally been downward and the 2001 rate was similar to the 1986 rate of 11.5 per 100,000.

Figure H4.1 Age-standardised suicide death rate by sex, 1986-2001



Source: Ministry of Health, New Zealand Health Information Service  
Note: 2000 and 2001 figures are provisional. Age-standardised to Segi's world population

## SEX DIFFERENCES

Males have a much higher rate of death by suicide than females, with 18.3 deaths per 100,000 males in 2001, compared with 5.5 deaths per 100,000 females. The difference is associated with choice of methods.<sup>17</sup> The male suicide rate increased sharply in the late 1980s and declined after 1998, but was still higher in 2001 than it was in 1986. In comparison, the female rate has been relatively stable. It increased slightly during 1996-1999, fell in 2000 and rose in 2001 but not to the level it had been in 1999. Because of the small numbers involved, it is more reliable to consider the trend over several years.

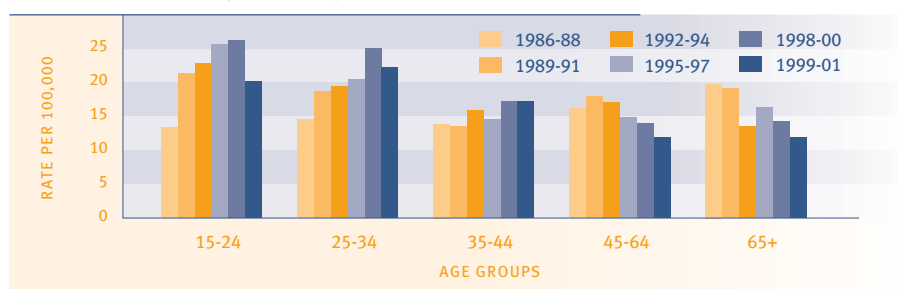
While males account for most suicide deaths (77 percent in 2001), females account for the majority of recorded suicide attempts that do not result in death (66 percent in 2001/2002).

## AGE DIFFERENCES

In 2001, the 25-34-year age group had the worst rate of suicide death (21.4 per 100,000, or 118 deaths), followed by the 15-24-year age group (20.0 per 100,000, with 107 deaths). For many decades, the rate of suicide was consistently worst at ages 65 and over but this changed in the late 1980s during a steep increase in youth suicide. The youth suicide rate peaked in 1995, when there were 156 deaths (a rate of 28.7 per 100,000) and has fallen since 1998, though not to the levels recorded in the early

1980s. The pattern is similar for 25–34-year-olds. Suicide rates have been falling among people over 45 years and in 2001, the rate for age group 45–64 was the lowest (10.5 per 100,000). These age patterns may reflect, in part, cohort effects.

Figure H4.2 **Suicide death rates by age group, 1984–1986 to 1999–2001**



Source: Ministry of Health, New Zealand Health Information Service

Note 1. Three-year average rates for 10-year age groups calculated by Ministry of Social Development

Note 2. 2000 and 2001 figures are provisional

## ETHNIC DIFFERENCES

In 2001, there were 79 Māori deaths from suicide, accounting for 16 percent of all suicides in that year. The age-standardised rate of suicide death was 13.4 per 100,000 for Māori, compared to 11.2 for non-Māori. The suicide rate for Māori youth in 2001 was 28.0 per 100,000, compared with the non-Māori rate of 18.1 per 100,000. Suicide deaths for both Māori and non-Māori were lower in 1999–2001 than in 1996–1998. Because of small numbers, trends in Māori suicide rates should be treated with caution.

Table H4.1 **Age-standardised suicide rates and number of suicide deaths, Māori and non-Māori, 1996–2001**

Year	Age-standardised rate per 100,000		Number	
	Māori	Non-Māori	Māori	Non-Māori
1996	17.5	12.9	95	445
1997	17.5	13.1	103	458
1998	19.2	13.1	112	465
1999	12.1	12.2	78	438
2000	13.1	10.7	80	378
2001	13.4	11.2	79	420

Source: Ministry of Health; New Zealand Health Information Service

Note: 2000 and 2001 figures are provisional. Age-standardised to Segi's world population

## INTERNATIONAL COMPARISON

A comparison of age-standardised suicide rates in 12 OECD countries for the years 1998–2001 shows that New Zealand's rate for males was fifth worst at 18.4 per 100,000, while the female rate of 5.4 was the sixth worst.<sup>18</sup> Finland had the worst male suicide rate (28.8 per 100,000 in 1999), while Japan had the worst female rate (9.3 per 100,000 in 2000). Australia (18.5) and Canada (17.9) had slightly worse rates of male suicide than New Zealand. The United Kingdom (9.9) and the United States (15.0) fared considerably better. In regards to females, Australia (4.5), Canada (4.6), the United Kingdom (2.6) and the United States (3.5) all reported better results than New Zealand.

Comparing youth suicide rates in the same 12 OECD countries, New Zealand had the worst male youth suicide rates, equal with Finland, and the second worst female youth suicide rates (after Norway). New Zealand is one of a small number of countries which have higher suicide rates at the younger ages.<sup>19</sup>

# Prevalence of cigarette smoking

## DEFINITION

The proportion of the population aged 15 and over who currently smoke cigarettes.

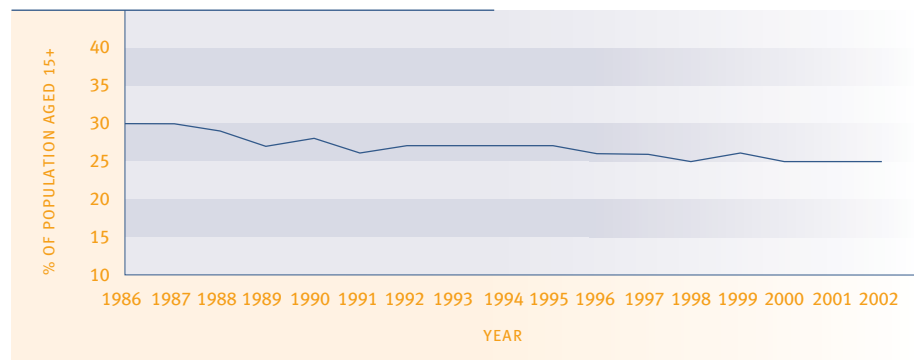
## RATIONALE

Tobacco smoking is a well-recognised risk factor for many cancers and for respiratory and cardiovascular diseases. In addition, exposure to environmental tobacco smoke (particularly maternal smoking) has been identified as a major risk factor for Sudden Infant Death Syndrome (SIDS) and respiratory problems in children. Internationally, smoking has been identified as the major cause of preventable death in OECD countries.<sup>20</sup>

## CURRENT LEVEL AND TRENDS

In 2002, 25 percent of New Zealanders aged 15 years and over were cigarette smokers. The prevalence of smoking has declined from 30 percent in 1986 with most of the decline occurring between 1987 and 1991. Since 1998 there has been little change.

Figure H5.1 **Prevalence of cigarette smoking, 1986-2002**



Source: Ministry of Health (2003b) Appendix 1, Table 11

## AGE AND SEX DIFFERENCES

Smoking is most prevalent among people aged 25-34 years, followed by those aged 15-24 years, and those aged 35-54. Older people aged 55 and over are much less likely to smoke and have experienced the greatest decline in smoking prevalence over the past 15 years.

Smoking prevalence has been similar for both sexes since the mid-1980s. In 2002, the rate was 25 percent for males and 24 percent for females. Females are slightly more likely than males to smoke at ages 15-34, but for those aged 35 and over, smoking has generally been more prevalent among males; over the 1990s, both sexes became less likely to smoke.



Table H5.1 **Prevalence of smoking by sex and age group, 2001**

	Percentage in each age group who smoke cigarettes				Total
	15-24	25-34	35-54	55+	
Male	31.6	31.1	26.7	13.6	25.2
Female	33.2	32.0	25.3	11.1	23.9

Source: Ministry of Health (2003b) Appendix 1, Table 6

## ETHNIC DIFFERENCES

Māori women have the highest smoking prevalence (52 percent), followed by Māori men (39 percent). Among Pacific peoples, smoking is more prevalent among men (35 percent) than among women (29 percent).

Since the early 1990s, smoking prevalence has declined by about three percentage points for European/Other ethnic groups but has remained relatively unchanged for Māori and Pacific peoples.<sup>21</sup>

Table H5.2 **Age-standardised prevalence of smoking by sex and ethnicity, 2002**

	Percentage in each ethnic group who smoke cigarettes			Total
	Māori	Pacific peoples	European/Other	
Male	39.3	34.6	23.8	26.2
Female	51.9	28.5	20.6	25.5
Total	46.4	31.9	22.1	25.8

Source: Ministry of Health (2003b) Table 1

Note: Rates are age-standardised using the WHO world population

## SOCIO-ECONOMIC DIFFERENCES

Smoking is more prevalent among those with lower incomes, beneficiaries, and those living in the most deprived areas. An analysis of 1996 Census data shows that the proportion of smokers in the most deprived (decile 10) areas is two to three times the proportion of smokers in the least deprived (decile 1) areas for all age groups, and for both men and women.<sup>22</sup>

## INTERNATIONAL COMPARISON

In a 2001 comparison of adult smoking prevalence rates, New Zealand had a rate of 25 percent, compared with an OECD median of 27 percent.<sup>23</sup> New Zealand ranked eighth best out of 17 OECD countries. Smoking prevalence was worst in the Netherlands (34 percent). New Zealand's rate was slightly better than that of the United Kingdom (27 percent), but considerably worse than those of Australia (19.8 percent), the United States (18.5 percent) and Canada (18.0 percent). When compared to other developed countries, New Zealand smoking levels are relatively low for males and relatively high for females.<sup>24</sup>

# Obesity

## DEFINITION

The proportion of the population aged 15 and over who are obese. Obesity is defined as having a Body Mass Index (BMI) greater than 30 for New Zealand European/Other, or greater than 32 for Māori and Pacific people.<sup>25</sup> For the population under 15, the measure is the proportion of children aged 5-14 years whose BMI met an international definition of obesity in the 2002 National Children's Nutrition Survey.<sup>26</sup>

## RATIONALE

Obesity is associated with heart disease, diabetes, stroke, high blood pressure and some cancers. The increase in the prevalence of obesity has been identified as a major cause of the projected increase in diabetes.<sup>27</sup>

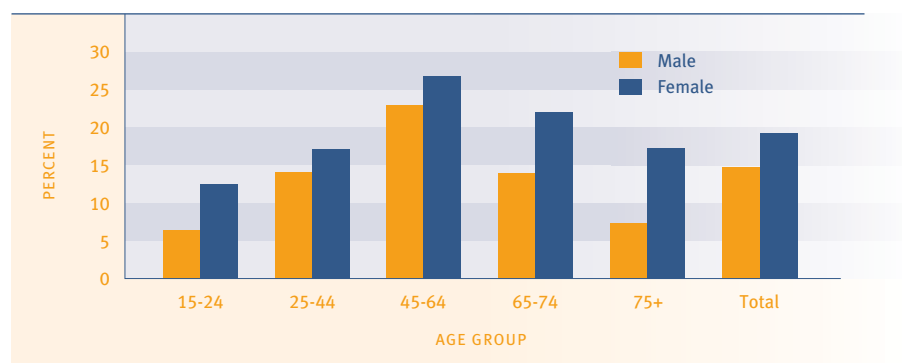
## CURRENT LEVEL AND TRENDS

In 1997, 17 percent of adults aged 15 and over were obese (15 percent of adult males and 19 percent of adult females). In 2002, 10 percent of children aged 5-14 years were obese.

In New Zealand, obesity is becoming increasingly common, with a 50 percent increase in adult obesity from the late 1980s to the mid-1990s. In 1989/1990, obesity was found in 10 percent of adult males and 13 percent of adult females.<sup>28</sup>

Internationally, increasing levels of obesity are related to social changes, including easier access to foods high in fat and energy, shifts towards less physically demanding work, increased use of automated transport, labour-saving technology in the home, and passive leisure.

Figure H6.1 **Proportion of the population aged 15+ who are obese, by age group & sex, 1997**



Source: Ministry of Health (1999d) p170. Rates for 15-24-year-olds derived by Ministry of Health

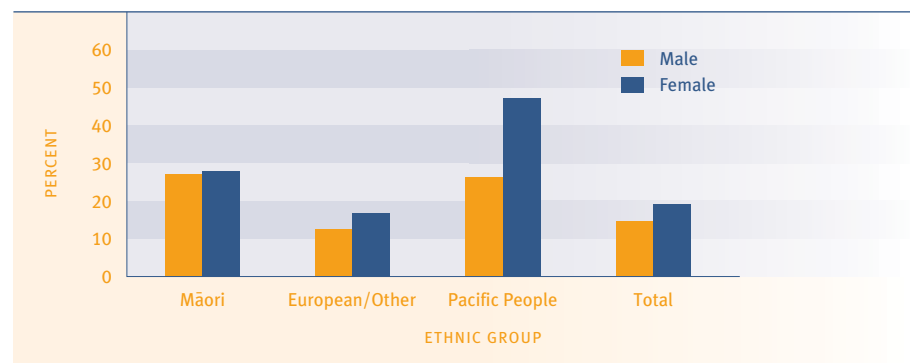
## AGE AND SEX DIFFERENCES

Obesity increases with age, peaking at the 45-64 year age group (23 percent for males, 27 percent for females), then declining at the older age groups. This age pattern may reflect in part a cohort effect. Adult females are more likely than adult males to be obese. This pattern is also evident among children aged 7-14 years. The sex difference in obesity is greatest at ages 65 years and over.

## ETHNIC DIFFERENCES

Māori and Pacific people have higher rates of obesity than other ethnic groups. Among adults in 1997, 28 percent of Māori females and 27 percent of Māori males were obese. For Pacific adults, the figures were 47 percent for females and 26 percent for males. This compares with 17 percent for European/Other females and 13 percent for European/Other males. Among children aged 5-14 in 2002, there was a similar pattern (Pacific children: 31 percent and 26 percent for females and males respectively; Māori children: 17 percent, 16 percent; European/Other: 6 percent, 5 percent).

Figure H6.2 Proportion of the population aged 15+ who are obese, by sex & ethnic group, 1997



Source: Ministry of Health (1999d) p171

Table H6.1 Obesity prevalence rates, Māori, non-Māori, 1989/1990, 1997

	1989/1990		1997	
	Māori %	Non-Māori %	Māori %	Non-Māori %
Male	19.3	8.7	27.2	13.1
Female	20.0	12.2	27.9	18.1

Source: Ministry of Health (1997) and Russell and Wilson (1991)  
Note: Rates are age-standardised using the WHO world population

## SOCIO-ECONOMIC DIFFERENCES

For females, there is an association between obesity and the level of deprivation in the area where people live. Females living in the least deprived quartile of small areas in New Zealand had the lowest level of obesity (13.1 percent), while those in the most deprived quartile had the highest level (25.4 percent). This relationship was not statistically significant for males.<sup>29</sup>

## INTERNATIONAL COMPARISON

New Zealand has a relatively high prevalence of obesity compared with other OECD countries, with a rate of 17 percent in 1997, compared to an OECD median of 11.5 percent. New Zealand ranked poorly at twenty-second out of 27 countries in the late 1990s. The United States had the worst rate of obesity (31 percent in 1999). The United Kingdom (22 percent in 2001) and Australia (21 percent in 1999) also had higher obesity rates than New Zealand, while the rate in Canada was slightly lower (15 percent in 2001). Japan has the lowest prevalence of obesity (3 percent in 2001).<sup>30</sup>

## DESIRED OUTCOMES

All people have the knowledge and skills they need to participate fully in society. Lifelong learning and education are valued and supported. All people have the necessary skills to participate in a knowledge society.

# Knowledge and Skills

## INTRODUCTION

Knowledge and skills enhance people's ability to meet their basic needs, widen the range of options open to them in every sphere of life, and empower them to influence the direction their lives take. The skills people possess can also enhance people's sense of self-worth, security and belonging.

We now live in a 'knowledge society', where access to information and proficiency with technology are becoming increasingly important. An inclusive society will increasingly require all people to have high levels of knowledge and skills.

Knowledge and skills include not only education and training, but also abilities gained through work and daily life: for example, parenting skills or skills relevant to recreation or leisure activities.

For many people, the acts of learning and of mastering new skills are important in themselves. Possession of knowledge and skills can be integral to a person's sense of belonging and self-worth: many people define themselves by what they can 'do', not only in employment but elsewhere in life.

Knowledge and skills relate directly to employment decisions and career choices. Those with relatively few educational qualifications are more likely to be unemployed and, on average, have lower incomes when in work. This affects not only the economic standard of living people are able to enjoy, but also their security and ability to make choices about their lives. Knowledge and skills are important for gaining access to services and for understanding and exercising civil and political rights.

## INDICATORS

Five indicators are used in this chapter. Each provides a snapshot of New Zealanders' acquisition of knowledge and skills at a particular stage in their lives, from early childhood to school leaving age to adulthood. The indicators are: participation in early childhood education, the number of school leavers with higher qualifications, the overall educational attainment of the adult population, adult literacy in English, and participation in tertiary education.

The focus of four of the five indicators is on formal education and training. This reflects the importance of formal education and training and the availability of data.

The indicators are relevant to both current and future social wellbeing. Participation in early childhood education is included because early childhood contributes significantly to a child's later development. Going to kindergarten, kōhanga reo or some other pre-school institution prepares children for further learning and helps equip them to cope socially at school. Quality early childhood programmes can help narrow the achievement gap between children from low-income families and more advantaged children.<sup>31</sup>

Students who attain higher qualifications (Sixth Form Certificate or higher) at school have a wider range of options for higher education and future employment. Those who leave school early are at greater risk of unemployment or having low incomes.<sup>32</sup>

Educational attainment of the adult population provides a broad picture of New Zealanders' overall attainment of knowledge and skills. It is influenced by factors not measured in the other indicators, such as adults gaining new qualifications and new migrants arriving with qualifications.

Literacy is a fundamental skill. A good level of literacy in English, including numeracy and the ability to understand documents and tables, is vital in the workplace and in everyday life.

Participation in tertiary education opens up career opportunities and provides people with the skills they need to participate in society. This has become particularly important with increasing dependence on 'knowledge' industries that require well-educated, highly-skilled workforces. It also captures aspects of lifelong learning through the participation of adults in tertiary education.

# Participation in early childhood education

## DEFINITION

The number of enrolments of children aged three and four years in early childhood centres or home-based education programmes as a proportion of all 3- and 4-year-olds. The measure includes all forms of organised and sustained centre and home-based programmes designed to foster learning and emotional and social development in children. The measure overestimates participation because children enrolled in more than one early childhood centre will be double-counted. Information from an alternative measure which avoids double counting, the proportion of Year One students who participated in early childhood education, is also included.

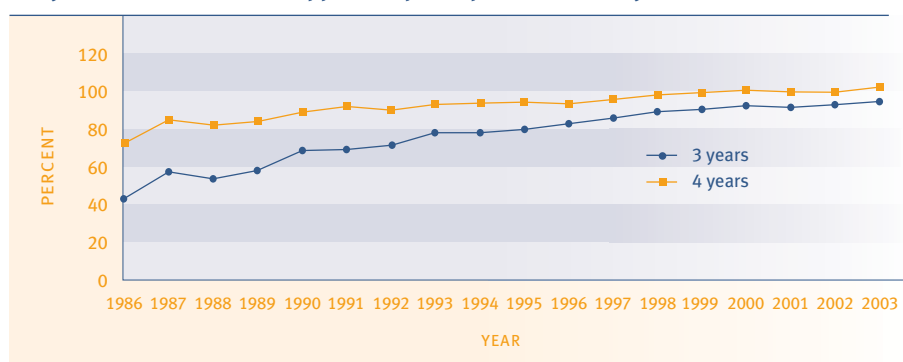
## RELEVANCE

Evidence from New Zealand and international research shows that the early years of childhood are vital to a child's development and future ability to learn.<sup>33</sup> Quality early childhood programmes prepare young children socially, physically, and academically for entry into primary education and can help narrow the achievement gap separating children from low-income families from more advantaged children.

## CURRENT LEVEL AND TRENDS

As at 1 July 2003, the 'apparent' early childhood education participation rate for 3-year-olds was 94 percent and for 4-year-olds it was 102 percent, indicating that some 4-year-olds attend more than one service. These figures represent a substantial increase from 43 percent and 73 percent respectively in 1986. Much of the growth in participation in early childhood education occurred in the five years between 1986 and 1991 with slower growth in subsequent years.

Figure K1.1 **Early childhood education "apparent" participation rate, 3-4 year olds, 1986-2003**



Source: Ministry of Education, Ministry of Social Development

Note: These figures overestimate the true participation rate. Rates in excess of 100 percent are possible, because children can be enrolled in more than one service

A new measure of early childhood education participation, which avoids the problem of double-counting, comes from information collected when children are in Year One at school. This shows that, as at July 2003, 94 percent of all Year One students had attended some form of early childhood education service before starting school. This compares with 91 percent of Year One students in 2000.

**ETHNIC DIFFERENCES**

There are marked ethnic differences in the proportion of Year One students who had attended an early childhood education service, with European students being the most likely to have attended: 97 percent compared with 88 percent of Māori and 83 percent of Pacific Year One students in 2003. However the gap in participation rates declined in the three years to 2003.

Table K1.1 **Early childhood education attendance by Year One students, by ethnic group, as at 1 July 2000-2003**

	European	Māori	Pacific	Asian	Other	Total
2000	95.4	84.8	76.1	89.2	83.0	91.0
2001	96.0	85.3	76.3	89.8	84.1	91.3
2002	96.6	86.5	79.4	92.1	86.6	92.3
2003	97.4	88.4	83.4	92.4	88.9	93.5

Source: Ministry of Education.

Note: These figures exclude cases for which attendance was unknown and differ from those published in *The Social Report 2003*

**PARTICIPATION BY  
TYPE OF EARLY  
CHILDHOOD  
EDUCATION SERVICE**

In 2003, childcare centres (40 percent) and kindergartens (39 percent) catered for the largest group of enrolments of 3- and 4-year-olds in early childhood education. Much smaller proportions were enrolled in play centres (6 percent) and kōhanga reo (5 percent).

# School leavers with higher qualifications

## DEFINITION

The proportion of secondary school leavers who leave school with Sixth Form Certificate in at least one subject, or with a higher qualification.

## RELEVANCE

Upper secondary education serves as the foundation for higher (post-secondary) learning and training opportunities as well as preparation for direct entry into the labour market. Those who leave school early with few qualifications are at a much greater risk of unemployment or vulnerability in the labour force and of having low incomes.<sup>34</sup>

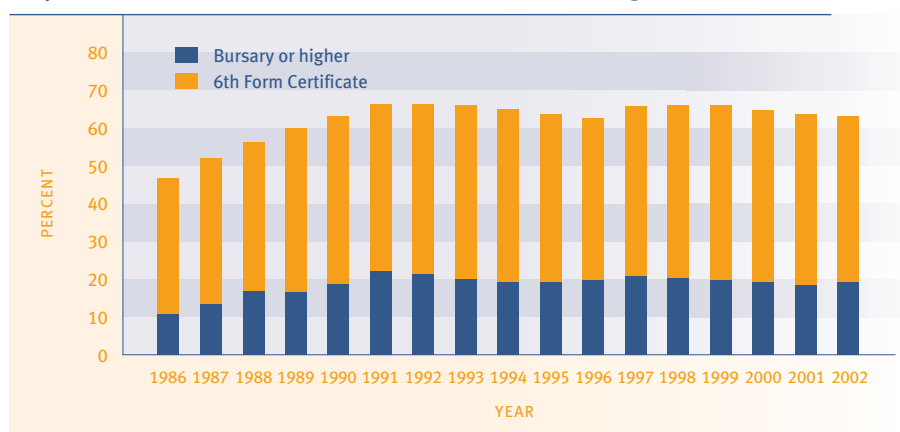
## CURRENT LEVEL AND TRENDS

In 2002, 63 percent of school leavers (33,000) left school with at least Sixth Form Certificate. This proportion has increased considerably from 47 percent in 1986. However, most of the increase occurred in the late 1980s. Since 1990, the proportion has fluctuated between 63 percent and 66 percent.

The proportion of school leavers attaining an A or B Bursary or Scholarship also increased during the period 1986 to 1991 and has remained around 18-22 percent over the past decade. In 2002, 19 percent of school leavers (10,000) had attained an A or B Bursary.

The lack of growth in the proportion of school leavers with higher qualifications since the early 1990s may be partly explained by an increase in employment and training opportunities for those without higher qualifications. Trends in the proportion of school leavers with higher qualifications are also influenced by changes in policy - such as the school leaving age - as well as student achievement.

Figure K2.1 **Proportion of school leavers with Sixth Form Certificate or higher, 1986-2002**



Source: Ministry of Education

Note: Bursary or higher includes A or B Bursary, Scholarship (to 1989) and National Certificate Level 3 or above (from 1996)

## SEX DIFFERENCES

In 2002, 68 percent of female school leavers had Sixth Form Certificate or higher qualifications compared to 59 percent of males. Between 1986 and 2002 the proportion of school leavers with at least Sixth Form Certificate improved at a faster rate for females than for males.



Table K2.1 **Proportion (%) of school leavers with higher qualifications, by sex, selected years, 1986-2002**

	Sixth Form Certificate or higher		Bursary or higher	
	Male	Female	Male	Female
1986	45.2	48.1	11.6	10.0
1991	63.5	69.2	21.1	23.4
1996	59.0	66.5	17.8	22.0
2001	59.4	68.1	15.8	21.2
2002	59.0	67.6	16.7	21.5

Source: Ministry of Education

Note: Bursary or higher includes A or B Bursary, Scholarship (to 1989) and National Certificate Level 3 or above (from 1996)

## ETHNIC DIFFERENCES

Māori lag considerably behind other ethnic groups in the qualifications they attain at school. In 2002, 39 percent of Māori school leavers and 54 percent of Pacific school leavers attained Sixth Form Certificate or a higher qualification. This compares with 68 percent of European students and 84 percent of Asian students.

There is also a substantial difference between ethnic groups in the proportions leaving school with Bursary or similar higher qualifications. In 2001, 4 percent of Māori and Pacific school leavers gained an A or B Bursary or National Certificate at Level 3 or above, compared with 22 percent of European and 41 percent of Asian school leavers. There has been little change in these proportions over the decade to 2002.

Table K2.2 **Proportion (%) of school leavers with higher qualifications by ethnic group, 1991, 1996, 2001, 2002**

	European	Māori	Pacific	Asian	Other	Total
<b>Sixth Form Certificate or higher</b>						
1991	na	37.4	52.2	na	na	66.3
1996	68.9	37.4	53.7	81.5	60.0	62.7
2001	68.5	40.6	54.7	84.7	63.7	63.6
2002	68.4	38.9	53.5	84.4	67.7	63.3
<b>Bursary or higher</b>						
1991	na	5.1	7.4	na	na	22.3
1996	23.7	4.1	5.8	41.7	18.8	19.9
2001	21.2	4.0	4.7	42.2	20.5	18.4
2002	22.2	3.9	4.2	41.3	21.1	19.1

Source: Ministry of Education

Note: Bursary or higher includes A or B Bursary, Scholarship (to 1989) and National Certificate Level 3 or above (from 1996)

## SOCIO-ECONOMIC DIFFERENCES

Young people from schools that draw their students from low socio-economic communities are less likely than other young people to attain higher school qualifications. In 2002, only 45 percent of school leavers from decile 1-3 schools (in the most disadvantaged communities) attained Sixth Form Certificate or higher qualifications, compared with 60 percent of those leaving decile 4-7 schools and 77 percent of those leaving decile 8-10 schools.

# Educational attainment of the adult population

## DEFINITION

The proportion of adults aged 25-64 years with educational attainment of at least upper secondary school level.

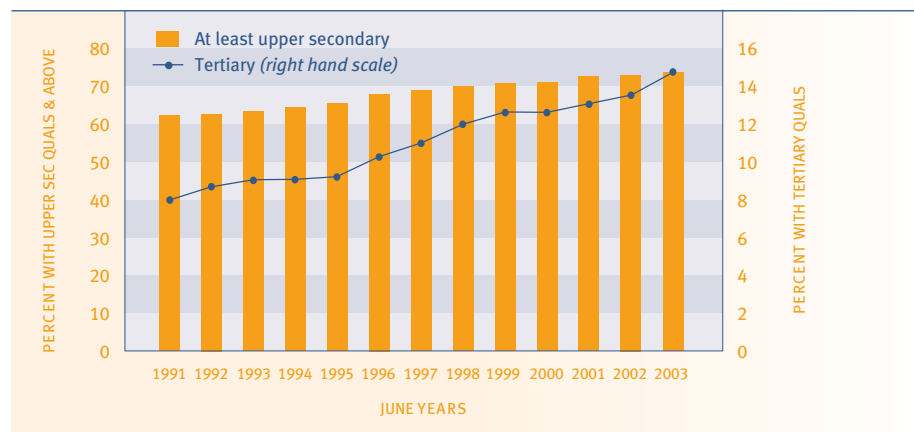
## RELEVANCE

The educational attainment of the adult population is an indicator of the skills available in the economy. The level of formal educational qualifications in the population is a commonly used proxy for the stock of 'human capital' ie the skills available in the population and labour force.

## CURRENT LEVEL AND TRENDS

At June 2003, 74 percent of the population aged 25-64 years (1.5 million people) had attained an educational qualification of upper secondary level or above. This proportion has steadily increased from 62 percent in 1991. Over the same period the proportion of adults with a bachelor's degree or higher qualification has risen from 8 percent to 15 percent (297,000). While some of the increase is due to adults gaining additional qualifications, most of the upward trend is due to new entrants to the 25-64 age group (young people and migrants) being better qualified on average than people reaching retirement age.

Figure K3.1 **Proportion of adults aged 25-64 with educational achievement of at least upper secondary level and tertiary level, 1991-2003**



Source: Statistics New Zealand, Household Labour Force Survey  
 Note: Tertiary = bachelor's degree or higher

## AGE AND SEX DIFFERENCES

Younger adults aged 25-34 years are much more likely to have at least upper secondary school qualifications than adults aged 55-64 (79 percent, compared to 61 percent). Similarly, young adults are more likely than older people to have tertiary qualifications (18 percent, compared to 9 percent).

Sex differences in educational attainment have narrowed over time. In 2003, women were more likely than men to have higher educational qualifications at ages 25-34. In contrast, at older ages men are much more likely than women to have higher educational qualifications.

Table K3.1 **Proportion (%) of population aged 25-64 with higher qualifications, by age and sex, 2003**

	25-34	35-44	45-54	55-64	Total 25-64
<b>At least upper secondary</b>					
Males	78.7	77.9	75.3	66.2	75.3
Females	80.2	76.5	70.8	55.4	72.3
Total	79.5	77.2	73.0	60.8	73.7
<b>Tertiary</b>					
Males	17.1	17.0	16.3	12.0	16.0
Females	19.2	14.6	12.3	6.3	13.8
Total	18.2	15.8	14.3	9.1	14.8

Source: Statistics New Zealand, Household Labour Force Survey  
 Note: Tertiary = bachelor's degree or higher

## ETHNIC DIFFERENCES

Māori and Pacific adults are much less likely than European and Other ethnic groups to have higher qualifications. In the year ended June 2003, 62 percent of Māori and 50 percent of Pacific adults aged 25-64 held upper secondary qualifications, compared to 78 percent of Europeans. Similarly, just 6 percent of Māori and 7 percent of Pacific adults held a tertiary qualification at bachelor's degree level or above, compared to 15 percent of Europeans. However, since 1991, growth in the proportion of adults with higher qualifications was fastest among Māori and Pacific adults.

The growth in the proportion of Pacific peoples with higher qualifications reflects the increasing proportion of the Pacific population who are born and educated in New Zealand. The relatively high percentage of the 'Other' ethnic group with higher qualifications reflects the selective process of immigration, which tends to target those with higher qualifications.

Table K3.2 **Proportion (%) of population aged 25-64 with higher qualifications, by ethnic group, selected years, 1991-2003**

	European	Māori	Pacific	Other	Total
<b>At least upper secondary</b>					
1991	66.1	39.3	27.9	57.7	62.3
1996	72.2	47.4	38.1	59.9	68.0
2002	76.9	59.6	49.8	67.5	73.0
2003	77.6	62.3	50.2	67.5	73.7
<b>Tertiary</b>					
1991	8.4	1.3	.s	19.7	8.0
1996	10.4	2.3	2.2	27.1	10.2
2002	13.5	5.5	5.8	31.5	13.7
2003	14.6	6.0	7.4	32.2	14.8

Source: Statistics New Zealand, Household Labour Force Survey  
 Note: .s = sampling error too high for publication; Tertiary = bachelor's degree or higher

## INTERNATIONAL COMPARISON

In 2001, 76 percent of New Zealand adults had at least upper secondary level qualifications, compared with an OECD median of 67 percent.<sup>35</sup> New Zealand ranked 12th out of 30 OECD countries. New Zealand also ranked 15th (equal with Ireland and Hungary) in the proportion who have completed tertiary qualifications to bachelor's degree or higher, with a rate of 14 percent (the same as the OECD median). Countries which had higher proportions of adults with tertiary qualifications at this level included the United States and Norway (both 28 percent - the highest rate), Canada (20 percent), Australia (19 percent), and the United Kingdom (18 percent).

# Adult literacy skills in English

## DEFINITION

The proportion of the population aged 16-65 with literacy skills in English (defined as prose, document and quantitative skills at Level 3 or above), as measured in the 1996 International Adult Literacy Survey (IALS). Level 3 is a 'suitable minimum for coping with the demands of everyday life and work in a complex, advanced society. It denotes roughly the skill level required for successful secondary school completion and college entry'.<sup>36</sup> Prose literacy is the ability to understand and use information from texts including editorials, news stories, brochures and instruction materials. Document literacy is the ability to locate and use information contained in formats, including maps, tables and job application forms. Quantitative literacy is the ability to apply arithmetic operations to numbers embedded in printed materials, such as balancing a chequebook or completing an order form.

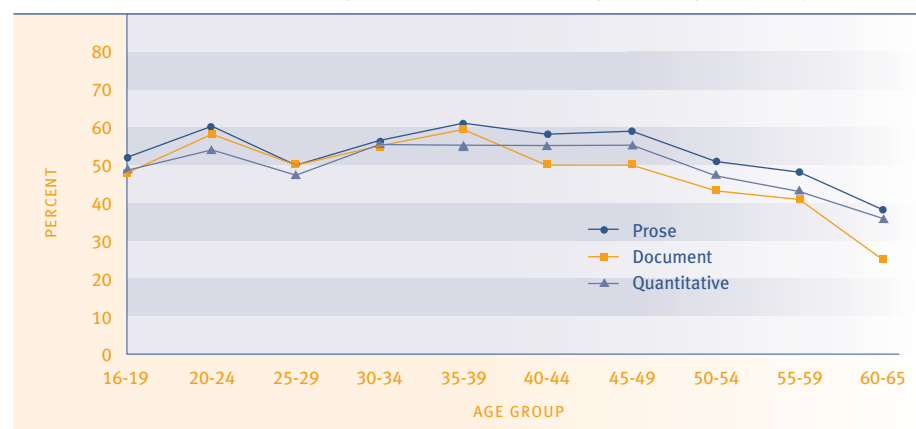
## RELEVANCE

The increasing complexity of our society and the need for a more flexible and highly educated workforce mean that individuals need to be able to understand and apply information of varying difficulty from a range of sources to function effectively at work and in everyday life. The IALS was designed to measure adult literacy skills in English by assessing proficiency levels, using test materials derived from specific contexts within countries.

## CURRENT LEVEL

Results from the first international literacy survey in 1996 show that 54 percent of New Zealand's population aged 16-65 had prose literacy skills at Level 3 or above, 50 percent had document skills at Level 3 or above, and 51 percent had quantitative skills at Level 3 or above.

Figure K4.1 Proportion of adults aged 16-65 years with higher literacy skills, by age group, 1996



Source: OECD (2000c)

## AGE DIFFERENCES

Across all three domains the proportion of people with literacy skills above or at Level 3 and above was broadly similar for people aged 16-49 but then declined with age for people aged over 50. Poorer literacy levels among those aged over 50 may be due either to differences in the education received by older people or to a decline in these skills as people age.

## SEX DIFFERENCES

Women performed better than men in prose literacy (58 percent at Level 3 or above compared with 50 percent for men). The reverse was true in respect of quantitative skills: 55 percent of men had quantitative literacy skills at Level 3 or above, compared with 47 percent of women. Differences between men and women in respect of document literacy skills at those levels were negligible.

## ETHNIC DIFFERENCES

Across all three domains, over half of all Europeans had literacy skills at Level 3 or above. Pacific peoples consistently had the smallest proportions at this level (less than a third in each domain). Māori had a larger proportion than other non-European ethnic groups in prose literacy at Level 3 or above but a smaller proportion in the document and quantitative literacy domains.

Table K4.1 **Proportion (%) of adults aged 16-65 years with higher level literacy skills (Level 3 or above), 1996**

	Prose literacy	Document literacy	Quantitative literacy
European	61	56	57
Māori	36	30	30
Pacific	27	25	28
Other	32	34	37
Total	54	50	51

Source: Ministry of Education (2001b)

Among Māori and Pacific adults, there were considerable sex differences favouring males in the document and quantitative domains that were not evident among Europeans. For example, only 18 percent of Pacific females were at Level 3 or above for quantitative literacy compared with 42 percent of Pacific males. The sex disparity was not as great among Māori but was still substantial, with 26 percent of females at Level 3 or above for quantitative literacy compared with 36 percent of males.<sup>37</sup>

## INTERNATIONAL COMPARISON

New Zealand's prose literacy rate of 54.2 percent was close to the OECD median of 53.5, and placed New Zealand seventh out of 17 OECD countries.<sup>38</sup> The top prose literacy performer in the OECD was Sweden (72.1). Outcomes for other countries include Canada (57.8), Australia (55.8), the United States (53.5) and the United Kingdom (47.9). New Zealand had a document literacy score of 49.5 percent, slightly lower than the OECD median of 52.9. This placed New Zealand 13th in the OECD for document literacy. Scores for other countries included: Canada (57.2), Australia (55.1), the United States (50.4) and the United Kingdom (49.6). Concerning quantitative literacy, New Zealand scored 50.6 percent. This was significantly lower than the OECD median of 57.0 and ranked New Zealand at 12th place. Canada scored 57.0, Australia (56.8), the United States (53.8) and the United Kingdom (49.0).<sup>39</sup>

# Participation in tertiary education

## DEFINITION

The proportion of the population aged 15 and over enrolled on 31 July in formal tertiary education leading to a recognised New Zealand qualification. Tertiary education providers include public institutions (universities, polytechnics, colleges of education, wānanga), and private tertiary education providers receiving government funding or approval, or registered with the New Zealand Qualifications Authority. Qualifications range from certificates and diplomas to bachelor and post-graduate degrees.

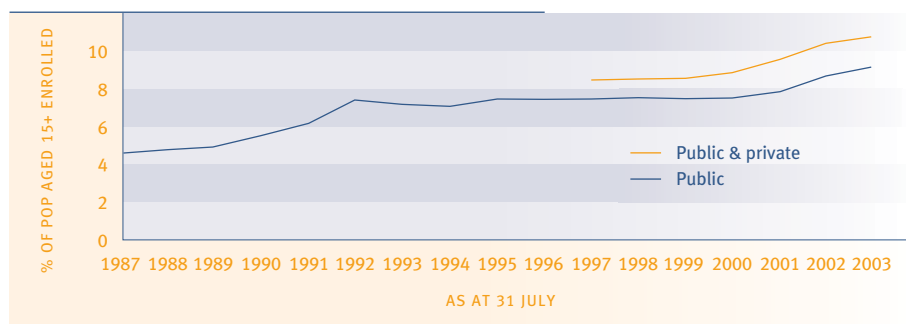
## RELEVANCE

Participation in tertiary education provides individuals with skills and knowledge that allow them to participate in society and the economy.

