

How well is Oranga Tamariki supporting caregivers?

Results from the 2023 Oranga Tamariki
Caregiver Survey

The Oranga Tamariki Evidence Centre works to build the evidence base that helps us better understand wellbeing and what works to improve outcomes for New Zealand’s children, young people and their whānau.

The survey questions and communications were developed in conjunction with the Caregiver Recruitment and Support (CGRS) team and the Evidence Centre (EC) within Oranga Tamariki and Symphony Research.

The survey was conducted by Symphony Research on behalf of Oranga Tamariki.

Acknowledgements:

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Results at a glance

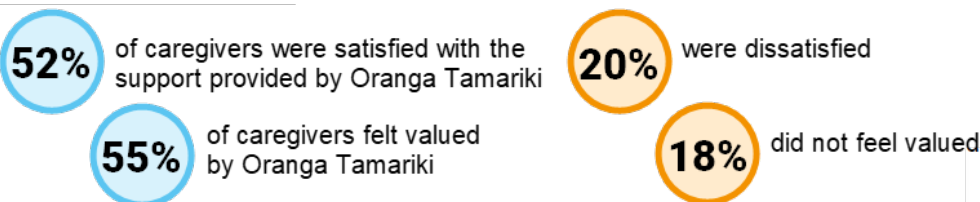
How well is Oranga Tamariki supporting Caregivers?

Results from the 2023 Caregiver Survey

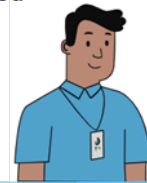


Throughout 2023, 2,467 Oranga Tamariki caregivers were invited to take part in a survey about their experiences. A total of **1,164** responses were received; this is a response rate of **47%**

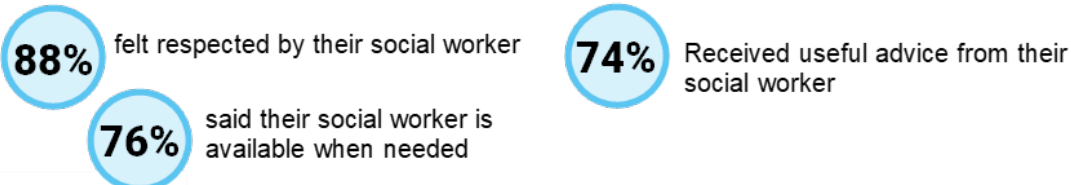
Overall Satisfaction



Compared to 2022, both satisfaction with support and those that feel valued increased in 2023



Satisfaction with Caregiver Social Workers



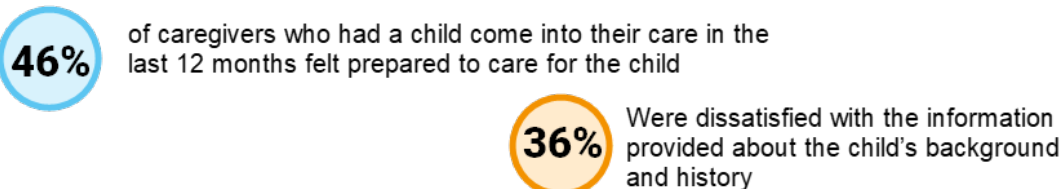
There were **increases across all areas** that caregivers were asked about in reference to their social worker compared to previous surveys



Satisfaction with Children's Social Workers



Preparedness to Care and Support Needs



Executive Summary

Background

Since 2019, Oranga Tamariki has provided caregivers with the opportunity to participate in a survey to better understand their experiences and to provide insights about the support provided by Oranga Tamariki.

In 2023, the survey was carried out through both phone and online.

This report presents the results from the 2023 survey, with comparisons to the results from previous caregiver surveys (2019, 2021, and 2022) where appropriate.

It's important to note, the report presents the findings from those who responded to the survey and may not represent the views of all caregivers.

Key findings

Between March 2023 and July 2023, 2,467 eligible caregivers were invited to participate in the Oranga Tamariki Caregiver Survey. In total, 1,164 caregivers participated, which is a response rate of 47%.

Who were the caregivers that responded to the survey?

- Over half (57%) of the caregivers were aged between 40 and 59
- Around one-third (36%) of the caregivers identified as Māori
- Two-thirds (64%) of the caregivers were whānau caregivers
- Most caregivers (56%) were providing long-term or permanent care for the child.

Who were the children that caregivers were caring for?

Caregivers were asked to think of a particular child when answering questions. These children:

- Were mostly school-aged
- Were mostly of Māori ethnicity
- Had mostly been with their caregiver for more than a year (83%) before this survey
- Were mostly reported to have positive wellbeing (86%).

Around half of the caregivers were satisfied with the support Oranga Tamariki provides and felt valued

- 52% of caregivers who responded to the survey felt satisfied or very satisfied with the support Oranga Tamariki provides, while 20% felt dissatisfied or very dissatisfied.



- Reasons for feeling satisfied or not, was mostly related to caregivers' interactions with social workers, the amount of supports they received and issues with the system as a whole.
- 55% of caregivers felt valued by Oranga Tamariki. Feeling valued comes from good support, communication, and appreciation from social workers. Caregivers discussed how they don't feel valued when they have poor communication and support from social workers or feel taken for granted.

Half of new caregivers felt prepared to become a caregiver

- 53% of new caregivers felt prepared to become a caregiver.

Half the caregivers who had a child come into their care in the last 12 months reported feeling prepared to care for a child and a third did not get the information they needed from Oranga Tamariki

- Less than half (46%) of these caregivers felt well prepared to care for the child.
- One-third (36%) of these caregivers expressed dissatisfaction with the information provided about the child's background and history.
- Satisfaction was also low with the information provided about the child's specific support needs related to health and wellbeing, learning and development, and interests or hobbies.
- Caregivers had suggestions for ways Oranga Tamariki could better support children coming into their care, including providing more information about the child, increasing help and support, providing more notice, and being tika and pono of care expectations.

Many caregivers are caring for children with support needs and have asked Oranga Tamariki for support

- The majority (76%) of caregivers had asked Oranga Tamariki for support, with just under half (47%) feeling the support received was enough.
- The areas of support most commonly needed by caregivers was in relation to: formal education/childcare/schooling (70%); financial support (59%) and whānau visits (58%).
- More than one-third (41%) of caregivers attributed the support needs to a disability or long-term health condition that the child had.

Half of caregivers thought allowances met their needs, and had not used respite care

- Over half (53%) of caregivers stated the allowances they received met the child's needs. Some caregivers expressed dissatisfaction with the effort required to obtain extra payments or reimbursement.
- Over half (58%) of caregivers had not used Oranga Tamariki respite care, the most common reason caregivers gave for not using respite care was because they didn't feel they needed it.



Most caregivers were satisfied with their Caregiver Social worker, but nearly half had experienced a change in the last 12 months

- Most caregivers were satisfied with their caregiver social worker:
 - 88% of caregivers felt their social worker respected them.
 - 78% reported that the caregiver social worker did what they said they would do.
- Nearly half (45%) of the caregivers experienced a change in their social worker within the last 12 months. Social worker turnover was said to cause discontinuity for caregivers with decision-making and support.