## CURRENT LEVEL AND TRENDS

In July 2003, 11 percent of the population aged 15 and over (337,000 people) were enrolled in formal tertiary education, an increase from 8 percent (246,600 people) in 1997. Long-term trend data is only available for public tertiary education institutions. In the mid-1980s, around 5 percent of the population aged 15 and over were enrolled in public tertiary education, compared to 9 percent in July 2003.

Figure K5.1 Tertiary education participation rate, 1987-2003



Source: Ministry of Education; Ministry of Social Development

Enrolments for courses that lead to qualifications below the level of a bachelor degree have risen faster than enrolments at degree level or above in recent years. In July 2003, 6 percent of the population aged 15 and over were enrolled in sub-degree tertiary education courses, an increase from 3 percent in 1994. In comparison, 5 percent of the population were enrolled in degree and post-graduate courses in 2003, a rise from 3 percent in 1994.

## AGE AND SEX DIFFERENCES

Tertiary education participation is highest among 18–24-year-olds. Recent increases in tertiary participation rates have been greatest at ages 25 and over, while participation under 18 years has declined.

Women are increasingly more likely than men to participate in tertiary study at ages 18 and over. The difference is greatest in the high incidence age group of 18–24 years, where the sex gap increased from four to seven percentage points between 1999 and 2003. There is little difference between males and females in the levels at which they are enrolled. Of all tertiary students enrolled in mid-2003, 38 percent of females and 37 percent of males were enrolled in degree courses and 8 percent of students of both sexes were enrolled in post-graduate courses.

Table K5.1 **Tertiary participation rates (%) by age and sex, 1999-2003**

Sex, year	15-17 years	18-24 years	25-39 years	40+ years	Total
<b>Males</b>					
1999	5.6	29.6	7.9	1.9	7.5
2000	7.9	31.2	8.4	2.1	8.0
2001	9.0	32.7	9.1	2.4	8.5
2002	8.0	33.3	9.9	2.8	9.0
2003	5.4	33.1	10.6	3.2	9.3
<b>Females</b>					
1999	5.5	33.9	10.2	3.4	9.2
2000	8.7	35.1	11.0	3.6	9.7
2001	8.5	37.3	12.4	4.0	10.6
2002	8.4	39.5	14.1	4.9	11.8
2003	4.5	39.8	15.1	5.5	12.2

Source: Ministry of Education, Ministry of Social Development

## ETHNIC DIFFERENCES

Māori participation in tertiary education has increased sharply in recent years. In July 2003, the age-standardised tertiary education participation rate for Māori was 16 percent, almost double the rate in 1999 (8 percent). In comparison, non-Māori participation increased from 8 percent in 1999 to 10 percent in 2003. The age-standardised rate has been higher for Māori than non-Māori since 2000.<sup>40</sup>

Māori participation in tertiary education is higher than non-Māori participation among those under 18 and over 25, but considerably lower than non-Māori participation at the core tertiary education ages of 18-24 years. However, participation in this age group has been growing. In 2003, 26 percent of Māori aged 18-24 were enrolled in tertiary education, compared with 19 percent in 1999. The non-Māori participation rate at 18-24 years was 35 percent in 1999 and 39 percent in 2003.

Table K5.2 **Tertiary participation rates (%) by age and sex, Māori, non-Māori, 2003**

Age group	Māori %			Non-Māori %		
	Male	Female	Total	Male	Female	Total
15-17	8.6	8.5	8.6	4.5	3.5	4.0
18-24	19.2	32.5	25.9	35.9	41.4	38.6
25-39	13.2	26.6	20.2	10.1	12.9	11.5
40+	8.7	17.4	13.2	2.7	4.3	3.6
Total	12.2	22.4	17.5	8.9	10.7	9.8

Source: Ministry of Education; Ministry of Social Development

There are marked ethnic differences in the level at which tertiary students are enrolled, with Māori and Pacific students being less likely to be enrolled in degree level courses than students from European, Asian or Other ethnic groups.

## INTERNATIONAL COMPARISON

There are currently no robust measures of tertiary participation across OECD countries. Some indication of New Zealand's relative standing can be gained from the proportion of the population enrolled in education at various ages. Taking the 20-29 year age group, who are more likely to be enrolled in tertiary than secondary education, in 2001, New Zealand ranked 14th with a rate of 23 percent; the same as the OECD median. The New Zealand rate was about the same as that of the United States and the United Kingdom, slightly above that of Canada (21 percent) but below the rate for Australia (28 percent).<sup>41</sup>

## DESIRED OUTCOMES

All people have access to meaningful, rewarding and safe employment. An appropriate balance is maintained between paid work and other aspects of life.

# Paid Work

## INTRODUCTION

Paid work has an important role in social wellbeing by providing people with incomes to meet their basic needs and contribute to their material comfort, as well as by giving them options for how they live their lives. Paid work is also important for the social contact and sense of self-worth or satisfaction it can give people.

The desired outcomes highlight four aspects of paid work: access to work, the financial return of work, quality of work, and the balance between work and other areas of life.

For most people, income from paid work is the main factor determining their material standards of living. On average, about two-thirds of total household income is derived directly from labour market income, and the figure is substantially greater for most households.<sup>42</sup> Income saved during working life contributes to the standard of living of many retired people.

The social and personal dimensions of paid work are equally important. Ideally, work should be not only materially rewarding but contribute to other aspects of wellbeing. Meeting challenges at work can contribute to a sense of satisfaction and self-worth. In this sense, it is important people are able to get work which matches their skills and abilities.

Social contact is an important part of wellbeing. For many people, much of their social contact is through their jobs. People often gain a sense of belonging or identity from their jobs, recognising themselves and others because of the organisation they work for or the type of work they do.

Conversely, unemployment can isolate people from society and cause them to lose self-confidence. Unemployment is associated with poorer mental and physical health, and lower levels of satisfaction with life.

The quality of work is of critical importance. A meaningful job can enhance people's satisfaction with their work. An unsafe job, on the other hand, places people's wellbeing at risk.

Work can also be stressful. People may be required to work longer hours than they want or need to. The desired outcomes acknowledge wellbeing is best served by maintaining a balance between paid work and other aspects of life, though where that balance lies will differ from person to person.



## INDICATORS

Five indicators are used in this chapter. They are: the unemployment rate, the employment rate, average hourly earnings from all wages and salaries, the number of workplace injury claims, and the proportion of the population in paid employment who are satisfied with their work/life balance.

Together, these indicators present a picture of people's access to employment, how financially rewarding employment is, the level of safety of employment, and the balance between work and other areas of life.

The first two indicators relate to the quantity of paid work on offer and taken up. This is affected by several factors, including economic conditions, investment decisions, migration flows, people's qualifications and abilities, and their decisions on how much time to allocate to paid work.

The first indicator is the unemployment rate. This measures the proportion of people who are out of work, actively seeking and available to take up work. This is a relatively narrow measure of unemployment but it accords closely with the OECD standard measure, allowing international comparisons. Information about long-term unemployment is also provided.

The second indicator is the employment rate. This provides an alternative picture of people's access to paid work, as it is influenced not only by the amount of work available but also by trends in labour force participation. The indicator measures the proportion of working-age people employed for one hour or more a week. Information is provided on the breakdown between full-time and part-time employment. This gives some indication of the types of work people are taking on and the overall level of employment.

The third indicator is a new indicator, and measures average hourly earnings from waged and salaried employment. The level of financial return to paid employment independent of the quantity of hours worked is central to the quality of paid work.

The fourth indicator is the rate of workplace injury claims per 1000 full-time equivalent employees. Workplace safety is important in its own right, but may also be a proxy for the quality of employment. Jobs should not pose an unreasonable risk to people's lives or physical wellbeing.

The final indicator measures the proportion of the population in paid employment who are satisfied with their work/life balance. This is a new measure for *The Social Report 2004* and replaces the indicator in last year's report of the proportion of the population in paid employment working 50 hours or more.

# Unemployment

## DEFINITION

The official unemployment rate is the number of people aged 15 and over who are not employed and are actively seeking and available for paid work, expressed as a percentage of the total labour force. The labour force is defined as the population aged 15 and over who are either employed or unemployed (not employed but actively seeking and available for paid work).

## RELEVANCE

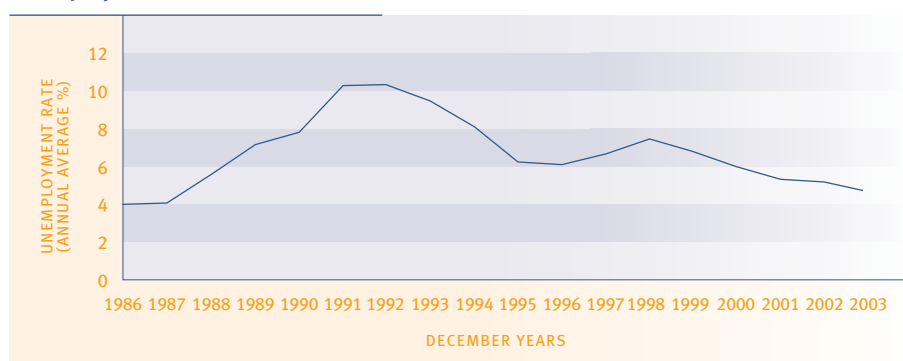
This is a key indicator of labour market outcomes and lack of access to employment. The unemployment rate is an important reflection of overall economic conditions and of the ease with which people are able to move into employment.

## CURRENT LEVEL AND TRENDS

In 2003, 4.7 percent of the labour force, or 93,900 people, were unemployed and actively seeking work. The unemployment rate has steadily declined since 1998 and is considerably lower than the peak rate of 10.3 percent in 1991/1992 (almost 170,000 people unemployed), but is still a little higher than the rate of 4.0 percent in 1986 (64,000 people unemployed).

In 2003, 27 percent of the surveyed unemployed were unemployed for a continuous period of six months or more, compared with 29 percent in 2002. This was still higher in 2003 than it had been in 1986, when it was 22 percent, but was substantially lower than the peak of 53 percent in 1992/1993.

Figure PW1.1 **Unemployment rate, 1986-2003**



Source: Statistics New Zealand, Household Labour Force Survey

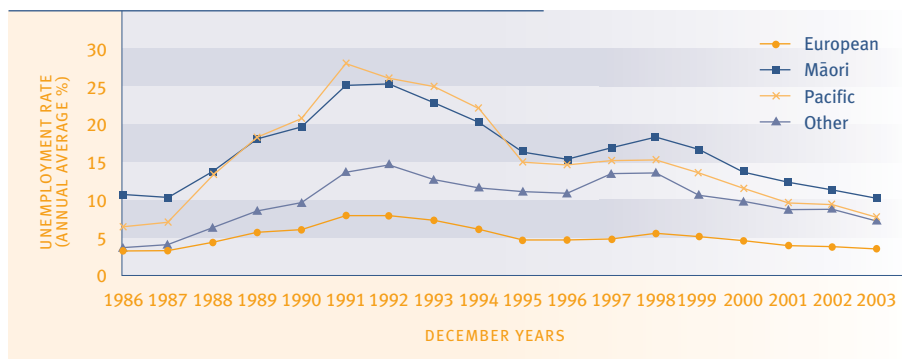
The economy's improved performance over the last decade has contributed to the steady decline in the unemployment rate over this time. Changes in the regulation of the labour market and the benefit system may also have had some effect.<sup>43</sup>

## ETHNIC DIFFERENCES

Substantial differences in unemployment rates persist for different ethnic groups. Māori unemployment rose from 10.7 percent in 1986 to a peak of 25.4 percent in 1992 but fell back to 10.2 percent by 2003, the best rate recorded since the survey began. Between 1986 and 1991, the unemployment rate for Pacific peoples rose from 6.5 percent to 28.0 percent, the highest rate for any ethnic group. Pacific peoples' unemployment rate has declined more than that of Māori since the mid-1990s, and was 7.7 percent in 2003. Pacific unemployment is still higher than it was in 1986.

Unemployment is lowest among people of European ethnicity; their unemployment rate rose from 3.2 percent in 1986 to a peak of 7.9 percent in 1992 and had declined to 3.5 percent by 2003. The unemployment rate among the 'Other' ethnic group category (which comprises predominantly people of Asian ethnicity and includes many recent migrants) increased from 3.6 percent in 1986 to 14.7 percent in 1992, and was still relatively high at 7.2 percent in 2003.

Figure PW1.2 **Unemployment rate by ethnic group, 1986-2003**



Source: Statistics New Zealand, Household Labour Force Survey

## AGE AND SEX DIFFERENCES

Unemployment rates among different age groups have followed similar trends but the level among those aged 15-24 (10.2 percent in 2003) has been consistently more than twice the rate for older groups. This group comprised 39 percent of all unemployed in 2003. Unemployment rates have been fairly similar for males and females since the mid-1990s. However in 2003, the female unemployment rate was marginally higher than the male unemployment rate.

Table PW1.1: **Unemployment rates (%), by age and sex, selected years, 1986-2003**

Year	15-24	25-44	45-64	Total 15+	Males	Females
1986	7.9	3.1	1.7	4.0	3.5	4.6
1991	18.8	8.8	5.8	10.3	10.9	9.5
1996	11.8	5.2	4.0	6.1	6.1	6.1
2001	11.8	4.4	3.3	5.3	5.4	5.3
2002	11.4	4.4	3.1	5.2	5.1	5.3
2003	10.2	4.1	2.8	4.7	4.4	5.0

Source: Statistics New Zealand, Household Labour Force Survey. Note: Average for December years

## REGIONAL DIFFERENCES

In 2003, regional unemployment rates were highest in Northland (8.0 percent) and Bay of Plenty (6.3 percent), and lowest in Southland and Tasman-Nelson-Marlborough-West Coast (each 3.5 percent). The fall in unemployment between 1992 and 2003 was greatest in the Auckland region.

## INTERNATIONAL COMPARISON

In 2003, New Zealand ranked eighth best out of 27 OECD countries with a standardised unemployment rate of 4.7 percent, compared with an OECD median of 6.0 percent. Since the mid-1980s, New Zealand's unemployment rate relative to other OECD countries has ranged from one of the best (ranked fifth in 1986 with a rate of 4.0 percent) to one of the worst (ranked 17th in 1992 with a rate of 10.3 percent) to a more favourable position in recent years. South Korea had the best unemployment rate in 2003 (3.6 percent). The New Zealand unemployment rate in 2003 was lower than that of Australia (6.1 percent), Canada (7.6 percent), the United Kingdom (5.0 percent) and the United States (6.0 percent).<sup>44</sup> In 2002, New Zealand ranked seventh best in terms of the proportion of the unemployed who had been unemployed for six months or longer.<sup>45</sup>

# Employment

## DEFINITION

The proportion of the population aged 15-64 years who are in paid employment for at least one hour per week.

## RELEVANCE

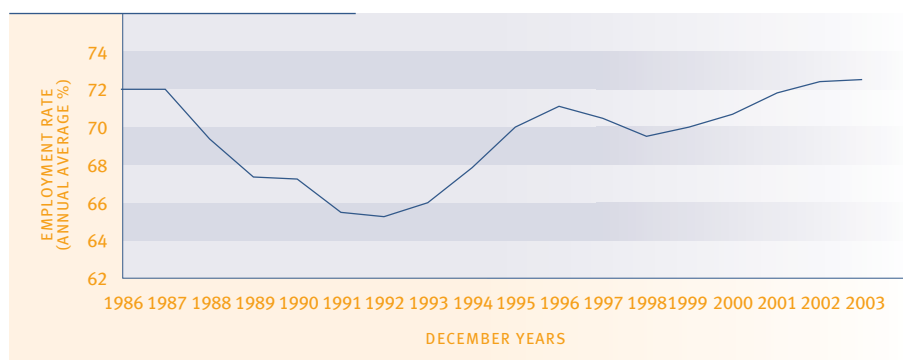
The employment rate is the best available indicator of the prevalence of paid employment. It captures trends in both unemployment and labour force participation (the proportion of the working age population either employed or unemployed).

## CURRENT LEVEL AND TRENDS

In 2003, 72.5 percent of 15–64 year-olds (1.878 million people) were employed for one hour or more per week. This was slightly above the rates recorded in 1986 and 1987 (72 percent). The employment rate has been rising since 1992, except during the economic downturn in 1997 and 1998. The increase from 65.3 percent in 1992 to 72.5 percent in 2003 corresponds to a rise of 423,000 in the number of employed people aged 15-64. Over the same period, the number of people aged 15-64 increased by 361,400.

Full-time employment rates declined between 1986 (60.3 percent) and 1991 (52 percent) and have yet to recover to 1986 levels among men. Part-time employment rates have increased for both sexes over the period (from 11.7 percent in 1986 to 15.9 percent in 2003), almost doubling among men. However, women (23 percent) continue to have higher part-time employment rates than men (8 percent).

Figure PW2.1 **Employment rate, 1986-2003**



Source: Statistics New Zealand, Household Labour Force Survey. Note: Based on population aged 15-64

## AGE AND SEX DIFFERENCES

The employment rate decline between 1987 and 1992 affected all age groups but was most pronounced for young people aged 15-24. Youth employment rates have remained relatively low during the period of employment growth since 1992, possibly due to a growth in participation in tertiary education and training. Conversely, employment rates for people aged 45-64 have grown strongly since 1992, driven mainly by the phasing in of the higher age of eligibility for New Zealand Superannuation, rising employment among women, and an increase in labour demand.

Women's employment rate is significantly lower than that of men, owing mainly to the fact that women spend more time on childcare and other unpaid household work. The gap has, however, narrowed substantially since the mid-1980s, from 24 to 13 percentage points.

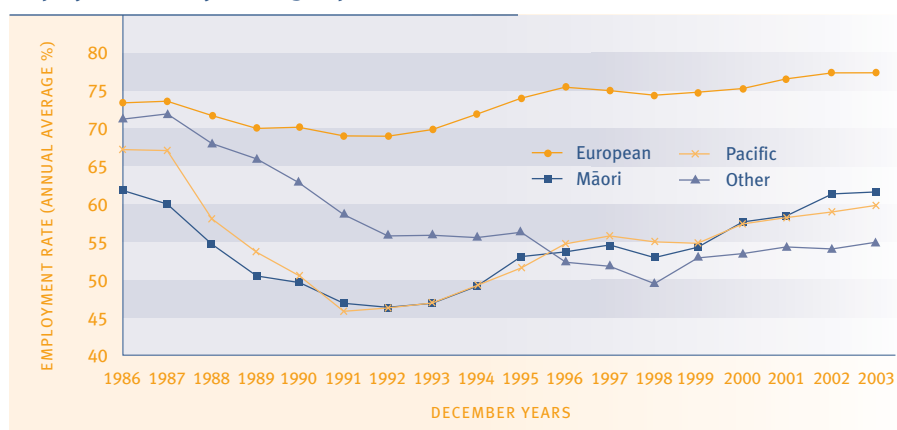
Table PW2.1 **Employment rates (%), by age and sex, selected years, 1986-2003**

Year	15-24	25-44	45-64	Total	Males	Females
1986	67.1	79.4	65.1	72.0	84.1	60.0
1991	54.3	74.0	61.7	65.5	73.7	57.5
1996	59.4	77.3	70.2	71.1	79.0	63.3
2001	56.0	77.9	73.6	71.8	78.9	64.9
2002	56.8	78.3	74.7	72.4	79.6	65.4
2003	56.6	78.3	75.3	72.5	79.3	65.8

Source: Statistics New Zealand, Household Labour Force Survey  
Note: Average for December years

## ETHNIC DIFFERENCES

The proportions of the European, Māori and Pacific working-age populations in employment all fell between 1987 and 1992 and have risen since then. The only ethnic group to have higher employment rates in 2003 than in the mid-1980s was the European only group (77.5 percent employed in 2003, compared with 73.5 percent in 1986). The Māori employment rate, at 61.7 percent in 2003, has almost recovered to 1986 levels (61.9 percent), but Pacific people were still much less likely to be employed (67.2 percent in 1986, 59.9 percent in 2003). The employment rate for the 'Other' ethnic category has fallen from being the second highest in the late 1980s to the lowest since the mid-1990s, reflecting in part the difficulties experienced by some newer migrants in integrating into the New Zealand labour market.<sup>46</sup>

Figure PW2.2 **Employment rate by ethnic group, 1986-2003**

Source: Statistics New Zealand, Household Labour Force Survey  
Note: Based on population aged 15-64

## REGIONAL DIFFERENCES

In 2003, employment rates were highest in Waikato (65.8 percent) and Wellington (65.5 percent), and lowest in Bay of Plenty (58.8 percent) and Northland (57.0 percent).

## INTERNATIONAL COMPARISON

In 2002, the New Zealand employment rate of 72.4 percent for people aged 15-64 years was higher than the OECD median of 66.7 percent and ranked eighth best out of 30 OECD countries. New Zealand's position has improved from 13th place in 1990, almost entirely due to the recovery in male employment rates. Iceland had the best employment rate in 2002 (82.8 percent). The New Zealand rate in 2002 was similar to that of the United Kingdom (72.7 percent), the United States (71.9 percent) and Canada (71.5 percent) and higher than that of Australia (69.4 percent).

# Average earnings from wage and salary jobs

## DEFINITION

Average hourly earnings from all wages and salaries for employees earning income from wage and salary jobs, as measured by the New Zealand Income Survey.

## RELEVANCE

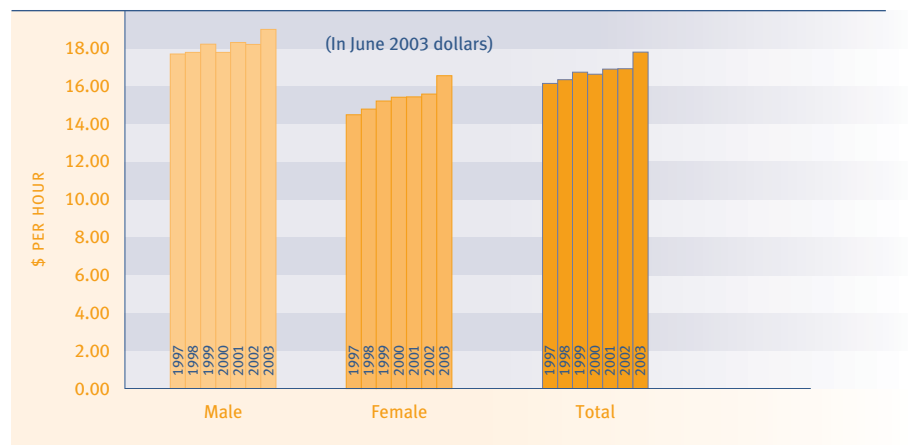
Average hourly earnings from wage and salary jobs is an indicator of the financial return to paid employment, independent of the quantity of hours worked.

## CURRENT LEVEL AND TRENDS

In June 2003, the average hourly wage of wage and salary earners was \$17.82. Male employees earned on average \$19.02 an hour from wage and salary jobs and female employees earned on average \$16.57 an hour.

After adjusting for the effects of inflation, average hourly earnings increased by \$1.66 per hour or 10 percent in the six years to June 2003.

Figure PW3.1 **Average hourly earnings from wage and salary jobs by sex, June 1997 to June 2003**



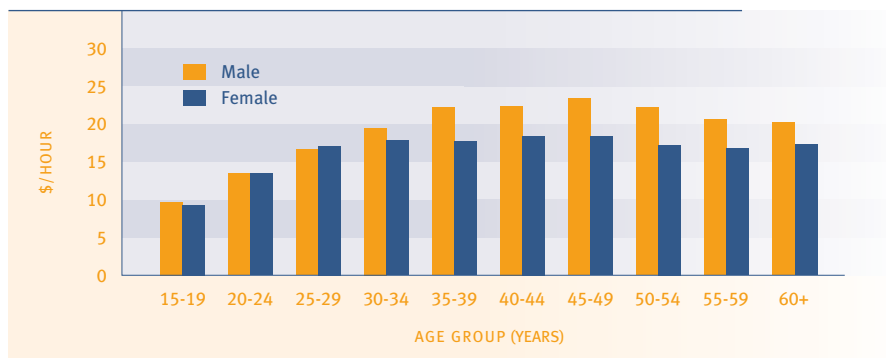
Source: New Zealand Income Survey (1997 - 2003) Statistics New Zealand

## AGE AND SEX DIFFERENCES

Average hourly earnings from wage and salary jobs rise with increasing age to peak at 45-49 years. In June 2003, 15-19 year-olds earned \$9.55 an hour on average from wage and salary jobs compared with \$20.68 an hour on average for 45-49 year-olds. Real average hourly earnings for 15-24 year-olds increased by 6 percent between 1997 and 2003, which was less than the increase for older workers (11 percent for the 25-44 age group and 12 percent for the 45-64 age group).

In 2003, men and women below 30 years had similar average hourly earnings from wage and salary jobs. Men earned more per hour on average from wage and salary jobs than women in every five-year age group above 30 years. The increase in average hourly earnings over the six years to June 2003 was greater for female employees (14 percent) than for male employees (7 percent).

Figure PW3.2 **Average hourly wage and salary earnings by age and sex, June 2003**



Source: Statistics New Zealand, New Zealand Income Survey

## ETHNIC DIFFERENCES

Māori in wage and salary jobs earned \$15.44 an hour on average in June 2003. This was less than European/Pākehā (\$18.44 an hour) and more than Pacific people (\$13.85 an hour). Wage and salary earners from other ethnic groups earned on average \$17.65 an hour.

Over the six years to June 2003, increases in real average hourly earnings for Māori, at just below 12 percent, were similar to increases for European/Pākehā (11 percent) over the six years to June 2003. Over the same period, Pacific people and those from other ethnic groups experienced lower increases in average hourly earnings from wage and salary jobs (9 percent and 10 percent, respectively).

# Workplace injury claims

## DEFINITION

The number of workplace accident insurance claims reported to the Accident Compensation Corporation (ACC) per 1,000 full-time equivalent employees, excluding those employees who received accident and emergency treatment only.

## RELEVANCE

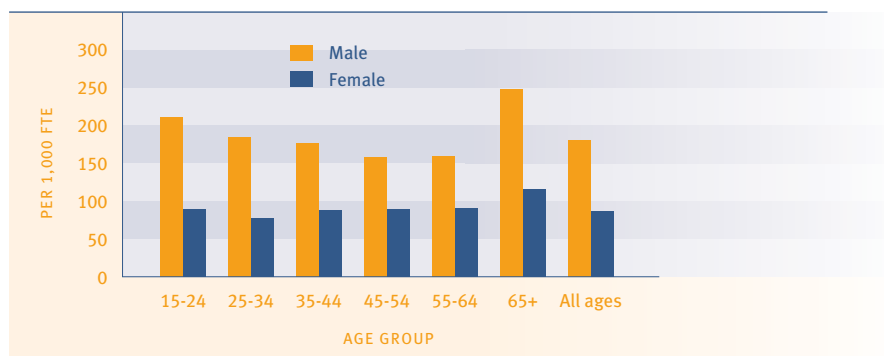
Safety at work is an important contributor to wellbeing and the risk of work-related accidents or illness can be seen as one component of the quality of work. The best currently available measure of the incidence of workplace injuries comes from the database of claims made to the ACC.

## CURRENT LEVEL

By September 2002, 229,489 work-related injury claims had been reported to the Accident Compensation Corporation for injuries incurred over the year ended June 2002, an increase of 1,595 (0.7 percent) on the year ended June 2001. This represents a rate of 141 claims per 1,000 full-time equivalent employees (FTEs), about the same as the previous year (a rate of 144 per 1,000 FTEs). The majority of claims were for medical treatment only (ie not including weekly compensation). Eighty percent of claims were in respect of employees, and people who employed others in their own business. The remainder were the self-employed who did not employ others in their business. The incidence rate for the self-employed not employing others was twice that of the rest of the workforce, as defined above, (246 per 1,000 FTEs compared with 127 per 1,000 FTEs).

Information on workplace injuries for 2002 is based on a new set of indicators developed by Statistics New Zealand. These figures have been backdated to 2001 but are not directly comparable with previous figures on workplace injuries. A comparison of the general trend over time, however, shows the number of claims reported to the ACC was approximately constant between 1995 and 1997 and then fell up to 1999. Numbers have continued to decline since 1999 but it is difficult to conclude much from this because of differences in the methods of collection.

Figure PW4.1 **Estimated claim rate per 1,000 FTE employed by age and sex, 2001-2002**



Source: Statistics New Zealand (2003b)

Injury claims for the year ending June 2002 that had been reported by September 2002 included 85 work-related fatalities. This is likely to be an underestimate of the final number of fatalities, because some deaths may subsequently have occurred for injuries in that period, and not all fatal work-related accidents result in a claim to ACC. Agriculture accounted for 20 percent of work-related fatalities, followed by manufacturing (14 percent) and construction (13 percent).



## AGE AND SEX DIFFERENCES

Males are more than twice as likely as females to suffer workplace injuries involving an injury insurance claim (180 per 1,000 FTEs for males compared with 87 per 1,000 FTEs for females). This reflects in part male predominance in relatively dangerous occupations. Among males, the highest injury claim rate was for those aged 65 and over followed by those aged under 35. Among females, age differences in the injury claim rate were less pronounced.

## ETHNIC DIFFERENCES

Workplace injury claim rates are higher for Māori (175 per 1,000 FTEs) than for other ethnic groups. This is likely to reflect the fact that Māori are disproportionately employed in industries and occupations that have high injury rates, such as forestry. In 2002, the next highest rate was that for Europeans (129 per 1,000 FTEs), followed by Pacific peoples (125 per 1,000 FTEs). The 'Other' ethnic group has the lowest accident claim rate (103 per 1,000 FTEs).

Table PW4.1 **New workplace injury claims, by ethnicity, 2001/2002**

Ethnic group	Number of claims	Rate per 1,000 FTEs
European	166,548	129
Māori	26,765	175
Pacific	9,533	125
Other	10,973	103
Total	229,489	141

Source: Statistics New Zealand (2003b)

## INDUSTRY DIFFERENCES

Variation in injury rates for different industries underlies many of the differences in injury rates for males and females, and ethnic and age groups. The highest injury rates are in mining (279 per 1,000 FTEs), agriculture (212 per 1,000 FTEs), construction (197 per 1,000 FTEs) and forestry (190 per 1,000 FTEs).

Table PW4.2 **New workplace injury claims, by industry, 2001/2002**

Industry	Number of claims	Rate per 1,000 FTEs
Mining	837	279
Agriculture	25,632	212
Construction	21,227	197
Forestry	1,902	190
Manufacturing	47,462	172
Transport and storage	9,969	142
Hunting and fishing	1,107	123
Electricity, gas and water supply	1,072	107
Accommodation, cafes and restaurants	6,490	100
Wholesale and retail trade	26,288	94
Communication services	2,613	84
Health and community services	9,788	73
Education	7,652	64
Property and business services	10,236	58
Finance and insurance	1,307	27

Source: Statistics New Zealand (2003b)

# Satisfaction with work/life balance

## DEFINITION

The proportion of employed people who are 'satisfied' or 'very satisfied' with their work/life balance, as reported in the Social Wellbeing Survey 2004.<sup>47</sup>

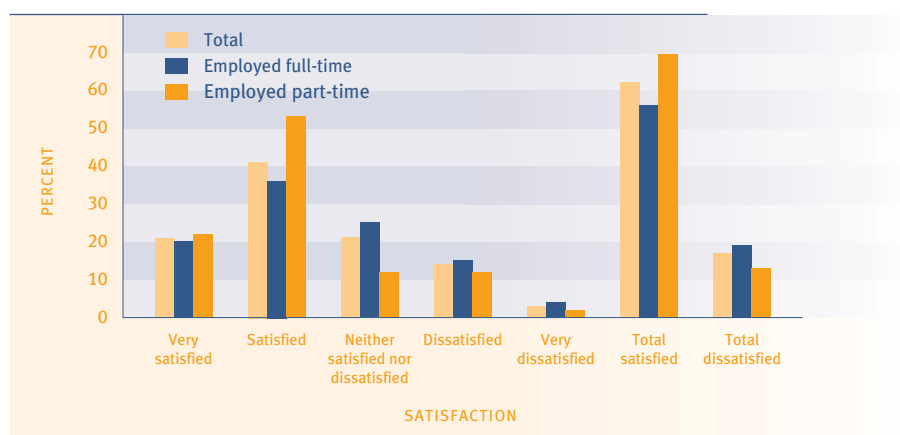
## RELEVANCE

It is important that people find a balance between paid work and other aspects of life. When this balance is not found people can find themselves suffering from stress or anxiety. Long working hours or non-standard working hours (eg night shifts) may compromise work/life balance.

## CURRENT LEVEL AND TRENDS

Results from the Social Wellbeing Survey 2004, indicate that most employed New Zealanders (62 percent) are 'satisfied' or 'very satisfied' with their work/life balance. People in part-time employment (75 percent) are more likely to be 'satisfied' or 'very satisfied' with their work/life balance than people in full-time employment (56 percent).

Figure PW5.1 Satisfaction with work/life balance, by employment status, 2004



Source: Ministry of Social Development (2004)

## AGE AND SEX DIFFERENCES

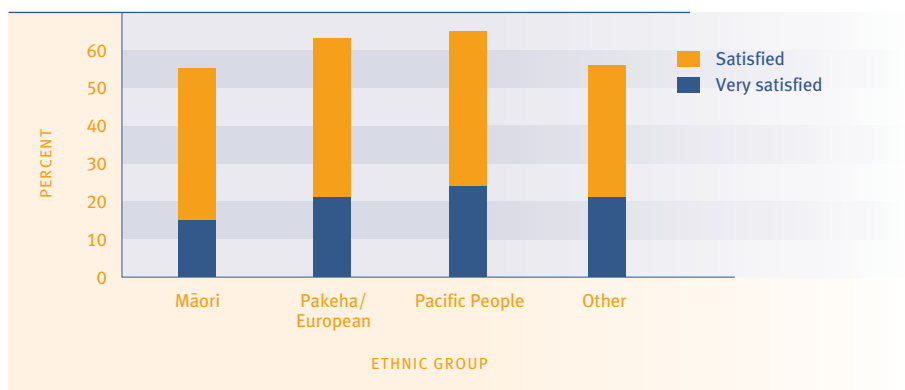
Those least likely to be satisfied with their work/life balance are people aged 15-24 years and 45-64 years (both have total satisfaction levels of 59 percent).

Females (66 percent) are more likely to report being satisfied with their work/life balance than males (57 percent). This difference partly reflects the fact that females are more likely to be in part-time work. Among full-time workers, males (55 percent) and females (57 percent) report similar levels of satisfaction with their work/life balance.

## ETHNIC DIFFERENCES

Pacific people (65 percent) report the highest levels of satisfaction with work/life balance, followed by people of European ethnicity (63 percent). Māori (55 percent) and Other ethnicities (56 percent) reported lower levels of satisfaction. Across all ethnicities, hours of employment affect satisfaction with work/life balance, with those working part-time having higher levels of satisfaction than those working full-time.

Figure PW5.2 **Levels of satisfaction with work/life balance by ethnicity, 2004**

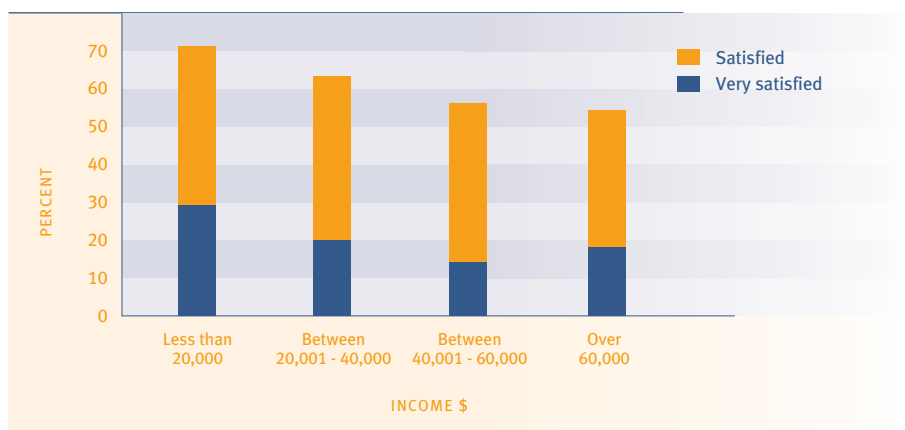


Source: Ministry of Social Development (2004)

## PERSONAL INCOME DIFFERENCES

Reported levels of satisfaction with work/life balance tend to decline with higher levels of income. Those New Zealanders whose personal incomes are less than \$20,000 are the most likely to be satisfied overall with their balance of work and life (71 percent), while those with incomes over \$60,000 are the least likely (54 percent).

Figure PW5.3 **Satisfaction with work/life balance, by personal income, 2004**



Source: Ministry of Social Development (2004)

## DESIRED OUTCOMES

New Zealand is a prosperous society, reflecting the value of both paid and unpaid work. All people have access to adequate incomes and decent, affordable housing that meets their needs. With an adequate standard of living, people are well placed to participate fully in society and to exercise choice about how to live their life.

# Economic Standard of Living

## INTRODUCTION

Economic standard of living concerns the physical circumstances in which people live, the goods and services they are able to consume, and the economic resources they have access to. It is concerned with both the average level of resources in New Zealand as well as the distribution of those resources across New Zealand society.

Basic necessities such as adequate food, clothing and housing are fundamental to wellbeing. The 1972 Royal Commission on Social Security agreed that a useful standard for adequacy was a level of resources that allowed individuals not just to survive but also to participate. They defined participation as meaning "no-one is ... so poor that they cannot eat the sort of food that New Zealanders usually eat, wear the same sort of clothes, [and] take a moderate part in those activities which the ordinary New Zealander takes part in as a matter of course."<sup>48</sup>

The desired outcome statement points to the importance of not only everyone enjoying a decent standard of living, but also that our society be as prosperous as possible. Such prosperity gives people choice over how to live their lives.

## INDICATORS

Six indicators are used in this chapter, each providing information on different aspects of economic standards of living. They are: market income per person, income inequality, proportion of the population with low incomes, proportion of the population with low living standards, housing affordability, and household crowding.

The focus is largely on objective measures of economic living standards, though one indicator (population with low living standards) takes into account people's subjective perceptions about how well off they are. Together, the indicators provide information about overall trends in living standards, levels of hardship, and how equitably resources are distributed. All are relevant to the adequacy of people's incomes and their ability to participate in society and make choices about their lives.

The focus of the first three is on incomes, while the remaining three are more direct measures of the material living standards people can achieve. This recognises that the same level of income can produce different living standards, depending on factors such as people's coping skills, their health status and the assets they own.

Market income per person gives an indication of the average level of income and therefore the overall material quality of life available to New Zealanders. This is an internationally-recognised measure, allowing comparisons between New Zealand and other nations. An estimate of the economic value of unpaid work is also provided.

Income inequality is measured by comparing the incomes of the top 20 percent of households with the incomes of the bottom 20 percent. High levels of inequality are associated with lower levels of social cohesion and personal wellbeing, even when less well off people have adequate incomes to meet their basic needs.

The proportion of the population with low incomes also provides information about how equitably resources are distributed and how many people are likely to be on incomes that don't allow full participation in society.

The population with low living standards takes into account the extent that people do without things and don't engage in social activities because of the cost, as well as measuring whether people feel their incomes are satisfactory.

Housing affordability measures the proportion of the population spending more than 30 percent of their income on housing. Housing costs have a major impact on overall material living standards.

The final indicator measures the number of people living in overcrowded houses. Housing is a basic need, and this indicator provides a direct measure of the adequacy of housing people can afford.

# Market income per person

## DEFINITION

Real gross national disposable income (RGNDI) is a measure of the total volume of goods and services available to New Zealanders. Because it is a measure of volume it is not affected by inflation. This indicator is RGNDI per person.