Three quarters of caregivers were satisfied with the child's social worker, but over half had also experienced a change in the last 12 months

- Caregivers were largely satisfied with the child's social worker:
 - 81% of caregivers felt the child's social worker respects the child, and
 - 77% reported the child's caregiver social worker respects them.
- More than half (55%) of the caregivers experienced a change in the child's social worker within the last 12 months, and they conveyed such change had an impact on both the child and themselves as caregivers.

Caring for the child had not impacted on the employment situation for half of the caregivers and for most there was no impact on housing

- 56% reported that caregiving had not impacted their employment situation.
- 85% said there was no impact on where they live.

There is a downward trend in the number of caregivers reporting they intend to end their caregiving role

- Over three quarters (78%) of caregivers reported that they were not thinking about discontinuing to be a caregiver for Oranga Tamariki.
- There has been a downward trend in the proportion of caregivers who have indicated they are thinking of discontinuing being a caregiver from 33% in 2021 to 22% in 2023.

Introduction

Oranga Tamariki is dedicated to supporting children in New Zealand whose wellbeing is at significant risk of harm now, or in the future. Oranga Tamariki believes that in the right environment, with the right people surrounding and nurturing them, children can, and should flourish. Oranga Tamariki needs to ensure their caregivers have what they need to provide stable, loving homes for children and to identify areas where change is needed.

In response to a need for a systematic picture of caregivers, their characteristics and needs, a survey programme for caregivers was undertaken. The first caregiver survey was run in 2019¹, and this survey was repeated in 2021, 2022², and 2023.

This report presents findings from the results of the 2023 survey and, where applicable, compares these to previous years. It's important to note that the results reflect those caregivers who responded to the survey, so may not represent the views of caregivers who didn't complete the survey.

Methodology

Data was collected through phone and online surveys

In February 2023, caregivers were sent a pre-notification letter and information sheet (See Appendix 2) from Oranga Tamariki which introduced the upcoming survey and offered the opportunity for them to opt out of the survey if they would prefer. The survey took place between March and July 2023.

Oranga Tamariki contracted 'Symphony Research' to undertake a phone survey on its behalf between March and May 2023. To balance the need for an appropriate response rate and low participant burden with the need for information, the decision was made to ask only a core set of questions on the phone with a longer survey offered online (See Appendix 3 for the questionnaire).

Following the phone survey, the online survey took place between June and July 2023. The online survey included caregivers who:

1. had participated in the phone survey and indicated their willingness to answer additional follow-up questions not included in the phone survey.
2. were not contacted for the phone survey – these caregivers were invited to take part in an online survey which included the 'core' questions asked in the phone survey as well as additional questions.

¹ [2019 Oranga Tamariki Caregiver Survey report](#)

² [2022 Oranga Tamariki Caregiver Survey Report](#)

Caregivers could also request a hard copy version of the survey to be sent to them.

As an acknowledgement of the time taken to complete the survey, caregivers had the option to enter a draw to win Prezzy® cards, with one \$250 card and five \$50 cards available.

Almost half of all eligible caregivers responded to the survey

The survey received a total of 1,164 combined phone and online survey responses out of the 2,476 eligible caregivers. This corresponds to a response rate of 47%, an increase from a 23% response rate in 2022.

The table below shows the responses by each survey mode. In total, 670 caregivers answered the core questions only through the phone survey and 494 caregivers answered the full set of survey questions through the phone and/or online survey.

Table 1. Number of responses by survey mode

Survey Mode	Number of responses
Phone survey only (core questions only)	670
Phone and follow-up online survey (all survey questions)	216
Online survey only (all survey questions)	278
Total responses	1,164

Data was weighted to ensure representativeness

Survey data were weighted to ensure that the sample is representative of the population of caregivers in the Oranga Tamariki caregiver database in terms of their relationship to their Oranga Tamariki child (whānau/non-whānau) and ethnicity (Māori/non-Māori). These groupings are based on self-reported data from survey questions that inquired about the caregiver's status as a whānau caregiver and their ethnicity.

There are some important things to note about the report

- 'Caregiver' is used for ease of reference throughout the report to refer to all Oranga Tamariki caregivers who responded to the survey. These may include people caring for children in their own whānau or extended family.
- Throughout the survey 'child' was used to describe children and young people of all ages. Children and young people in care can be aged up to 18 years old. Young people can also choose to be with caregivers up until they are 21 years old.



- When a caregiver was, or is, looking after multiple children, they were instructed to think about the child who has the next birthday and reflect on their experiences while caring for that child. This child is referred to as the 'nominated child'.
- Some questions were only asked of caregivers who had become a caregiver within the last 12 months and some only to caregivers who currently had a child in their care.
- For the results shown in this report 'don't know,' 'not applicable,' and 'prefer not to say' responses have been excluded.
- Percentages in the tables and graphs are based on weighted data to ensure that the survey results are representative of the population.
- It's important to note that percentages in the report may not always add up to 100% due to rounding or the allowance for multiple answers.
- The 'n=' figure is provided throughout the report to denote the number of responses received for a specific question or response, offering context when percentages are used. Note that not all questions were asked in both the phone and online survey, which resulted in the differences in the base "n=" for different questions.

A full overview of the methodology can be found in Appendix 1.

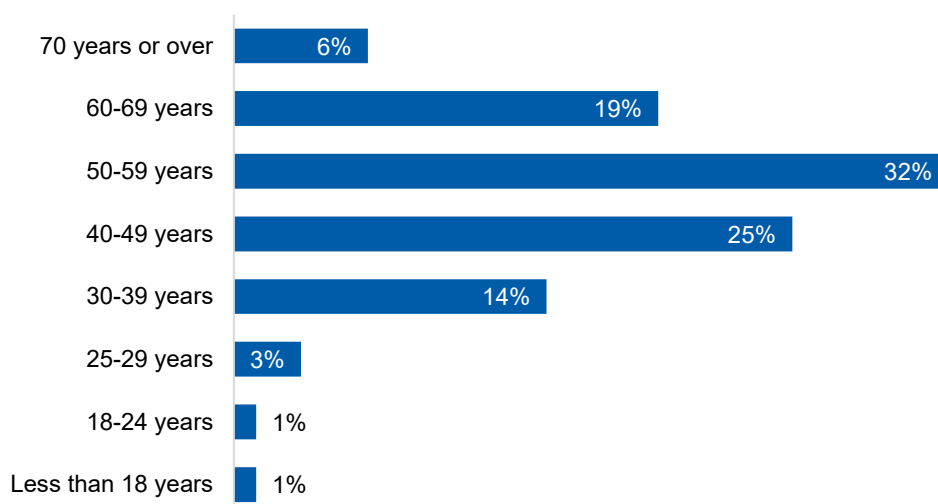
Who were the Oranga Tamariki caregivers who responded to the survey?

There are different ways people can care for children who need a safe home in which they can flourish. Oranga Tamariki caregivers are both whānau and non-whānau caregivers and can provide a range of care options for children. This following section outlines the characteristics of the caregivers who responded to the 2023 Oranga Tamariki Caregiver Survey.