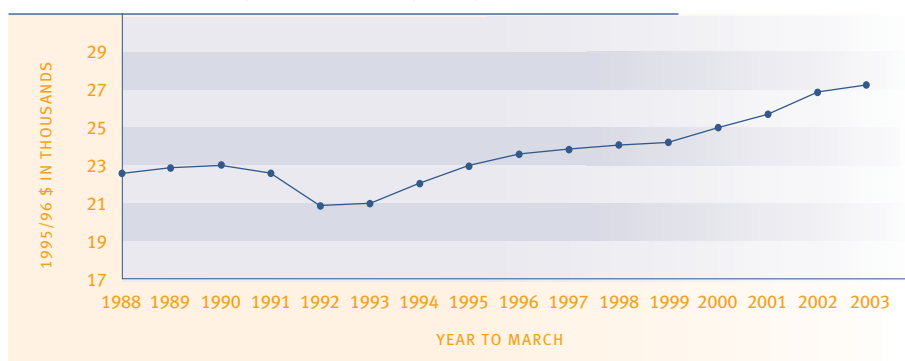
## RELEVANCE

Per capita national disposable income gives a measure of the average income available to New Zealanders. A nation with rising per capita RGNDI will have a greater capacity to deliver a better quality of life and standard of living to the population.

## CURRENT LEVEL AND TRENDS

In the year to March 2003, RGNDI per person was \$27,237 in constant 1995/1996 dollars compared with \$22,573 in 1988 (1995/1996 dollars). This represents an average growth rate over the period of 1.26 percent per year. RGNDI grew slowly between 1988 and 1990, before falling to below its 1988 level by 1992. Since 1992, there has been steady growth. This growth reflects the slow but steady increase in the ratio of capital to labour, productivity gains, as well as increasing labour force participation and declining unemployment.

Figure EC1.1 **Real gross national disposable income per capita, 1988-2003**



Source: Statistics New Zealand

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## INTERNATIONAL COMPARISON

Comparisons with other OECD countries are available for a similar measure, real gross domestic product (GDP) per person. Using real GDP per person in current US dollars, adjusted for purchasing power parity, New Zealand ranked 21st out of 30 OECD countries in 2002.<sup>49</sup> By way of comparison, New Zealand was the 19th most prosperous country out of 26 countries in 1986, and the 10th most prosperous in 1970. Between 1986 and 2002, real GDP per person in New Zealand grew by 20 percent compared with an OECD average of 35 percent.

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## ECONOMIC VALUE OF UNPAID WORK

RGNDI does not take into account the value of unpaid work such as looking after children, cooking meals at home, fixing the car, or voluntary work in the community. The estimated value of unpaid work in New Zealand in 1999 was \$39,637 million (1998/1999 dollars), equivalent to 39 percent of gross domestic product (GDP).<sup>50</sup> This equates to an annual salary of \$13,820 for the average unpaid household worker. Alternatively, the economic value of unpaid work is equivalent to \$9,944 per capita (1995/1996 dollars).

# Income inequality

## DEFINITION

Income inequality refers to the extent of disparity between high and low incomes. The measure used here is the ratio of the 80th percentile to the 20th percentile of the household disposable income distribution (ie the ratio of a high household income to a low household income). The higher this ratio, the greater the level of inequality.

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## RELEVANCE

The degree of income inequality is often regarded as an important aspect of the fairness of the society we live in. A high level of income inequality may also be detrimental to the level of social connectedness across society.

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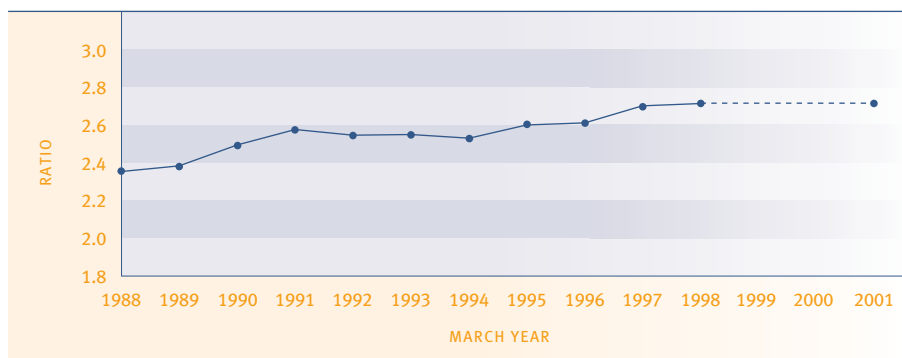
## CURRENT LEVEL AND TRENDS

In 2001, the disposable income of a household at the 80th percentile was 2.7 times larger than the income of a household at the 20th percentile. In 1988, the ratio was 2.4. Income inequality rose between 1988 and 1991, then fell slightly, and has been rising since 1994. The rapid rise occurring between 1988 and 1991 was largely due to widespread economic reforms, combined with major changes to the social welfare system. The economic recession and large rise in unemployment exacerbated inequalities.

Most of the observed increase in inequality has been due to a relatively larger overall rise in the incomes of the top 20 percent of income earners, particularly between 1988 and 1990 and between 1994 and 1998. Incomes of those in the bottom 20 percent have remained approximately constant after adjusting for inflation over the whole period. The middle 60 percent experienced some slight decline between 1988 and 1994 followed by increases between 1994 and 1998.



Figure EC2.1 **Ratio of the 80th percentile of disposable household income to the 20th percentile of disposable household income, 1988-1998, 2001**



Source: Derived from Statistics New Zealand's Household Economic Survey by the Ministry of Social Development  
 Note: 1. This measure does not adjust for household size  
 2. The weightings of the records in the sample have been revised for all years since The Social Report 2001

## INTERNATIONAL COMPARISON

Comparisons with other OECD countries are available using a different measure, the Gini co-efficient.<sup>51</sup> During the mid-1990s, New Zealand performed worse than the OECD median and ranked 15th out of 21 countries. The best performers were the Scandinavian countries. Australia, the United Kingdom, the United States and Canada, along with New Zealand, were in the bottom half of the OECD for income inequality.<sup>52</sup>

# Population with low incomes

## DEFINITION

The proportion of the population in economic family units with equivalent income net of housing cost below three thresholds (low, medium, and high). The measures take account of incomes, housing costs and family size and are adjusted for inflation and taxes. The thresholds are 40 percent, 50 percent, and 60 percent of 1998 median equivalent net-of-housing-cost family incomes.

## RELEVANCE

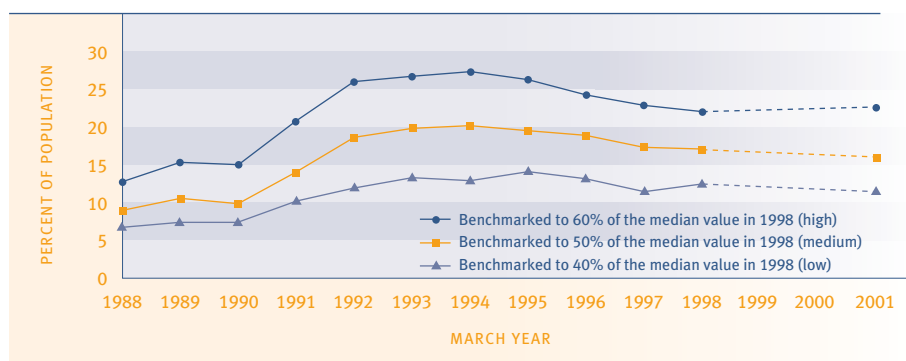
Insufficient economic resources limit people's ability to participate and belong to their community and wider society and otherwise restrict their quality of life. Furthermore, a consistent finding across the literature on outcomes for children is that low family income in childhood, if it is long-lasting, is associated with negative outcomes, such as lower educational attainment and poor health.

## CURRENT LEVEL AND TRENDS

In the year to June 2001, 22.6 percent of the population were living below the 60 percent threshold, a slight increase on the proportion in the previous survey year to March 1998 (22.0 percent). On all three measures (low, medium, and high), the proportion of the population with low incomes increased sharply in the early 1990s, reached a peak in the mid-1990s, and declined over the latter half of the decade. However, in 2001, the proportion of the population below these thresholds was still substantially higher than it had been in 1988.

The increase in the proportion of the population with low incomes through the early 1990s is attributable to high rates of unemployment and declines in the level of social assistance. The recent improvement in this measure may likewise reflect more robust economic (and income) growth, and the steady decline in unemployment.

Figure EC3.1 **Lines showing proportions of population with net-of-housing-cost incomes below thresholds, 1988-1998, 2001**



Source: Derived from Statistics New Zealand's Household Economic Survey, 1988-2001, by the Ministry of Social Development

## POPULATION GROUP DIFFERENCES

In 2001, 29.1 percent of dependent children were in economic family units below the 60 percent line (benchmarked to the 1998 median). This represents an increase from 27.5 percent in 1998 and is almost twice the proportion in 1988 (14.6 percent), but substantially below the peak of 36.4 percent in 1994. For people aged 15 years or over, females (21.8 percent) were a little more likely to be in low income households than males (19.5 percent) in 2001.

Economic families most likely to be living with low incomes are: families reliant on income-tested benefits, sole-parent families, families with at least one adult belonging to an ethnic group other than European, families in rented dwellings and families with dependent children. The situation improved for most of these family types between 1993 and 1998. However, for sole-parent families the proportion below the 60 percent benchmark line increased again between 1998 and 2001.

Table EC3.1

**Proportion of population with net-of-housing-cost incomes below the 60 percent line (benchmarked to 1998 median), 1988, 1993, 1998, 2001**

	1987-88	1992-93	1997-98	2000-01
<b>Total population</b>	12.7	26.7	22.0	22.6
Total dependent children	14.6	34.7	27.5	29.1
Children in sole-parent families	18.5	65.6	59.2	66.3
Children in two-parent families	13.8	27.5	18.5	19.7
Males (15 years & over)	11.9	23.3	19.6	19.5
Females (15 years & over)	12.2	24.9	20.8	21.8
Total economic families	14.0	28.0	23.2	23.2
<b>Economic families</b>				
With one dependent child	11.5	30.1	25.2	26.5
With two dependent children	11.7	32.9	23.5	26.0
With three or more dependent children	18.6	40.8	30.7	32.7
Sole-parent families	17.4	62.5	51.9	59.4
Two-parent families	12.4	25.1	17.0	17.5
<b>Economic families</b>				
With any Māori adult	14.0	41.0	31.2	32.0
With any Pacific adult	24.4	48.9	44.3	40.0
With any 'Other' ethnic group adult	23.6	42.8	53.7	35.6
With any European/Pākehā adult	12.6	23.3	18.5	18.7
<b>Economic families with main source of income</b>				
New Zealand Superannuation	7.0	8.4	9.9	6.5
Income-tested benefit	26.0	74.3	61.7	61.6
<b>Housing tenure (households with one family unit)</b>				
Rented	n.a.	43.3	37.2	33.5
Owned with mortgage	n.a.	24.3	15.3	17.1
Owned without mortgage	n.a.	4.9	3.7	5.6

Source: Derived from Statistics New Zealand Household Economic Survey, by Ministry of Social Development

**INTERNATIONAL COMPARISON**

Based on a slightly different measure, 60 percent of median equivalent disposable household income in 1995, and not taking housing costs into account, 13.7 percent of New Zealand households were living below the low income threshold, compared with an OECD median for the mid 1990s of 14.3 percent. New Zealand ranked ninth out of 22 OECD countries.<sup>53</sup> This represents a higher proportion of households with a low (relative) income than the majority of European countries but a lower proportion of households compared with Canada, Australia, the United Kingdom and the United States.

# Population with low living standards

## DEFINITION

The proportion of the population with a ‘somewhat restricted’, ‘restricted’ and ‘very restricted’ standard of living: Levels 1-3 of the Economic Living Standard Index (ELSI).

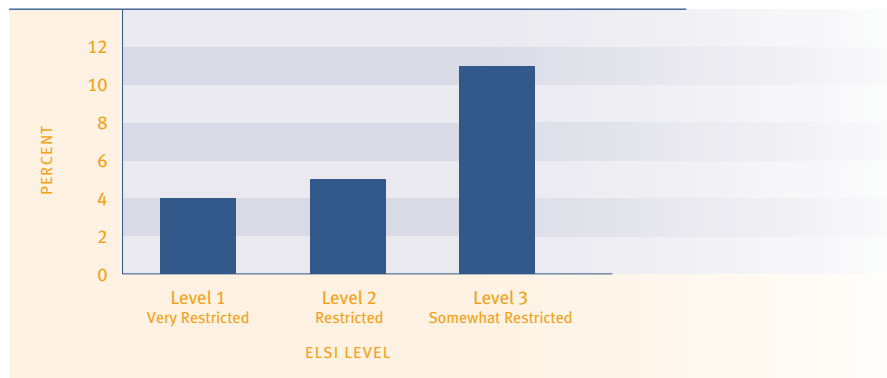
## RELEVANCE

ELSI is an indicator of how people are living in terms of their possessions, activities and how they get by financially. Having a low living standard limits a person’s ability to participate in the wider society, curtails quality of life, and can have negative long-term consequences across a wide range of social and economic outcomes.

## CURRENT LEVEL

In 2000, 4 percent of the total population had ‘very restricted’ living standards, 5 percent had ‘restricted’ living standards and a further 11 percent had ‘somewhat restricted’ living standards. In total, 20 percent of the population had living standards in the bottom three levels of the ELSI scale.

Figure EC4.1 **Proportion of the population with lower living standards, 2000**



Source: Krishnan et al (2002), p 40

## POPULATION GROUP DIFFERENCES

Groups with higher than average prevalence of lower living standards include sole-parent families (51 percent), families who rely on income-tested benefits (57 percent), families with dependent children (particularly larger families), Māori and Pacific people (39 percent and 42 percent, respectively), and those living in rented dwellings. Dependent children are more at risk of low living standards than the population average. The probability of having low living standards declines with age, except for a slight increase during peak child-rearing years.

Table EC4.1

**Proportion of population and economic families with lower living standards (ELSI Levels 1-3), 2000**

	Percent
<b>Total population</b>	20
Males	18
Females	21
Total economic families	18
<b>Age groups</b>	
Dependent children (under 18 years)	29
18-24 years	16
25-44 years	19
45-64 years	16
65 years and over	7
<b>Economic families</b>	
With one dependent child	25
With two dependent children	24
With three or more dependent children	35
Sole parent family	51
Two parent family	18
<b>Economic families</b>	
With any Māori members	39
With any Pacific members	42
With any European/Pākehā members	15
With any 'Other' ethnic group members	22
<b>Economic families with main source of income</b>	
New Zealand Superannuation	7
Income-tested benefits	57
Market income	14
<b>Housing tenure</b>	
Rented - Housing New Zealand	63
Rented - Private	33
Rented - Local Authority	30
Owned with mortgage	22
Owned without mortgage	8

Source: Krishnan et al (2002)

# Housing affordability

## DEFINITION

The proportion of households and the proportion of people within households spending more than 30 percent of their income on housing.

## RELEVANCE

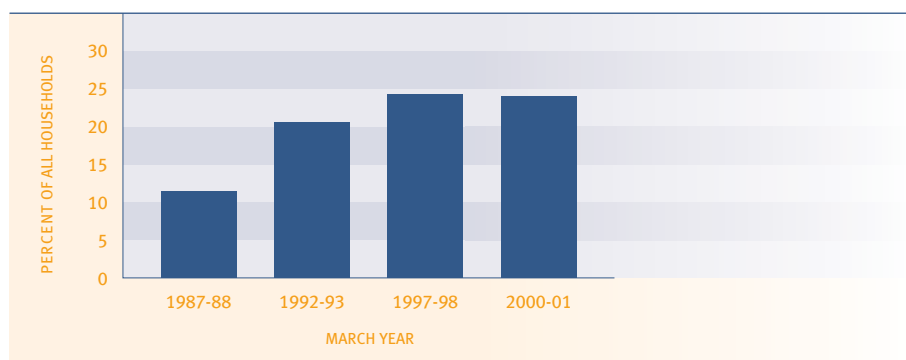
Affordable housing is an important factor in the wellbeing of individuals and families. High housing costs relative to income are often associated with severe financial difficulty, especially among low-income households, and can leave such households with insufficient income to meet other basic needs such as food, clothing, transport, medical care and education.

## CURRENT LEVEL AND TRENDS

In 2001, 24 percent of households spent more than 30 percent of their income on housing costs.

Since the late 1980s, there has been a substantial increase in the proportion of households spending more than 30 percent of their income on housing. Between 1988 and 1993 the proportion rose from 11 percent to 20 percent of households, reaching just over 24 percent in 1998. This is partly due to changes in household composition, and immigration and rising average incomes increasing the demand for housing and pushing prices up.

Figure EC5.1 **Proportion of households with housing cost outgoings-to-income ratio greater than 30 percent, 1988, 1993, 1998, 2001**



Source: Statistics New Zealand Household Economic Survey, Ministry of Social Development

Note: The weightings of the records in the sample have been revised for all years since The Social Report 2001

High housing costs relative to household income are of greatest concern in respect of low-income households. Analysis of data on those households in the lowest 20 percent of the (equivalised) household income distribution shows a similar increasing trend over the 1988-2001 period but with significantly higher proportions of households spending more than 30 percent of income on housing.<sup>54</sup> In 2001, 42 percent of households in the lowest fifth of the household income distribution spent more than 30 percent of their income on housing. This has increased from 16 percent in 1988.

It is important to remember this indicator will include some people whose high housing outgoings or low incomes represent only a temporary state of affairs, as, for example, they choose to make high mortgage repayments, or are temporarily out of work or in full-time study.

## AGE AND SEX DIFFERENCES

In 2001, 35 percent of children under 18 years were in households with housing costs exceeding 30 percent of income, a three-fold increase on 1988.

For people aged 15 years or over, females (22 percent) were a little more likely than males (20 percent) to be in households spending more than 30 percent of their income on housing in 2001.

Table EC5.1 **Proportion of the population in households spending more than 30 percent of their income on housing, 1988, 1993, 1998, 2001**

	1987-88 %	1992-93 %	1997-98 %	2000-01 %
<b>Total population</b>	10.6	20.6	24.9	24.0
Males (15 and over)	10.3	18.8	21.0	20.1
Females (15 and over)	9.5	19.3	22.7	22.2
<b>Age groups</b>				
Under 18 years	11.9	27.1	37.1	34.7
18-24 years	12.4	24.6	26.1	29.0
25-44 years	14.7	26.3	31.1	28.2
45-64 years	5.0	12.2	13.8	15.8
65 years and over	3.2	4.0	7.1	7.2

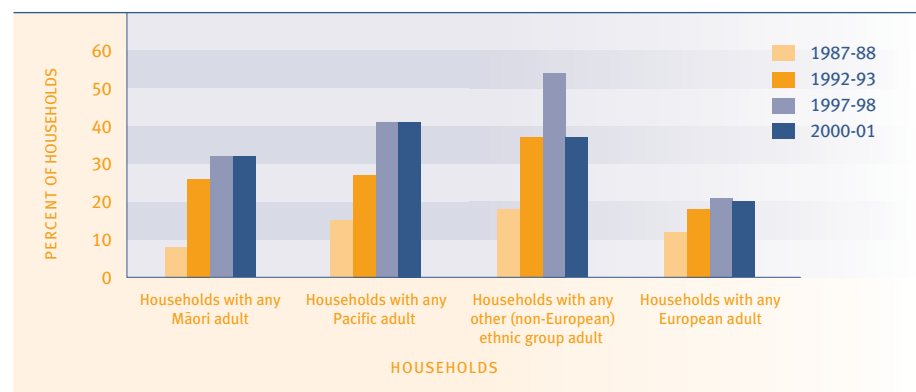
Source: Statistics New Zealand Household Economic Survey, Ministry of Social Development

Note: The weightings of the records in the sample have been revised for all years since The Social Report 2001

## ETHNIC DIFFERENCES

Housing costs in excess of 30 percent are much more common in households that include at least one non-European adult. For households with at least one Māori adult, the proportion increased from 8 percent in 1988 to 26 percent in 1993 and to 32 percent in 1998, remaining at that level in 2001. For those households containing at least one Pacific adult the increases have been greater, from 15 percent in 1988 to 43 percent in 1998 and 2001.

Figure EC5.2 **Proportion of households with housing cost outgoings-to-income ratio greater than 30 percent, by ethnic group 1988, 1993, 1998, 2001**



Source: Statistics New Zealand Household Economic Survey, Ministry of Social Development

Note: The weightings of the records in the sample have been revised for all years since The Social Report 2001

# Household crowding

## DEFINITION

The proportion of the population living in crowded housing (ie requiring one or more additional bedrooms, as defined by the Canadian Crowding Index).

## RELEVANCE

Housing space adequate to the needs and desires of a family is a core component of quality of life. The Canadian Crowding Index is a proxy measure to monitor incidence of 'crowding' in the population.

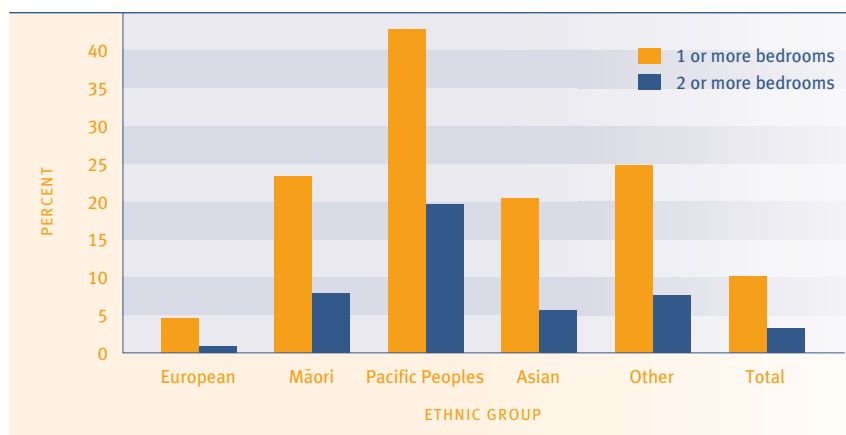
National and international studies indicate an association between the prevalence of certain infectious diseases and crowding<sup>55</sup> as well as between crowding and poor educational attainment. Crowding can also contribute to psychological stress for people in the households concerned.

## CURRENT LEVEL AND TRENDS

In 2001, 108,900 people, or 3.2 percent of the New Zealand resident population, lived in households requiring two or more additional bedrooms. A further 239,500 people (6.9 percent) required just one further bedroom. In total, 348,400 people (10.1 percent) lived in households requiring at least one more bedroom to accommodate household members adequately, based on the criteria in the Canadian Crowding Index (see Appendix Two).

In the five years to 2001, the number of people living in households requiring two or more bedrooms declined by around 6,000; there were 115,300 people (3.4 percent) in that situation in 1996.

Figure EC6.1 **Proportion of population living in households requiring additional bedrooms, by ethnic group, 2001**



Source: Statistics New Zealand (1998c)

## AGE AND SEX DIFFERENCES

Household crowding is more likely to be experienced by younger people than older people. In 2001, 17 percent of children under the age of 10 years lived in households requiring at least one more bedroom, compared to 15 percent of 10–14 year-olds. Among all adults aged 15 and over, 8 percent lived in crowded households but this ranged from 16 percent of 15–24 year-olds, to 9 percent of 25–44 year-olds, 5 percent of 45–64 year-olds, and just 2 percent of those aged 65 and over.



In 1996, just over 50,000 children under 18 years (5.3 percent of all children under 18) were living in households which required two or more additional bedrooms.<sup>56</sup>

In 2001, 42,900 dependent children (under 18 and not employed full-time) were in this situation, accounting for 4.8 percent of all dependent children.

There is almost no sex difference in the likelihood of living in crowded households, except at ages 25-44, where females are slightly more likely than males to live in households requiring at least one extra bedroom (10 percent, compared to 9 percent).

## ETHNIC DIFFERENCES

Pacific people are far more likely to be living in crowded households than other ethnic groups. In 2001, a total of 43 percent of Pacific people lived in households requiring extra bedrooms (20 percent requiring two or more, 23 percent just one more). Other ethnic groups were the next most likely, with 25 percent requiring at least one extra bedroom, followed by Māori (23 percent) and Asians (20 percent). Partly reflecting their older age profile, only 5 percent of European New Zealanders were living in houses that met the definition of crowding used here.

The largest group of those living in households requiring at least one extra bedroom were those who identified as European (38 percent), followed by Māori (34 percent), Pacific people (28 percent), Asian (14 percent) and Other ethnic groups (just 2 percent).<sup>57</sup> However, of those living in more severe crowding situations (households requiring two or more bedrooms), Pacific people and Māori made up the largest groups (41 percent and 38 percent, respectively).

Cultural attitudes and economic conditions are two primary factors which account for the extreme variation in crowding levels between ethnic groups. The variance in population age structures is also a factor: both Māori and Pacific peoples ethnic groups have younger age structures than the European population.

## REGIONAL DIFFERENCES

There is considerable regional variation in household crowding. Whether measured by population or household, Manukau City has by far the worst level of household crowding (24 percent of people, 13 percent of households required one or more bedrooms in 2001). The next worst levels were in Opotiki District and Porirua City, where almost one in five people, and one in 10 households required at least one more bedroom. Other local authority areas with relatively high levels of crowding were Auckland City and the Far North, Wairoa and Kawerau Districts. All of the South Island local authorities had lower than average levels of household crowding.

## SOCIO-ECONOMIC DIFFERENCES

Unemployed people are more likely to be living in crowded households than those with full-time jobs (20 percent and 6 percent, respectively). Other groups with crowding levels above the average adult level of 8 percent include those with no qualifications (10 percent) and those who receive income support (16 percent).<sup>58</sup>

There is a clear correlation between levels of income and levels of crowding: in 2001, 6 percent of households in the bottom quartile of equivalised household income required one or more bedrooms, compared with 2 percent of those in the top income quartile.

Households in rental accommodation were more likely to be crowded (11 percent) than those in dwellings owned with a mortgage (4 percent) or mortgage-free (2 percent).

## DESIRED OUTCOMES

All people enjoy civil and political rights. Mechanisms to regulate and arbitrate people's rights in respect of each other are trustworthy.

# Civil and Political Rights

## INTRODUCTION

The enjoyment of civil and political rights is crucial to people's ability to participate in society, make choices about their lives, and live with dignity.

Civil and political rights fall into two broad categories. The first requires that people are protected from interference or abuse of power by others. The second requires that society is organised in a way that enables all people to develop to their full potential.<sup>59</sup>

Rights are defined in various international treaties and in domestic legislation. The New Zealand Bill of Rights Act 1990 sets out many rights New Zealanders enjoy. These include rights to life and security, voting rights, and rights to freedom of expression, peaceful assembly, association, thought, conscience, religion and belief. They also include rights to freedom from discrimination, and various rights relating to justice and criminal procedures. Other laws, such as the Privacy Act 1993, also provide protection for specific rights. The relationship between Māori and the Crown is guided by the Treaty of Waitangi.

New Zealand has also signed six core United Nations treaties, covering civil and political rights; economic, social and cultural rights; the elimination of racial discrimination and discrimination against women; the rights of children; and protection against torture and other cruel, inhuman or degrading treatment.

Civil and political rights are important for wellbeing in many ways. At a fundamental level, they protect people's lives and their physical wellbeing (for example, by recognising rights to freedom from torture and arbitrary arrest).

Wellbeing depends on people having a sense of choice or control over their lives, and on being reasonably able to do things they value, all of which are impossible without the exercise of the many rights referred to above.<sup>60</sup> People's ability to take part in society, and their senses of belonging and identity also depend on the exercise of these rights.

## INDICATORS

New Zealand is internationally recognised as having an excellent human rights record.<sup>61</sup> The court system is independent and courts can enforce the rights affirmed in the New Zealand Bill of Rights Act, although there is no power to strike down legislation inconsistent with the Act. Other institutions exist to protect people from government power (examples include the Privacy Commissioner and the Ombudsmen) or to prevent and deal with instances of discrimination (such as the Human Rights Commission and Human Rights Review Tribunal). New Zealand regularly reports to the United Nations on its record in protecting rights.

However, direct measurement of civil and political rights is not a simple matter.

This chapter uses four indicators to provide some picture of how New Zealand's formal commitments to civil and political rights are reflected in reality. They are: voter turnout at general elections, the proportion of women represented in elected government positions, perceived discrimination, and perceptions of public integrity.

A key right in any democracy is the right to vote. The inclusion of voter turnout figures provides an indication of the confidence voters have in, and the importance of, the nation's political institutions. High voluntary voter turnout rates are an indication people see these institutions as relevant and meaningful to them, and they believe their individual vote is important.

An effective and relevant political system should broadly reflect the society it represents. The second indicator measures the proportion of women in elected positions in government.

Measuring the extent to which New Zealanders actually experience discrimination is problematic. Some research has suggested that for every 100 people who are discriminated against, only one will make a complaint.<sup>62</sup> Perceived discrimination is a subjective measure of people's views about the level of discrimination against different groups in New Zealand society.

Corruption undermines the democratic process and the rule of law. It is difficult to measure levels of corruption by reference to the number of prosecutions or court cases as this will to some extent be driven by the efficient functioning of the justice system. The fourth indicator, absence of corruption, is the level of perceived corruption among politicians and public officials.

# Voter turnout

## DEFINITION

**General elections:** The proportion of the estimated voting age population (aged 18 and over) who cast a valid vote in general elections. **Local authority elections:** The proportion of all enrolled electors (both resident and ratepayer) who cast a vote in contested local authority elections.

## RELEVANCE

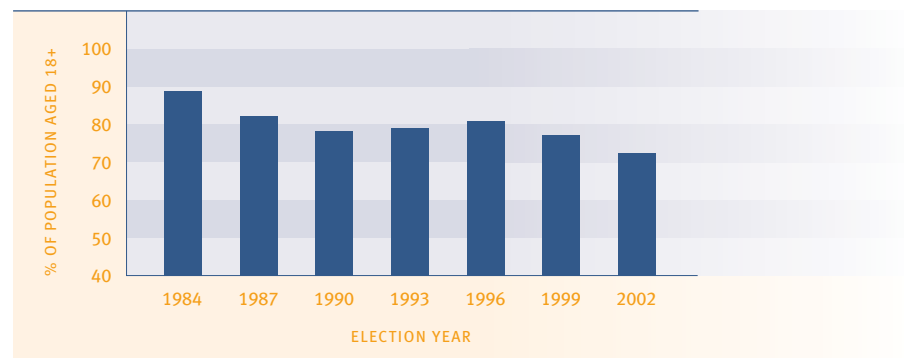
Voter turnout rates are a measure of political participation. They can be seen as an indicator of the extent to which citizens are a part of the political process, and an indicator of the level of trust in political institutions.

## CURRENT LEVEL AND TRENDS

### 1. General elections

Voter turnout of the eligible population was 72.5 percent in 2002. Voter participation in general elections declined sharply from 89 percent in 1984 to 78 percent in 1990, increased slightly to 81 percent in 1996, then declined again to a new low in 2002.

Figure CP1.1 **Proportion of voting age population who cast votes, 1984-2002**



Source: Electoral Commission (2002), p 174. 1984 figure calculated by Ministry of Social Development

## COMPARISONS BETWEEN GROUPS

Because of the nature of the secret ballot, information on differences in participation rates among various sectors of the New Zealand population is not directly available. Nevertheless, results from several New Zealand Election Surveys over a number of years associate a number of social, demographic, and occupational characteristics with impacts on the voter turnout rate. Non-voters are more likely to be people on lower incomes, younger people, and members of Māori or Pacific ethnic groups. There are few differences in voting turnout rates between men and women.<sup>63</sup>

## REGIONAL DIFFERENCES

There are few discernible differences in voting turnout rates between rural and urban voters, although non-voting tends to be lowest in provincial cities.

## INTERNATIONAL COMPARISON

New Zealand's voter turnout rate in 2002 was 72.5 percent, compared to an OECD median over 1997 to 2002 of 71 percent.<sup>64</sup> This placed New Zealand 15th out of 30 OECD countries. Greece had the best voter turnout at 89 percent. Voter turnout was higher in Australia (sixth, 82 percent) than New Zealand, but lower in Canada (26th, 55 percent), the United Kingdom (23rd, 58 percent) and the United States (29th, 47 percent).

## CURRENT LEVEL AND TRENDS

### 2. Local authority elections

There are 252 elected local authorities in New Zealand: 12 regional councils, 21 district health boards (established 1 January 2001), 15 city councils, 59 district councils and 146 community boards. There was a major restructuring of local government in 1989. Voter turnout in the 2001 local authority elections was the lowest since 1989 for all except regional councils, which had the second lowest since then.

Table CP1.1

**Voter turnout (%) in local authority elections, 1989-2001**

	1989	1992	1995	1998	2001
<b>Regional councils</b>	56	52	48	53	49
<b>District health boards</b>					50
<b>Territorial authorities</b>					
City councils	52	48	49	51	45
City mayors	50	48	49	51	45
District councils	67	61	59	61	57
District mayors	67	61	59	59	56
<b>Community boards</b>	54	49	50	50	46

Source: Department of Internal Affairs (2003), Table 7.1

Note: There was no election held for Rodney District in 2001

Local authority voter turnout is generally highest for district councils, with their more rural population base, for smaller city councils and those in the South Island. Councils of these types all had a majority turnout in 2001, while among large city councils and North Island city councils, fewer than half of eligible electors voted. Voter turnout ranged from 65 percent for district councils in the South Island, to 43 percent for city councils in the North Island.

In large regional councils, there was an upward trend in voter turnout between 1995 and 2001. However, the average turnout was still higher among small regional councils. Similarly, voter turnout was highest on average among the smaller district health boards.

# Representation of women in government

## DEFINITION

The proportion of elected members of parliament and local government bodies who are women.

## RELEVANCE

The representation of women in government can be seen as an indicator of political representation more generally. Representative political institutions engage a wide range of communities in the political process, draw on the talents and skills of the broadest group of people, and provide checks and balances on the use of political power.

## CURRENT LEVEL AND TRENDS

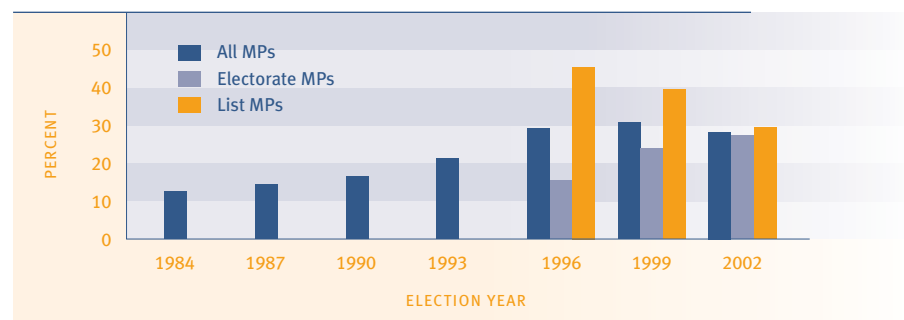
### 1. General elections

As a result of the 2002 general election, women hold 34 of the 120 seats in Parliament, or 28 percent. Under the first-past-the-post electoral system, women's representation in parliament increased from 13 percent in 1984 to 21 percent in 1993. In the first mixed-member-proportional election held in 1996, this rose sharply to 29 percent. There was a further small rise to 31 percent in 1999, followed by a decline to 28 percent in 2002.

In 1996, women made up a far higher proportion of list MPs than electorate MPs (46 percent, compared to just 15 percent of electorate MPs). However, by 2002, the female proportions were similar in both categories.

The majority of women elected to parliament in 2002 were electorate MPs (56 percent). The proportion of women MPs who were electorate MPs has increased from 29 percent in 1996 and 43 percent in 1999.

Figure CP2.1 **Women as a proportion of elected members of parliament, 1984-2002**



Source: Electoral Commission (2002), p 176

## INTERNATIONAL COMPARISON

In 2003, the percentage of women in New Zealand's parliament was 28 percent, compared to an OECD median of 20 percent.<sup>65</sup> New Zealand was ranked 11th best out of 30 OECD nations, with Sweden ranking first place with 45 percent. Other countries with higher representation of women include Denmark and Finland (38 percent), the Netherlands (37 percent), and Norway (36 percent). Australia (25 percent), Canada (21 percent), the United Kingdom (18 percent) and the United States (14 percent) all have lower percentages of women represented in parliament than New Zealand.

## CURRENT LEVEL AND TRENDS

### 2. Local government elections

In the 2001 local government elections, 615 women were elected to local authorities and they made up 31 percent of elected members. The representation of women among those elected increased from 25 percent in 1989 to 32 percent in 1998, then fell slightly to 31 percent in 2001. In the 1980s, women were more highly represented in local government than in national government but the difference has narrowed over time.

Women candidates were more likely than male candidates to be elected in each election year from 1989 to 1998, but this was reversed in 2001, when 40 percent of women candidates were elected, compared to 43 percent of men.

In 2001, women's representation was highest on district health boards (44 percent), followed by city councils (39 percent) and community boards (31 percent). City councils were the only local authorities to see an increased share of women elected in 2001.

The number of women elected to city council mayoral positions has remained steady at four (out of 15) for most election years since 1989. In contrast, the number of women mayors in district councils increased rapidly from six (out of 59) in 1989 to 15 in 1998, then fell sharply to eight in 2001.

Table CP2.1

**Proportion (%) of members who were women, by type of local body, 1989-2001**

	1989	1992	1995	1998	2001
Regional councils	22	25	29	28	26
District health boards					44
City councils	35	35	33	36	39
District councils	19	23	26	27	25
Community boards	29	32	33	35	31

Source: Department of Internal Affairs (2003), Table 5.4

Table CP2.2

**Women mayors, 1989-2001**

	1989	1992	1995	1998	2001
City councils	4/14	4/15	3/15	4/15	4/15
District councils	6/59	9/59	12/59	15/59	8/58*

Source: Department of Internal Affairs (2003), Table 5.5  
Note: There was no election in Rodney District in 2001

# Perceived discrimination

## DEFINITION

The proportion of people aged 18 and over who perceived selected groups as being the targets of some or a great deal of discrimination.

## RELEVANCE

Surveys on perceived discrimination towards groups of people provide one indication of the level and type of discrimination in New Zealand. They do not measure actual levels of discrimination and therefore it is not possible to conclude whether actual levels of discrimination have increased or decreased.

## CURRENT LEVEL AND TRENDS

In January 2004, more than three-quarters of respondents from the Human Rights Commission Survey 2004 (78 percent) thought that Asian people were subject to a great deal or some discrimination, the highest proportion for any group. This was followed by recent immigrants (72 percent) and refugees (70 percent). Perceived discrimination against these groups has increased since December 2001, from 73 percent for Asians, and from 68 percent for recent immigrants and refugees.

Table CP3.1 **Proportion (%) of survey respondents who perceived selected groups as being subject to a great deal or some discrimination, December 2000-January 2004**

Group	Dec 2000	Dec 2001	Jan 2003	Jan 2004
Asians	73	73	79	78
Recent immigrants		68	77	72
Refugees		68	72	70
People who are overweight	72	65	65	68
People on welfare	75	70	68	66
Gays and lesbians	74	65	61	58
Pacific peoples	71	65	65	57
People with disabilities	61	55	53	55
Māori	70	62	57	53
Older people	53	48	49	46
Women	50	44	41	38

Source: Human Rights Commission (2004)



Approximately two-thirds of survey respondents thought that people who are overweight and people on welfare were the target of a great deal or some discrimination. More than half thought that gays and lesbians, Pacific peoples, people with disabilities, and Māori were subjected to such discrimination.

Women, older people, Māori, Pacific peoples, people who are overweight, people on welfare, people with disabilities, and gays and lesbians were all less likely to be considered the targets of some or a great deal of discrimination in January 2004, compared to December 2000.

# Absence of corruption

## DEFINITION

The degree of corruption among politicians and public officials perceived to exist within New Zealand according to business people, academics and risk analysts on a scale of 0 (highly corrupt) to 10 (highly clean). Corruption is defined as the ‘abuse of public office for private gain’. Results are taken from Transparency International’s Corruption Perceptions Index.

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## RELEVANCE

Corruption undermines democracy and the rule of law and threatens domestic and international security. Corruption may also have adverse social and economic consequences for a country. The Corruption Perceptions Index is a good proxy indicator of the values and norms that underpin public institutions.

The Corruption Perceptions Index is a subjective measure that should be seen as a snapshot view of key decision-makers. There is no hard empirical data on levels of corruption. The only method of gathering comparative data is to build on the experience and perceptions of those who are most directly confronted with corruption.