Most caregivers were 40 years or older

Over half (57%) of the caregivers who responded to this survey were aged between 40 and 59. Twenty-five percent of respondents were aged over 60, while 19% were aged under 40. See Figure 1.

Figure 1. Caregiver age groups



Base: all respondents, excluding don't know, not answered and not applicable (n=489). Note this information was collected in the online survey only

Over two-thirds of the caregivers were in a household with more than one approved caregiver

In 59% of households there were two approved caregivers who could help care for the child, while 29% of respondents said that they were the only approved caregivers in their household. A further 12% had three or more caregivers in the home.

Around one-third of the caregivers identified as Māori

As shown in Table 2, a total of 36% of respondents were of Māori ethnicity, and 68% identified as New Zealand European (noting that caregivers could select multiple ethnicity groups).

Table 2. Ethnicity of caregivers

Caregiver ethnicity	Percentage (n=1,151*)
New Zealand European	68%
Māori	36%
Pacific	10%
Asian	2%
Other	10%

*Base: all respondents, excluding prefer not to say and not answered



Around two-thirds of respondents were family/whānau caregivers

Sixty-four percent of respondents (n=728) were recognised as whānau/family members of the child in their care, with the majority being grandparents (42%) or an aunt/uncle (41%). See Table 3. Notably, 92% (n=655) of these whānau caregivers were aware of their whakapapa/family connection before the child came into their care. In addition, a greater number of caregivers who identified as Māori were family/whānau to the child than non-Māori respondents (83%, compared to non-Māori, 53%).

Table 3. Caregiver relationship to the child

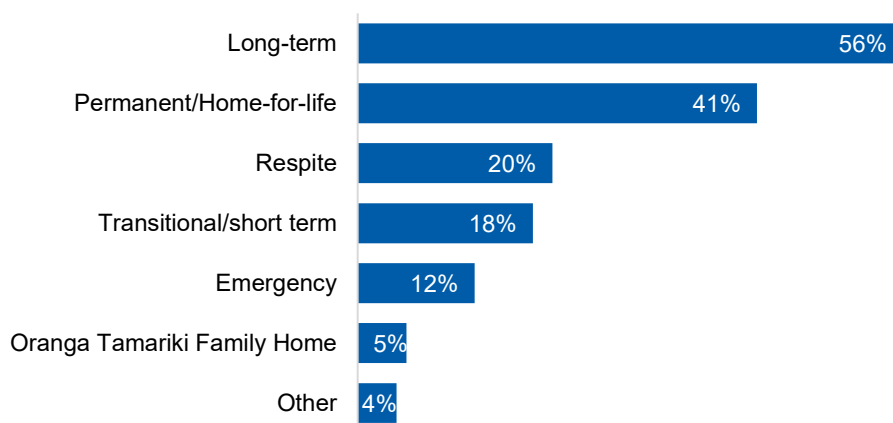
Relationship	Total (n=701*)
Grandparent or great grandparent	42%
Aunt or uncle or great aunt or uncle	41%
Other relative/in-law	7%
Cousin	5%
Sibling (step or biological)	2%
Whāngai	2%
Niece or nephew	1%

*Base: respondents with a Whānau/family/hapu/iwi relationship with the child, excluding don't know, not answered and not applicable.

Caregivers were mainly providing long-term or permanent care for the child

Most respondents (56%) reported providing long-term care, while 41% offered permanent/Home-for-life care, with a smaller proportion providing respite or transitional/short-term care. See Figure 2.

Figure 2. Type of care caregivers are providing



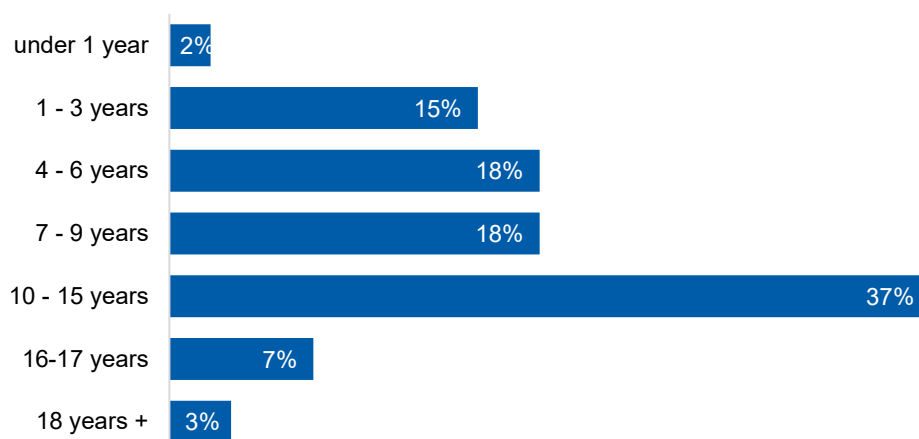
Base: respondents who have cared for a child in the last 12 months, excluding don't know, not applicable and not answered (n=1123)

Who were the children caregivers were caring for?

Most nominated children were school-aged

Around 35% of nominated children were under 6 years of age, with 55% aged between 7 and 15, and 10% aged 16 or over. See Figure 3.

Figure 3. Age groups of nominated children



Base: all respondents, excluding don't know, not answered and not applicable(n=1134)

Over half of the nominated children were Māori

Among these nominated children, 59% were of Māori ethnicity, and 53% identified as New Zealand European (noting that caregivers could select multiple ethnicity groups for the child). See Table 4.

Table 4. Nominated child ethnicity

Child ethnicity	Percentage (n=1,121*)
Māori	59%
New Zealand European	53%
Pacific	13%
Asian	2%
Other	10%

*Base: all respondents, excluding prefer not to say and not answered

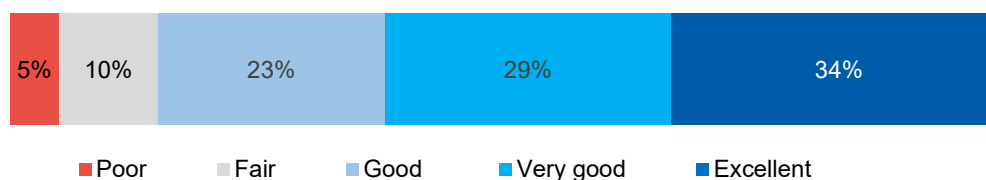
Most nominated children had been with their caregiver for more than a year

Eighty-three percent of the nominated children had been with their caregiver for more than a year prior to this survey.

Most children were reported to have positive wellbeing

As shown in Figure 4, 86% of caregivers rated the overall wellbeing of the child in their care as 'good,' 'very good,' or 'excellent' over the past 12 months.

Figure 4. The overall wellbeing of the nominated child in care



Base: all respondents, excluding don't know, not answered and not applicable (n=1123)

How satisfied were caregivers with the support provided by Oranga Tamariki?

Half of the caregivers were satisfied with the support provided by Oranga Tamariki

Fifty-two percent of caregivers who responded to the survey felt satisfied or very satisfied with the support Oranga Tamariki provided, and 20% felt dissatisfied or very dissatisfied. See Figure 5.

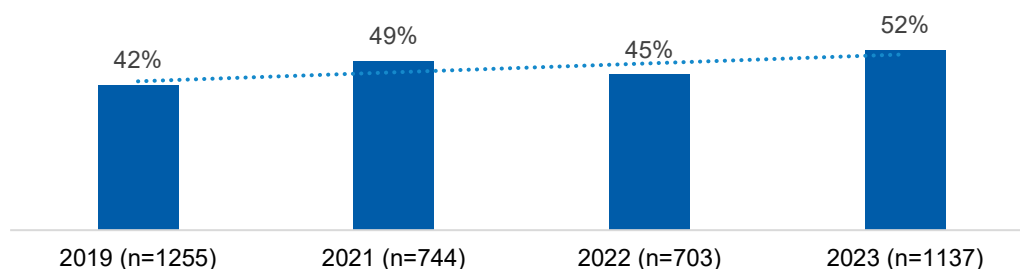
Figure 5. Caregiver satisfaction with the support Oranga Tamariki provides



Base: all respondents, excluding don't know, not answered and not applicable (n=1137)

Compared to previous years, satisfaction levels increased, from 42% in 2019, with a minor dip in 2022, before increasing to 52% in 2023 (note, this trend is not statistically significant). See Figure 6.

Figure 6. Percentage of caregivers 'Satisfied' or 'Very satisfied' with the support provided by Oranga Tamariki: 2019 to 2023 comparison



Base: all respondents, excluding don't know, not answered and not applicable

Caregivers gave comments explaining why they gave those satisfaction ratings

The survey asked respondents to comment why they gave the satisfaction rating that they did, 96% of caregivers (n=1,114) took the opportunity to provide comments. The comments were coded into themes under the two categories of 'satisfied' (n=748) or 'dissatisfied' (n=1,116)³. Some caregivers made comments that reflected their 'mixed feelings' and so their comments were coded under both the 'satisfied' and 'dissatisfied' categories. Some caregiver's comments also contained multiple themes and so were coded in more than one theme to reflect this.

Satisfaction mostly related to positive social worker interactions

Caregiver's comments reflected that their satisfaction with Oranga Tamariki was often due to positive interactions with social workers (n=626). In particular, these caregivers noted they were satisfied because of the:

- support received from social workers (n=252)
- availability and responsiveness of social workers they were interacting with (n=95)

Caregivers commented that social workers that were: available and responsive; had good communication; were in contact regularly; and were helpful contributed to their satisfaction with Oranga Tamariki:

"They help me a lot. I would ring or txt and they will respond ASAP. They are lovely people to work with specially my support worker."

"When there were emergency warnings and also the time of the flood, they supported our family and were the first call that we had received to ask if we were ok and if we needed anything."

Reasons for feeling dissatisfied also mostly related to interactions with social workers, a lack of support or issues with the system

Caregivers who made comments reflecting their dissatisfaction with Oranga Tamariki highlighted this was mostly related to:

- negative interactions with social workers (n=666)
- a lack of support from Oranga Tamariki (n= 208)
- issues with the care system generally (n=161)

Negative interactions with social workers

Negative interactions with social workers were commonly mentioned when it came to dissatisfaction. Some caregivers observed that the support they received was highly variable between social workers, resulting in inconsistencies in the services and interactions they received. Additionally, poor communication, untimely responses, poor social worker practice, and lack of follow through on decisions made between

³ Note: n= the number of times a comment was coded in a theme. Caregiver's comments were often coded across multiple themes.

caregivers and social workers were frequently raised in comments and grouped in this category.

“Communication is quite hard, especially if you have one person you have to communicate with. A little bit of difficulty with communication and being told the right thing. Getting told things at the last minute and stuff like that.”

Some caregivers (n=128) also commented on the high turnover of social workers and how this had negatively impacted the support they had received and on their satisfaction with Oranga Tamariki. Further impacts of social worker turnover on caregivers and children in care are discussed on page 33.

“The reason I'm a bit dissatisfied is that over the years I have had dealings with Oranga Tamariki and the family we have had around 17 workers. When you get to have a good worker, like the last one, we only had them for about two months, then she said she was leaving, and you get kicked over to another worker again.”

A lack of support from Oranga Tamariki

Caregivers often mentioned the difficulty in receiving the support they needed for the child in their care or for themselves:

“There has been no support for the child, he needs some mental behavioural support, and we are just having a battle trying to get anything.”

“Caregivers need way more support than what they are getting, it's incredibly sad to see caregivers at breaking point, when they are doing their best to care for children in their care.”

Issues with the care system

Issues with the Oranga Tamariki system were also mentioned, such as slow processes and approvals and payment issues:

“Very under resourced, very difficult to answer and support in a timely manner due to what seems to be hierarchal structure. Everything has to be approved. Waiting for approval for activities, support or expenses requires a lot of energy and follow up to get a resolution.”

Over half of the caregivers felt valued by Oranga Tamariki

Fifty-five percent of the caregivers who responded to the survey felt valued or very valued by Oranga Tamariki, while 18% felt undervalued or very undervalued. See Figure 7.

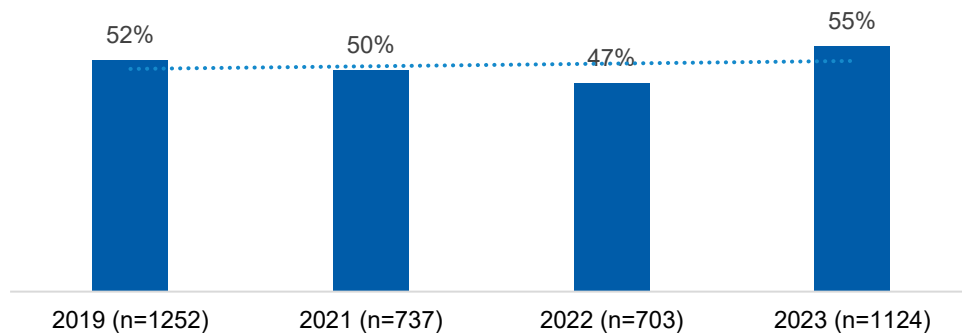
Figure 7. How valued caregivers feel by Oranga Tamariki



Base: all respondents, excluding don't know, not answered and not applicable (n=1124)

The proportion of caregivers who report feeling valued has remained relatively stable over the past four surveys, there was an increase of 8 percentage points in 2023 compared to 2022; however, this increase was not significant (see Figure 8).

Figure 8. Percentage of caregivers felt 'Valued or 'Very valued' by Oranga Tamariki: 2019 to 2023 comparison



Base: all respondents, excluding don't know, not answered and not applicable

Caregivers discussed what made them feel valued by Oranga Tamariki

A total of 92% of caregivers who responded to the survey (n=1074) commented on why they gave the rating they did for feeling valued by Oranga Tamariki. These themes are described below⁴.