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## CURRENT LEVEL AND TRENDS

Since the Index was first developed in 1995, New Zealand has demonstrated consistently low levels of perceived corruption. New Zealand’s worst score was in 1997 with a score of 9.23.

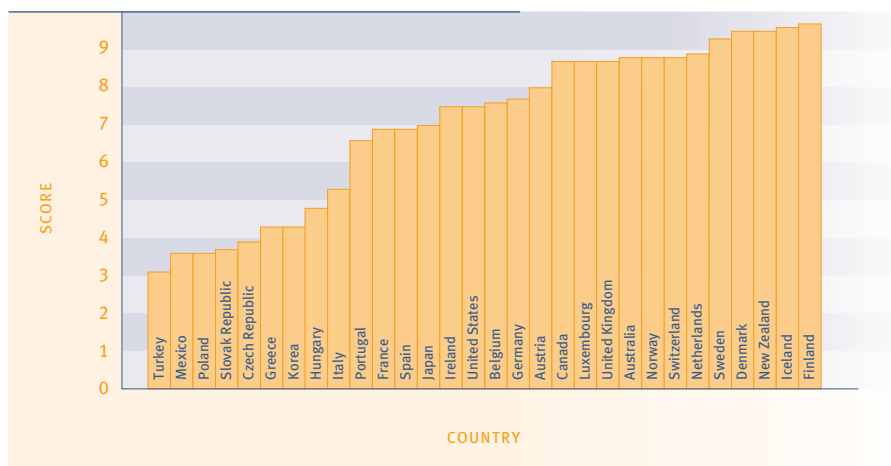
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## INTERNATIONAL COMPARISONS

In 2003, Transparency International Corruption Perceptions Index ranked New Zealand as the third least corrupt nation in the OECD, with a score of 9.5 out of 10.<sup>66</sup> This was very high compared to the OECD median of 7.55. New Zealand is consistently ranked in the top four countries of the OECD, with first place in 1995 and 1996. In 2003, Finland was ranked the least corrupt nation in the OECD with a score of 9.7.

New Zealand has very low levels of perceived corruption compared to Australia (eighth place, 8.8), Canada (11th equal, 8.7), the United Kingdom (11th equal, 8.7), and the United States (18th place, 7.5).

Figure CP4.1 **Absence of corruption in OECD countries, 2003**



Source: Transparency International's Corruption Perceptions Index 1995-2003

## DESIRED OUTCOMES

New Zealanders share a strong national identity, have a sense of belonging, and value cultural diversity. All people are able to pass their cultural traditions on to future generations. Māori culture is valued and protected.

# Cultural Identity

## INTRODUCTION

'Culture' refers to the customs, practices, languages, values and world views that define social groups such as those based on nationality, ethnicity, region, or common interests. Cultural identity is important for people's sense of self and how they relate to others. A strong cultural identity can contribute to people's overall wellbeing.

Cultural identity is not exclusive. People may identify themselves as New Zealanders in some circumstances and as part of a particular culture - Māori, Chinese or Scottish, for example - in other circumstances. They may also identify with more than one culture.

The desired outcomes recognise that it is important for people to feel a sense of national identity and also to be able to belong to particular social or ethnic groups. They recognise New Zealand as a multicultural society, while also acknowledging that Māori culture has a unique place. Under the Treaty of Waitangi, the Crown has an obligation to protect the Māori language.

Defining a national identity is not a simple matter. New Zealand is a diverse nation, made up of many cultural groups, with many different customs and traditions. While people may describe themselves as 'New Zealander', how they define their 'New Zealand-ness' may vary from person to person. For example, they might see a New Zealand identity in aspects of New Zealand history, in New Zealand achievements in sporting, artistic or other endeavours, through a sense of national characteristics or traits, or through national symbols and icons. Māori culture may form one aspect of national identity, since it is unique to New Zealand and forms part of our identity in the outside world.

Cultural identity is an important contributor to people's wellbeing. Identifying with a particular culture gives people feelings of belonging and security. It also provides people with access to social networks which provide support and shared values and aspirations. These can help break down barriers and build a sense of trust between people - a phenomenon sometimes referred to as social capital - although excessively strong cultural identity can also contribute to barriers between groups. An established cultural identity has also been linked with positive outcomes in areas such as health and education.<sup>67</sup>

Conversely, members of minority cultures can feel excluded from society if the majority of those in authority obstruct or are intolerant of their cultural practices, as happened to the Māori language and culture through much of New Zealand's history.

Culture can also play a part in promoting social wellbeing in other ways. A strong national culture or identity, and strength in artistic endeavours, can be a source of economic strength and higher material standards of living.

## INDICATORS

Three indicators are used. They are: local content programming on television, the proportion of the Māori population who can speak Māori, and the proportion of people who can speak the first language (other than English and Māori) of their identified ethnicity.

While they cannot provide an exhaustive picture of New Zealand's cultural identity, they do provide snapshots of the health of particular aspects. There is a strong focus on the health of the Māori culture.

The first indicator, the amount of New Zealand content on television, provides one way of measuring the strength of New Zealanders' sense of national identity.

The second indicator measures the current health of the Māori language. Language is a central component of culture and a necessary skill for full participation in Māori society.

The final indicator, the proportion of people who can speak the first language (other than English and Māori) of their ethnicity, is an indicator of the degree to which people are able to retain their culture and traditions and to pass those on to subsequent generations.

# Local content programming on New Zealand television

## DEFINITION

The number of hours of local content screened on New Zealand television channels during prime time (6pm to 10pm), as a proportion of the total prime time schedule, between 1988 and 2003. Local content is generally defined as material that is both predominantly made in New Zealand and reflective of New Zealand identity and culture.

## RELEVANCE

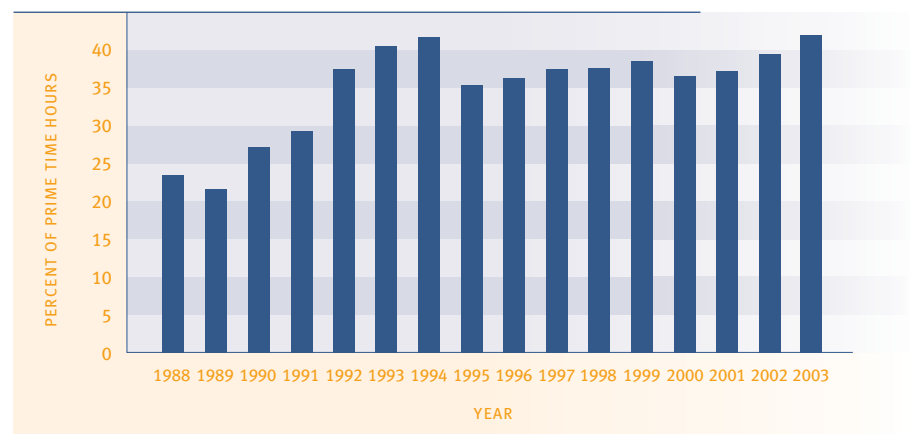
Television is the dominant cultural medium for most New Zealanders. The 1998/1999 Time Use Survey indicated that New Zealanders spend almost two hours per day watching television or videos.<sup>68</sup> Ninety-eight percent of New Zealand households have at least one television set.<sup>69</sup> For many people, television is a major source of news, information and entertainment and strongly influences their sense of local and national identity. A local content measure reflects the extent to which we see our culture reflected through this medium.

## CURRENT LEVEL AND TRENDS

In 2003, local content on the three main television channels comprised 42 percent of the prime time schedule, an increase from 40 percent in 2002. The proportion of local content rose from 24 percent in 1988 to a peak of 42 percent in 1994, before dropping to 35 percent in 1995.

The percentage of local content in prime time transmission hours differs across the three main channels: TVOne: 60 percent (57 percent in 2002), TV2: 25 percent (20 percent in 2002), and TV3: 41 percent (41 percent in 2002).

Figure Cl1.1 **Proportion of local content on prime time television, 1988-2003**



Source: *New Zealand on Air (2004)*

Note: These figures are for prime time (6pm-10pm) local content on TV One, TV2, and TV3 only

Since 1988, other free-to-air broadcasters (including Prime, a number of regional channels and the Māori Television Service) as well as pay-television channels Sky (satellite) and Saturn (cable), have joined the three national television channels.

Table C11.1 **Percentage share of prime time local content by programme type, selected years, 1988-2003**

Programme type	1988	1990	1995	2000	2001	2002	2003
	%	%	%	%	%	%	%
News, current affairs	26	23	21	30	33	29	32
Information	10	5	8	17	21	18	19
Sports	24	39	31	20	13	18	14
Entertainment	14	12	9	7	9	10	8
Children's	15	13	15	10	8	8	10
Drama/comedy	2	1	7	6	6	6	6
Māori	6	3	3	6	6	5	6
Documentaries	2	3	5	4	4	5	5
Children's drama	1	1	1	0	0	0	0
Total New Zealand content hours	2,112	4,249	5,018	6,185	6,190	7,201	6,526

Source: NZ On Air (2000) Appendix 3, p29; (2003) Figure 2, p8

Three programme types accounted for two-thirds of local content hours in 2003: news and current affairs (32 percent), information programmes (19 percent), and sports (14 percent). Hours of prime time sports content fell by 29 percent between 2002 and 2003, largely because in 2002, large sports events such as the Winter Olympics, the Commonwealth Games and the Louis Vuitton Cup were broadcast on prime time television.

## INTERNATIONAL COMPARISON

International comparisons are difficult due to inconsistencies in measurement approaches by different countries. Available figures suggest that, while local content on New Zealand television is steadily increasing, in 1999 it accounted for 24 percent of total transmission time, and NZ had the smallest proportion of local content. This was compared to USA (90 percent), UK (BBC only, 78 percent), Canada (60 percent), Norway (56 percent), Finland (55 percent), Australia (which mandates a local content transmission quota of 55 percent on all free-to-air commercial networks) and Ireland (RTE only, 41 percent).<sup>70</sup> Note that this is a measure of total air time programming, rather than prime time programming, which is the measure the indicator in this report is based on.

# Māori language speakers

## DEFINITION

The number of Māori who reported in the census they could hold a conversation about everyday things in Māori, as a proportion of the Māori population.

## RELEVANCE

As a central component of Māori culture, Māori language is an important aspect of participation and identity. The Māori language forms part of the broader cultural identity and heritage of New Zealand and in 1987 was granted the status of an official language of New Zealand.<sup>71</sup>

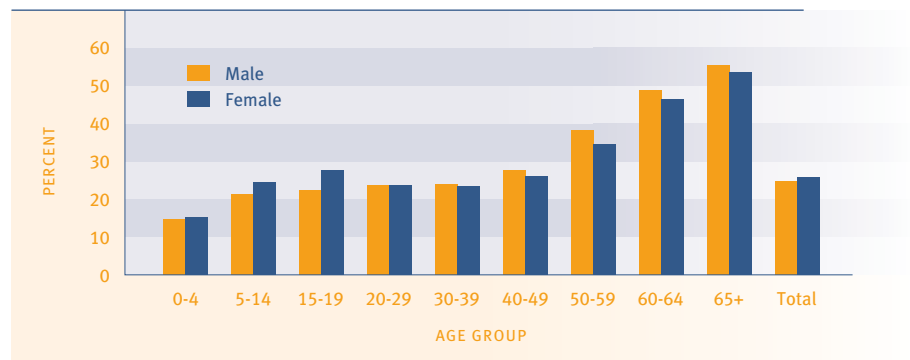
## CURRENT LEVEL

The 2001 Census showed that one-quarter of all Māori (25 percent or 130,482 Māori) and 28 percent of Māori aged 15 and over (or 91,809) stated they could hold a conversation in Māori about everyday things. Māori accounted for 81 percent of the total number of Māori language speakers (160,500). The 1996 Census also showed that the proportion of Māori who speak te reo was around 25 percent, but because of changes in the census ethnicity measures this figure is not directly comparable with the figure for 2001.

The proportion of Māori who were fluent Māori speakers declined markedly over the last century, particularly following the rapid urbanisation of the Māori population in the 1950s and 1960s. The first national Māori language survey in 1973 estimated that the proportion of fluent speakers had fallen to 18 percent.

Information on the fluency of Māori speakers is available from the survey of the health of the Māori language, conducted in 2001. The survey showed that more people could understand Māori (59 percent of Māori aged 15 years and over, or 190,209) than speak it (42 percent, or 136,600). In terms of proficiency, while 42 percent could speak some Māori, only 9 percent could speak Māori 'well' or 'very well', 11 percent could speak Māori 'fairly well', and 22 percent could speak Māori but 'not very well'. Similarly, while 59 percent of people could understand Māori, only 15 percent could understand Māori 'well' or 'very well', 18 percent could understand Māori 'fairly well', and 25 percent could understand Māori but 'not very well'.<sup>72</sup>

Figure CI2.1 Proportion of Māori speakers in the Māori population by age & sex, 2001



Source: Statistics New Zealand 2001 Census



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## AGE AND SEX DIFFERENCES

Older Māori are considerably more likely than younger Māori to be able to converse about everyday things in Māori. In the 2001 Census, more than half of Māori aged 65 and over (54 percent) reported having conversational fluency in the Māori language, compared with less than one-quarter (22 percent) of Māori under 40.

Sex differences in the proportion of Māori language speakers were also apparent. From age 40 years onwards, males were more likely than females to be Māori language speakers, while at younger ages (below 20 years) a higher proportion of females than males could speak Māori.

Among non-Māori, the proportion of Māori language speakers was higher at the younger ages. Females were also more likely to be Māori language speakers than males.

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## ETHNIC DIFFERENCES

The 2001 Census showed that 4.5 percent of the total population could hold a conversation in Māori. After Māori, Pacific peoples had the highest proportion who could speak Māori (5.8 percent), followed by Europeans (1.7 percent) and Asians (0.8 percent).

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## REGIONAL DIFFERENCES

Māori who live in areas with a high proportion of Māori residents are the most likely to be Māori language speakers. Regions with the highest proportion of people with conversational Māori skills were Gisborne (35 percent), Bay of Plenty (32 percent), Northland (30 percent), Waikato (28 percent) and Hawkes Bay (27 percent).

# Language retention

## DEFINITION

The proportion of people who can speak the ‘first language’ (excluding English) of their ethnic group, for ethnic groups (other than Māori) with an established resident population in New Zealand, as recorded in the 2001 Population Census. Ability to speak a language is defined as being able to hold an everyday conversation in that language. ‘First language’ refers to an indigenous language associated with a given ethnicity, as opposed to the first language of a person. Sign language is not treated as a ‘first language’ for the purposes of this indicator.

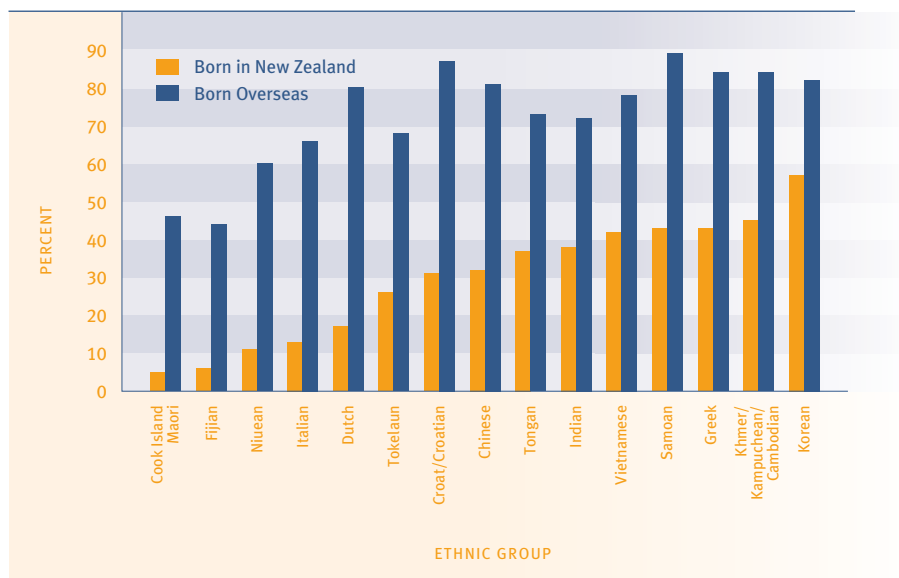
## RELEVANCE

The ability to speak the language of one’s identified ethnicity is an indicator of the ability to retain and pass on one’s culture and traditions to future generations. Language is a central component of cultural identity.

## CURRENT LEVEL

In 2001, the proportion of people who could hold an everyday conversation in the ‘first language’ of their ethnic group varied widely between ethnic groups, from 17 percent of Cook Island Māori to 81 percent of Koreans. In all ethnic groups, those who were born in New Zealand were less likely to be able to speak the ‘first language’ than those who were born overseas.

Figure CI3.1 **Proportion of people who could speak the ‘first language’ of their ethnic group, by birthplace, 2001**



Source: Statistics New Zealand, 2001 Census, unpublished data

## AGE AND SEX DIFFERENCES

In all ethnic groups, young people were less likely than older people to be able to hold an everyday conversation in the 'first language' of their ethnic group. The proportions were similar for males and females.

Table C13.1 **Proportion of people in selected ethnic groups who can speak the 'first language' of their ethnic group, by age group and sex, 2001**

	Age (years)			Sex		Total
	0-24	25-49	50+	Males	Females	
	%	%	%	%	%	
<b>Pacific peoples</b>						
Samoaan	50	75	89	61	64	62
Cook Island Māori	7	26	53	16	18	17
Tongan	44	66	73	53	54	54
Tokelauan	27	57	76	38	43	40
Niuean	13	38	61	24	27	26
Fijian (except Fiji Indian/Indo-Fijian)	14	36	50	26	26	26
<b>Asian</b>						
Indian	50	70	74	61	63	62
Chinese	59	75	82	67	71	69
Khmer/Kampuchean/Cambodian	67	85	87	73	79	76
Vietnamese	60	82	84	69	74	72
Korean	78	84	84	80	82	81
<b>European</b>						
Dutch/Netherlands	21	63	81	59	60	59
Greek (incl Greek Cypriot)	27	73	89	64	61	63
Croat/Croatian	41	70	81	66	63	65
Italian	13	44	70	39	35	37

Source: Statistics New Zealand, 2001 Census, unpublished data

## DESIRED OUTCOMES

All people are satisfied with their participation in leisure and recreation activities. All people have adequate time in which they can do what they want to do and can access an adequate range of different opportunities for leisure and recreation.

# Leisure and Recreation

## INTRODUCTION

Both leisure and recreation are crucial components of a balanced and healthy lifestyle. Leisure time is a time when people can do what they want, separate from work and other commitments.

Recreation and leisure play an important role in social wellbeing by providing people with a sense of identity and personal autonomy. Involvement in leisure time activities gives greater meaning to individual and community life and contributes to people's overall quality of life. Recreation can encourage personal growth, self-expression and increased learning opportunities, satisfying needs not met in people's non-leisure time.

For many people, participation in leisure and recreation increases physical and mental health. Recreation often involves a physical activity or sport. Increased physical activity can lead to decreased health problems, and higher productivity at work, especially when combined with a balanced diet and healthy lifestyle.

The benefits for mental health are equally important. Several studies have demonstrated links between regular physical activity and a reduction in the symptoms of mild or moderate depression, stress, and anxiety. Passive leisure also has benefits for mental health, by providing an outlet for the mind. It may provide physical rest, tension release, opportunities to enjoy nature and escape from daily routine.

Participation in leisure and recreation can also have social benefits. It creates opportunities for socialisation and contributes to social cohesion by allowing people to connect and network with others. It can also contribute to family bonding as families participate together in leisure activities.

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## INDICATORS

Three indicators are used in this chapter. They are: subjective satisfaction with leisure, participation in sport and active leisure and experience of cultural activities. Together, these indicators present a picture of how people feel about their leisure time and also what they do in their leisure time.

The first indicator is subjective satisfaction with leisure. This measures how people feel about both the quality and quantity of their leisure.

The second indicator measures people's participation in sport and active leisure. Moderate physical activity can improve a number of health outcomes, risk factors and diseases. This indicator gives us a sense of how active New Zealanders are.

The final indicator, participation in cultural and arts activities, measures people's involvement in cultural activities. Cultural activities contribute to individual growth, as well as providing opportunities for personal development, social cohesion and the passing on of cultural traditions.

# Satisfaction with leisure

## DEFINITION

The proportion of people aged 15 and over who are 'satisfied' or 'very satisfied' with their leisure-time as reported in the Social Wellbeing Survey 2004.

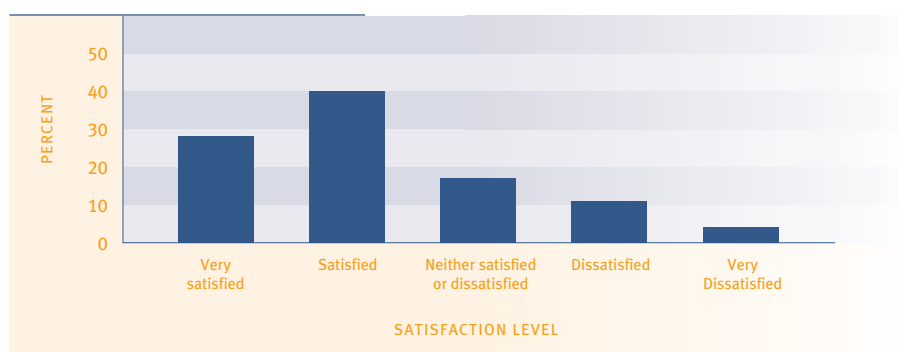
## RELEVANCE

Leisure-time is a crucial component of a balanced and healthy lifestyle. It is a time when people can do what they want, separate from work and other commitments. New Zealanders' subjective feelings about their leisure-time provide information on how people feel about both the quality and quantity of their leisure.

## CURRENT LEVEL AND TRENDS

According to the Social Wellbeing Survey 2004, just over two-thirds of New Zealanders (68 percent) are satisfied overall with their leisure. Specifically, 40 percent are 'satisfied' and 28 percent are 'very satisfied'.

Figure L1.1 **Satisfaction with leisure, 2004**



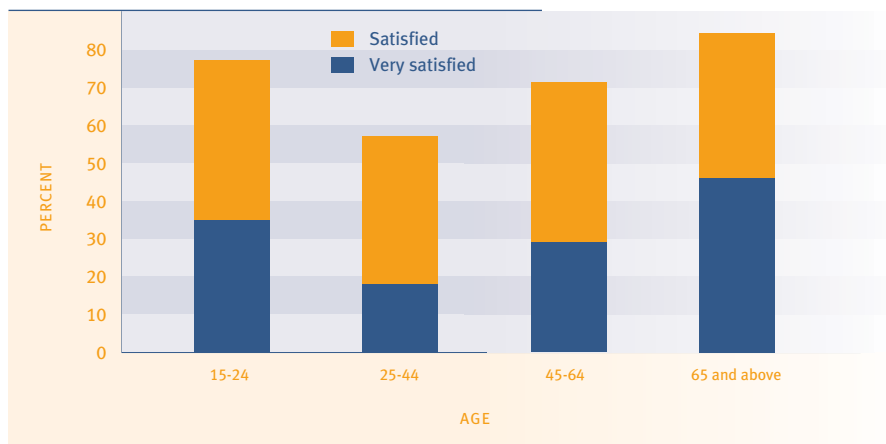
Source: Ministry of Social Development (2004)

## AGE DIFFERENCES

While over half of New Zealanders are satisfied with their leisure-time, those aged between 25 and 44 years are less satisfied overall (57 percent). This age group tends to have larger work and family commitments than other groups, which may impinge on the time they have available for leisure. In comparison, those aged between 46 and 64 years and 15 and 24 years are more likely to report being satisfied with their leisure-time with total satisfaction levels of 71 percent and 78 percent respectively. Those aged over 60 report the highest levels of overall satisfaction with their leisure time (84 percent).

## SEX DIFFERENCES

There are minimal differences in reported satisfaction with leisure-time between the sexes. Sixty-nine percent of both men and women report that they are satisfied with their leisure-time.

Figure L1.2 **Levels of satisfaction with leisure, by age, 2004**

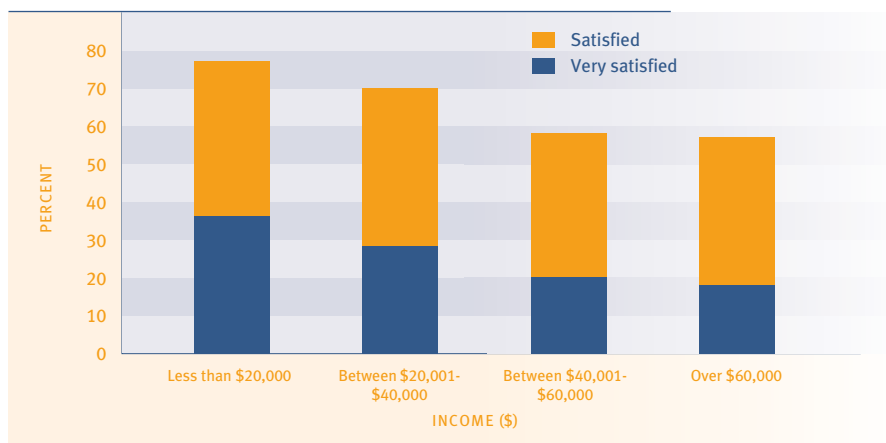
Source: Ministry of Social Development (2004)

## ETHNIC DIFFERENCES

Most New Zealanders, regardless of ethnicity, are satisfied overall with their leisure-time. The European ethnic group reports the highest level of total satisfaction (70 percent), followed by those of Other ethnic groups (65 percent), Māori (66 percent) and Pacific peoples (64 percent).

## PERSONAL INCOME DIFFERENCES

As income increases the proportion of people reporting satisfaction with their leisure-time tends to decrease. Seventy-seven percent of people with incomes of less than \$20,000 report that they are 'very satisfied' or 'satisfied' with their leisure-time, compared to 57 percent of those earning over \$40,000. As income increases to between \$20,000 and \$40,000, satisfaction levels decrease to 70 percent. Satisfaction levels continue to decrease for New Zealanders who are earning over \$40,000 (57 percent) and remain at this level for incomes over \$60,000.

Figure L1.3 **Levels of satisfaction with leisure, by personal income, 2004**

Source: Ministry of Social Development (2004)

# Participation in sport and active leisure

## DEFINITION

The proportion of adults aged 18 years and over and young people aged 5-17 years who were physically active, as measured by the Sport and Physical Activity Surveys of 1997/1998, 1998/1999 and 2000/2001. Being physically active means they took part in at least 2.5 hours of sport and/or leisure-time physical activity in the seven days prior to being interviewed.

## RELEVANCE

People participate in sport and active leisure for a wide variety of reasons: for physical fitness and mental wellbeing, enjoyment and entertainment, for personal growth and development, and as a means to meet new people.

## CURRENT LEVEL AND TRENDS

Seventy percent of adults aged 18 years or over and 66 percent of young people aged 5 to 17 years were reported to be physically active in 2000/2001.

More adults were physically active in 2000/2001 than in 1997/1998 (67 percent). Over the same period there was no significant change in the proportion of young people who were active. However young people who were sedentary (who had done no activity in past two weeks) increased from 8 percent to 13 percent.

Table L2.1 **Activity level of adults and young people by sex, 2000/2001**

Activity level	Young people 5-17 years			Adults 18 years and over		
	Boys	Girls	All	Men	Women	All
	%	%	%	%	%	%
Sedentary	11.6	14.1	12.8	8.9	9.6	9.3
Relatively inactive	17.9	23.4	20.7	21.0	20.7	20.9
<b>Inactive</b>	<b>29.5</b>	<b>37.6</b>	<b>33.5</b>	<b>30.0</b>	<b>30.4</b>	<b>30.2</b>
Relatively active	20.9	26.1	23.5	13.3	18.3	15.9
Highly active	49.6	36.3	43.0	56.7	51.4	54.0
<b>Active</b>	<b>70.5</b>	<b>62.4</b>	<b>66.5</b>	<b>70.0</b>	<b>69.6</b>	<b>69.8</b>

Source: SPARC Trends, 1997-2000

## SEX DIFFERENCES

Men and women were equally likely to be physically active in 2000/2001. This resulted from an increase in the proportion of women who were physically active, from 65 percent in 1997/1998 to 70 percent in 2000/2001. In each of the survey years, men were more likely than women to be highly active (five hours or more in the seven days prior to interview).

In 2000/2001, a smaller proportion of girls (62 percent) were physically active than boys (70 percent) and boys were much more likely to be highly active than girls. An increase in the proportion doing no physical activity at all in the past two weeks occurred for boys and girls between 1997/1998 and 2000/2001.



## AGE DIFFERENCES

Adults aged 65 or over became the most active adult age group in 2000/2001 (76 percent) with the proportion of active adults of this age increasing from 67 percent in 1997/1998. Smaller but significant increases were also apparent for 50–64 year-olds and 35–49 year-olds.

Comparing across all age groups, 16–17 year-olds were the least likely to be active (49 percent in 2000/2001). The proportion of young people aged 13–15 that were active fell from 74 percent in 1997/1998 to 62 percent in 2000/2001.

## ETHNIC DIFFERENCES

European adults were more likely to be physically active than adults of other ethnic groups in 2000/2001. In that year the proportion of Europeans who were physically active reached 72 percent, an increase from 68 percent in 1997/1998.

Young Māori and Pacific people were much less likely to be physically active in 2000/2001 than in 1997/1998. The proportion of young Pacific people who were sedentary (did no activity in the two weeks prior to interview) rose from 6 percent in 1997/1998 to 33 percent in 2000/2001. The proportion of young Māori who were sedentary rose from 6 percent to 18 percent over this period.

Table L2.2 **Activity level of young people aged 5-17 years by ethnic group, 2000/2001**

Activity level	European	Māori	Pacific	Other
	%	%	%	%
Sedentary	9.3	18.4	32.9	7.1
Relatively inactive	21.7	15.9	19.8	24.0
<b>Inactive</b>	<b>31.0</b>	<b>34.3</b>	<b>52.7</b>	<b>31.1</b>
Relatively active	23.8	18.4	21.7	38.0
Highly active	45.2	47.3	25.6	30.9
<b>Active</b>	<b>69.0</b>	<b>65.7</b>	<b>47.3</b>	<b>68.9</b>

Source: SPARC (2003b)

Table L2.3 **Activity level of adults aged 18 years and above by ethnic group, 2000/2001**

Activity level	European	Māori	Pacific	Other
	%	%	%	%
Sedentary	7.8	14.8	9.5	21.0
Relatively inactive	19.8	20.9	28.2	30.0
<b>Inactive</b>	<b>27.6</b>	<b>35.7</b>	<b>37.7</b>	<b>51.1</b>
Relatively active	16.1	13.4	14.8	19.3
Highly active	56.4	50.9	47.5	29.6
<b>Active</b>	<b>72.4</b>	<b>64.3</b>	<b>62.3</b>	<b>48.9</b>

Source: SPARC (2003b)

# Participation in cultural and arts activities

## DEFINITION

The proportion of the population aged 15 and over who had experienced one or more of the cultural activities included in the 2002 Cultural Experiences Survey. Respondents were asked to report on activities they experienced over either a 12-month period (for goods and services accessed or experienced relatively infrequently) or a four-week recall period (for activities experienced on a more regular basis).

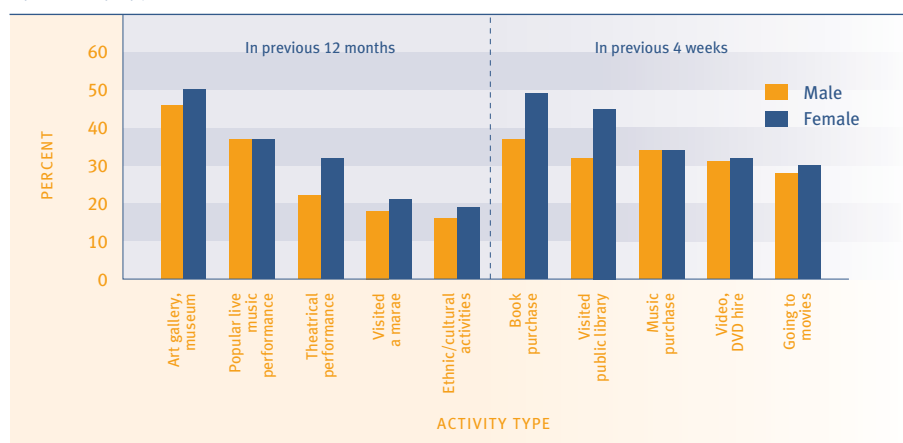
## RELEVANCE

Cultural activities are an integral part of leisure and recreation. People participate in cultural activities for a wide variety of reasons: for enjoyment and entertainment, for personal growth and development, as a means of expression, to learn new skills and to meet new people, and to pass on cultural traditions.

## CURRENT LEVEL AND TRENDS

The vast majority of New Zealanders aged 15 and over (93 percent or 2.6 million people) experienced one or more of the cultural activities included in the 2002 Cultural Experiences Survey. The most popular of the less frequent activities included in the survey (those experienced over the past year) were visiting an art gallery or museum (48 percent) and attending a popular live music performance (37 percent). The most popular activities undertaken in the previous four weeks were purchasing books (43 percent) and visiting a public library (39 percent). Lack of time and cost were the main barriers to experiencing cultural activities more often, or at all.

Figure L3.1 **Proportion of the population aged 15 and over who experienced cultural activities, by activity type & sex, 2001/02**



Source: Statistics New Zealand (2002a)

## SEX AND AGE DIFFERENCES

Women (95 percent) were slightly more likely to experience one or more of the cultural activities included in the survey than men (92 percent). Activities with a much higher proportion of women than men participating included purchasing a book, visiting a library, and going to a theatrical performance. There was no difference in the proportion of men and women who had purchased music.

Younger people were more likely to experience at least one of the cultural activities included in the survey than people in the older age groups. In 2002, virtually all 15–24 year-olds (98 percent) and 96 percent of 25–44 year-olds took part in one or more of the surveyed activities. Participation was lowest among the 65+ age group (81 percent). Popular activities among younger people included hiring a video or DVD (53 percent) and purchasing music (49 percent). Older people (65+ years) were more likely to visit a public library than other age groups, with 46 percent reporting this activity.

## ETHNIC DIFFERENCES

Māori were more likely to have participated in at least one of the cultural activities included in the survey than the European or Pacific groups (Māori 97 percent; European 93 percent; Pacific 92 percent). Popular activities experienced by Māori included visiting a marae (69 percent) and attending a popular live music performance (40 percent). European New Zealanders were more likely to report visiting an art gallery or museum than other groups (51 percent), while Pacific people had the highest rate of participation in community-based ethnic or cultural activities (39 percent).

Table L3.1 **Proportion (%) of population aged 15+ who had participated in cultural activities by activity type and ethnic group**

	Māori	Pacific people	European
<b>In the previous 12 months</b>			
Art gallery/museum	42	27	51
Book purchase	40	29	45
Popular live music performance	40	27	39
Theatrical performance	18	19	30
Visited a marae	69	22	14
Community-based ethnic/cultural activities	20	39	14
<b>In the previous four weeks</b>			
Visited public library	34	31	39
Music purchase	32	33	34
Video, DVD hire	39	26	31
Going to movies	23	21	30
<b>Any cultural activity</b>	<b>97</b>	<b>92</b>	<b>93</b>

Source: Statistics New Zealand (2002a)

## REGIONAL DIFFERENCES

In 2002, 94 percent of people living in urban areas experienced one or more of the cultural activities included in the survey, compared to 93 percent of people living in secondary urban areas and 91 percent of those living in minor urban and rural areas. Comparing across regional council areas, Wellington had the highest proportion of people who experienced at least one of the surveyed activities (97 percent), while Taranaki had the lowest level of participation (87 percent).

## DESIRED OUTCOMES

The natural and built environment in which people live is clean, healthy, and beautiful. All people are able to access natural areas and public spaces.

# Physical Environment

## INTRODUCTION

The physical environment includes land, air, water, plants and animals, buildings and other infrastructure, and all of the natural resources that provide our basic needs and opportunities for social and economic development.

A clean, healthy environment is important for people's physical and emotional wellbeing. At a fundamental level, factors such as clean air and good quality drinking water are vital for people's physical health. Other environmental factors such as noise pollution can cause both physical harm and psychological stress.

The cleanliness and beauty of the environment is also important for people's sense of wellbeing. For many people, access to an attractive physical environment contributes to their contentedness with life. A healthy environment also provides recreational opportunities, allowing people to take part in activities they value. For New Zealanders, the 'clean, green' environment is also an integral part of national identity, and guardianship of the land and other aspects of the physical environment is seen as an important part of social wellbeing.<sup>73</sup> This image is also vital for the health of New Zealand's economy, as it is a key factor both in attracting tourists and underpinning the nation's success as an exporter of primary products.

Harm to the environment can reduce quality of life not only for people living today but also for many years in the future. The concept of 'sustainability' is an important aspect of social wellbeing. It acknowledges that social and economic developments need to take place in ways that don't harm present and future wellbeing by damaging the natural environment, and don't harm future wellbeing by using natural resources in unsustainable ways.

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## INDICATORS

Two indicators are used in this chapter. Both measure important aspects of the environment that have a direct impact on individual wellbeing. The indicators are: air quality and drinking water quality.

These indicators provide an insight into both current and future wellbeing. They relate to the health, cleanliness and beauty of the environment. No direct measure of people's access to natural areas and public spaces is included due to a lack of adequate data.

Clean air and good quality drinking water are both necessities of life. Pollution in either air or water can have significant detrimental effects on people's health, as well as being detrimental to the beauty of the environment.

The first indicator measures the levels of fine particles in the air at certain sites. Fine particles are known to have an adverse effect on people's health. Prolonged exposure to elevated levels has been linked with aggravation of existing respiratory and cardiovascular diseases and premature death.

The second indicator measures the percentage of the population receiving drinking water that complies with the 1995 drinking water standards. Poor quality drinking water can create health risks from water-borne disease and contaminants. It is also likely to be associated with poor quality sewerage infrastructure and electricity supply.

# Air quality

## DEFINITION

PM10 is particulate matter that is less than 10 microns in diameter. The New Zealand ambient air quality guideline for PM10 is 20 micrograms per cubic metre (20µg/m<sup>3</sup>) averaged annually.

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## RELEVANCE

Good air quality is an important component in maintaining our quality of life, the appeal of New Zealand as a tourist destination, and the health of people, plants and animals. PM10 is the primary contaminant of concern in New Zealand as it is known to affect many people with adverse health effects. Health effects associated with this contaminant include increased premature mortality, aggravation of existing respiratory and cardiovascular diseases, hospital admissions and emergency department visits, school absences, lost work days and restricted activity days.

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## CURRENT LEVEL AND TRENDS

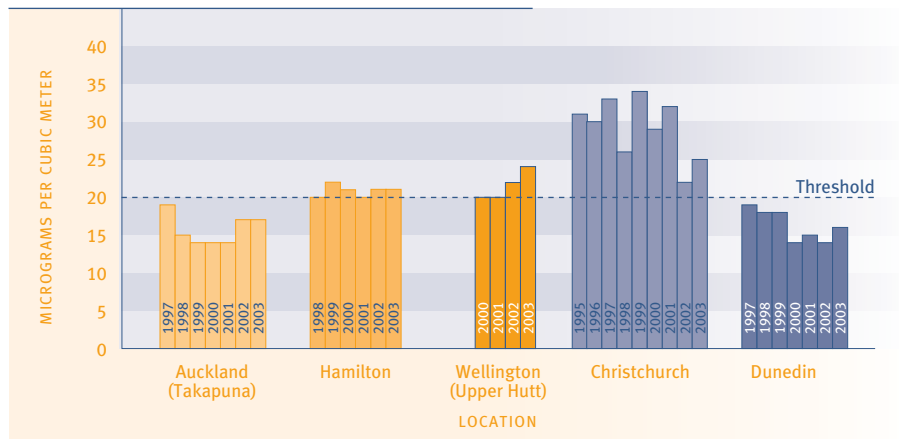
Figure EN1.1 shows that average annual PM10 levels in the air were above the ambient guideline in Christchurch for all years between 1995 and 2003. However, more recent years (2002 and 2003) may be showing evidence of an improvement. Hamilton also exceeded the guideline in 1999/2000, and in 2002/2003, but by a smaller amount.