⁴ Note: the n= the total number of times a comment was coded under each theme and caregiver's comments were coded into multiple themes



Feeling valued comes from good support, communication, and appreciation from social workers

For the caregivers who responded to this question, the main reasons caregivers gave for feeling valued by Oranga Tamariki were due to:

- social worker support (n=186)
- feeling recognised, valued, and appreciated (n=175)
- social workers being responsive, available, or making regular contact (n=86)

Caregiver's comments around reasons for feeling valued were similar to comments around satisfaction, with support from social workers, regular contact and responsiveness and good communication frequently mentioned. It appeared that communication and being attentive to needs acted as acknowledgement to caregivers that they were valued:

“Because when I have questions Oranga Tamariki are there with answers, help and support.”

“...she takes me to appointments or sorts other alternatives out for us when he's in need. She doesn't take very long to come back with the items that he needs.”

Appreciation and recognition from social workers were also important. Some caregivers discussed that small gestures like being told thank you, morning teas, and being praised for their efforts made them feel valued. Knowing that they were making a difference and doing a good job as a caregiver also contributed to this for some:

“Social workers are very supportive of my efforts to care for my granddaughter, tell me that I am doing a great job, and readily acknowledge the impact that doing so has had on my life.”

“They are very positive and grateful like every time I speak to them about what I am doing for the child in care, they make you feel good about doing it.”

Caregivers don't feel valued when they feel taken for granted

Comments from caregivers who mentioned reasons for why they did not feel valued by Oranga Tamariki **largely related to issues with social workers** (n=492). In particular this was due to:

- a lack of support (n=101)
- a lack of communication (n=69)

Issues with lack of support and communication

Feeling undervalued came from a lack of communication and support from social workers, such as not providing guidance, responding to requests for help, or missing appointments. Some caregivers felt that social workers were treating them poorly or had poor practice:



“Social workers treat us like we are invisible. We do not see our caregiver social worker ever. They do not keep appointments. Lack of communication from the social workers. Social workers talk down to us and are rude. Do not listen to our concerns and no support has been given.”

Within these issues of lack of support and communication, not being listened to for their views and opinions made caregivers feel undervalued, particularly if they wanted to advocate for the child in their care. Caregivers who felt undervalued often felt taken for granted for the care they gave with limited support from Oranga Tamariki:

“Sometimes we get left out of the loop [...] sometimes I feel left out and no feedback.”

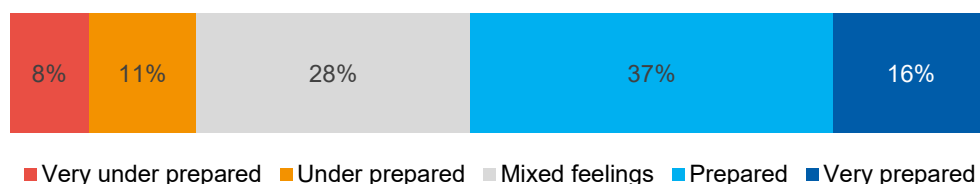
“I feel like you are a dumping ground, they put the children there and disappear, I've had birthdays not acknowledged.”

How supported and prepared did caregivers feel when the child came into their care?

Half of new caregivers felt prepared to become a caregiver, and satisfaction with the process to become a caregiver has remained stable

A total of 116 caregivers who responded to the survey indicated that they had become an Oranga Tamariki caregiver in the last 12 months. These caregivers were asked how well prepared they felt to become an Oranga Tamariki caregiver. Fifty-three percent of respondents felt prepared or very prepared, while 19% reported not feeling prepared. See Figure 9.

Figure 9. How prepared caregivers felt to become a caregiver

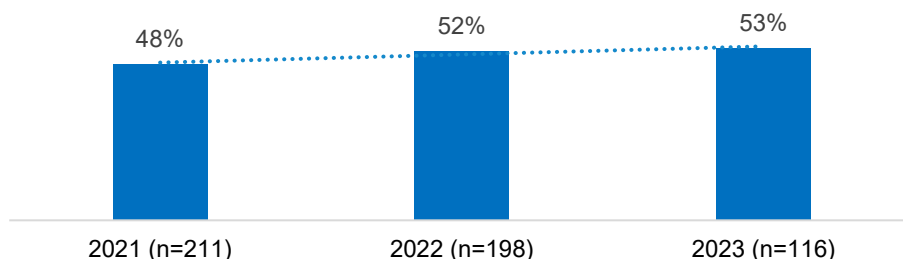


Base: respondents who had become an Oranga Tamariki caregiver in the last 12 months, excluding don't know, not applicable and not answered (n=116)

The overall percentage of respondents who felt prepared to become a caregiver remained stable between 2021 and 2023 at around half. See Figure 10.



Figure 10. Percentage of caregivers who felt 'Prepared' or 'Very prepared' to become a caregiver: 2021 to 2023 comparison



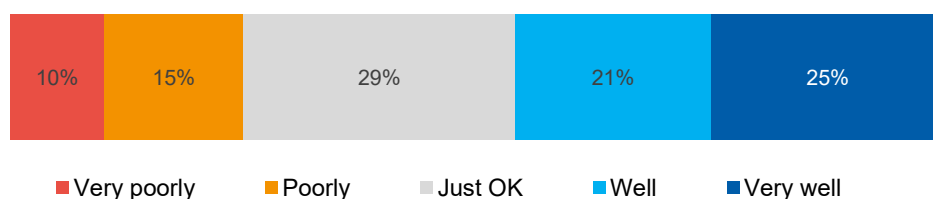
Base: respondents who have become an Oranga Tamariki caregiver in the last 12 months, excluding don't know, not applicable and not answered

Less than half of caregivers felt prepared when the child came into their care, and would have liked more information about them and their needs

Less than half of the caregivers who recently had a child come into their care felt well prepared by Oranga Tamariki to care for the child

Two hundred and five caregivers who responded to the survey indicated that they had a child first come into their care in the last 12 months. These caregivers were asked how well Oranga Tamariki prepared them to care. Overall, 46% percent of respondents reported feeling well prepared, while a quarter of new caregivers expressed a sense of being poorly prepared (see Figure 11). This is a slight decrease in the proportion of respondents who felt prepared when a child came into their care from previous surveys (50% in 2021 and 49% in 2022).

Figure 11. Caregiver view on how well Oranga Tamariki prepared them to care for their most recent child



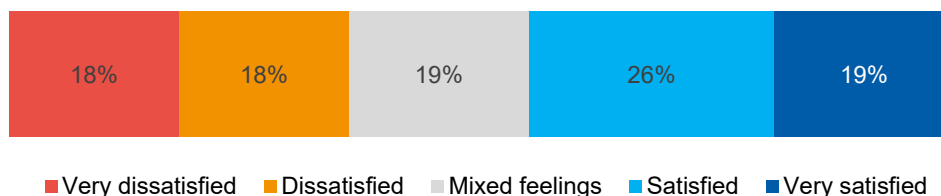
Base: respondents who had the child come into their care in the last 12 months, excluding don't know, not applicable and not answered (n=178)

One-third of caregivers expressed dissatisfaction with the information provided about the child's background and history

Caregivers who had a child first come into their care in the last 12 months (n=205) were asked about their satisfaction with the information Oranga Tamariki provided to them about the child's background and history. Less than half (45%) of respondents

felt satisfied or very satisfied with the provided information, while 36% felt dissatisfied or very dissatisfied. See Figure 12.