Wellington levels appear to be on the rise with PM10 equal to the guideline in 2000/2001 and in excess of the guideline in 2002 and 2003. Levels in Auckland also appear to be on the rise, although they have not yet exceeded the annual guideline.

Dunedin consistently recorded levels of particles below the New Zealand annual guideline.

Poor air quality in New Zealand is typically associated with urban areas and is a product of vehicle emissions (Auckland) and domestic home heating (nationally). Industrial and agriculture emissions are also lesser sources of PM10, as are dust pollens and sea spray, which are natural sources of particles. Annual data presented here should not be confused with daily average PM10 concentrations, which are known to exceed health-based guidelines in 28 urban centres in New Zealand.

Figure EN1.1 **PM10 concentration in selected sites 1995-2003**



Source: Ministry for the Environment (2002)  
 Note: Data for Wellington is unavailable before 2000, for Dunedin before 1997, and for Hamilton before 1998

## INTERNATIONAL COMPARISON

Ambient air quality is entirely location-specific and it is not possible to compare countries. For example, it is possible to compare annual PM10 in Auckland with annual PM10 in Los Angeles, but an OECD median cannot be calculated. As a broad generalisation, however, the air quality in New Zealand’s urban areas is comparable with or better than a number of OECD countries. New Zealand emits below the average OECD level for carbon dioxide on a per capita basis.<sup>74</sup>

# Drinking water quality

## DEFINITION

The percentage of the surveyed population that receive their water from community water supplies, whose drinking water complies with the Drinking Water Standards of New Zealand 1995 relating to *E. coli* and *Cryptosporidium*. About 85 percent of the New Zealand population drink water from community supplies.

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## RELEVANCE

Maintaining good drinking water quality is critical for human health and quality of life outcomes. The health risk to consumers from water-borne disease in drinking water supplies comes from two main types of microbiological organisms: bacteria (such as faecal coliforms, and *E. coli*), and parasites (such as *Giardia*, and *Cryptosporidium*). Improvements in this indicator ensure that less of the population is at risk of water-borne disease and other contaminants.

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## CURRENT LEVEL AND TRENDS

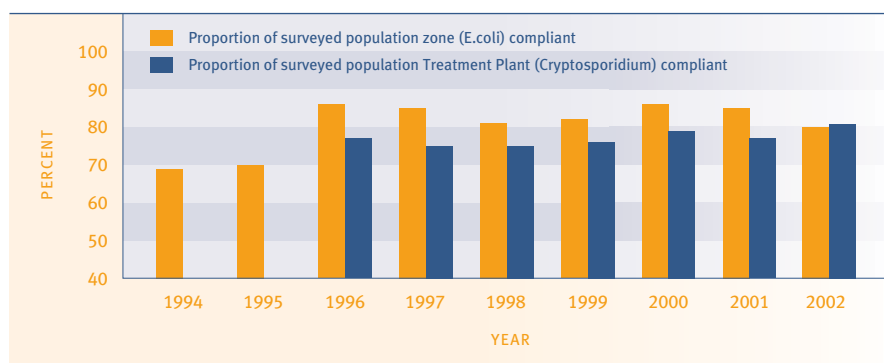
The majority of New Zealanders are supplied with community drinking water that is free of micro-organisms. The proportion of New Zealanders whose drinking water, measured at the tap, complies with the 1995 drinking water standards regarding *E. coli* increased from 69 percent in 1994 to 80 percent in 2002. Overall the level of *E. coli* compliance has fluctuated over the second half of the 1990s from between 80 and 86 percent. Most water supplies serving large population areas are fully compliant with the 1995 standards. The main reason for non-compliance is inadequate monitoring rather than the actual contamination of drinking water. Inadequate monitoring is the reason behind the slight decrease in *E. coli* compliance between 2001 and 2002.

Compliance with the 1995 drinking water standards for *Cryptosporidium* is measured at the water treatment plant rather than at the tap. Data is not available for *Cryptosporidium* compliance before 1996. Since 1996, the compliance rate has increased slightly from a value of 77 percent in 1996 to 81 percent in 2002. Between these years there was some measured fluctuation in levels of compliance with a low of 75 percent in 1997 and 1998.

While the proportion of consumers with fully compliant drinking water supplies has remained fairly flat since 1996, this reflects the replacement of the 1984 standards with the more stringent standards adopted in 1996 rather than any decline in water treatment over this time.



Figure EN2.1 **Proportion of the surveyed population served with water that meets drinking water standards, 1994-2002**



Source: Ministry of Health (2002b)

## REGIONAL DIFFERENCES

Groundwater sources supply drinking water for about 40 percent of the New Zealand population, while about 60 percent of people are supplied from surface (catchment) water. Most water in catchment headwaters is of good quality, but problems with the quality of some groundwater sources have been identified.

There is considerable regional variation in the population served with drinking water that is fully compliant. In 2002, only 13 percent of the population in Otago and 21 percent of the population in Southland were served with drinking water that fully complied with the 1995 drinking water standards. Waikato and Northland also had particularly low compliance rates, varying between 32 percent and 38 percent of the population covered. Compliance in Auckland, Tauranga and Wellington, however, was close to 100 percent. The vast majority of non-compliance is due to inadequate monitoring, rather than actual contamination. This is the main reason for low levels of compliance in Northland, Waikato and Otago in 2002.

Where drinking water quality is affected, the agricultural sector is seen as the most important source of water quality problems.<sup>75</sup>

## INTERNATIONAL COMPARISON

Overall, the quality of New Zealand water is high by international standards. New Zealand's water supplies are free of many of the diseases that result in sickness and death in other countries. However, the incidence of infection from Giardia in water supplies is 85 per 100,000 people, which is considered high compared to the reported rates for other western countries.<sup>76</sup>

## DESIRED OUTCOMES

All people enjoy physical safety and feel secure. People are free from victimisation, abuse, violence and avoidable injury.

# Safety

## INTRODUCTION

Safety is fundamental to wellbeing: at their most extreme, violence and avoidable injuries threaten life itself. In other cases, they reduce quality of life for the victim and other people in a multitude of ways.

Both safety and security are important. Safety is freedom from physical or emotional harm, while security is freedom from the threat or fear of harm or danger. The desired outcomes recognise that threats come in many forms, ranging from deliberate violence to accidental injury.

Violence and injury corrode quality of life in many ways. Physical injury causes pain and incapacity, reducing victims' enjoyment of life and ability to do things that are important to them.

Property crime, such as burglary, also affects people's wellbeing. In addition to the direct losses associated with crime of this sort, evidence suggests the threat of burglary is a more significant worry for many people than the threat of violence.<sup>77</sup>

Psychological effects are often as important as the physical ones. Victims of violence or injury often retain emotional scars long after their physical wounds have healed. They may suffer from depression or face other mental health issues.

Crime affects not only individuals but also society as a whole. The victim's family and friends are likely to suffer grief and anger. They may have to care for someone who is temporarily or permanently incapacitated and may suffer from loss of livelihood. Crime and the fear of crime may also reduce social cohesion within communities.

Crime may restrict people's choices about how to live their lives. For example, they may avoid certain areas or avoid going out because of a fear of crime.

Costs to society as a whole range from the costs of hospital care and law enforcement to the loss of the victim's input to their work and community.

Children who grow up surrounded by violence may themselves become violent adults, perpetuating a negative cycle.

## INDICATORS

Four indicators are used in this chapter. They are: child abuse and neglect, criminal victimisation, safety perceptions, and road casualties. The first three indicators combine to provide a picture of the level and impact of violence in the community. Together, the indicators directly address the question of how free New Zealanders may be from victimisation, abuse, violence and avoidable injury.

Child abuse and neglect, the first indicator, are major social problems. They cause physical and psychological harm which are often long-lasting. Child abuse figures are relevant to current levels of wellbeing and point to future social problems as well.<sup>78</sup> This indicator uses the proportion of children assessed as abused following notification to the Department of Child, Youth and Family Services, which is likely to underestimate the true level of violence against children. This under-reporting makes it difficult to interpret trends over time and also difficult to draw conclusions from trends; an increase in the rate of reported child abuse may in fact be positive if it reflects higher levels of awareness and reporting of abuse, rather than higher levels of abuse itself.

Measuring criminal victimisation is difficult, as many crimes are not reported to the Police. This is particularly true of burglary, domestic violence, and child abuse. The second indicator uses survey results to give a more comprehensive picture of the level of criminal victimisation in society, including the level of violence.

The third indicator is perceptions of safety. Feeling unsafe harms quality of life by producing anxiety and reducing people's options in life. However, there is some evidence that fear is often not linked to the actual risk of becoming a crime victim - for example, people may feel unsafe and have their quality of life reduced even when the actual likelihood of their being victimised is relatively small.

People should also be able to live in a society where they are free from the risk of avoidable death or injury. The leading cause of avoidable injury and death is motor vehicle crashes. In economic terms, the social cost of motor vehicle crashes has been estimated at \$3.1 billion annually.<sup>79</sup> The final indicator is road casualties.

Workplace accidents are another form of avoidable injury. They are discussed in the chapter on Paid Work.

# Child abuse and neglect

## DEFINITION

The number of children assessed as abused (physically, emotionally, sexually) or neglected following a notification to the Department of Child, Youth and Family Services (CYFS), as a proportion (per 1,000) of all children under 17 years of age.

## RELEVANCE

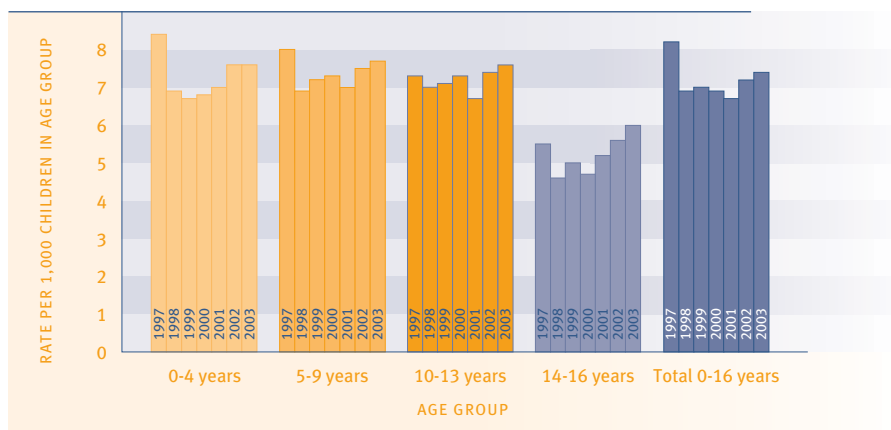
Abuse or violence damages a child's physical and psychological health, with the consequences often experienced well into adolescence and adulthood.

## CURRENT LEVEL AND TRENDS

In the year to June 2003, there were 31,781 care and protection notifications to the Department of Child, Youth and Family Services (CYFS). On a population basis, this represented 31.8 notifications per 1,000 children aged 0-16 years. Annual fluctuations in these figures do not necessarily reflect changes in the prevalence of child abuse. They may be influenced by the level of resources made available, and by changes in administration and reporting patterns.<sup>80</sup> More than one notification can be made for individual children.

In the year to June 2003, 7,361 children were assessed as abused or neglected by CYFS. This was a substantiated child abuse rate of 7.4 children for every 1,000 children 0-16 years of age, similar to the (revised) rate of 7.2 percent in 2002.<sup>81</sup>

Figure SS1.1 **Substantiated child abuse and neglect rate, by age group, 1997-2003**



Source: Ministry of Social Development, SWIS (1997-2000), CYRAS (2001-2003)

Note: The rate is based on individual children who were assessed as abused (physically, emotionally, sexually) or neglected. 2002 rates have been revised

## AGE AND SEX DIFFERENCES

There is little difference by sex in rates of abuse among children under 10 years old but at age 14-16 females are much more likely to be abused than males. In 2003, the rate of substantiated child abuse among 14-16-year-old females was 8.0 per 1,000, over twice the rate for males (3.9 per 1,000). These age and sex differences have been consistent over the last six years.

Table SS1.1 **Substantiated cases of child abuse or neglect, by age and sex, years ended 30 June 2002 and 2003**

Age group	Rate per 1,000 children					
	2002			2003		
	Male	Female	Total	Male	Female	Total
0-4 years	7.5	7.3	7.6	7.2	7.5	7.6
5-9 years	7.3	7.6	7.5	7.4	7.9	7.7
10-13 years	6.4	8.3	7.4	6.6	8.4	7.6
14-16 years	3.7	7.4	5.6	3.9	8.0	6.0
Total	6.5	7.7	7.2	6.5	8.0	7.4

Source: Ministry of Social Development, CYRAS. Revised data for 2002

## ETHNIC DIFFERENCES

Māori children are more likely than non-Māori children to be assessed as abused or neglected. In 2003, the rate per 1,000 was 11.9 for Māori and 5.9 for non-Māori. While the corresponding rates are not available for Pacific children, they are not over-represented among children assessed as abused, accounting for 11 percent of such children in 2003, about the same representation as they have in the child population.

Table SS1.2 **Substantiated cases of child abuse or neglect, Māori and non-Māori ethnicity and sex, years ended 30 June, 1998-2003**

Year to 30 June	Rate per 1,000 children aged 0-16					
	Māori			Non-Māori		
	Male	Female	Total	Male	Female	Total
1998	11.8	13.9	13.0	4.6	5.5	5.1
1999	12.3	14.3	13.4	4.5	5.5	5.0
2000	11.1	13.2	12.3	4.7	5.6	5.3
2001	9.4	10.9	10.2	4.9	6.1	5.6
2002	9.7	11.4	11.8	5.5	6.5	5.7
2003	10.8	12.5	11.9	5.1	6.5	5.9

Source: Ministry of Social Development, CYRAS

Note: 2001 and 2002 rates have been revised

## INTERNATIONAL COMPARISON

A UNICEF report on child maltreatment deaths in 27 OECD countries, averaged over a five-year period during the 1990s, placed New Zealand twenty-fourth out of 27 countries, with a rate of 1.2 deaths per 100,000 children under the age of 15 years.<sup>82</sup> This was high compared to an OECD median of 0.6 deaths per 100,000.

Only Mexico and the United States (both 2.2 per 100,000) had higher child maltreatment death rates than New Zealand. Outcomes for other countries include Australia and Canada (both 0.7 per 100,000, 18th equal), and the United Kingdom (0.4 per 100,000, 6th equal). These findings should be treated with caution because the very small numbers involved produce highly volatile rates. In addition, although the data comes from the same World Health Organization database and uses the same international classification of death by cause, there may be differences between countries, and within countries over time, in the classification of death by intention.

# Criminal victimisation

## DEFINITION

The proportion of the population aged 15 and over who have been the victims of one or more incidents of criminal offending as measured by the 2001 National Survey of Crime Victims.

## RELEVANCE

The criminal victimisation rate provides a broad measure of personal safety and wellbeing. Surveys of criminal victimisation generally provide a more comprehensive picture of victimisation than police data, as not all offending is reported or recorded.

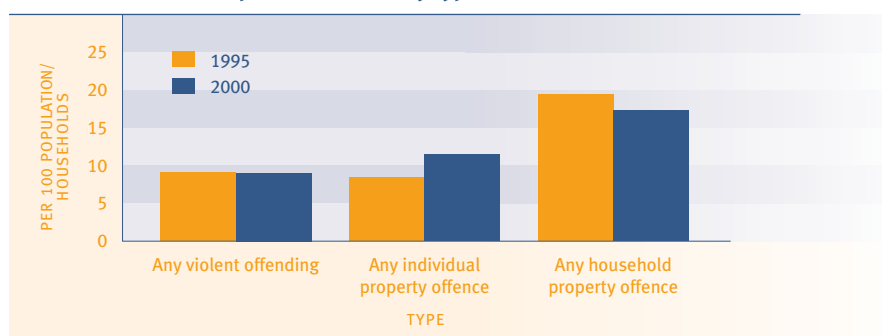
## CURRENT LEVEL AND TRENDS

Survey data shows that 30 percent of New Zealand adults aged 15 and over experienced victimisation during 2000. This is similar to the level in 1995 (31 percent).

A breakdown by the type of offence shows that 9 percent of the adult population reported they had been the victim of violent offending in 2000, the same level as in 1995. Eleven percent reported they had been subject to an individual property offence, such as theft or wilful damage, up from 8 percent in 1995. The proportion of people who were the victim of a household property offence was 19 percent in 1995 and 17 percent in 2000.

A small number of individuals accounted for the vast majority of violent victimisations. Less than 2 percent of the adult population were victims of violence five or more times, but they experienced 55 percent of the violent victimisations. Violent victimisations comprised slightly less than half of the total volume of victimisations disclosed by the 2001 survey.

Figure SS2.1 Criminal victimisation prevalence rate by type of victimisation, 1995, 2000



Source: Morris et al (2003), Tables 2.6, 2.8 and revised 1995 figures

## AGE DIFFERENCES

Young adults are more likely than older adults to be a victim of crime. In the 2001 survey, 46 percent of the 15–24 year age group had experienced victimisation compared with 33 percent of those aged 25–39, 28 percent of the 40–59 year age group and 13 percent of those aged 60 and over. Youth were more than twice as likely to be a victim of violent crime as the 25–39 year age group, the next closest group. Younger adults were also more likely than older people to experience an individual property offence, though the difference by age was less pronounced than for violent offences.

Table SS2.1 **Criminal victimisation rate by major offence type and age, 2000**

Offence type	Rate per 100 persons in each age group				
	15-24	25-39	40-59	60+	Total
Any violent offending (including sexual assault)	23.5	9.5	5.6	1.3	9.0
Any 'individual' property offence	18.3	13.2	10.3	5.0	11.5
Any victimisation (including household victimisation)	45.9	32.9	28.2	12.7	29.5

Source: Morris et al (2003), Tables 2.6, 2.8, 2.13 and additional data

## SEX DIFFERENCES

The overall rate of victimisation did not vary by sex, with 30 percent of women and 29 percent of men reporting they had experienced victimisation in 2000. This is similar to 1995 when 31 percent of women and 32 percent of men experienced victimisation. While men and women were equally as likely to report being the victim of violence, more men than women disclosed violence by someone not well known to them (12 percent compared with 8 percent).

Survey information on partner violence shows that more than one in four women (26 percent) and just under one-fifth of men (18 percent) had been abused or threatened with violence by a partner at some time in their adult life. Changes in methodology between the 2001 and 1996 surveys on criminal victimisation mean it is not possible to compare changes in partner victimisation over time.<sup>83</sup>

Women's lifetime experience of sexual interference or assault was considerably higher than men's (19 percent compared with 5 percent).

## ETHNIC DIFFERENCES

In 2000, Māori were considerably more likely to be a victim of crime (41 percent) than Pacific people (28 percent) and Europeans (29 percent). The difference was greatest for violent victimisation, with one-fifth of Māori experiencing offending of this type, compared to 11 percent of Pacific people and 8 percent of Europeans. Māori were also more likely to experience individual property offences, though the difference was less marked than for violent offending. Pacific peoples were the least likely of any group to experience offending of this type. The proportion of Māori women who had been abused or threatened with violence by a partner at some time during their adult life was very much higher (49 percent) than for European women (24 percent) and Pacific women (23 percent).

Table SS2.2 **Criminal victimisation rate by major offence type and ethnicity, 2000**

Offence type	Rate per 100 persons aged 15+			
	European	Māori	Pacific	Other
Any violent offending (including sexual assault)	8.4	19.5	11.3	2.6
Any 'individual' property offence	11.5	14.7	8.2	11.9
Any victimisation (including household victimisation)	28.9	40.9	28.3	26.4

Source: Morris et al (2003), Table 2.14

# Perceptions of safety

## DEFINITION

The proportion of people who reported that they felt unsafe walking alone in their neighbourhood at night. People who said they did not walk alone at night were asked how they thought they would feel.

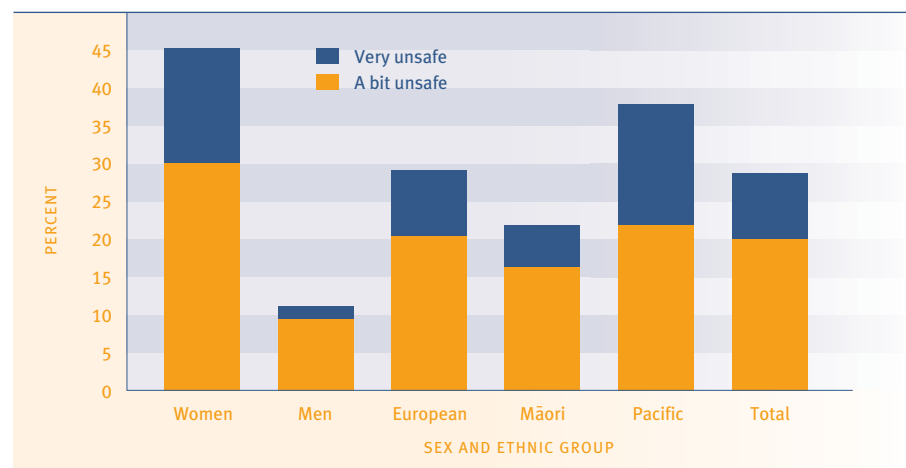
## RATIONALE

Feeling safe is fundamental to wellbeing. Anxiety and worries about victimisation detract from wellbeing in themselves, and may cause people to alter their behaviour to avoid being victimised. This limits people's options and can reduce their freedom. People's subjective perceptions about safety are not always linked to the actual risk of becoming a crime victim.

## CURRENT LEVEL

In 2001, 29 percent of New Zealanders reported feeling unsafe walking alone in their neighbourhood at night. A fifth (20 percent) reported feeling only 'a bit unsafe', while 9 percent felt 'very unsafe'.

Figure SS3.1 **Proportion of the population who felt unsafe walking alone in their neighbourhood after dark, 2001**



Source: Morris et al (2003)

People's perceptions varied widely according to their behaviour. Of people who reported they did not walk alone at night, 30 percent reported feeling it would be a bit unsafe and 16 percent said they felt walking alone was very unsafe. People who reported that they walked alone at night were much less likely to feel unsafe. Only 10 percent felt a bit unsafe and 1 percent felt very unsafe.

## SEX AND AGE DIFFERENCES

Women were considerably more likely than men to report feeling unsafe about walking alone after dark (45 percent for females and 11 percent for males). Women were over three times more likely than men to report feeling a bit unsafe and over eight times as likely to report feeling very unsafe.



Table SS3.1 **Proportion of adults aged 15 and over who felt unsafe walking alone in their neighbourhood after dark by sex, 2001**

	Age group					Sex	
	15-16	17-24	25-39	40-59	60+	Male	Female
A bit unsafe	17.7	19.6	22	18	21.5	9.5	30.1
Very unsafe	8.8	7.3	8	7.2	12.4	1.7	15.1
A bit unsafe or very unsafe	26.5	26.9	30	25.2	33.9	11.1	45.2

Source: Morris et al (2003)

There is relatively little age difference in perceptions of safety. Just over a third (34 percent) of those aged 60 and older said they felt it would be unsafe to walk alone in their neighbourhood after dark. This compares with 27 percent of people aged between 15 and 24. At all ages, women felt less safe than men.

## ETHNIC DIFFERENCES

Pacific people were much more likely than other ethnic groups to report feeling unsafe about walking alone in their neighbourhood after dark. Over a third (38 percent) of Pacific people said they would feel unsafe, compared to 29 percent of the European and Other ethnic groups. The difference is greatest with regard to the proportion of people who felt very unsafe. Māori, by way of contrast, generally felt safer than other ethnic groups. Just over one-fifth (22 percent) of Māori said they would feel unsafe walking alone after dark in their neighbourhood, while 6 percent stated they would feel very unsafe.

Women were more likely to report feeling unsafe walking alone in their neighbourhood after dark than males for all ethnic groups. Pacific men were more than twice as likely as European and Māori men to report feeling unsafe. In contrast, a similar proportion of Pacific and European women reported they felt unsafe, while the proportion among Māori women was much lower. Pacific women, however, were considerably more likely to report feeling 'very unsafe' compared to other groups.

Table SS3.2 **Proportion of adults aged 15 and over who felt unsafe walking alone in their neighbourhood after dark by ethnicity, 2001**

	European	Māori	Pacific people	Other
<b>A bit unsafe</b>				
Male	9.1	7.9	16.5	12.3
Female	31.2	24.2	27	33.5
Total	20.5	16.3	21.9	22.8
<b>Very unsafe</b>				
Male	1.7	1.2	5.1	0.4
Female	15.2	9.7	26	13.1
Total	8.6	5.5	15.9	6.7
<b>A bit unsafe or very unsafe</b>				
Male	10.8	9.1	21.6	12.7
Female	46.4	33.9	53	46.6
Total	29.1	21.8	37.8	29.5

Source: Morris et al (2003)

# Road casualties

## DEFINITION

The number of people killed or injured in motor vehicle crashes as a proportion (per 100,000) of the total population.

## RELEVANCE

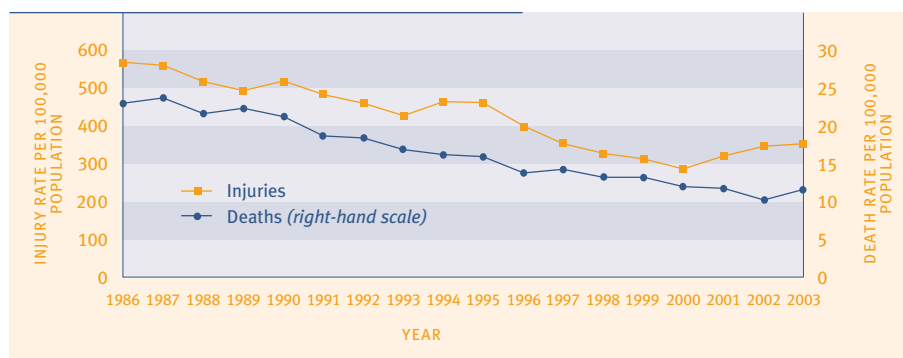
Road deaths are a major cause of premature death, especially among young adults. Deaths, injuries and disability resulting from motor vehicle crashes inflict considerable pain and suffering on individuals, families and communities, as well as on other road users, emergency service providers, health workers and others.

## CURRENT LEVEL AND TRENDS

In 2003, 461 people died as a result of motor vehicle crashes, a rate of 11.5 deaths per 100,000 population.<sup>84</sup> A further 14,361 people were injured, a rate of 358.2 injuries per 100,000 population. Deaths and injuries from motor vehicle crashes have declined substantially since 1986, when the rates were 23.1 and 569.6 per 100,000 respectively. The number of people killed in motor vehicle crashes was 40 percent lower in 2003 than it was in 1986. Although there was a rise in the number of people injured in the last three years, there were 24 percent fewer injured in 2003 than in 1986.

There is no conclusive evidence on what has driven the reduction in road casualties since 1986, but better roads, better vehicles, as well as legislation, enforcement and education aimed at reducing road casualties may have contributed to an improvement in drivers' attitudes and behaviour.

Figure SS4.1 Road traffic injury and death rates, 1986-2003



Source: Land Transport Safety Authority  
Note: 2003 data is provisional

## AGE AND SEX DIFFERENCES

Young people aged 15-24 years are far more likely than any other age group to be injured in a motor vehicle crash, with a rate more than double that of the population as a whole (785 per 100,000 in 2003). The risk of dying is relatively low in middle age, then increases sharply at older ages, partly because of increasing fragility among the very old.

Males are much more likely than females to be injured or killed in motor vehicle crashes. In 2002, the injury rate was 401.8 per 100,000 for males and 310.7 per 100,000 for females; the death rate was 15.8 per 100,000 for males and 7.3 per 100,000 for females.

Table SS4.1 **Road casualty rates by age and sex, 2003**

Age	Rate per 100,000 population in each group					
	Reported injury rate			Death rate		
	Males	Females	Total	Males	Females	Total
Under 15	146.4	125.7	137.1	3.5	2.6	3.1
15-24	895.2	666.5	785.0	30.4	14.2	22.4
25-34	535.2	385.0	458.8	25.9	6.4	15.8
35-44	394.5	281.7	337.5	16.0	6.3	11.0
45-54	297.7	252.7	275.5	10.8	6.4	8.6
55-64	261.4	220.0	240.7	12.0	5.1	8.5
65-74	226.5	204.5	216.6	15.4	8.3	11.7
75+	247.9	196.3	217.1	19.5	14.2	16.3
Total	401.8	310.7	358.2	15.8	7.3	11.5

Source: Land Transport Safety Authority (provisional 2003 data); Statistics New Zealand, 2001-based estimated resident population as at 30 June 2003

## ETHNIC DIFFERENCES

Māori are much more likely than other ethnic groups to die in motor accidents, though their age-standardised death rate declined from 26 per 100,000 in 1996 to 19 per 100,000 in 1999. In comparison, the death rate for European/Other ethnic groups was 12 per 100,000 in 1999 and for Pacific peoples, 8 per 100,000.

Table SS4.2 **Motor vehicle death rates by ethnicity, 1996-1999**

Year	Age-standardised rate per 100,000			
	Māori	Pacific people	European and Other	Total
1996	26	14	12	14
1997	25	10	12	14
1998	21	12	12	13
1999	19	8	12	13

Source: New Zealand Health Information Service, cited in Ministry of Health 2000, Table 1; unpublished data for 1998, 1999 from NZHIS

Māori and Pacific peoples are less likely to drive than Europeans, but they are at greater risk of injury and death from motor vehicle crashes. A 1998 survey showed that, per distance driven, the risk of being hospitalised as a result of a crash was more than three times as high for Māori drivers, and only slightly less than three times as high for Pacific drivers compared to Europeans.<sup>85</sup>

## INTERNATIONAL COMPARISON

In 2002 New Zealand was ranked 14th among 28 OECD countries with a road death rate of 10.3 per 100,000 people.<sup>86</sup> This was similar to the OECD median of 10.8 deaths per 100,000. Turkey had the best outcome in the OECD in 2002 with a road death rate of 5.6 per 100,000. The New Zealand road death rate was better than that of the United States at 14.9 per 100,000 but worse than Canada at 8.9, Australia at 8.8 and the United Kingdom at 6.1 per 100,000.

## DESIRED OUTCOMES

People enjoy constructive relationships with others in their families, whānau, communities, iwi and workplaces. Families support and nurture those in need of care. New Zealand is an inclusive society where people are able to access information and support.

# Social Connectedness

## INTRODUCTION

Social connectedness refers to the relationships people have with others.

Social connectedness is integral to wellbeing. People are defined by their social roles, whether as partners, parents, children, friends, caregivers, team-mates, staff or employers, or myriad other roles. Relationships give people support, happiness, contentment and a sense they belong and have a role to play in society.<sup>87</sup> They mean people can call on help during hard times.

Social connectedness also refers to people joining to achieve shared goals which benefit each other and society as a whole - ranging from working together as part of business and paid employment to contributing to their communities through voluntary groups.

One of the most important aspects of social connectedness is the relationship people have with a spouse or partner. Studies have consistently found that having a partner contributes to a person's reported level of wellbeing.<sup>88</sup>

Several studies have demonstrated links between social connectedness and the performance of the economy as well as positive outcomes for individual health and wellbeing.<sup>89</sup>

Social connectedness is fostered when family relationships are positive, and when people have the skills and opportunities to make friends and to interact constructively with others. Good health, employment, and feeling safe and secure all increase people's chances of developing positive relationships.

There can be many barriers to social connectedness. The tendency to make connections outside the family varies between cultures and communities, and factors such as language differences, high levels of inequality, and tensions between ethnic groups can create barriers between people.

## INDICATORS

Five indicators are used to measure New Zealand's levels of social connectedness. Together, the five indicators used here measure opportunities for and actual levels of connection between people, both within people's immediate social groups and with the wider community. The indicators are: access to the internet, regular contact with family/friends, trust in others, proportion of the population experiencing loneliness, and contact between young people and their parents.

Access to the internet is significant because it allows people to keep in touch without seeing each other face to face. This means social connectedness can be maintained even when people are in different cities or even different countries. It also means new social networks can be opened up between people who may never have met, crossing geographical boundaries.

For the vast majority of people, social networks centre on family and friends. The second indicator measures the proportion of people who take part in family activities and have family or friends over for a meal at least once a month.

Trust in others, the third indicator, measures the extent to which people expect others to act fairly towards them. High levels of trust enhance wellbeing by facilitating co-operative behaviour among people who otherwise do not know each other. Trust also enhances people's ability to develop positive relationships with others.

Levels of loneliness are measured in the fourth indicator. Feelings of loneliness can not only be detrimental to people's emotional health, but their physical health also, resulting in adverse health problems including stress, anxiety or depression.

The final indicator, the proportion of young people who report getting enough time each week with their parents, is a measure of the extent to which people in need of care and nurturing receive that support.

# Telephone and internet access in the home

## DEFINITION

The proportion of the population with telephone and internet access in the home, as measured by the 2000 Living Standards Surveys.

## RELEVANCE

Being able to communicate and interact easily in the absence of frequent face-to-face contact helps maintain social connectedness. Access to telephones and access to communication via the internet, especially emails, are particularly relevant as social indicators because access to mail services is almost universal and fax use is principally by businesses. The internet also makes it easier to access a significant and growing repository of information and knowledge.

## CURRENT LEVEL

Access to a telephone is almost universal in New Zealand at 97 percent overall. Internet access is also relatively high at 41 percent, considering the relatively recent introduction of this communication technology.

Table SC1.1 **Proportion of population with telephone and internet access by population characteristics, 2000**

	Telephone %	Internet access %
<b>Population estimates</b>		
Total population	97.3	40.6
Dependent children	96.4	44.3
<b>Age groupings</b>		
Adults aged under 65	97.3	44.2
Adults aged over 65	99.2	11.8
<b>Family ethnicity</b>		
Māori economic family	92.3	28.3
Pacific economic family	88.1	16.4
European economic family	99.2	44.3
Other economic family	96.9	50.7
<b>Families with dependent children</b>		
One parent with dependent children	88.9	25.3
Two parents with dependent children	98.3	49.6
All families with dependent children	96.8	45.6
<b>Family employment/income status</b>		
People under 65, main income earner in full-time employment	98.8	49.0
People under 65, main income earner not in full-time employment	91.6	29.2
Adults over 65, with employment or other income (above New Zealand Superannuation)	99.5	18.2
Adults over 65, with little or no other income (above New Zealand Superannuation)	98.8	5.4

Source: Ministry of Social Development (2003b)

### ETHNIC DIFFERENCES

People living in Pacific economic families (those with any Pacific member) have the lowest telephone and internet access in the home (88 percent and 16 percent, respectively), followed by people living in Māori economic families (92 percent and 28 percent). The highest level of internet access in the home was among people living in other non-European economic families (51 percent).

### AGE GROUP AND EMPLOYMENT OR INCOME DIFFERENCES

Adults over 65 years are more likely than average to have a telephone, but much less likely to have internet access in their home (12 percent compared to 44 percent among adults under 65). Older people with no income other than New Zealand Superannuation have the worst level of internet access in the home (5 percent).

Among adults under 65, telephone and internet access in the home is lower than average where the main earner in the family is not in full-time employment, the difference being more striking in the case of internet access (29 percent compared to 49 percent).

### DIFFERENCES BY FAMILY TYPE

Overall, families with dependent children are more likely than average to have internet access in the home. However, sole-parent families are about half as likely as two-parent families to have internet access (25 percent compared to 50 percent) and considerably less likely than two-parent families to have a telephone (89 percent compared to 98 percent).

### INTERNATIONAL COMPARISON

New Zealand compares relatively favourably with other countries in relation to access to the internet. In 2000, 14 out of every 100 New Zealanders were internet subscribers, compared with an OECD median of 11. New Zealand ranked ninth out of 26 OECD countries.<sup>90</sup>

# Participation in family/whānau activities and regular contact with family/friends

## DEFINITION

The proportion of the population who participated in family/whānau activities and the proportion of the population who had family or friends over for a meal at least once a month, as measured by the 2000 Living Standards Surveys. ‘Family/whānau’ activities were not specified in the surveys; respondents interpreted them in their own ways.

## RELEVANCE

An important reflection of social connectedness is found in the extent to which people are in regular contact with family and friends, and the extent to which they participate in family (whānau) activities.

## CURRENT LEVEL

A high proportion of the population say they take part in family/whānau activities (86.8 percent) and more than two-thirds (70.5 percent) report having had family or friends over for a meal at least once a month.

Table SC2.1 **Proportion of population doing family activities and having family/friends over for a meal, by population characteristics**

	Participate in family activities %	Have family/friends over for a meal %
<b>Population estimates</b>		
Total population	86.8	70.5
<b>Age groupings</b>		
Adults aged under 65	86.5	72.0
Adults aged 65 and over	80.4	60.5
<b>Family ethnicity</b>		
Māori economic family	90.9	68.9
Pacific economic family	86.1	79.6
European economic family	87.6	70.0
Other economic family	71.8	70.3
<b>Families with dependent children</b>		
One parent with dependent children	87.4	65.4
Two parents with dependent children	90.0	72.6
All families with dependent children	89.6	71.4
<b>Family employment/income status</b>		
People under 65, main income earner in full-time employment	89.0	73.4
People under 65, main income earner not in full-time employment	83.4	66.9
Adults 65 and over, with employment or other income (above New Zealand Superannuation)	85.5	69.3
Adults 65 and over, with little or no other income (above New Zealand Superannuation)	75.4	51.8

Source: Ministry of Social Development (2003b)



## ETHNIC DIFFERENCES

According to the surveys, people living in Māori economic families are the most likely to take part in family or whānau activities (91 percent), while Pacific and European people have average levels of participation (86 and 88 percent, respectively). Those living in Other economic families are much less likely than average to take part in such activities (72 percent), perhaps reflecting the fact this group may include many new migrants whose families live overseas. Sharing meals in the home is more common among Pacific peoples (80 percent) than among people of other ethnic groups (70 percent).

## AGE GROUP AND EMPLOYMENT OR INCOME DIFFERENCES

Adults over 65 years are less likely to engage in family activities (80 percent) and considerably less likely to have people over for a meal (61 percent), particularly those with no income other than New Zealand Superannuation (52 percent).

Among adults under 65, participation in family activities and sharing meals is somewhat lower than average where the main earner in the family is not in full-time employment (83 percent and 67 percent).

## DIFFERENCES BY FAMILY TYPE

Not surprisingly, families with dependent children are more likely than average to participate in family or whānau activities, and there is little difference between sole-parent and two-parent families on this measure of social connectedness. However, sole-parent families are less likely than two-parent families to have friends or family over for a meal (65 percent compared to 73 percent).

# Trust in others

## DEFINITION

The proportion of the population aged 15 and over reporting that people can ‘almost always’ or ‘usually’ be trusted as reported in the Social Wellbeing Survey 2004.

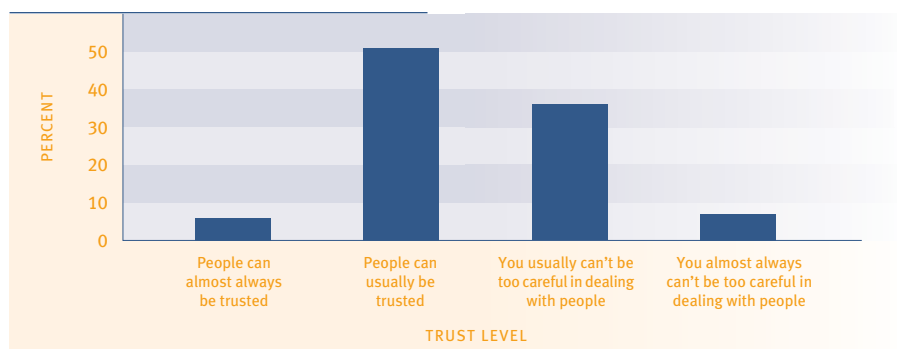
## RELEVANCE

Trust in others is an important indicator of how people feel about members of their community. High levels of trust facilitate co-operative behaviour among people and contribute to people’s ability to develop positive relationships with others.

## CURRENT LEVEL

Results from the Social Wellbeing Survey 2004 show that over one-half (57 percent) of New Zealanders believe that people can be trusted, with 6 percent reporting that ‘people can almost always be trusted’ and 51 percent reporting that ‘people can usually be trusted’.

Figure SC3.1 Levels of trust in other people, 2004



Source: Ministry of Social Development (2004)

## SEX DIFFERENCES

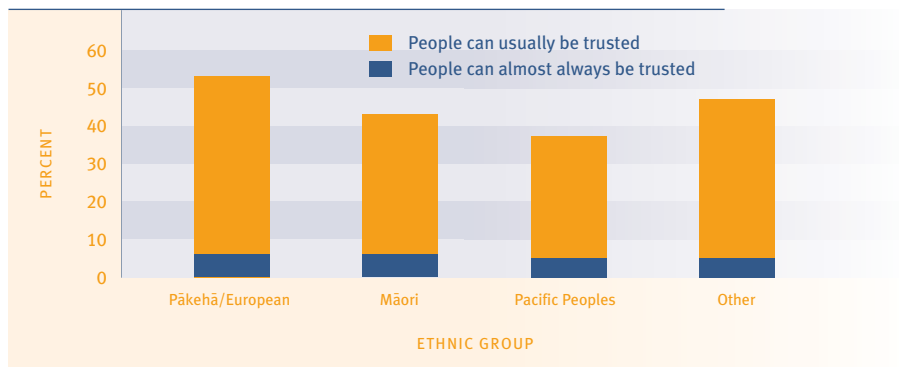
Males (60 percent) are more likely than females (54 percent) to report that people can be trusted. Both sexes have the same proportion of supporters (6 percent) for the statement ‘people can almost always be trusted’, but a higher proportion of men (54 percent) than women (48 percent) indicated that ‘people can usually be trusted’.

There are only minor age differences concerning trust in others. Across all age groups over 50 percent of New Zealanders report that people can ‘usually’ or ‘almost always’ be trusted.

## ETHNIC DIFFERENCES

Pākehā/Europeans showed the highest overall level of trust in others with 59 percent responding that people could ‘almost always’ or ‘usually’ be trusted. Māori and Pacific people are more cautious, with only 49 percent of Māori and 42 percent of Pacific people reporting that people could be trusted. Fifty-three percent of people in other ethnic groups (including Asians) indicated that they thought that people could ‘almost always’ or ‘usually’ be trusted.

Figure SC3.2 **Proportion of respondents reporting that people can 'almost always' or 'usually' be trusted, by ethnic group, 2004**

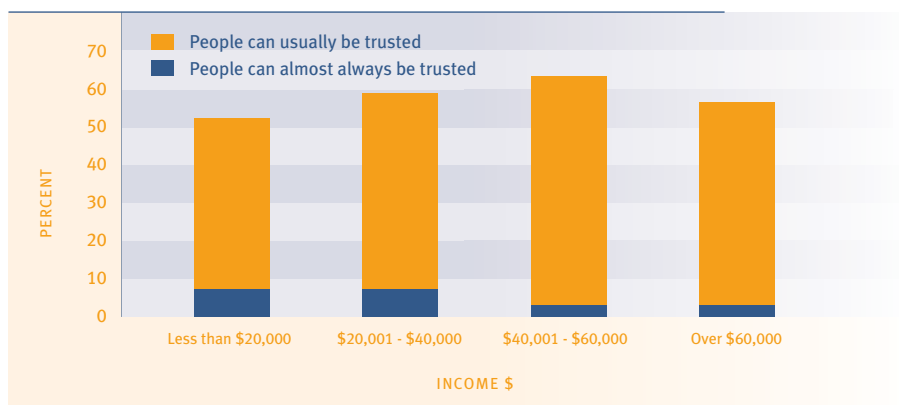


Source: Ministry of Social Development (2004)

## PERSONAL INCOME DIFFERENCES

Across all income levels a majority of New Zealanders indicated that people could 'almost always' or 'usually' be trusted. New Zealanders with personal incomes between \$40,001-60,000 reported the highest overall levels of trust. Those with incomes \$20,000 or less reported lower levels of trust overall, with only 52 percent indicating that they thought people could be trusted 'almost always' or 'usually'.

Figure SC3.3 **Proportion of respondents reporting that people can 'almost always' or 'usually' be trusted, by personal income, 2004**



Source: Ministry of Social Development (2004)

## INTERNATIONAL COMPARISON

In 1998, 49 percent of New Zealanders said that most people can be trusted. This was high compared to an OECD median of 38 percent in 1995/1996. New Zealand ranked sixth out of 26 OECD countries. Norway had the best outcome in the OECD, with 65 percent of Norwegians stating that most people can be trusted. Outcomes for other countries include Canada (sixth, 52 percent), Australia (13th, 40 percent), the United States (14th, 36 percent), and the United Kingdom (18th, 31 percent).

# Loneliness

## DEFINITION

The proportion of people aged 15 and over who reported feeling lonely sometimes, often, or always during the previous 12 months, as reported in the Social Wellbeing Survey 2004.

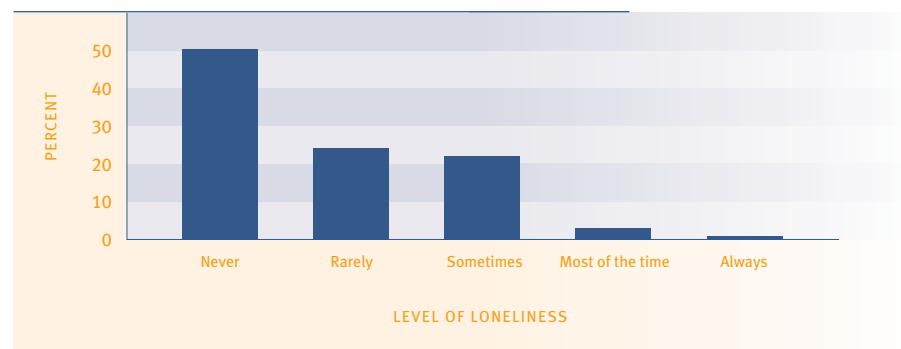
## RELEVANCE

Social contact is of fundamental importance to people: humans are social creatures. Self-assessed loneliness is a proxy indicator of whether people are happy with the amount and quality of social contact that they get. As well as being an undesirable state in itself, loneliness may also contribute to poor outcomes in other areas including adverse health problems such as stress, anxiety or depression.

## CURRENT LEVEL

In the Social Wellbeing Survey 2004, 26 percent of New Zealanders reported having felt lonely over the last twelve months. Twenty-two percent said they felt lonely 'sometimes' while a small group of people reported more frequent loneliness. Three percent said they were lonely 'most of the time' and 1 percent said that they 'always' feel lonely. Unemployed people and people without a partner were more likely than New Zealanders as a whole to report feeling lonely (41 percent and 37 percent respectively).

Figure SC4.1 **Proportion of the population reporting loneliness, 2004**



Source: Ministry of Social Development (2004)

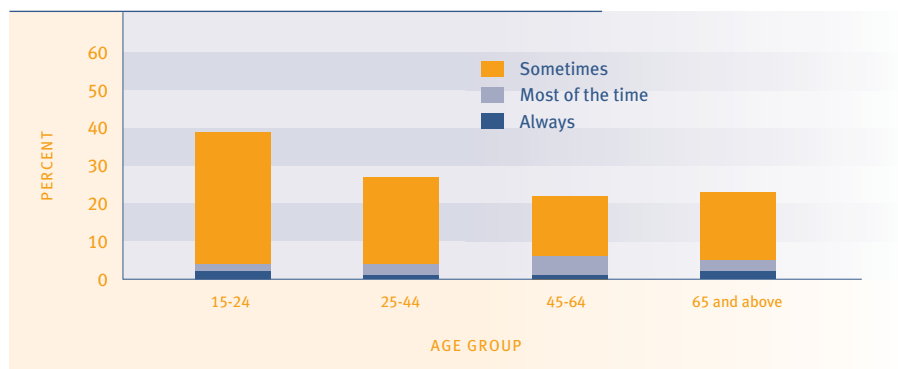
## SEX DIFFERENCES

Overall, females (28 percent) were more likely to report having felt lonely in the last twelve months than males (24 percent). Twenty-six percent of females said they felt lonely 'rarely', compared to 22 percent of males, and 23 percent of females said they were 'sometimes' lonely, compared to 20 percent of males.

## AGE DIFFERENCES

Loneliness is most prevalent amongst those aged 15-24. Thirty-seven percent of people in this age group experienced feelings of loneliness 'sometimes', 'often', or 'always' compared to an average of 26 percent across all age groups. The proportion of people reporting feelings of loneliness tends to decrease as age increases. Only 26 percent of those aged 25-44, 22 percent of 45-64 year olds, and 23 percent of those aged over 65 reported feeling lonely 'sometimes', 'often', or 'always'. However, even in older age groups there is a small proportion of people who report significant loneliness.

Figure SC4.2 **Proportion of people experiencing loneliness always, often or some of the time, by age, 2004**



Source: Ministry of Social Development (2004)

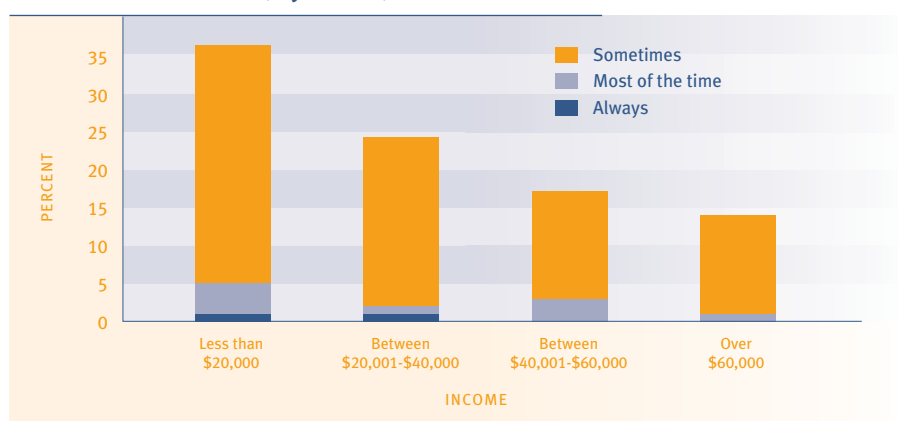
## ETHNIC DIFFERENCES

About one quarter of Māori, Pākehā/European and Pacific peoples stated that they are lonely 'sometimes', 'often', or 'always' and there is little difference between these groups in overall levels of loneliness. Between 21-25 percent experience loneliness 'rarely', 19 to 20 percent are 'sometimes' lonely, and 5 percent of all three groups are lonely either 'most of the time' or 'always'. In contrast, 36 percent of people in 'other' ethnic groups (including Asians) felt lonely in the past twelve months.

## PERSONAL INCOME DIFFERENCES

People with personal incomes of \$20,000 or less reported higher rates of loneliness than people with higher incomes: 36 percent said they felt lonely 'sometimes', 'often', or 'always' in the past 12 months, compared to 24 percent of those earning \$20,000 to \$40,000 and 17 percent of those with incomes between \$40,000 and \$60,000. Only 14 percent of those whose incomes were over \$60,000 indicated that they felt lonely. Of those on less than \$20,000, 6 percent report being lonely 'most of the time' compared to 3 percent or less for those with incomes over \$20,000.

Figure SC4.3 **Proportion of people experiencing loneliness always, often or some of the time, by income, 2004**



Source: Ministry of Social Development (2004)

# Contact between young people and their parents

## DEFINITION

The proportion of secondary school students aged 12-18 years who reported that most weeks they were able to spend enough time with Mum and/or Dad (or someone who acts as Mum and/or Dad).

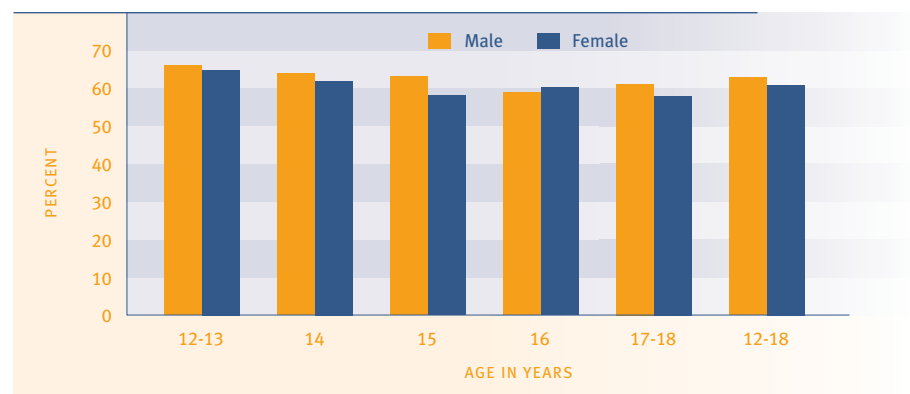
## RELEVANCE

Healthy relationships are built through both the quantity and quality of time spent together. Young people having enough time with their parents is a proxy indicator of the extent to which those in need of care and nurturing receive appropriate support.

## CURRENT LEVEL

In 2001, 63 percent of male students and 61 percent of female students reported that most weeks they were able to spend enough time with at least one parent.

Figure SC5.1 **Students reporting they spent enough time with their parent(s), 2001**



Source: Adolescent Health Research Group, (2003a)

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## AGE AND SEX DIFFERENCES

There were no significant differences by sex in the proportion of students reporting that they spent enough time with at least one parent. Girls at 15 years of age reported less often than younger boys and girls (12-13 years) that most weeks they were able to spend enough time with Mum or Dad.

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## ETHNIC DIFFERENCES

Fifty-five percent of Māori students and 65 percent of European students reported that most weeks they were able to spend enough time with Mum and/or Dad. The difference was statistically significant after adjusting for age, sex and socio-economic differences between the two ethnic groups. Pacific students (60 percent), Asian students (65 percent) and students of other ethnic groups (60 percent) showed no statistically significant difference from New Zealand European students after adjusting for age, sex and socio-economic differences.

# Conclusion

*The Social Report 2004* uses 43 indicators to document social wellbeing in New Zealand. These indicators present a snapshot of wellbeing in New Zealand, how it has changed over time, how different groups within our society fare, and how New Zealand compares with other countries. This section summarises the findings from these indicators.

The indicators for which we have long-term trend data show that many aspects of wellbeing have been improving in New Zealand. Compared to the mid 1990s, New Zealanders are on average living longer, they are more highly educated, less likely to be unemployed, and more prosperous.

Five indicators show no change since the mid 1990s. These are: absence of corruption, income inequality, housing affordability, criminal victimisation, and the proportion of women in government.

Two indicators - the proportion of school leavers with higher qualifications and voter turnout - have worsened slightly.

Nine of the 43 indicators are new to the social report this year, and together they provide information on a number of the non-economic dimensions of wellbeing. The new indicators show a high level of trust between New Zealanders. The large majority of New Zealanders also rarely or never experience loneliness, though unemployed people, people on low incomes, and young people are considerably more likely to feel lonely. Almost one in five employed people are dissatisfied with their work/life balance.

We also provide detail on the extent of overall life satisfaction of New Zealanders. Approximately 80 percent of adults in our recent Social Wellbeing Survey indicate being satisfied or very satisfied with their lives.

Social wellbeing in New Zealand also compares favourably with other developed countries.

New Zealand is in the top half of the OECD for the majority of indicators for which we are able to compare ourselves, including: indicators of life expectancy, a range of education indicators, employment and unemployment, trust in others, and absence of corruption. New Zealanders also report very high levels of satisfaction with their lives compared to people in many OECD countries.

New Zealand is in the bottom half of the OECD in relation to a smaller number of indicators. New Zealand is a below-average performer in relation to per capita incomes, income inequality, rates of child deaths by maltreatment, suicide, obesity, and quantitative and document adult literacy.

*The Social Report 2004* also enables an analysis of how different groups within our society fare. Across a wide variety of indicators, people with low incomes, Māori, Pacific peoples and other non-European/Pākehā ethnic groups tend to experience poorer average outcomes than the rest of the population. Comparisons between age groups, and between men and women reveal a more mixed picture.

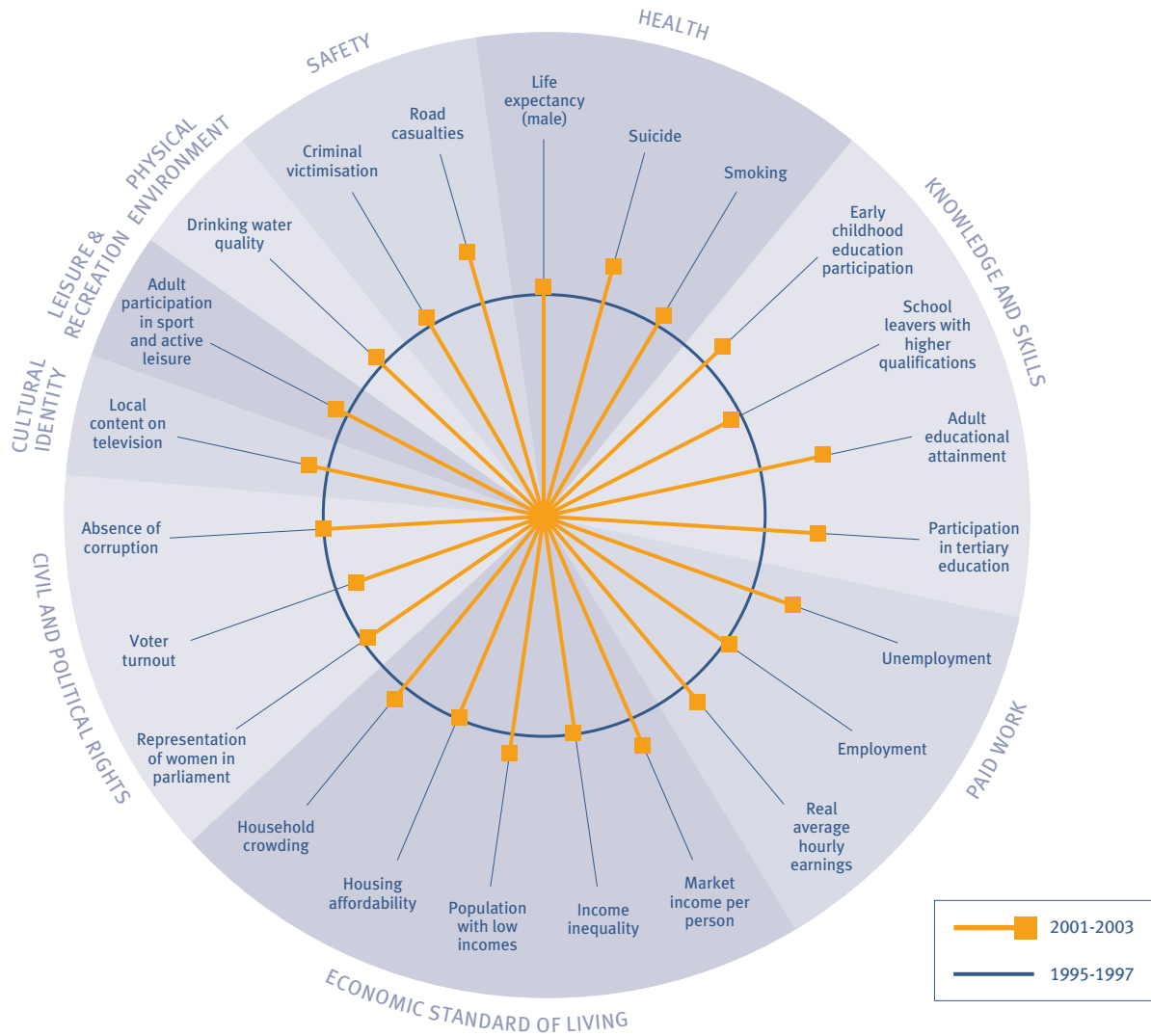


# Is social wellbeing improving?

**Social wellbeing in New Zealand has improved since the mid-1990s**

The diagram below compares wellbeing today with our performance in 1995-1997, using those indicators for which we have trend data.

Figure C01 **Changes in social wellbeing, 1995-1997 to 2001-2003**



## Interpreting 'Changes in social wellbeing 1995/97 to 2001/03'

The blue circle represents average performance against each indicator between 1995 and 1997, and the spokes represent the most recent performance, where possible averaged over the most recent three years. Where a spoke falls outside of the circle, this means that outcomes have improved since the mid-1990s; the further from the circle it falls, the more significant the improvement. Where a spoke falls within the circle, outcomes in this area have deteriorated since

the mid-1990s; the further the spoke is from the blue circle, the more pronounced the deterioration. There are, however, some important limitations on this style of presentation. In particular, we cannot directly compare the size of changes for different indicators. The absence of trend data for some indicators also means that we can only show 23 of the 43 indicators used in *The Social Report 2004*.

HEALTH  
KNOWLEDGE AND SKILLS  
PAID WORK  
ECONOMIC STANDARD OF LIVING  
CIVIL AND POLITICAL RIGHTS  
CULTURAL IDENTITY  
LEISURE AND RECREATION  
PHYSICAL ENVIRONMENT  
SAFETY  
SOCIAL CONNECTEDNESS

Of the 23 indicators for which a time series is available, 16 have shown some improvement since the mid 1990s. There has been no change in five of the indicators. Two of the indicators - the proportion of young people leaving school with higher qualifications, and voter turnout - have deteriorated slightly since the mid-1990s.

The indicators enable overall conclusions about only some social report domains.

Indicators of life expectancy, suicide, and cigarette smoking point to improvements in the health of the population since the mid-1990s.

In the knowledge and skills area there is a generally positive picture. There has been significant growth in participation in early childhood and tertiary education, and improvements in the educational attainment of the adult population. However there has been a slight decline in the proportion of young people who leave school with higher qualifications.

The overall prosperity of the nation, average hourly earnings, and unemployment have all improved since the mid-1990s, but there has been little change in income inequality and housing affordability. The last two indicators are however based on data from 2001, and conditions may have changed since then.

In the area of civil and political rights there is a mixed picture. While there has been no change as measured by indicators of absence of corruption and the proportion of women in parliament, there has been a decline in voter turnout.

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**Social wellbeing is also better today than during the mid-1980s**

Many of the indicators for which there is long-term data trend available also show that wellbeing is as good as, or better now, than during the mid-1980s. New Zealanders are on average living longer lives, are better educated, and are more likely to be employed. There are some important exceptions, however, with housing affordability, poverty, income inequality, and voter turnout having deteriorated.

Most of these indicators have steadily improved over the last two decades. The exceptions are those directly linked to economic conditions. Poverty, unemployment, and suicide worsened during the 1990s but have subsequently improved, though not to mid-1980s levels in the case of poverty.

## **Are New Zealanders satisfied with their lives?**

*The Social Report 2004* measures a range of aspects of social wellbeing. For the first time, we have also measured the overall life satisfaction of New Zealanders.

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**Overall, New Zealanders report relatively high levels of life satisfaction**

In 2004, 27 percent of New Zealanders reported feeling very satisfied with their life. Fifty four percent reported feeling satisfied. Only 5 percent of people indicated that they felt dissatisfied with their life.<sup>91</sup>

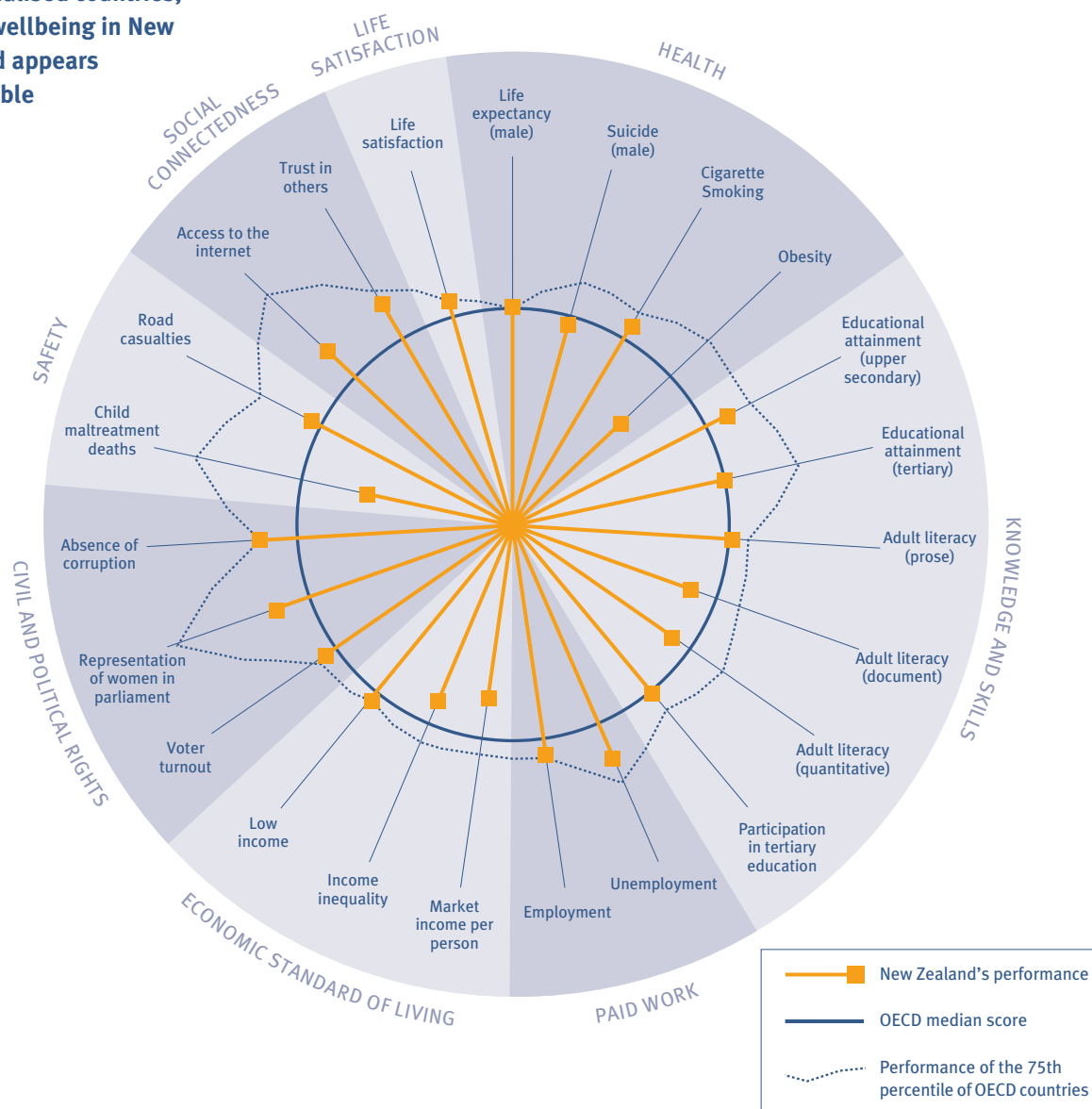
There is a surprising lack of variation in the average levels of satisfaction across different groups in the population. For example, despite marked difference in outcomes across a wide range of indicators, there is very little variation in average life satisfaction between different ethnic groups. The factors that do seem to make a difference include: low income, unemployment, and loneliness which have a small adverse effect; and having a child, which has a small beneficial impact.

Overall life satisfaction is high in New Zealand compared to other countries, with New Zealand being amongst the top quarter of OECD countries.<sup>92</sup>

## How does New Zealand compare to other OECD countries?

Compared to other industrialised countries, social wellbeing in New Zealand appears favourable

Figure CO2 Social wellbeing in New Zealand relative to the OECD



### Interpreting 'Social wellbeing in New Zealand relative to the OECD'

Figure CO2 shows wellbeing in New Zealand relative to the OECD against 23 indicators. The blue circle represents the OECD median score for each indicator, and the spokes represent outcomes in New Zealand relative to the OECD median. The irregular shape outside of the median circle represents outcomes for the 75th percentile. Where a spoke falls inside the circle, New Zealand is in the bottom half of the OECD. Where the spoke falls outside of the circle, outcomes in New Zealand are better than the OECD median.

Where a spoke falls past the irregular shape, New Zealand makes it to the top quarter of the OECD. **SOME CAUTION IS REQUIRED WITH THIS DATA:** International comparisons are frequently difficult to interpret because of differences between countries in methods used to collect, classify and record social data. We only show 23 of the 43 indicators used in *The Social Report 2004* in the graph, because comparable international data is not available for each indicator.

New Zealand makes it into the top half of the OECD for roughly two thirds of the 23 indicators for which internationally comparable data is available.

New Zealand performs well in the area of civil and political rights. We consistently have one of the lowest levels of perceived corruption across the OECD, and are in the top half of the OECD both for the percentage of women in parliament, and for voter turnout.

New Zealand also performs strongly for both our relatively high employment rates and relatively low unemployment rates. New Zealand's performance has improved markedly in this area since the early 1990s.

New Zealand appears to sit around the middle of the OECD for our performance in the area of health. Life expectancy in New Zealand is similar to the median life expectancy in the OECD, though there is a relatively narrow range of outcomes across the OECD for this indicator. Our position declined over the 1970s and 1980s but improved in the 1990s. We perform well for the prevalence of cigarette smoking but have relatively high suicide rates. We are the sixth worst performer for obesity rates.

In the area of knowledge and skills, New Zealand is at or near the OECD median for adult literacy, for participation rates in tertiary education for the 20-29 year age group, and for the proportion of adults with tertiary qualifications. None of the measures used in this report enable us to look at the relative performance of children and young people. However results from the OECD's PISA study, which is designed to look at trends in student achievement across time in 32 countries, ranked New Zealand 15 year-olds near the top for their overall performance.<sup>93</sup> However, compared to other countries, New Zealand has greater differences between the best and poorest achieving students – a pattern also reflected in other international studies of school students.

New Zealand sits below the middle ranked OECD country for Gross Domestic Product (GDP) per capita. We also do poorly for income inequality. However, we are slightly better than the OECD median in relation to the proportion of the population on low incomes.

We do not have enough comparable international data in the safety domain to make any strong conclusions. However, there is some evidence to suggest that New Zealand has relatively high rates of child maltreatment deaths, though there is some concern about the comparability of such data across countries.

Lastly, New Zealanders rate themselves highly in terms of life satisfaction and overall happiness. Out of 25 OECD countries, New Zealand has the fifth highest percentage of the population who are satisfied with their lives.

## The distribution of social wellbeing in New Zealand

The indicators used in *The Social Report 2004* enable us to compare how social wellbeing differs across broad groups within the New Zealand population. It is worth noting however, that these comparisons are for population group averages, and that in most cases, the variation in outcomes between members of any one group will be much greater than between group averages.

### There are systematic differences across a wide variety of indicators by age

The overall risk of mortality and incidence of disability increases with age. Older people are less likely to have higher qualifications or higher literacy levels. Those aged 65 years or more are also less likely to participate in family activities, engage in cultural and arts activities, or to have internet access.

Employment levels and average earnings from wage and salary jobs peak in the 'middle years'. However, this group also reports the greatest dissatisfaction with work/life balance and available leisure time.

Younger people report higher levels of loneliness. They are more likely than older age groups to be subject to criminal victimisation and road casualties. Younger people also have the highest rates of unemployment and the lowest rates of voting in general elections.

The risk of poverty, low living standards and household crowding are all greater for children.

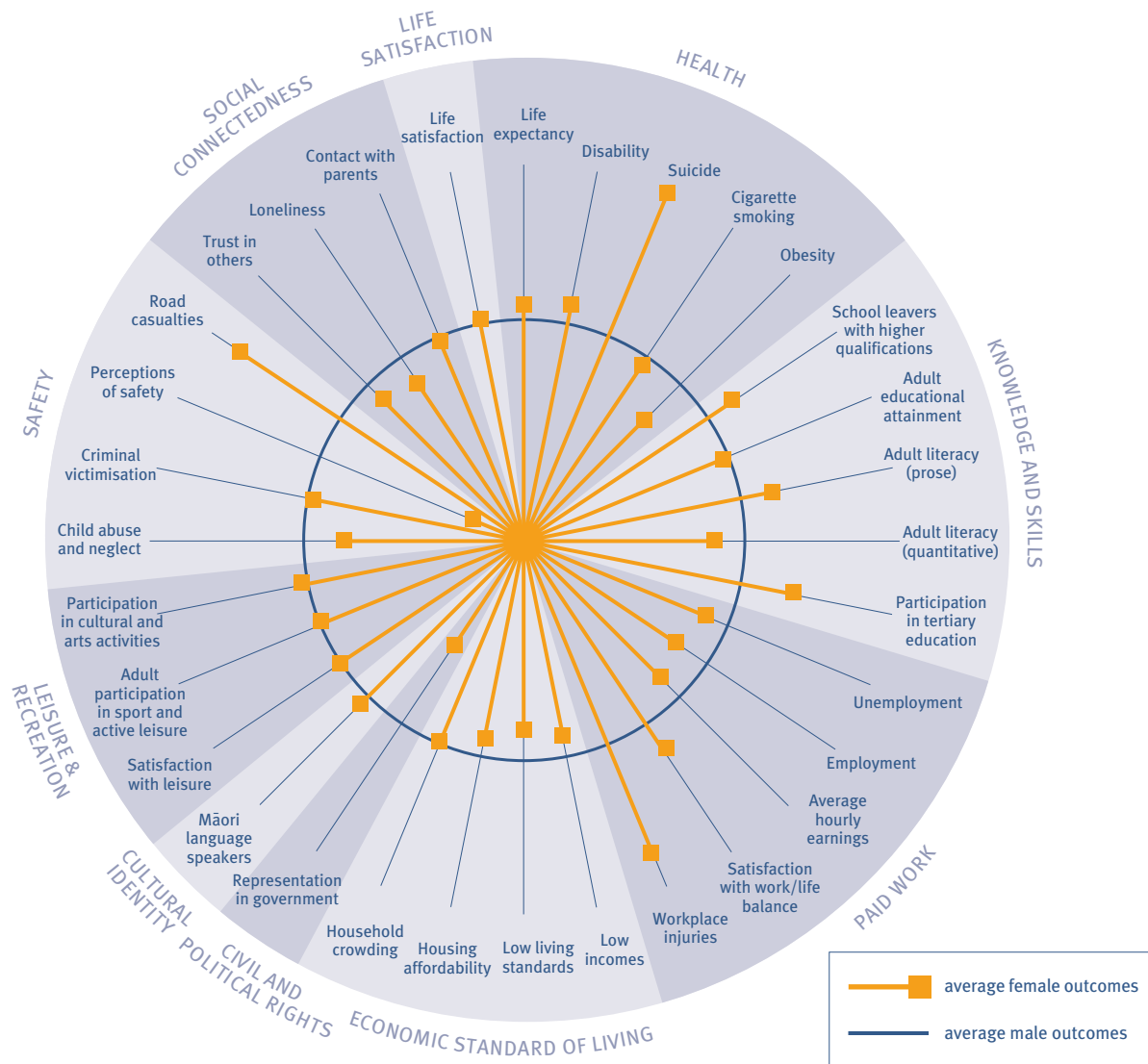
### Sex differences are apparent across a range of indicators of social wellbeing

Men have a lower life expectancy and higher rates of suicide. Men also have higher rates of workplace injury and of death and injury from road crashes. They are less likely than women to leave school with higher qualifications, have lower rates of tertiary participation, and indicate that they are more concerned about their work/life balance.

Women have much lower levels of representation in local and central government than men. Women also have lower rates of employment than men, lower hourly wages and a higher risk of poverty. Girls are less likely than boys to participate in active leisure, while women have higher rates of obesity.

There is no reported difference in overall levels of victimisation between men and women. However, girls are more likely than boys to be subject to child abuse and neglect, and women are more likely to report feeling unsafe than men. Women are also slightly less trusting of others, and are more likely to report experiencing loneliness than men.

Figure C03 **Social wellbeing for women, relative to men**



### Interpreting ‘Social wellbeing for women, relative to men’

The blue circle represents average male outcomes against each indicator, and the spokes represent outcomes for women. Where a spoke falls outside of the circle, this means that outcomes for women are better than for men; the further the spoke from the circle, the more pronounced the difference. Where a spoke falls within the circle,

outcomes for women are worse than for men; the further the spoke is from the blue circle, the more pronounced this effect. There are, however, some important limitations on this style of presentation. In particular, we cannot directly compare the size of changes for different indicators.

### There are clear ethnic differences across a range of indicators of social wellbeing

The majority of indicators for which we have time series data show social wellbeing improving for Māori since the mid 1990s. In many instances improvements for Māori have been greater than for Europeans/Pākehā. For example, the gaps between Māori and Europeans/Pākehā for life expectancy, tertiary participation, and unemployment have narrowed since the mid 1990s.

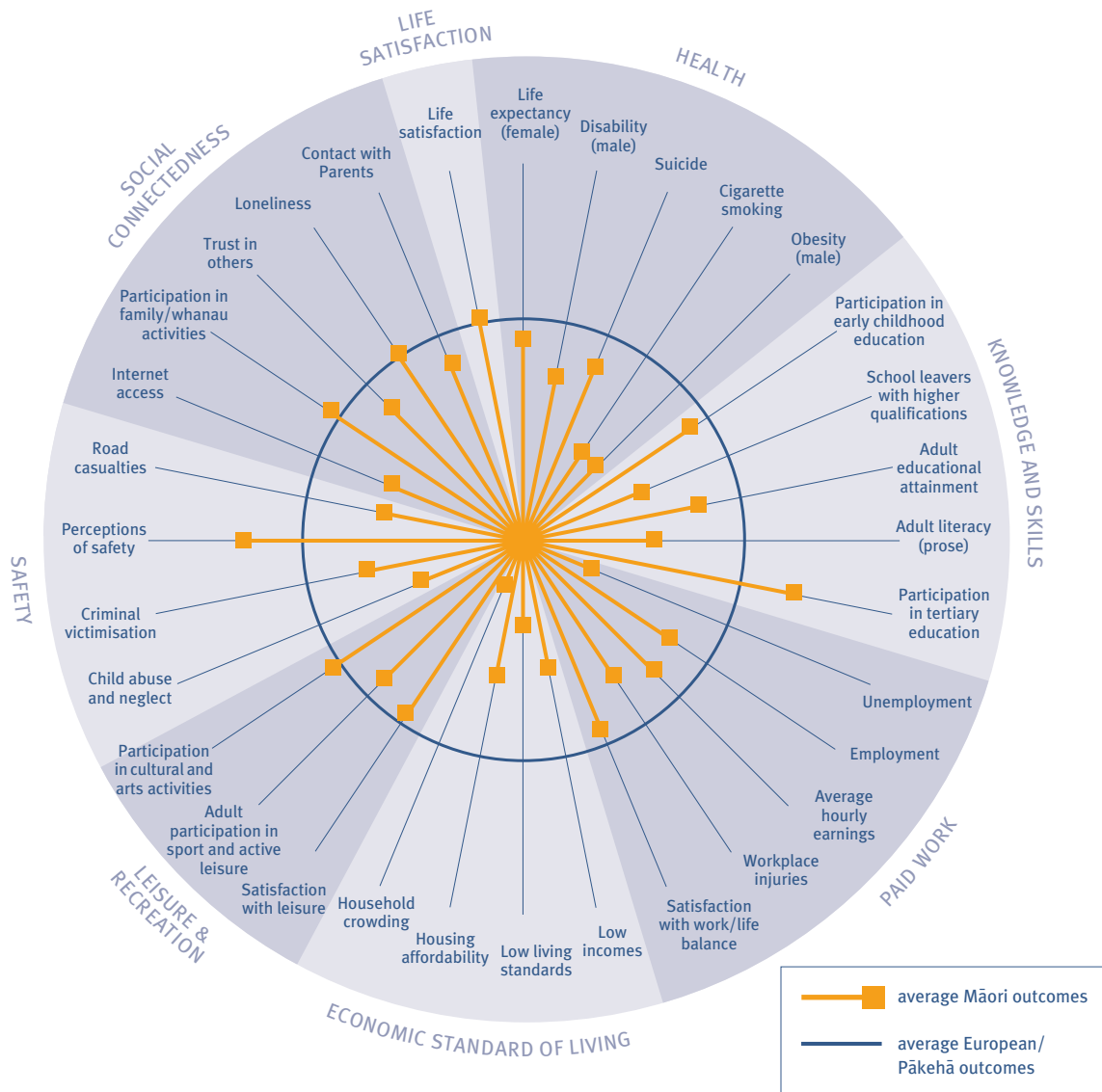
Wellbeing for Māori is however still relatively poor in the areas of health, paid work and economic standards of living. Māori report feeling safer than

Europeans/Pākehā, but have higher levels of criminal victimisation, child abuse and neglect, and are more likely to be injured or killed in road crashes.