Figure 12. Caregiver overall satisfaction with information provided about the child’s background and history

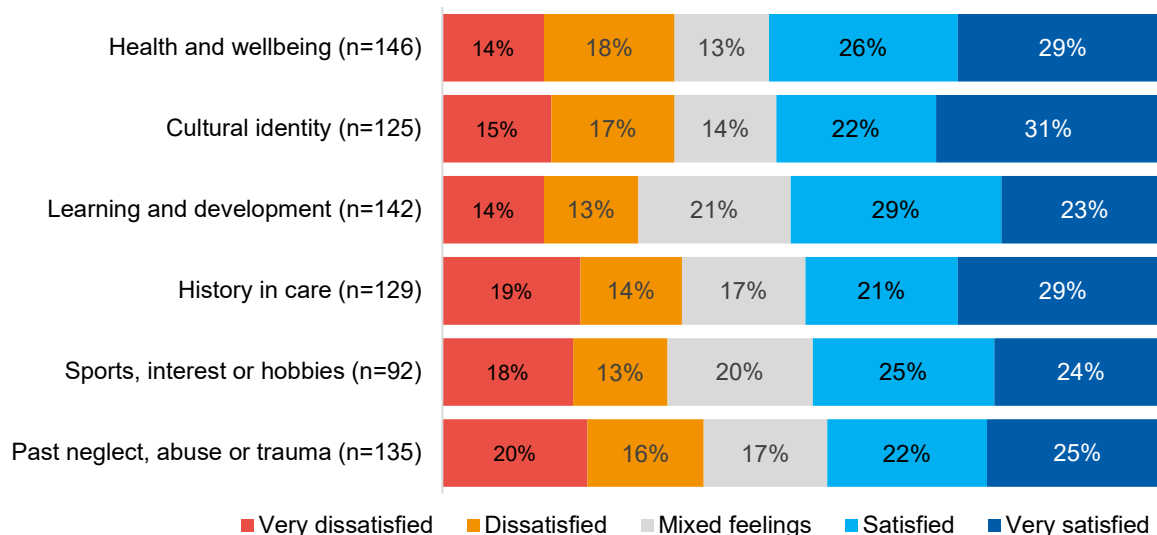


Base: respondents who had the child come into their care in the last 12 months, excluding don't know, not applicable and not answered (n=175)

Satisfaction was also comparatively low with the information provided about the child’s specific support needs

Caregivers who had a child first come into their care in the last 12 months (n=205) were also asked their level of satisfaction with the information they received about the child’s specific support needs across various areas. Approximately half of the caregivers answering these questions expressed satisfaction; however, one-third reported being dissatisfied or very dissatisfied with the information provided. The highest level of dissatisfaction was regarding information about the child’s past neglect, abuse, or trauma, with 36% expressing dissatisfaction with the information provided on this. See Figure 13.

Figure 13. Caregiver satisfaction with information provided about the child’s specific support needs



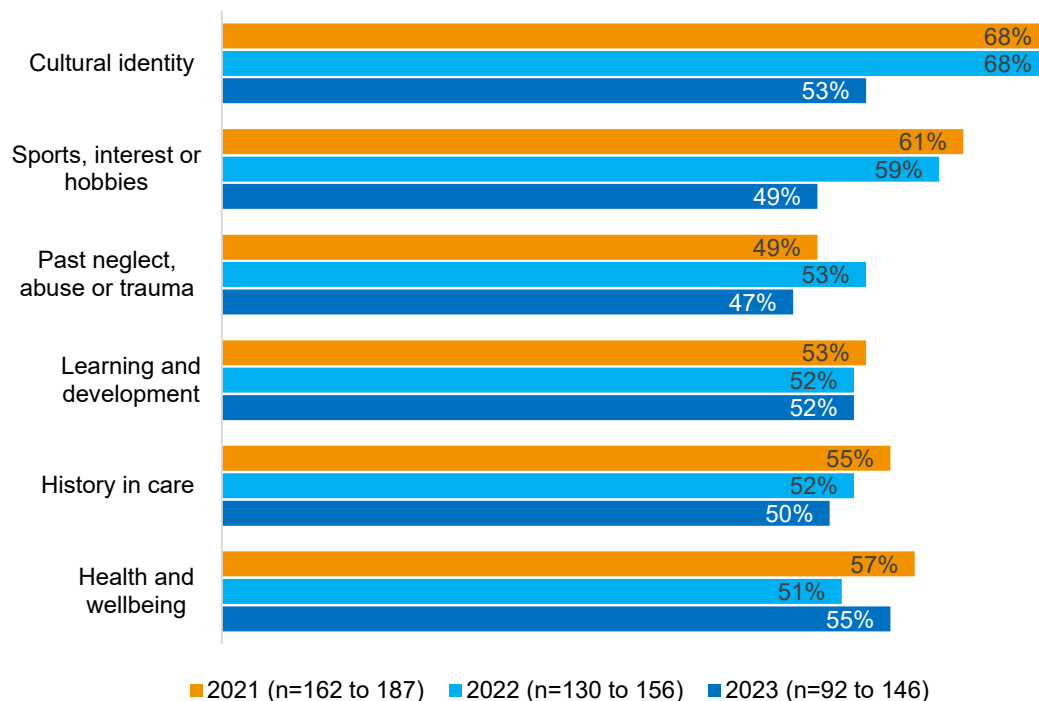
Base: respondents who had the child come into their care in the last 12 months, excluding don't know, not applicable and not answered

Compared to the survey results in 2021 and 2022, caregiver’s satisfaction with the information provided about the child’s specific support needs has decreased slightly in many areas. The most significant decrease is in the information provided about



the child’s cultural identity (a decrease of 15 percentage points from 2021) and information around a child’s sports, interest and hobbies (a decrease of 12 percentage points) from 2021. See Figure 14.

Figure 14. Caregiver satisfaction with information provided about the child’s specific support needs: 2021 to 2023 comparison



Base: respondents who had the child come into their care in the last 12 months, excluding don't know, not applicable and not answered

Caregivers had suggestions for ways Oranga Tamariki could better support children coming into their care

Caregivers who indicated that they were “just ok” or “poorly prepared” to care for the child when they came into their care were asked how Oranga Tamariki could have prepared them better. Themes that came from these answers (n=227) are discussed below.

Provide more information about the child to enable caregivers to do their jobs well

A total of 117 comments reflected how the lack of information caregivers had received meant they were not able to provide the needed care and support for the child as well as they could. Some caregivers received information about conditions the child may have but did not receive any information on how to give appropriate support to the child for that condition. Some of those who knew or were related to the child felt assumptions were made by Oranga Tamariki that they already knew important medical or personal history of the child:

“We needed to be educated or supported in a way to manage the child's needs. He was non-verbal. We got no support, no education, we were left to deal with it. The impact of not having support was tremendous on our family which led to lots of tension and altered relationships.”