The difference in outcomes is less pronounced in the knowledge and skills area, with Māori being more likely than Europeans/Pākehā to participate in tertiary education. However, Māori are less likely than Europeans/Pākehā to participate in early childhood education, less likely to leave school with higher qualifications, and have lower levels of adult literacy.

Māori report slightly more participation in cultural and arts activities and family/whānau activities than Europeans/Pākehā.

Figure CO4 **Social wellbeing for Māori, relative to Europeans/Pākehā**



### Interpreting 'Social wellbeing for Māori, relative to Europeans/Pākehā'

The blue circle represents average outcomes for Europeans/Pākehā against each indicator and the spokes represent outcomes for Māori. Where a spoke falls outside of the circle this means that outcomes for Māori are better than for Europeans/Pākehā; the further the spoke from the circle the more pronounced the difference. Where a spoke

falls within the circle outcomes for Māori are worse than for Europeans/Pākehā; the further the spoke is from the blue circle the more pronounced this effect. There are, however, some important limitations on this style of presentation. In particular we cannot directly compare the size of changes for different indicators.

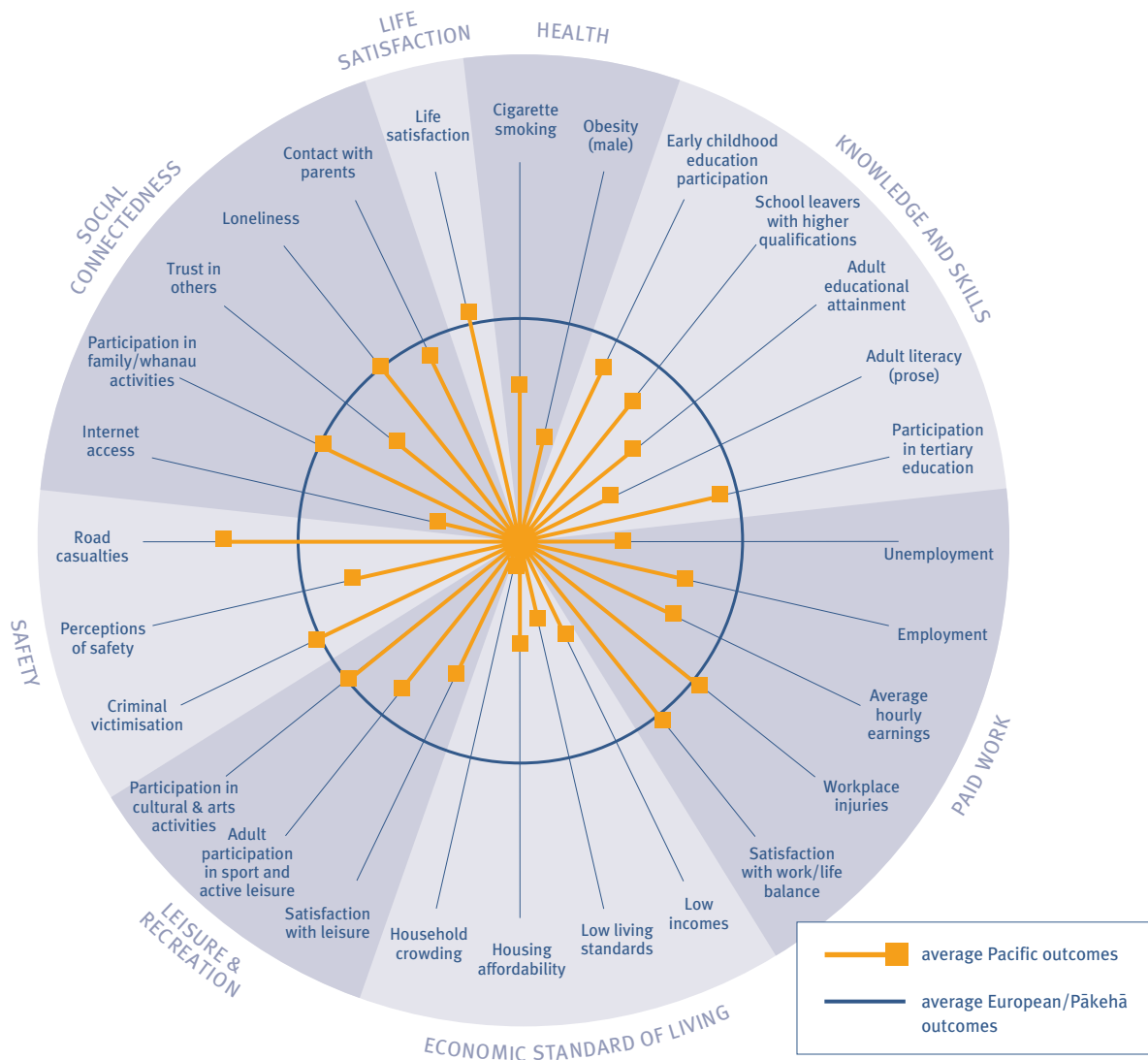


The majority of indicators for which we have time series data, show social wellbeing has also improved for Pacific peoples since the mid 1990s. There has also been a reduction in the gap between Pacific peoples and Europeans/Pākehā for some indicators, including unemployment and educational attainment.

Pacific peoples however still have higher levels of unemployment, and are at greater risk of poverty and household crowding than Europeans/Pākehā. Pacific adults report lower levels of participation in active sport and leisure and have higher rates of cigarette smoking and obesity than Europeans/Pākehā. Pacific peoples also do relatively poorly in the area of knowledge and skills.

Pacific people are less likely to be injured or killed on our roads, and there are few reported differences in levels of criminal victimisation.

Figure C05 **Social wellbeing for Pacific peoples, relative to Europeans/Pākehā**



### Interpreting 'Wellbeing for Pacific peoples relative to Europeans/Pākehā'

The blue circle represents average outcomes for Europeans/Pākehā against each indicator and the spokes represent outcomes for Pacific peoples. Where a spoke falls outside of the circle this means that outcomes for Pacific peoples are better than for Europeans/Pākehā; the further the spoke from the circle the more pronounced the difference.

Where a spoke falls within the circle outcomes for Pacific peoples are worse than for Europeans/Pākehā; the further the spoke is from the blue circle the more pronounced this effect. There are, however, some important limitations on this style of presentation. In particular we cannot directly compare the size of changes for different indicators.



Only a limited number of indicators enable us to look at the outcomes for New Zealanders who identify with an ethnic group other than European/Pākehā, Māori, or Pacific. Those that do, show a mixed picture. People of 'other' ethnicity generally perform well in the area of knowledge and skills, particularly for tertiary participation and educational attainment. They are also more likely to take part in sport and active leisure, and to be satisfied with their leisure time. However, people of 'other' ethnicity are more likely than Europeans/Pākehā to be unemployed and to have a low standard of living. They may also be more socially isolated than other ethnic groups – they have higher rates of loneliness, and are less likely to have family and friends over for dinner.

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**There is a strong connection between low income and poor outcomes in many areas of wellbeing**

People living in materially deprived communities have a lower life expectancy, higher rates of cigarette smoking and obesity, and lower levels of educational achievement. Adults with low incomes are less likely to vote. Low income families are also less likely than those on higher incomes to have internet connections, while adults with low incomes report higher levels of loneliness, and lower levels of trust in others.

## SUMMARY OF INDICATORS

Indicators	Current overall level of indicator (most recent year)	Variation within the population	Is this aspect of the quality of life improving overall?	How does this aspect of the quality of life compare with the OECD average (median)?
<b>Health</b>				
<b>Health expectancy</b>	64.8 years for males and 68.5 years for females (2001)	Lower for males and Māori	Improved for females	No comparison available
<b>Life expectancy</b>	76.3 years for males and 81.1 years for females (2000-02)	Lower for males, Māori and Pacific peoples and those living in deprived areas	Improving	Average for both males and females
<b>Disability requiring assistance</b>	10.2 % for males and 9.3 % for females (age standardised rate)	Higher for Māori	No change since 1996/97	No reliable comparison available
<b>Suicide</b>	11.7 per 100,000 (age-std rate for all ages); youth 15–24 years, 20.0 per 100,000 (2001)	Suicide deaths higher for males, youth, young adults and Māori; attempted suicide higher for females	Improved since 1998	Average for all ages; poor for male youth
<b>Prevalence of cigarette smoking</b>	25% of population aged 15 years and over smoke cigarettes (2002)	Higher rates among young people, Māori, Pacific peoples and those living in deprived areas	Improved to 1991, steady since	Good for males, poor for females
<b>Obesity</b>	17% for population 15+ (1997); 10% for children 5-14 years (2002)	Higher for females, Pacific people, Māori, females in deprived areas	Worsened up to 1997. No more recent data	Poor

Indicators	Current overall level of indicator (most recent year)	Variation within the population	Is this aspect of the quality of life improving overall?	How does this aspect of the quality of life compare with the OECD average (median)?
<b>Participation in early childhood education</b>	'Apparent' participation rate of 94% for 3 year olds and 102% for 4 year olds (2003)	Māori and Pacific rates lower than non-Māori	Improving	No robust comparison available
<b>School leavers with higher school qualifications</b>	63% of school leavers with at least Sixth Form Certificate (2002)	Proportions lower for males, Māori and Pacific school leavers	Improved to 1991, slight decline since 1998	No comparison available
<b>Educational attainment of the adult population</b>	74% of the population aged 25–64 years with at least an upper secondary qualification; 15% of the population aged 25–64 years with tertiary (bachelor degree+) qualifications (2003)	Proportions lower for older people, women, Māori and Pacific peoples	Improving	Good for upper secondary and average for tertiary
<b>Adult literacy skills in English</b>	54% of population aged 16–65 have a level of literacy in English needed to meet the complex demands of everyday life and work; 50% meet the same standard for document literacy and 51% for quantitative (1996)	Literacy levels lower among older people, Māori and Pacific peoples and Other ethnic groups	No trend available	Average for prose literacy, but below average for document and quantitative
<b>Participation in tertiary education</b>	10.8% of population aged 15 and over enrolled in tertiary education institutions (2003)	Lower rates for males, students from deprived areas; higher for Māori at ages under 18 and over 25	Improving	No direct comparison available; average for 20-29 year olds

## Knowledge and Skills

Indicators	Current overall level of indicator (most recent year)	Variation within the population	Is this aspect of the quality of life improving overall?	How does this aspect of the quality of life compare with the OECD average (median)?
<b>Paid Work</b>				
Unemployment	4.7% of the labour force (2003)	Higher rates for young people, Māori, Pacific and Other ethnic groups	Improving since 1998 almost to mid-1980s levels	Good
Employment	72.5% of the population aged 15-64 years (2003)	Lower rates for young people, women, Māori, Pacific peoples and Other ethnic groups	Improved since 1998 to above mid-1980s levels	Good
Average hourly earnings	\$17.82 per hour for wage and salary earners (\$19.02 for males; \$16.57 for females)	Lower for Māori, Pacific, youth, females over 30	Improving	No comparison available
Workplace injury claims	141 claims per 1,000 full-time equivalent employees (2000/01)	Higher rates for men and Māori	No change over past year	No comparison available
Satisfaction with work/life balance	62% of the population say they are satisfied with their work/life balance	Men, Māori, people of "other" ethnicity, and people whose personal incomes are more than \$60,000 less likely to be satisfied with their work/life balance	No data	No comparison available

Indicators	Current overall level of indicator (most recent year)	Variation within the population	Is this aspect of the quality of life improving overall?	How does this aspect of the quality of life compare with the OECD average (median)?
Market income per person	RGNDI of \$27,237 per capita (in constant 1995/96 dollars) (2003)	Not measured	Improving	Poor
Income inequality	The household in the 80th percentile has an income 2.7 times the household in the bottom 20th percentile (2001)	Not relevant	Worsened to 1998 then stable	Poor in the mid 1990's
Population with low incomes	22.6% of population lives in economic family units with incomes below 60% of median (2001)	Higher rates among large families, sole parents, Māori or Pacific families, families from Other ethnic groups, families who rely on income-tested benefits and families in rented dwellings	Worsened to 1994 then improved slowly	Better than OECD median in mid 1990s
Population with low living standards	20% of the total population with restricted living standards (ELSI Levels 1–3) (2000)	As for population with low incomes	No trend data available	No comparison available
Housing affordability	24% of households spend more than 30% of income on housing (2001)	Higher proportions among Māori, Pacific or Other ethnic groups	Worsened to 1998 then stable	No comparison available
Household crowding	3.2% of individuals living in households requiring two or more additional bedrooms (2001)	More common among families with young children, youth, people in rental housing, Māori and Pacific peoples, and in South Auckland	Some improvement	No comparison available

## Economic Standard of Living

Indicators	Current overall level of indicator (most recent year)	Variation within the population	Is this aspect of the quality of life improving overall?	How does this aspect of the quality of life compare with the OECD average (median)?
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## Civil and Political Rights

Voter turnout (general elections)	72.5% of the population eligible to vote (2002)	Non-voters more likely to be on lower incomes, younger people, Māori or Pacific people	Worsened	Above average
Representation of women in government	28% of seats in parliament (2002 general election); 31% of elected members (2001 local authority elections)	Not relevant	Improvement, then marginal decline in latest year	Good
Perceptions of discrimination	Asians most common group perceived to be subject to discrimination	Not relevant	Deteriorated for people who are overweight, people with disabilities	No comparison available
Absence of corruption	New Zealand ranked third least corrupt nation with a Corruption Perceptions Index score of 9.5 (2003)	Not relevant	Steady	Very good

Indicators	Current overall level of indicator (most recent year)	Variation within the population	Is this aspect of the quality of life improving overall?	How does this aspect of the quality of life compare with the OECD average (median)?
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## Cultural Identity

Māori language speakers	25% of Māori report conversational fluency in Māori (2001)	Fluent speakers more likely to be older	No trend available	Not relevant
Language retention	Varied from 17% of Cook Island Maori to 81% of Koreans (2001)	Not relevant	No trend available	No comparison available
Local content programming on New Zealand television	42% of the prime time schedule (2003)	Not relevant	Improved since 2000	Below average

Indicators	Current overall level of indicator (most recent year)	Variation within the population	Is this aspect of the quality of life improving overall?	How does this aspect of the quality of life compare with the OECD average (median)?
<b>Leisure and Recreation</b>				
Satisfaction with leisure	68% of the population are satisfied overall with their leisure time (2004)	Those aged 25-44 years and people with personal incomes over \$40,000 report lower satisfaction rates	No trend available	No comparison available
Participation in cultural and arts activities	93% of adult population took part in cultural activities (2001/02)	Higher participation rates among young people	No trend available	No comparison available
Participation in sport and active leisure	70% of adults 18 and over, 66% of young people 5-17 years were physically active (2000/01)	Girls and Pacific young people; Maori and Pacific adults less likely to be physically active	Overall improvement, particularly for older adults; deterioration for Maori and Pacific young people	No comparison available



Indicators	Current overall level of indicator (most recent year)	Variation within the population	Is this aspect of the quality of life improving overall?	How does this aspect of the quality of life compare with the OECD average (median)?
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## Physical Environment

Air quality	PM10 levels exceeded recommended guidelines consistently in Christchurch (1995–2003) and Hamilton (1999–2000 and 2002–2003). Wellington levels exceeded guidelines in 2002 and 2003	Not reported	Steady	No comparison available
Drinking water quality	80% of the population had a water supply that conforms with the 1995 standards for E. Coli (2002)	Not reported	Steady	No comparison available

## Safety

Child abuse and neglect	7.4 substantiated notifications per 1,000 children aged 0–16 (2003)	Female and Māori children more likely to be assessed as abused or neglected	Trend cannot be reliably interpreted	Poor
Criminal victimisation	30% of population aged over 15 years were victims of criminal offending, either as individuals or members of households (2000)	Younger people and Māori more likely to have been a victim of crime	Similar to 1995 level	No reliable comparison available
Perceptions of safety	29% of population felt unsafe walking alone in their neighbourhood after dark	Higher among females, Pacific peoples	No trend available	No comparison available
Road casualties	11.5 deaths per 100,000 population (2003, provisional)	High rates among men, young people, Māori, and those aged 65 and over	Improvement since 1986	Average

Indicators	Current overall level of indicator (most recent year)	Variation within the population	Is this aspect of the quality of life improving overall?	How does this aspect of the quality of life compare with the OECD average (median)?
<b>Social Connectedness</b>				
Telephone and internet access in the home	97% of adult population have access to telephone and 41% to internet in their homes (2000)	Access less likely among Māori and Pacific families, families with unemployed adults and sole parent families	No trend available	Above average for internet
Participation in family/whānau activities and regular contact with family/friends	71% of adults had family or friends over for dinner at least once a month in the previous year and 87% engage in family/whānau activities (2000)	Older people and Europeans less likely to be involved in family activities	No trend available	No comparison available
Trust in others	57% of the adult population report that people can be trusted (2004)	Women, Māori, Pacific peoples and those with incomes less than \$20,000 report lower levels of trust	Improving	Good
Experience of loneliness	50% of the adult population report having never felt lonely in the past 12 months (2004)	People of 'other' ethnicity, young people, people whose incomes are less than \$20,000, unemployed people and unpartnered people report higher levels of loneliness	No trend available	No comparison available
Contact between young people and their parents	63% of male and 61% of female students spent enough time with Mum or Dad (2001)	Māori students more likely to report not getting enough time with their parents	No trend available	No comparison available

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# Changes to The Social Report 2004

This year's report comprises 10 outcome domains and 43 indicators, an expansion on the 2003 report which contained nine outcome domains and 38 indicators.

The most significant change to *The Social Report 2004* is the introduction of a new leisure and recreation outcome domain. This change was signalled in last year's social report and is the outcome of stakeholder consultation on the content of *The Social Report 2001*. Up until this year, we have been unable to include this outcome domain in the report because of data limitations.

In total, nine new indicators have been included in this year's report, two of which are in the leisure and recreation outcome domain. Four indicators from last year's report have been deleted. The introduction of these indicators represents the availability of new data sources and the development of better indicators from existing data sources over the past year, and is part of the ongoing process of refining and improving the indicators used in the social report. The table below summarises these changes.

Table AP1.1 Summary of new and deleted indicators in The Social Report 2004

Outcome domains/section	New indicators	Deleted indicators
<b>Paid Work</b>	<ul style="list-style-type: none"> <li>Average hourly earnings.</li> <li>Satisfaction with work/life balance. Proportion of the population who are satisfied with their work-life balance.</li> </ul>	<ul style="list-style-type: none"> <li>Proportion of the employed population working long-hours. This indicated has been replaced by the “satisfaction with work/life balance” indicator.</li> </ul>
<b>Civil and Political Rights</b>	<ul style="list-style-type: none"> <li>Absence of corruption. Corruption Perceptions Index (Transparency International) score out of 10.</li> </ul>	
<b>Culture and Identity</b>	<ul style="list-style-type: none"> <li>Language retention. The proportion of the resident population who can speak the ‘first language’ (excluding English) for ethnic groups (other than Māori) that have an established resident population in New Zealand.</li> </ul>	<ul style="list-style-type: none"> <li>Māori and Pacific children receiving Māori medium and Pacific medium education. This indicator had been used as a proxy measure of the extent to which people are able to retain and pass their culture and values on to future generations. It has been replaced by the “language retention” indicator.</li> </ul>
<b>Leisure and Recreation</b> (new outcome domain)	<ul style="list-style-type: none"> <li>Satisfaction with leisure. The proportion of people who are satisfied with their leisure.</li> <li>Participation in sport and active leisure.</li> </ul>	
<b>Social Connectedness</b>	<ul style="list-style-type: none"> <li>Trust in others. Proportion of the adult population reporting that people can always be trusted or can usually be trusted.</li> <li>Loneliness. Proportion of the population experiencing loneliness always, often or some of the time.</li> <li>Contact between young people and their parents. Proportion of young people who agree that most weeks they get enough time to spend with Mum and/or Dad.</li> </ul>	<ul style="list-style-type: none"> <li>Unpaid work outside the home. The estimated economic value of unpaid work is captured in the Market Income indicator in the Economic Standard of Living domain.</li> <li>Membership of and involvement in groups. We have no time series data for this indicator.</li> </ul>

There have been very minor changes to the indicators in the health domain, with two indicators renamed to better reflect what they actually measure, but no actual changes to specific indicators. Independent life expectancy has been renamed health expectancy, and what was dependent disability has been renamed disability requiring assistance.

These changes build on the following changes that were introduced in last year’s social report:

- the renaming of the *Human Rights* domain to *Civil and Political Rights*. This is because economic, social and cultural rights are already captured within other domains
- the renaming of the *Culture and Identity* domain to *Cultural Identity*. Feedback received in 2001 was that this domain incorrectly conflated cultural activities with identity and belonging
- the renaming of the *Environment* domain to *Physical Environment* to better reflect the impact of both the built and the natural environment on people’s wellbeing.

# Technical details

## People

**Data sources:** Population size and growth: Statistics New Zealand Resident Population Estimates; Census of Population and Dwellings; Resident Population Projections (2001-Base); Population Monitor; External Migration Information Release, INFOS data for time series data natural increase and net migration data.

Fertility: Statistics New Zealand: Population Monitor, Births, Additional Tables (Age-specific Fertility Rates by Single Year of Age for Māori, non-Māori, Total, Ethnic groups); international comparison from *Demographic Trends 2003*, Table 2.09.

Geographic and ethnic distribution of the population: Statistics New Zealand, Census of Population and Dwellings.

Age and Sex Structure of the Population: Statistics New Zealand Resident Population Estimates.

Household structure: Statistics New Zealand, Census of Population and Dwellings.

Families with Dependent Children: Table P3: Families with dependent children, by family type, 1976 to 2001; Statistics New Zealand, 1976, 1981, 1986, unpublished census data; 1991 Census: *New Zealanders at Home*, Tables 16, 17; 1996 Census, *Families and Households*, Tables 16, 21, 26; 2001 Census: *Families and Households*, Tables 13 and 24.

People with Disability: Statistics New Zealand, 2001. *Disability Counts*. Tables 1.01a, 1.02a.

Same-sex couples: Statistics New Zealand, 2001 Census, *Families and Households*, Tables 7, 11.

## Health

### H1 Health expectancy

**Definition/formulae:** The total number of years a newborn can expect to live without any self-reported functional limitation requiring the assistance of another person or a complex assistive device.

Note:

1. 2001 estimates have been revised following the official release of 2000-02 complete life tables in March 2004.
2. Independent life expectancy estimates for 1996 have been revised slightly, reflecting changes to the smoothing method required for the 2001 data and the release of 2000-02 complete life tables.
3. Māori and non-Māori rates are based on estimates for ages 0-85 years because of the small number of Māori aged over 85, and are referred to here as 'partial' independent life expectancies.

**Limitations of data:** The ability to monitor health expectancy on a regular basis depends on the availability of information about disability and levels of disability.

This measure of health expectancy (titled Independent Life Expectancy in previous editions of The Social Report) has inherent limitations as a population health indicator. An indicator that included all levels of disability - not just a single dependency threshold - would provide a more precise measure of health (ie a disability adjusted life expectancy). The social preferences (disability weights) needed to construct such an indicator are still under development in New Zealand.

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**Data sources:** Ministry of Health, revised data.

## H2 Life expectancy

**Definition/formulae:** The expected number of years a hypothetical newborn male or female would live if they were subject throughout their lives to the age-specific mortality patterns prevailing over a three-year period centred on their birth year.

Note: Ethnic-specific estimates for the period 1980-82 to 1995-97 have been adjusted for undercounting in the ethnic mortality statistics using census ethnic definitions and were revised after the official release of the 2000-02 complete Life Tables in March 2004. The figures differ from those published by Statistics New Zealand for the same period and are not comparable with earlier estimates.

The analysis associating life expectancy with levels of deprivation is based on NZDep96, a small area index of deprivation based on a principal component analysis of nine socio-economic variables from the 1996 census. The index has been converted to a scale ranging from 1 to 10, where 1 represents the least deprived 10 percent of small areas, and 10 represents the most deprived 10 percent. The small areas are about the size of a census meshblock and have populations of at least 100 people.

**Limitations of data:** Available annually from abridged life tables for the total population only. Official Māori/non-Māori data is only available five-yearly from complete life tables based on three-year period around census years.

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**Data sources:** Statistics New Zealand (2004) *New Zealand Life Tables: 2000-2002*, Table 1; Ministry of Health (ethnic-specific data for 1985-87, 1990-92); Tobias and Cheung (2003) *Monitoring Health Inequalities: Life Expectancy and Small Area Deprivation in New Zealand*, Table 3; OECD (2003c) *OECD Health Data 2003*, Table 1; Ministry of Health (1999) *Our Health, Our Future: Hauora Pakari, Koiora Roa, The Health of New Zealanders 1999*, Chapter 2.

## H3 Disability requiring assistance

**Definition/formulae:** The age-standardised disability requiring assistance prevalence rate per 100 population. Disability requiring assistance includes those with a functional and/or role limitation who require assistance from another person or from a complex assistive device over a period of at least six months. Those needing assistance intermittently are defined here as having a 'moderate' disability requiring assistance; those requiring continuous or daily assistance are defined as having a 'severe' disability requiring assistance. These definitions correspond to disability Levels 2 and 3 used by the Ministry of Health (1999).

The disability requiring assistance prevalence rate is age-standardised to the WHO world population, based on observed (not smoothed) age specific rates.

**Limitations of data:** Data is based on a sample survey and is therefore subject to sampling error. Rates of severe disability for Māori are based on small numbers and should be used with caution.

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**Data sources:** Ministry of Health, unpublished data from the New Zealand Disability Surveys, 1996, 1997 and the 2001 New Zealand Disability Survey.

#### H4 Suicide

**Definition/formulae:** The age-standardised rate of suicide deaths per 100,000 population.

Age-standardised to Segi's world population.

Note: The figures for 2000 and 2001 are provisional and may be revised.

**Limitations of data:** Because suicide is a relatively rare event in statistical terms, rates of suicide can vary markedly from year to year. Any interpretation of trends requires an examination of rates over several years. Deaths by suicide are subject to a coroner's inquiry and can only be officially deemed suicide once an inquest is complete. This means there can be a considerable delay in publication of the final statistics.

Data on the rates of suicide for geographical regions and cities may be of little value for reporting comparisons because of the low numbers, and hence highly variable suicide rates. For example, where populations are small, the rate of suicide can be greatly inflated by one or two deaths.

Data on attempted suicide is only available for those admitted to hospital as inpatients or day patients for self-inflicted injury. Those cared for in hospital but not admitted and those cared for by primary or community care services are not reported. Therefore, the actual rate of attempted suicide is likely to be much higher than reported in official statistics.

Comparability over time is affected by a change in population concept in 1991 (from de facto to resident), and the change in the ethnicity classification in 1995. Ethnic-specific mortality data is also subject to some uncertainty due to differences in collection across different providers.

A comparison of international trends in suicide is problematic due to differences in the methods used to classify suicide.

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**Data sources:** Ministry of Health, New Zealand Health Information Service (unpublished tables); Ministry of Health (2004) *Suicide Facts: Provisional 2001 Statistics (all ages)*; Beautrais (2000) *Restricting Access to Means of Suicide in New Zealand: A Report Prepared for the Ministry of Health on Methods of Suicide in New Zealand*. World Health Organisation: [http://www.who.int/mental\\_health/Topic\\_Suicide/suicide1.html](http://www.who.int/mental_health/Topic_Suicide/suicide1.html) [16 June 2004].

#### H5 Prevalence of cigarette smoking

**Definition/formulae:** The proportion of the population aged 15 and over who ever smoke any ready-made cigarettes or roll-your-own tobacco cigarettes. Information on smoking prevalence was collected from quarterly surveys conducted by AC Nielson Ltd and reported by the Ministry of Health.

Ethnic rates are age-standardised using the WHO world population.

**Limitations of data:** The international comparison is affected by differences in the collection and classification of the data. The classification of ethnicity information changed from 1997 onwards. Therefore, ethnic-specific data before and after 1997 may not be comparable.

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**Data sources:** Ministry of Health (2003b) *Tobacco Facts 2003*; Ministry of Health, OECD (2003c) *OECD Health Data 2003*, Frequently asked data, Table 19: *Tobacco consumption: % of population who are daily smokers*. Retrieved 11 May 2004 from [http://www.oecd.org/document/16/0,2340,en\\_2649\\_37407\\_2085200\\_1\\_1\\_1\\_37407,00.html](http://www.oecd.org/document/16/0,2340,en_2649_37407_2085200_1_1_1_37407,00.html). [16 June 2004].

## H6 Obesity

**Definition/formulae:** Obesity is defined as the accumulation of excess body fat to the extent that health is adversely affected (WHO 2000). It is measured using Body Mass Index (BMI) which is calculated by dividing weight (in kilograms) by height (in metres) squared. Adults with a BMI greater than 30 kg/m<sup>2</sup> are classified as obese. In the 1997 National Nutrition Survey, the cut off for Māori and Pacific people was set slightly higher, at 32 kg/m<sup>2</sup>. For children, the measure is the proportion of 5-14-year-olds whose Body Mass Index (weight/height<sup>2</sup>) met the international definition of obesity established by Cole, et al (2000) in the 2002 National Children's Nutrition Survey. The definition adapts the widely used cut-off point for adults (30kg/m<sup>2</sup>) to produce age and sex specific cut-offs for children and youth aged 2-18 years.

Information on obesity is based on the 1997 National Nutrition survey, the 2002 National Children's Nutrition Survey and the 1989-90 Life in New Zealand (LINZ) Study.

**Limitations of data:** The cut off level is arbitrary and does not necessarily correspond to levels of health risk. There is some debate about whether a separate cut off for Māori and Pacific people is warranted. 1989-90 data for Māori should be viewed with caution as the number of Māori in the survey was small.

**Data sources:** Ministry of Health (2002a) *An Indication of New Zealanders' Health*; Ministry of Health (1999d) *NZ Food: NZ People*; OECD (2004a) *Health at a Glance: OECD Indicators 2003*, Chart 8. Retrieved 14 May 2004 from [http://www.oecd.org/searchResult/0,2665,en\\_2649\\_201185\\_1\\_1\\_1\\_1\\_1,00.html](http://www.oecd.org/searchResult/0,2665,en_2649_201185_1_1_1_1_1,00.html); Ministry of Health (2003c) *NZ Food, NZ Children: Key results of the 2002 National Children's Nutrition Survey*; Ministry of Health, obesity data from the 1989-90 Life in New Zealand (LINZ) Study and the 1997 National Nutrition Survey. Russell, D and Wilson, N (1991) *Life in New Zealand*, Volume 1, Executive Overview, Table V.1, pp118-119.

## Knowledge and Skills

### K1 Participation in early childhood education

**Definition:** The number of children aged three and four years enrolled in early childhood education programmes as a proportion of the estimated population aged three and four years. Early childhood education (ECE) programmes include: licensed ECE services (kindergartens, playcentres, education and care services, home-based services, casual education and care (no regular roll), correspondence school and te kohanga reo); and licence-exempt ECE services (early childhood development funded playgroups, Pacific people early childhood groups, and playcentres); and licence-exempt kohanga reo.

**Limitations of data:** Rates of participation are only 'apparent' because children may be enrolled in more than one ECE centre. The rates may therefore be inflated. The measure does not provide information on the length of participation or the quality of the programmes, both of which are relevant to positive educational outcomes.

**Data sources:** Ministry of Education (various years) *Education Statistics of New Zealand; Education Statistics News Sheet*, v 10, no 1, March 2001; customised tables; OECD (2003a) *Education at a Glance: OECD Indicators*, 2003 edition, Table C1.2.



## K2 School leavers with higher qualifications

**Definition:** The number of students leaving school with Sixth Form Certificate in at least one subject or a higher qualification, as a proportion of the total number of school leavers during the year. Higher qualifications include: Sixth Form Certificate in at least one subject (irrespective of grade awarded); National Certificate Level 2 (or 12 or more credits at Level 2 or above); Higher School Certificate (or 12-39 credits at Level 3 or above); Entrance Qualification (or 40 or more credits at Level 3 or above); University Bursary, A or B grade (or National Certificate Level 3); University Scholarship (up to 1989).

**Limitations of data:** The available data on school leavers' highest qualifications does not allow a breakdown by the number of subjects passed or the grades achieved. Policy changes relating to qualifications affect comparability over time.

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**Data source:** Ministry of Education (various years) *Education Statistics of New Zealand*; Ministry of Education website, <http://www.minedu.govt.nz>: School Leaver Statistics. [16 June 2004].

## K3 Educational attainment of the adult population

**Definition:** The proportion of adults aged 25-64 years with educational attainment of at least upper secondary school level, defined in the International Standard Classification of Education (ISCED 97) as Level 3 and above.

ISCED 3 includes local polytechnic certificate or diploma, trade certificate or advanced trade certificate, University Bursary, Scholarship, Higher School Certificate, Higher Leaving Certificate, Sixth Form Certificate, University Entrance in one or more subjects, School Certificate in one or more subjects, other school qualification.

ISCED 4 includes technician's certificate, New Zealand Certificate or diploma.

ISCED 5B includes university certificate or diploma, teacher's certificate or diploma, nursing certificate or diploma, other tertiary qualification.

ISCED 5A/6 includes post-graduate degree, certificate or diploma, bachelor's degree.

**Limitations of data:** There are substantial differences in the typical duration of ISCED 3 programmes between countries, ranging from two to five years of secondary schooling.

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**Data sources:** Statistics New Zealand, Household Labour Force Survey; OECD (2002c) *Education at a Glance: OECD Indicators*, 2002 edition, Tables A1.2, A2.3.



#### K4 Adult literacy skills in English

**Definition:** Respondents in the International Adult Literacy Survey were asked to carry out various everyday tasks. 'Prose literacy' refers to the knowledge and skills required to use information from texts, such as editorials, news stories, poems and fiction; 'document literacy' refers to the knowledge and skills required to locate and use information contained in various formats such as job applications, payroll forms, transportation timetables, maps, tables and graphics; and 'quantitative literacy' refers to the knowledge and skills required to apply arithmetic operations such as balancing a cheque book, completing an order form or determining the amount of interest on a loan. The achievement attained on each of the literacy domains is grouped into one of five 'skill levels'. Level 1 represented the lowest ability range and level 5 the highest. Level 3 is considered a suitable minimum for coping with the demands of everyday life and work in a complex, advanced society. It denotes roughly the skill level required for successful secondary school completion and college entry. Like higher levels, it requires the ability to integrate several sources of information and solve more complex problems.

**Limitations of data:** The first international adult literacy survey was conducted in 1994-95; the New Zealand survey took place in 1996.

**Data sources:** Ministry of Education (2001b) *More Than Words: The New Zealand Adult Literacy Strategy*; OECD (2000c) *Literacy in the Information Age: Final Report of the Adult Literacy Survey*, p137. Retrieved June 2004 from <http://www1.oecd.org/publications/e-book/8100051e.pdf>

#### K5 Participation in tertiary education

**Definition:** Participation in tertiary education is calculated by: the number of students who are enrolled in tertiary education institutions and studying for a New Zealand registered qualification as at 31 July each year; divided by the population aged 15 and over. Private tertiary institutions are included from 1997 onwards.

Te Wānanga o Aotearoa is a public tertiary institution that provides programmes with an emphasis on the application of knowledge regarding auhauatanga Māori (Māori tradition) according to tikanga Māori (Māori custom). A settlement of a Treaty of Waitangi claim was reached with Te Wānanga o Aotearoa in November 2001. This settlement enabled the wānanga to expand and establish new campuses around the country.

The Māori and non-Māori total tertiary participation rates in this section have been age-standardised to the estimated total resident population aged 15 and over, as at 30 June 2003.

**Limitations of data:** Changes in the number of institutions, the status of institutions, and the types of courses offered affect comparisons over time.

**Data sources:** Ministry of Education website, <http://www.minedu.govt.nz>; Tertiary Statistics [16 June 2004]; Ministry of Education (2002) *Participation in Tertiary Education*, August 2002; *Education Statistics of New Zealand for 2001*; OECD (2003a) *Education at a Glance: OECD Indicators*, 2003, Table C2.1.

## Paid Work

### PW1 Unemployment

**Definition:** The proportion of labour force (aged 15 and over) that is unemployed. The labour force is the sum of those defined as employed and those defined as unemployed. Hence the unemployment rate is defined as unemployed/(employed and unemployed). The unemployed are defined in the Household Labour Force Survey as those who are without a paid job (or unpaid work in a relative's business) and who have actively sought work in four weeks before the survey and are available to take work. 'Actively seeking' includes any actions such as contacting an employer, asking friends and relatives, contacting an employment agency or the Department of Work and Income but excludes those who have only checked newspaper advertisements. The employed are those who worked for pay or profit for one hour or more in the week before the survey or who worked unpaid in a relative's business or who have a job but did not work that week because of leave, sickness or industrial disputes.

Standardised unemployment rates used for international comparison are seasonally adjusted rates.

**Limitations of data:** Data is based on a sample survey and is therefore subject to sampling error. The definition of the unemployed excludes some people who regard themselves as unemployed, including the 'discouraged unemployed' - those not meeting the 'actively seeking work' criterion. This group is classified in the 'Not in the Labour Force' category. The unemployment rate also excludes those who have part-time employment but are seeking to work more hours.

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**Data sources:** OECD (2003b) *OECD Employment Outlook*, 2003, Statistical Annex, Table A, p299; OECD (2004b) *Main Economic Indicators*, p16: Standardised Unemployment Rates. Retrieved 14 May from [http://www.oecd.org/document/15/0,2340,en\\_2825\\_293564\\_1873295\\_1\\_1\\_1\\_1,00.html#SUR](http://www.oecd.org/document/15/0,2340,en_2825_293564_1873295_1_1_1_1,00.html#SUR)

### PW2 Employment

**Definition:** The proportion of the population aged 15-64 that is employed for at least one hour per week. See above for definition of the employed. The definition used here relates to the population aged 15-64, rather than to those aged 15 and over, because otherwise results are skewed by differences in the proportions of the sub-populations over 65, particularly when comparing males with females and comparing different ethnic groups.

**Limitations of data:** As above, data is subject to sampling error. The definition of employment includes those working one hour or more per week, so will include some people who are likely to regard their status as closer to unemployment than to being employed. For example people on the unemployment benefit and searching for work but working a few hours per week will be counted as employed.

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**Data sources:** OECD (2003b) *OECD Employment Outlook*, 2003, Statistical Annex, Table G, p325; OECD (2003b) *OECD Employment Outlook*, 2003, Statistical Annex, Table B, pp300-303.

### PW3 Earnings from wage and salary jobs

**Definition/formulae:** Average hourly earnings from all wage and salary jobs for employees earning income from wage and salary jobs as measured by the New Zealand Income Survey, an annual supplement to the Household Labour Force Survey.

**Limitations of data:** The final dataset consists of 29,000 valid person records including 4,000 imputed person records. Hourly earnings relate to the number of hours usually worked and the usual income rather than the number of hours actually worked and the actual income. Proxy interviewing may be used to collect data on income under certain circumstances. Estimates from sample surveys are subject to error.

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**Data source:** Statistics New Zealand (2003c), New Zealand Income Survey, *Hot off the Press* June 1997 Table 8, June 1998 to June 2003 Table 10 Unpublished data from New Zealand Income Survey, June 2003.

#### PW4 Workplace injury claims

**Definition:** The number of work-related accident claims reported to the Accident Compensation Corporation per 1,000 full-time equivalent employees (one part-time employee = 0.5 full-time employee).