“The child had a heap of trauma and self-harming issues that weren't disclosed and implicated the placement severely. I realise it was probably a last option, but the support wasn't there in a pretty traumatic placement for all parties concerned.”

Increase help and support

A total of 59 comments mentioned a lack of help and support to help prepare them for caregiving. Some mentioned children coming into their care did not have belongings or that they did not have support to help the child settle. Providing training on caregiving and conditions the child may have, physical items such as cots and bedding, and appropriate financial support for immediate needs was needed:

“They came to us with a bag of clothes and that was it.”

Provide more notice

A total of 22 comments discussed that the transition period for the child coming into their care was rushed and poorly communicated. While caregivers acknowledged emergency situations, this was often highly disruptive and sometimes introduced pressure for caregivers to act quickly:

“I had extremely short notice and was told that if I as a whanau member did not take the child she would go into care outside the whanau. I got a phone call at 4.30 in the afternoon, she was delivered in the next 20 minutes.”

“...They did not give us time to prepare or to think about it or anything.”

What are the support needs of the children in caregivers' care?

Two-thirds of children need support with education, childcare, or schooling

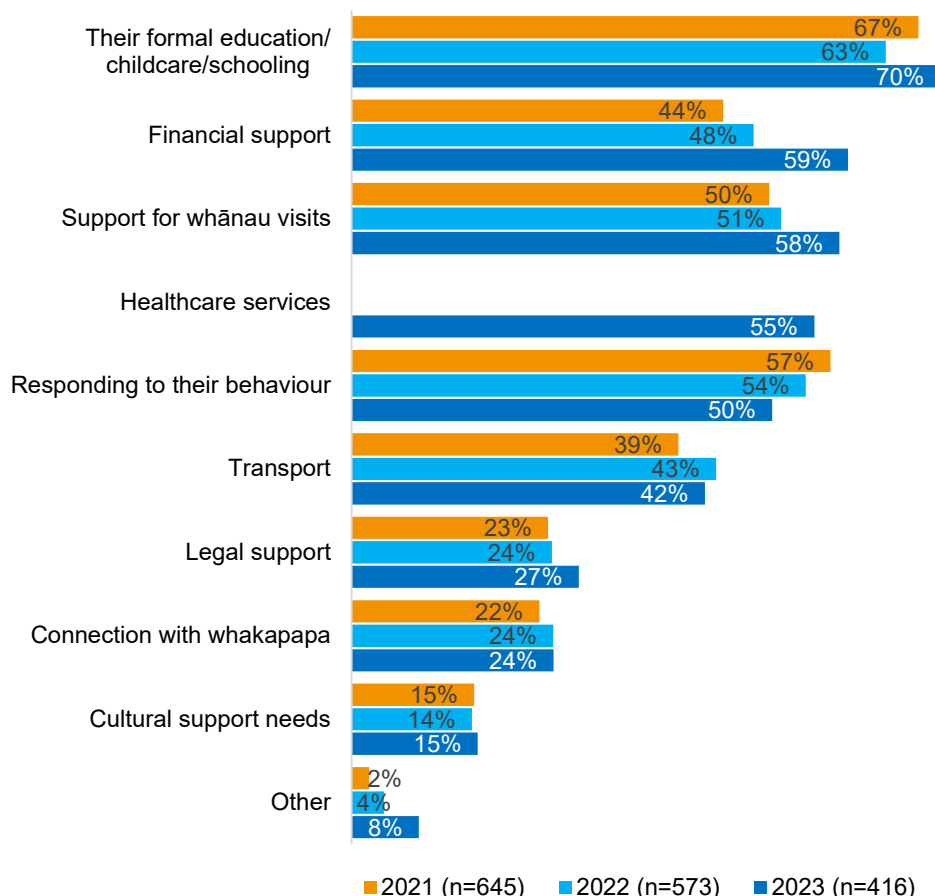
Caregivers were asked to indicate if the child they were caring for needed support in a range of areas over the past 12 months. They were provided with a list of nine possible types of support and had the opportunity to mention other types of support they required. Results shown in Figure 15 indicated:

- Seventy percent of respondents expressed a need for assistance with the child’s formal education, childcare, or schooling;
- Approximately 60% of respondents noted a need for financial support and support for whānau visits;
- About half of the respondents mentioned healthcare services and responding to the child’s behaviour as areas requiring support.

Whānau caregivers reported a higher need for support in various areas, particularly financial support (67% compared to non-whānau, 49%) and education/schooling (74% compared to non-whānau, 64%).

Comparing these results to the findings from previous surveys, there was an increase in the percentage of caregivers who indicated they needed support in different areas. The most notable was in relation to financial support (an increase of 15 percentage points compared to 2021) and whānau visits (an increase of eight percentage points compared to 2021). There was a decrease in the percentage of caregivers indicating the need for support responding to the child’s behaviour (decrease of seven percentage points compared to 2021). See Figure 15.

Figure 15. Child support needs: 2021-2023 comparison⁵



Base: respondents who have cared for a child in the last 12 months, excluding don't know, not applicable and not answered. Note this information was collected in the online survey only

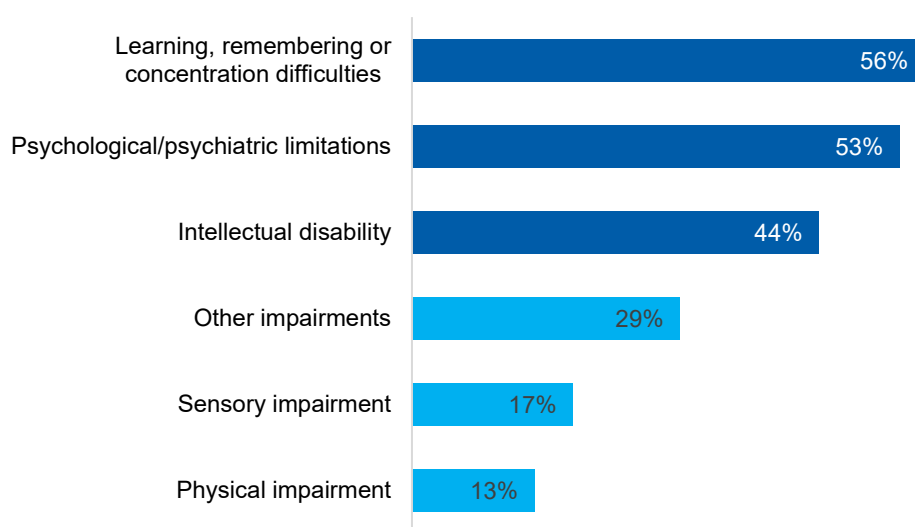
⁵ The questionnaire options for this question were refined in 2023, so it's inappropriate to compare the results for 'Healthcare services' to the findings in previous years.



More than one-third of caregivers attributed the need for support to a disability or long-term health condition

Of the caregivers who reported the child in their care needed support, 41% (n=167) attributed this to a disability or long-term health condition. As shown in Figure 16, these were most commonly learning, remembering, or concentration difficulties (56%), psychological limitations (53%), and intellectual disability (44%).