**Limitations of data:** The data does not include workplace accidents where no claim was made with an insurer. In some cases there are also delays between the occurrence of the accident, the claim being reported to the insurer and the insurer reporting the claim to the ACC.

Information on workplace injuries for 2001/2002 is based on a new set of indicators developed by Statistics New Zealand. These figures have been backdated to 2000/2001 but are not directly comparable with previous figures on workplace injuries.

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**Data sources:** Statistics New Zealand (2003b) *Injury Statistics 2001/2002*. Statistics New Zealand: Wellington. Full-time equivalent employee data is as estimated by the Statistics New Zealand 1986-2002 Household Labour Force Survey.

#### PW5 Satisfaction with work/life balance

**Definition/formulae:** The proportion of people who are satisfied with their work/life balance according to the Social Wellbeing Survey 2004. Responses range from 'very satisfied' through to 'very dissatisfied'.

**Limitations of data:** The Social Wellbeing Survey is an experimental survey commissioned by the Ministry of Social Development to collect information on subjective elements of wellbeing. In particular, the relatively small sample size for the survey (n=1127) means that there is a relatively high standard error around population estimates for small groups. Subjective measures of wellbeing reflect people's perceptions of their own situation which may differ from their objective status.

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**Data source:** Ministry of Social Development, Social Wellbeing Survey 2004.

## Economic standard of living

#### EC1 Market income per person

**Definition/formulae:** Real GNDI measures the real purchasing power of the net income of New Zealand residents from both domestic and overseas sources after taking account of income redistribution resulting from international transfers. GNDI is GNI (previously called GNP) plus net international transfers. Real GDP per person (as used in the OECD comparisons) is Gross National Expenditure plus exports minus imports.

**Derivation of RGNDI:** In the published tables, RGNDI is calculated as follows:

Constant price gross domestic product (production-based measure) plus constant price trading gain/loss plus constant price total net income and transfers.

Constant price trading gain/loss is defined as current price exports divided by the imports implicit price index less constant price exports. Constant price total net income and transfers equals investment income credits less investment income debits plus transfers credits less transfers debits, all divided by the imports implicit price index.

**Limitations of data:** Major limitations to the use of RGNDI as an indicator of wellbeing include its failure to include non-marketed (and, therefore, non-priced) activities (barring the exception of imputed rentals). RGNDI provides no information on income distribution considerations. Evidence suggests monetary measures have a very weak cross-sectional and limited time series correlation with self-assessed measures of wellbeing. Use of real GDP for OECD comparisons is likely to over-state New Zealand's relative position because of New Zealand's relatively high per capita net external debt.

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**Data sources:** Statistics New Zealand, Real GNDI per capita, INFOS series SNBA.SRNDIPCO; OECD real GDP data is from OECD *Annual National Accounts - v 1, Comparative Tables*; Statistics New Zealand (2001c) *Measuring Unpaid Work in New Zealand 1999*. Table 1, p 15.

## EC2 Income inequality

**Definition/formulae:** The ratio of the 80th percentile of disposable household income to the 20th percentile of disposable household income. This indicator is based on 'actual' household income so does not take into account household size and composition. For international comparison purposes we have compared GINI co-efficients.

**Limitations of Data:** International comparisons have been made with data from the mid 1990s.

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**Data source:** Household Economic Survey. Access to the data used in this study was provided by Statistics New Zealand under conditions designed to give effect to the confidentiality provisions of the Statistics Act 1975. The results presented in this study are the work of the Ministry of Social Policy/Ministry of Social Development. Forster M and Pearson M (2002)/1 Income Distribution and Poverty in the OECD Area: Trends and Driving Forces *OECD Economic Studies*, No 34. p.38 and Statistics New Zealand (1999) *Income Distribution in New Zealand - Key Statistics*.

## EC3 Population with low incomes

**Definition/formulae:** The measures have been constructed using economic family units as the base unit of analysis. An economic family is operationally defined as:

Financially independent single adult (not in a de jure or 'social' marriage, not caring for dependent children).

Sole-parent family - ie financially independent single adult (not in a de jure or 'social' marriage) caring for one or more dependent children.

Couple (in a de jure or 'social' marriage, not caring for dependent children).

Two-parent family - ie couple (in a de jure or 'social' marriage) caring for one or more dependent children.

All young adults are considered financially independent at 18 years of age; 16 and 17-year-olds are also considered financially independent if receiving a benefit in their own right or employed for 30 hours or more per week.

Conceptually, an economic family is a group of co-resident people whose financial affairs are common or have been merged to the extent that the people are substantially interdependent (with an individual not part of such a group being considered to constitute an economic family in its minimal form).

Housing costs have been apportioned to economic family units. Account was taken of the housing costs of the economic family unit by subtracting its housing cost from its after-tax income. The resulting amounts were inflation adjusted using the CPI for all groups excluding housing.

Adjustment for family size was made by means of a per capita equivalisation process based on the 1988 Revised Jensen Equivalence Scale. The resulting amount - Housing-adjusted Equivalised Disposable Income (HEDY) - can be regarded as an income-based proxy measure of standard of living. The HEDY is the metric on which the low thresholds are specified.

Changes over the decade 1988 to 1998 have been tracked in terms of the proportion of economic families with HEDY values below 40 percent, 50 percent and 60 percent of the median HEDY in 1998. This definition means that the measures are based on constant-value benchmarks. The three measures are referred to as the 40 percent line, the 50 percent line and the 60 percent line. For the purpose of this analysis the self-employed have been included.

Note: While technical analysis done to date indicates that the measurement approach is well-grounded and robust, future work may point to the use of other thresholds as more informative for social monitoring.

The methodology used to calculate the figures used in the international comparison section follows that used by the OECD: the income concept is equivalised household disposable income; the equivalence scale is the square root scale (ie equivalence scale elasticity = 0.5); equivalent household income is attributed to all individuals in the household; individuals are ranked by their attributed equivalent disposable income to obtain the median for that year; the thresholds are set at 60% of this (contemporary) median.

**Limitations of data:** The HEDY metric is an imperfect indicator of living standards, which is influenced by factors other than income and housing cost. People with the same income level can have greatly different standards of living as a result of their lifecycle stage (youth, middle age, older people), ownership of assets, the extent to which they receive assistance from others, and the extent to which they have atypical expenditure commitments (eg unusually high medical costs, debt repayments, transport costs, electricity costs, etc). People who experience a lengthy period of substantial restriction are likely to have different life outcomes to those who experience only a transient episode.

Family ethnicity is defined in this indicator by the presence of an adult of a particular ethnic group. The figures for families defined in this way are not mutually exclusive.

Housing costs is the sum of annualised accommodation expenditure codes (includes mortgage payments (principal and interest), payments to local authorities, property rent, rent of private dwelling, boarding house, student accommodation not paid with formal fees). In this indicator the accommodation supplement is counted as income.

Note that the weightings used for the Household Economic Survey were revised for all years in 2001. Some figures in this section may therefore differ from those presented in the Social Report 2001.

**Data sources:** Derived from the Household Economic Survey by the Ministry of Social Policy/Ministry of Social Development and OECD (2000d) *Trends and Driving Factors in Income Distribution and Poverty in the OECD Area*, DEELSA/ELSA/WD p 94.

#### EC4 Population with low living standards

**Definition/formulae:** The Economic Living Standard Index (ELSI) is a direct measure of material standard of living, based on information on the extent to which respondents economise on consumption because of cost; have ownership restrictions because of cost; have social participation restrictions because of cost; people's own rating of their standard of living; and people's rating of the adequacy of their incomes to meet day to day needs. The ELSI scale has seven reporting levels: level 1 'very restricted', level 2 'restricted', level 3 'somewhat restricted', level 4 'fairly comfortable', level 5 'comfortable', level 6 'good', level 7 'very good' living standards. Lower living standards encompass the bottom three categories (levels 1-3) of the ELSI scale.

**Limitations of data:** Measures only material wellbeing.

**Data source:** *New Zealand Living Standards 2000*, Ministry of Social Development (2003b), Ministry of Social Development: Wellington.



## EC5 Housing affordability

**Definition/formulae:** Proportion of all households with housing cost outgoings-to-income ratio greater than 30 percent.

Household incomes have been equivalised using the 1988 Revised Jensen Equivalence Scale.

Housing costs is the sum of annualised accommodation expenditure codes (includes mortgage payments (principal and interest), payments to local authorities, property rent, rent of private dwelling, boarding house, student accommodation not paid with formal fees). In this indicator the accommodation supplement is counted as income.

**Limitations of data:** Measures of housing affordability do not shed light on issues of housing quality, suitability or sustainability, nor do they explain why affordability problems may exist, or the extent to which inadequate housing is occupied to avoid affordability problems. Furthermore, marginally-housed families are often hidden from official statistics and therefore not counted among those with an affordability problem.

Household ethnicity is defined in this indicator by the presence of an adult of a particular ethnic group. The figures for households defined in this way are not mutually exclusive.

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**Data source:** Derived from the Household Economic Survey by the Ministry of Social Policy.

## EC6 Household crowding

**Definition/formulae:** The Canadian National Occupancy standard sets the bedroom requirements of a household according to the following compositional criteria:

- there should be no more than two people per bedroom
- parents or couples share a bedroom

- children under five years, either of same or opposite sex, may reasonably share a bedroom
- children under 18 years of the same sex may reasonably share a bedroom
- a child aged five to 17 years should not share a bedroom with one under five of the opposite sex
- single adults 18 years and over and any unpaired children require a separate bedroom.

**Limitations of data:** There is no contemporary official statistic or index of household crowding in New Zealand. There are many frameworks or models used in many countries for analysing the incidence of crowding. It is unlikely that any single measure of crowding could adequately summarise such a complex and multi-faceted issue as crowding.

There is no definitive evidence that crowding leads to negative social outcomes. There are just associations between living in crowded circumstances and negative outcomes. The mechanisms by which these outcomes result are not clear.

The Canadian crowding index is not an objective index of crowding. The extent to which household members will perceive themselves as living in crowded circumstances is dependent on many factors including social and cultural expectations. Furthermore, it cannot be assumed that households requiring two or more additional bedrooms (based on the Canadian index) will suffer negative social outcomes.

The Canadian crowding index is used here as it is both sensitive to household size and composition. The measure sets a bedroom requirement for households based on precise criteria. It is useful not only for ascertaining crowding levels but also to identify the extent of bedroom under-utilisation.

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**Data sources:** Statistics New Zealand (1999e) *New Zealand Now - Housing*, pp 56-63; Ministry of Social Policy (2001) *Definitions of Crowding and the Effects of Crowding on Health: A Literature Review*, Research Series Report 1, p 4; Statistics New Zealand, unpublished data from the 2001 census.

## Civil, political and human rights

### CP1 Voter turnout

**Definition/formulae:** The total number of votes cast is divided by the estimated number of people who would have been eligible to vote (voting age population) on election day, and expressed as a percentage. To be eligible to vote, a person must be at least 18 years old and meet residential and certain other criteria.

**Limitations of data:** The voting age population is based on population estimates that are subject to revision. The 1984 figure is based on the estimated de facto population aged 18 and over, as at 30 June 1984.

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**Data source:** Electoral Commission (2002) *The New Zealand Electoral Compendium*, 3rd edition; Statistics New Zealand, estimated de facto population by age; Department of Internal Affairs (2003) *Local Authority Election Statistics 2001*; International Institute for Democracy and Electoral Assistance <http://www.idea.int>

### CP2 Representation of women in government

**Definition/formulae:** The proportion of elected members of parliament and local government bodies who are women.

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**Data source:** Electoral Commission (2002) *The New Zealand Electoral Compendium*, 3rd edition; Department of Internal Affairs (2003) *Local Authority Election Statistics 2001*; International Parliamentary Union *Women in National Parliaments*, Situation as at 30 April 2004, <http://www.ipu.org/wmn-e/classif.htm>

### CP3 Perceived discrimination

**Definition/formulae:** The proportion of people aged 18 and over who perceived selected groups as being the targets of discrimination (ie subject to some discrimination or a great deal of discrimination).

**Limitations of data:** Surveys on perceived discrimination do not measure actual levels of discrimination against groups.

The margin of error for a 50 percent figure at the '95 percent confidence level' is 3.6 percent.

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**Data sources:** Human Rights Commission Omnibus Results (January 2004).

### CP4 Absence of corruption

**Definition/formulae:** The degree of corruption perceived to exist within New Zealand according to business people, academics and risk analysts. Corruption is defined as the 'abuse of public office for private gain.' Results are taken from Transparency International's Corruption Perceptions Index which ranked 133 countries in 2003, in terms of how corrupt they are perceived to be. Scores ranged between 10 (highly clean) and 0 (highly corrupt). The Corruption Perceptions Index is a poll of polls, produced yearly since 1995, using 17 different surveys and polls from 13 independent institutions.

**Limitations of data:** The Corruption Perceptions Index is a subjective measure and must be seen as a snapshot of the views of key decision-makers. There is no hard, empirical data concerning levels of corruption. The only method of gathering comparative data is to take a subjective perspective which builds on the experience and views of those who directly see the effects and reality of corruption. The Index is a relative measure: New Zealand's score depends not only on perceptions of corruption in New Zealand, but also on perceptions of corruption in the other countries surveyed.

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**Data source:** Transparency International Corruption Perceptions Index 1995-2003. <http://www.transparency.org>

## Culture and identity

### CI1 Local content programming on New Zealand television

**Definition/formulae:** The hours of local content broadcast on TV One, TV2, and TV3 in prime time, expressed as a percentage of the total prime time schedule. TV3 commenced in November 1989. New Zealand programming includes first runs and repeats across all three channels.

**Limitations of data:** The number of local content hours broadcast on other free-to-air or pay channels is not included in the data presented here.

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**Data source:** New Zealand on Air (2004) *Local Content, New Zealand Television, 2003*, [www.nzonair.govt.nz](http://www.nzonair.govt.nz)

### CI2 Māori language speakers

**Definition/formulae:** Māori language speakers as a proportion of the Māori ethnic group. Māori language speakers are defined as those able to hold a conversation about a lot of everyday things in Māori.

**Limitations of data:** The data is reliant on self-reporting and does not measure the actual level of fluency in the population. More detailed information on the level of fluency among Māori language speakers is available from a nationwide survey undertaken in 1995. This data is not directly comparable with the census data because different definitions were used.

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**Data sources:** Statistics New Zealand (2002b) *New Zealand Census of Population and Dwellings: Māori*; Te Puni Kōkiri (2001b) *Provisional results of the 2001 Survey of the Health of the Māori Language*.

### CI3 Language retention

**Definition/formulae:** The proportion of people who can speak the 'first language' (excluding English) of their ethnic group, for ethnic groups (other than Māori) with an established resident population in New Zealand, as recorded in the 2001 Population Census. Ability to speak a language is defined as being able to hold an everyday conversation in that language. 'First language' refers to an indigenous language associated with a given ethnicity rather than the first language of an individual.

Several criteria were used to identify ethnic groups with an established resident population in New Zealand. These included total population size, years since the group's arrival in New Zealand and the age distribution and birthplace (overseas and within New Zealand) of group members. These variables provide a measure of the influence of time and of demographic characteristics of the groups. Each variable was applied independently to a large list of ethnic groups from which 15 were selected under the broad categories of Pacific peoples, Asian and European. To be selected, a group needed to have a New Zealand resident population of over 2,000 people; a broad age distribution to investigate the impact of age on language retention; and sufficient numbers born in New Zealand in order to make meaningful comparisons with overseas-born residents.

**Limitations of data:** While a direct link can usually be made between a language and an ethnic group, this is not always the case. Some ethnicities are associated with several languages and one language can span several ethnicities. While English is an official language of some groups selected in these tables, the 2001 Census does not distinguish between different varieties of the English language. English has therefore been excluded as a first language within these tables. Because both the ethnic group and language spoken census variables allow more than one response, their may be some individuals who appear in more than one ethnic group category.

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**Data source:** Statistics New Zealand, 2001 Census, unpublished data (from forthcoming report on language retention).



## Leisure and recreation

### L1 Subjective satisfaction with leisure

**Definition/formulae:** People's levels of subjective satisfaction with their available leisure time according to the Social Wellbeing Survey 2004. Responses range from 'very satisfied' through to 'very dissatisfied'.

**Limitations of data:** The Social Wellbeing Survey is an experimental survey commissioned by MSD to collect information on subjective elements of wellbeing. In particular, the relatively small sample size for the survey (n=1127) means that there is a relatively high standard error around population estimates for small groups. Subjective measures of wellbeing reflect people's perceptions of their own situation which may differ from their objective status.

### L2 Participation in sport and active leisure

**Definition/formulae:** The proportion of adults (18 years and over) and young people (5-17 years) who were physically active as defined by the Sport and Physical Activity Surveys of 1997/1998, 1998/1999 and 2000/2001.

Being 'physically active' means being either 'relatively active' or 'highly active'. Relatively active means that the respondent took part in at least 2.5 hours, but less than 5 hours of sport/leisure-time physical activity in the 7 days before the interview. Highly active means that the respondent took part in 5 hours or more of sport/leisure-time physical activity in the 7 days prior to interview.

**Limitations of data:** Information on the activity of children was collected from parents with help from the children if they were present. This approach relied on the parents being well informed about their children's involvement in sport and leisure-time physical activity.

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**Data source:** Sport and Recreation New Zealand (2003a) *SPARC Facts Series* (1997-2001), retrieved 7 April 2004 from <http://www.sparc.org.nz/research/sparcfacts-3.php>  
Sport and Recreation New Zealand (2003b) *SPARC Trends: Trends in Participation in Sport and Active Leisure 1997-2001*, retrieved 7 April 2004 from [http://www.sparc.org.nz/research/pdfs/Trends\\_Report.pdf](http://www.sparc.org.nz/research/pdfs/Trends_Report.pdf)

### L3 Participation in cultural and arts activities

**Definition/formulae:** The proportion of the population aged 15 and over who experienced a cultural activity as measured in the 2002 Cultural Experiences Survey. Respondents were asked to report on activities they experienced over either a 12 month period (for goods and services accessed or experienced relatively infrequently) or a four week recall period (for activities experienced on a more regular basis). The survey was undertaken as a supplement to the March 2002 quarter Household Labour Force Survey (HLFS).

**Limitations of data:** This was an ad hoc survey, and is not comparable with the indicator in The Social Report 2001. The focus of this survey was on experience/consumption; it did not include participation such as acting or performing.

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**Data sources:** Statistics New Zealand (2002a) *2002 Cultural Experiences Survey*.

## Physical environment

### EN1 Air quality

**Definition/formulae:** The level of ambient concentrations of PM10 averaged annually are categorised for four major urban centres in New Zealand. These levels are compared with the government's PM10 guideline value of 20 mg/m<sup>3</sup> (20 micrograms per cubic meter) averaged annually. PM10 is particulate matter that is less than 10 microns in diameter.

**Limitations of data:** Ambient air quality sites where data on PM10 levels are publicly available are few in number and tend to represent urban areas where 'worst case' PM10 concentration levels are to be found. The monitoring sites are mainly located in residential areas where air pollution problems are anticipated or have already been confirmed. The sites do not therefore always represent the pollution levels that will be experienced over an entire town or city. The data, being so location-specific, cannot be compared with an OECD median.

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**Data source:** Ministry for the Environment and Ministry of Health (2002) *Ambient Air Quality Guidelines - 2002 Update*. Ministry for the Environment: Wellington.

### EN2 Drinking water quality

**Definition/formulae:** The Drinking-water Standards for New Zealand (DWSNZ) 1995 requires that all water leaving the treatment plant must be free of both faecal coliform bacteria (including E. Coli) and Cryptosporidium. Additionally, adequate monitoring and the use of a registered laboratory are required to demonstrate full compliance with this standard. The figures shown give the percentage of the population who are served by community water supplies and whose water supplies comply with the 1995 DWSNZ in respect of E. Coli and Cryptosporidium.

**Limitations of data:** Drinking water rated not fully compliant may be the result of failing one of three of the microbiological criteria, the use of a non-registered laboratory, or inadequate monitoring, rather than being actually contaminated. Compliance with the DWSNZ standards regarding Cryptosporidium is measured at the treatment plant rather than at the tap, so there is a possibility of contamination between the treatment plant and the point of consumption.

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**Data source:** Ministry of Health (2002b) *Annual Review of the Microbiological Quality of Drinking-water in New Zealand* (2001).

## Safety

### SS1 Child abuse and neglect

**Definition/formulae:** The number of children who were assessed as abused (physically, emotionally, sexually) or neglected, following a notification to the Department of Child, Youth and Family Services as a proportion (per 1,000) of all children under 17 years of age.

**Limitations of data:** There is currently no single measure that can adequately establish the prevalence of child abuse in the community, or establish trends in child abuse over time. Mortality rates capture only the most extreme form of abuse; hospitalisation data on injuries sustained as a result of child abuse are subject to misclassification and reflect changes in hospital admission procedures. Notifications of child abuse and neglect, and hence the number of children assessed as abused, can be affected by the level of resources made available, by administrative changes, and by changes in the likelihood of people reporting suspected abuse.

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**Data sources:** Ministry of Health, New Zealand Health Information Service; Ministry of Social Development (SWIS and CYRAS data); Statistics New Zealand, estimated resident population, mean for the year ended 30 June.

### SS2 Criminal victimisation

**Definition/formulae:** The number of individuals who have been the victims of one or more incidents of criminal offending over the 2000 year as a proportion of the population aged 15 and over, as measured by the 2001 National Survey of Crime Victims. The survey includes all behaviour reported by the respondents which falls within the legal definition of criminal offending. This is a broader measure than that collected from police records.

Criminal victimisation prevalence rates for 1995 have been revised slightly.

**Limitations of data:** The survey includes a wide range of behaviour with varying degrees of seriousness but excludes offences such as shoplifting and tax evasion as well as victimless crimes such as drug abuse. Many of the reported behaviours may not be regarded as a 'crime' by the victims and they may not regard the incident as requiring police intervention.

Differences in the method of collection and in the questionnaire may affect the comparability of the results from the 2001 and 1996 surveys.

The 2001 survey had a response rate of 62 percent and the 1996 survey had a response rate of 57 percent. The response rates for Māori and Pacific peoples were much lower. The differences in the response rates between the surveys, and the low response rates among Māori and Pacific peoples, may have impacted on both the validity of comparisons between the two surveys and on the reliability of the findings of the 2001 survey, especially with respect to Māori and Pacific peoples.

Previous studies suggest that sexual offending and domestic abuse are substantially under-reported in criminal victimisation surveys. The results, therefore, should be treated with some caution.

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**Data sources:** Morris et al (2003) *New Zealand National Survey of Crime Victims 2001*. Ministry of Justice, customised tables.

## Social connectedness

### SS3 Perceptions of safety

**Definition/formulae:** The proportion of people who reported they felt unsafe walking alone in their neighbourhood at night, as measured by the 2001 National Survey of Crime Victims. People who said they did not walk alone at night were asked how they thought they would feel.

**Limitations of data:** People's subjective perceptions about safety are not always linked to the actual risk of becoming a crime victim.

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**Data sources:** Morris et al (2003) *New Zealand National Survey of Crime Victims 2001*. Ministry of Justice.

### SS4 Road casualties

**Definition/formulae:** Number of deaths caused by motor vehicles per 100,000 population. Number of injured persons resulting from motor vehicle crashes as reported to the police, per 100,000 population. Pedestrians or cyclists killed or injured by motor vehicles are included.

**Limitations of data:** The collection of ethnicity data changed during 1995 for both mortality and hospitalisation data. For mortality data, the basis of ethnicity has changed from a biological concept to a concept of self-identification; in mid-1995 hospitalisation data recorded multiple ethnic groups, whereas previously only one ethnic group could be recorded. Consequently, comparison of 1996 ethnic-specific data with previous years is misleading; 1996 is the start of a new time series for ethnic-specific data.

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**Data sources:** Land Transport Safety Authority; New Zealand Health Information Service; New Zealand Travel Surveys. The Land Transport Safety Authority derives its data from two main sources: injury data from the Traffic Crash Reports completed by police officers who attend the fatal and injury crashes; and mortality and hospitalisation data from the New Zealand Health Information Service. The LTSA does not report on ethnic-specific rates of death or hospitalisation; this data comes directly from NZHIS. The New Zealand Travel Survey 1997/98 was based on a sample of approximately 14,000 people and the survey report compared results from a similar survey conducted in 1989/90. Source: International Road Traffic and Accident Database (OECD). <http://www.bast.de/htdocs/fachthemen/irtad/english/we2.html>

### SC1 Telephone and Internet access in the home

**Definition/formulae:** The proportion of the population with telephone and internet access in the home, as measured by the 2000 Living Standards Surveys.

The data is derived from responses to two Ministry of Social Policy surveys of living standards conducted in 2000, one of 3,060 older people (65+ years) and the other of 3,682 working age adults (18-64 years). Both surveys involved face-to-face interviews with nationwide representative samples.

For further details, see notes for EC4 Population with low living standards.

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**Data source:** Statistics New Zealand 2001 *Census of Population and Dwellings*; Ministry of Social Development (2003) *New Zealand Living Standards Surveys 2000*.

### SC2 Participation in family/whānau activities and regular contact with family/friends

**Definition/formulae:** The proportion of the population who had had family or friends over for a meal at least once a month, and the proportion who had participated in family (whānau) activities, as measured by the 2000 Living Standards Surveys. Family or whānau activities were not specified in the surveys; respondents interpreted them in their own ways.

The data is derived from responses to two Ministry of Social Policy surveys of living standards conducted in 2000, one of 3,060 older people (65+ years) and the other of 3,682 working-age adults (18-64 years). Both surveys involved face-to-face interviews with nationwide representative samples.

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**Data source:** Ministry of Social Development (2003) *New Zealand Living Standards Surveys 2000*.

### SC3 Trust in others

**Definition/formulae:** The proportion of the population who report that people can almost always or usually be trusted, as reported in the Social Wellbeing Survey 2004. Responses range from those who believe that others can ‘almost always or usually be trusted,’ compared with people who believe that ‘you usually or almost always can’t be too careful in dealing with people’.

**Limitations of data:** The Social Wellbeing Survey is an experimental survey commissioned by the Ministry of Social Development to collect information on subjective elements of wellbeing. In particular, the relatively small sample size for the survey (n=1127) means that there is a relatively high standard error around population estimates for small groups. Subjective measures of wellbeing reflect people’s perceptions of their own situation which may differ from their objective status.

**Data source:** Ministry of Social Development, Social Wellbeing Survey, 2004.

### SC 4 Loneliness

**Definition/formulae:** The proportion of the population who are lonely all of the time, often, or some of the time, in the Social Wellbeing Survey 2004. Responses range from ‘never lonely’ to ‘always lonely’.

**Limitations of data:** The Social Wellbeing Survey is an experimental survey commissioned by the Ministry of Social Development to collect information on subjective elements of wellbeing. In particular, the relatively small sample size for the survey (n=1127) means that there is a relatively high standard error around population estimates for small groups. Subjective measures of wellbeing reflect people’s perceptions of their own situation which may differ from their objective status.

**Data source:** Ministry of Social Development, Social Wellbeing Survey 2004.

### SC5 Contact between young people and their parents

**Definition/formulae:** The percentage of secondary school students who reported in 2001 that most weeks they got enough time to spend with Mum and/or Dad (or someone who acts as Mum and/or Dad).

**Limitations of data:** Estimates from sample surveys are subject to error. The achieved sample size for the Youth2000 survey was 9,699 students, 4 percent of the total 2001 New Zealand secondary school roll.

**Data source:** Adolescent Health Research Group (2003b) *New Zealand Youth: A Profile of their Health and Wellbeing*. Auckland: University of Auckland. Table on p. 46.  
 Adolescent Health Research Group (2003a). *New Zealand Youth: A Profile of their Health and Wellbeing: Regional reports* (2003)

# Endnotes

## Introduction

- 1 Durie (2001)
- 2 Royal Commission on Social Policy, vII p472
- 3 Auckland City Council et al (2001)

## People

- 4 The 2001 figure for Pacific females under 18 has been revised, using age-specific fertility rates by single year of age and ethnic group for the period 2000-2002, published by Statistics New Zealand on the web-based Population Monitor in 2004
- 5 Statistics New Zealand (2003a) p29
- 6 These figures are based on 'medium' projections (Series 4), assuming medium fertility, medium mortality and a long-term annual net migration gain of 5,000
- 7 These figures are based on 'medium' projections (Series 6), assuming medium fertility, medium mortality, medium inter-ethnic mobility and medium long-term annual net migration (-2,500 for Māori, 500 for Pacific peoples, -8,000 for Europeans). For the Asian population, the medium migration variant assumes that net migration will trend downwards, from 23,000 in 2004 to 5,000 in 2021. There are no projections for other ethnic groups, which together made up less than 1 percent of the population in 2001
- 8 Disability is defined as any restriction or lack (resulting from impairment) of ability to perform an activity in the manner or within the range considered normal for a human being. People were not considered to have a disability if an assistive device (such as glasses) completely eliminated their limitation. A concept of time was also introduced as a filter; the limitation must have lasted for, or be expected to last for, at least six months or more. See Statistics New Zealand (2001e) p128
- 9 Provisional data from Ministry of Health (unpublished)
- 10 In part these figures reflect the older age distribution of people with disabilities, and that older people tend to be more poorly qualified, and to be on low personal incomes

## Health

- 11 Howden-Chapman and Tobias (2000)
- 12 Ministry of Health (1999a) p351
- 13 Tobias and Cheung (2003)
- 14 OECD (2003c) Table 1
- 15 Ministry of Health and Health Funding Authority (1998) p67
- 16 Age-standardised rates are rates in which there has been an adjustment to take account of differences in the age distribution of the populations being compared
- 17 Beautrais (2000), cited in Ministry of Health (2003a) p6
- 18 [http://www.who.int/mental\\_health/prevention/suicide/country\\_reports/en/](http://www.who.int/mental_health/prevention/suicide/country_reports/en/)
- 19 New Zealand Health Information Service/World Health Organization
- 20 Ministry of Health (1999a) p 344
- 21 Ministry of Health (2003b) p12
- 22 Howden-Chapman and Tobias (2000) p54
- 23 OECD (2003c)
- 24 Ministry of Health (2003b) p16
- 25 The use of different cut points for ethnic groups is currently under review by the Ministry of Health
- 26 Cole et al (2000)
- 27 Ministry of Health (2002a) p12
- 28 Hillary Commission (1991)
- 29 Ministry of Health (1999d) Table F1
- 30 OECD (2004a)

## Knowledge and Skills

- 31 See, for example, Wylie (1999)
- 32 OECD (2000b) p294
- 33 Wylie (1999), Boocock (1995)
- 34 OECD (2000b) p294
- 35 OECD (2003a)
- 36 Ministry of Education (2001c)



<sup>37</sup> Ministry of Education (2001c)

<sup>38</sup> For the purposes of calculating New Zealand's performance relative to the OECD median, Switzerland's score was excluded as it had three separate entries - French, Italian, and German

<sup>39</sup> OECD (2000c)

<sup>40</sup> The Māori and non-Māori total tertiary participation rates in this section have been age-standardised to the estimated total resident population aged 15 and over, as at 30 June 2003

<sup>41</sup> OECD (2003a)

### **Paid Work**

<sup>42</sup> This includes wage and other payments to employees and entrepreneurial income, 1998 Statistics New Zealand data, cited in Department of Labour (1999)

<sup>43</sup> Savage (1996). See also Maloney (1987)

<sup>44</sup> OECD (2003b) Statistical Annex, Table A, p299; OECD (2004b) p16

<sup>45</sup> OECD (2003b) Statistical Annex, Table G, p325

<sup>46</sup> See Winkelmann and Winkelmann (1998)

<sup>47</sup> The Ministry of Social Development commissioned the Social Wellbeing Survey in early 2004 in order to be able to report on a number of the new indicators used in this report. The methodology, results and data from the survey are available at the Social Report website [www.socialreport.msd.govt.nz](http://www.socialreport.msd.govt.nz)

### **Economic Standard of Living**

<sup>48</sup> Royal Commission on Social Security in New Zealand (1972)

<sup>49</sup> OECD 2004(c)

<sup>50</sup> Statistics New Zealand (2001c)

<sup>51</sup> For a description of the Gini co-efficient, see Statistics New Zealand (1999) p118

<sup>52</sup> Forster M and Pearson M (2002) p98

<sup>53</sup> Derived from the Household Economic Survey by the Ministry of Social Development and using international data from OECD (2000d) p94

<sup>54</sup> Robust data is not available for low-income households by household characteristics (such as ethnicity)

<sup>55</sup> Baker et al (2000)

<sup>56</sup> Statistics New Zealand (1998e) p61

<sup>57</sup> Percentages do not add to 100 as some people identified with more than one ethnic group

<sup>58</sup> Persons who received income support in the 12 months prior to the census. Excludes those who received ACC or New Zealand Superannuation

### **Civil and Political Rights**

<sup>59</sup> Ministry of Foreign Affairs and Trade (1998)

<sup>60</sup> The 1988 Royal Commission on Social Policy found that New Zealanders felt wellbeing was strongly associated with the ability to make choices and to not have choices imposed on them. Royal Commission on Social Policy (1988)

<sup>61</sup> For example, see the section on New Zealand in the United States State Department Bureau of Democracy, Human Rights and Labor 2003 *Country Reports on Human Rights Practices* <http://www.state.gov/g/drl/rls/hrrpt/2002/18257.htm>

<sup>62</sup> Miller and Sarat (1980-81)

<sup>63</sup> Vowles and Aimer (1993:53)

<sup>64</sup> International Institute for Democracy and Electoral Assistance <http://www.idea.int> [16 June 2004]

<sup>65</sup> Inter-Parliamentary Union <http://www.ipu.org.wmn-e/world> [16 June 2004]

<sup>66</sup> Transparency International <http://www.transparency.org/cpi/2003/cpi2003.en.html> [16 June 2004]

## Cultural Identity

- <sup>67</sup> Durie (1997), National Health Committee Not in reference list (1998a) p33
- <sup>68</sup> Statistics New Zealand (2001b)
- <sup>69</sup> ACNielsen (2004)
- <sup>70</sup> NZ On Air (1999) p3
- <sup>71</sup> All those who identified as Māori in the census are counted as part of the Māori ethnic group in this indicator
- <sup>72</sup> Well or very well refers to being able to talk naturally and confidently in Māori about domestic or community subjects without making errors. Fairly well refers to being able to communicate their ideas in Māori most of the time but may make some grammatical errors. Not very well refers to being able to give simple instructions in Māori and maintain basic question and answer sequences

## Physical Environment

- <sup>73</sup> The 1988 Royal Commission on Social Policy identified 'guardianship of the physical resource' as a major part of the 'safe prospect' aspect of social wellbeing
- <sup>74</sup> Statistics New Zealand (1993) p26
- <sup>75</sup> Statistics New Zealand (1993) p83
- <sup>76</sup> Statistics New Zealand (1993)

## Safety

- <sup>77</sup> Morris et al (2003) pp222-224
- <sup>78</sup> National Research Council (1993)
- <sup>79</sup> National Road Safety Committee (2000)

- <sup>80</sup> Between June 1994 and June 1995 years, there was a change in the notification categories used and notifications not directly related to care and protection (which came under the heading of 'general welfare inquiries') were subsequently excluded from the statistics. This contributed to the sharp drop in the number of notifications between 1994 and 1995
- <sup>81</sup> Figures have been revised because of changes in the recording system
- <sup>82</sup> UNICEF (2003) Figure 1a, p4. The New Zealand figure is a five-year average for the period 1994-1998
- <sup>83</sup> Morris et al (2003) p145
- <sup>84</sup> 2003 data is provisional
- <sup>85</sup> Land Transport Safety Authority (2000)
- <sup>86</sup> International Road Traffic and Accident Database (OECD)  
<http://www.bast.de/htdocs/fachthemen/irtad/english/we2.html>

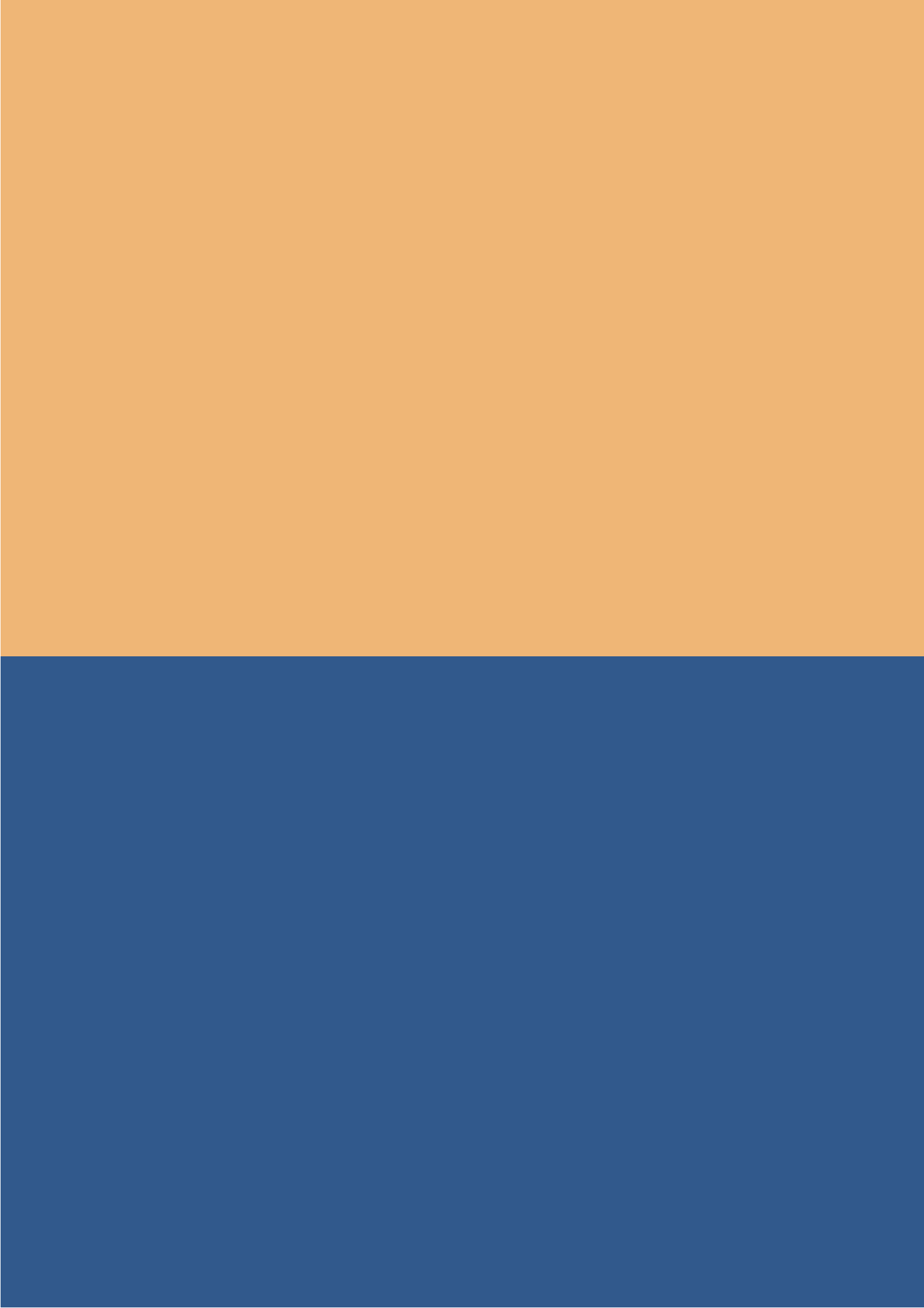
## Social Connectedness

- <sup>87</sup> Spellerberg (2001)
- <sup>88</sup> Donovan and Halpern (2002) p27
- <sup>89</sup> Noll and Berger-Schmitt (2000)
- <sup>90</sup> OECD (2001a)

## Conclusion

- <sup>91</sup> Ministry of Social Development (2004)
- <sup>92</sup> Veenhoven (2004)
- <sup>93</sup> Ministry of Education (2002b)







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