Figure 16. Support needs related to disability or long-term health conditions

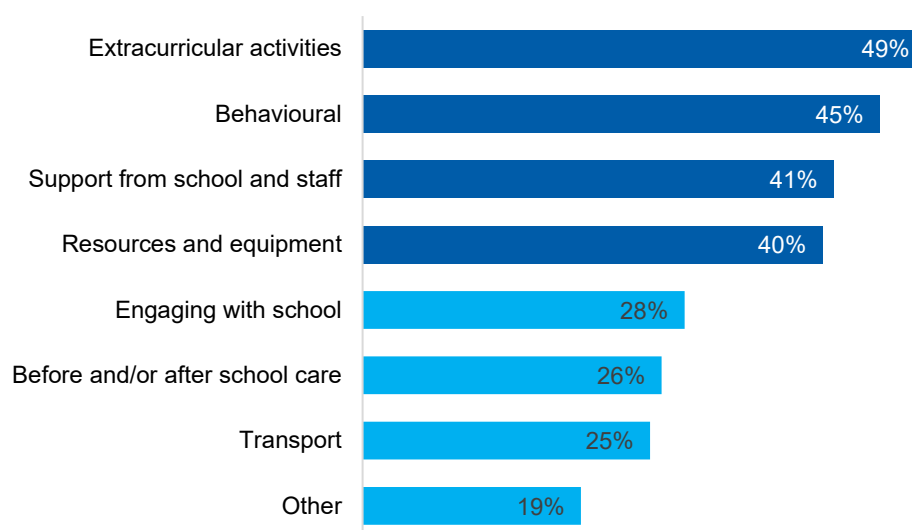


Base: respondents who attributed the support needs to a disability or long-term health condition that the child had, excluding don't know, not answered and not applicable (n=164)

Caregivers requiring assistance with a child's formal education sought support for extracurricular activities, behaviour, and school staff assistance

Among those caregivers who indicated a need for support in areas related to the child's formal education, childcare, or schooling (n=276); the need for support was primarily associated with: extracurricular activities (49%); behavioural support (45%); assistance from school and staff (41%); and resources and equipment (40%). See Figure 17.

Figure 17. Child's support needs with formal education, childcare, or schooling

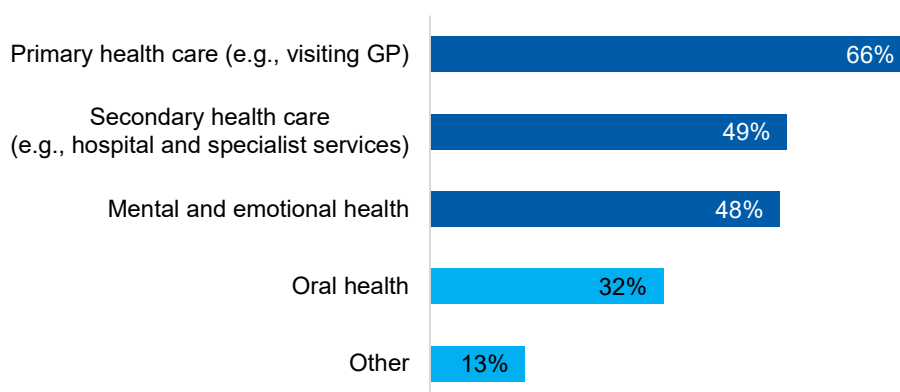


Base: respondents who needed support with the child's formal education in the last 12 months, excluding don't know, not answered and not applicable (n=276)

Assistance with primary healthcare was the most needed healthcare support identified

Among caregivers who expressed a need for assistance with the child's health care (n=230), 66% cited they needed support with primary health care (e.g., visiting a GP), while 49% mentioned secondary healthcare, such as hospital and specialist services, with 48% specifying they needed support for a child's mental and emotional health. See Figure 18.

Figure 18. Child's support needs with healthcare



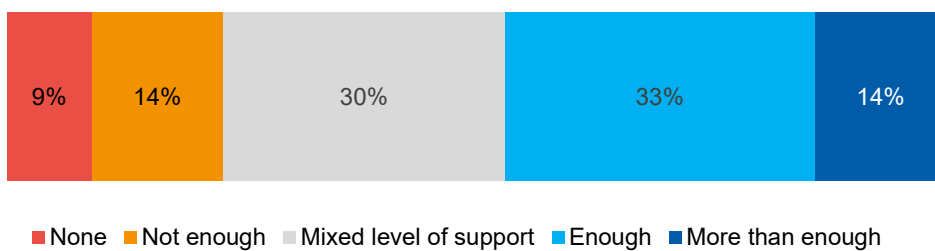
Base: respondents who needed support with the child's healthcare in the last 12 months (n=230)

Most caregivers had asked Oranga Tamariki for support and just under half felt what they received was enough

Caregivers were asked whether they had sought support from Oranga Tamariki for the child in the last 12 months. A total of 76% (n=332) of respondents indicated they had sought support.

Among those who had reached out to Oranga Tamariki for support, 47% reported they received enough or more than enough support, while 14% indicated they received inadequate support, and 9% said they received no support. See Figure 19.

Figure 19. The level of support caregivers received from Oranga Tamariki



Base: respondents who asked Oranga Tamariki for support for the child in the last 12 months, excluding don't know, not applicable and not answered (n= 332).
Note this information was collected in the online survey only

Caregivers were also asked about the sources of support they received for the child, apart from social workers. The majority of respondents (77%) stated that they got support from family and friends. Other common sources of support included lawyers (25%) and a counsellor/psychologist (24%).

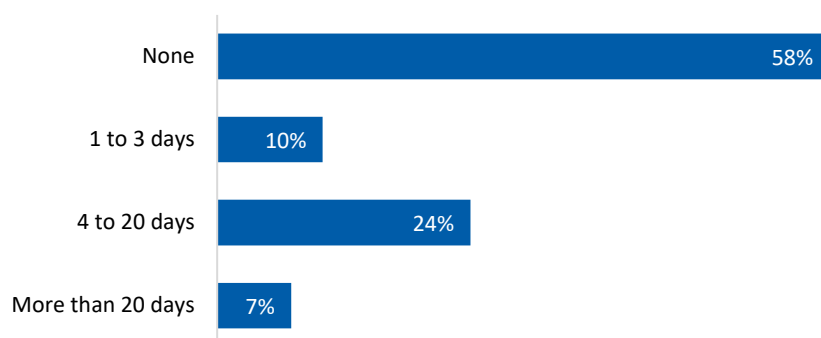
What are the support needs of caregivers?

Over half of caregivers have not used respite care

One of the ways Oranga Tamariki supports caregivers to continue to care and provide safe, stable, and loving homes for children is through respite care, to provide caregivers, and the children they care for, with a much-needed break.

Caregivers were asked about their use of Oranga Tamariki organised respite care. As shown in Figure 20, 58% of respondents had not used any Oranga Tamariki respite for the child in their care. The results remain similar to the survey findings in 2021 (63%) and 2022 (61%).

Figure 20. Amount of respite taken by caregivers in the last 12 months

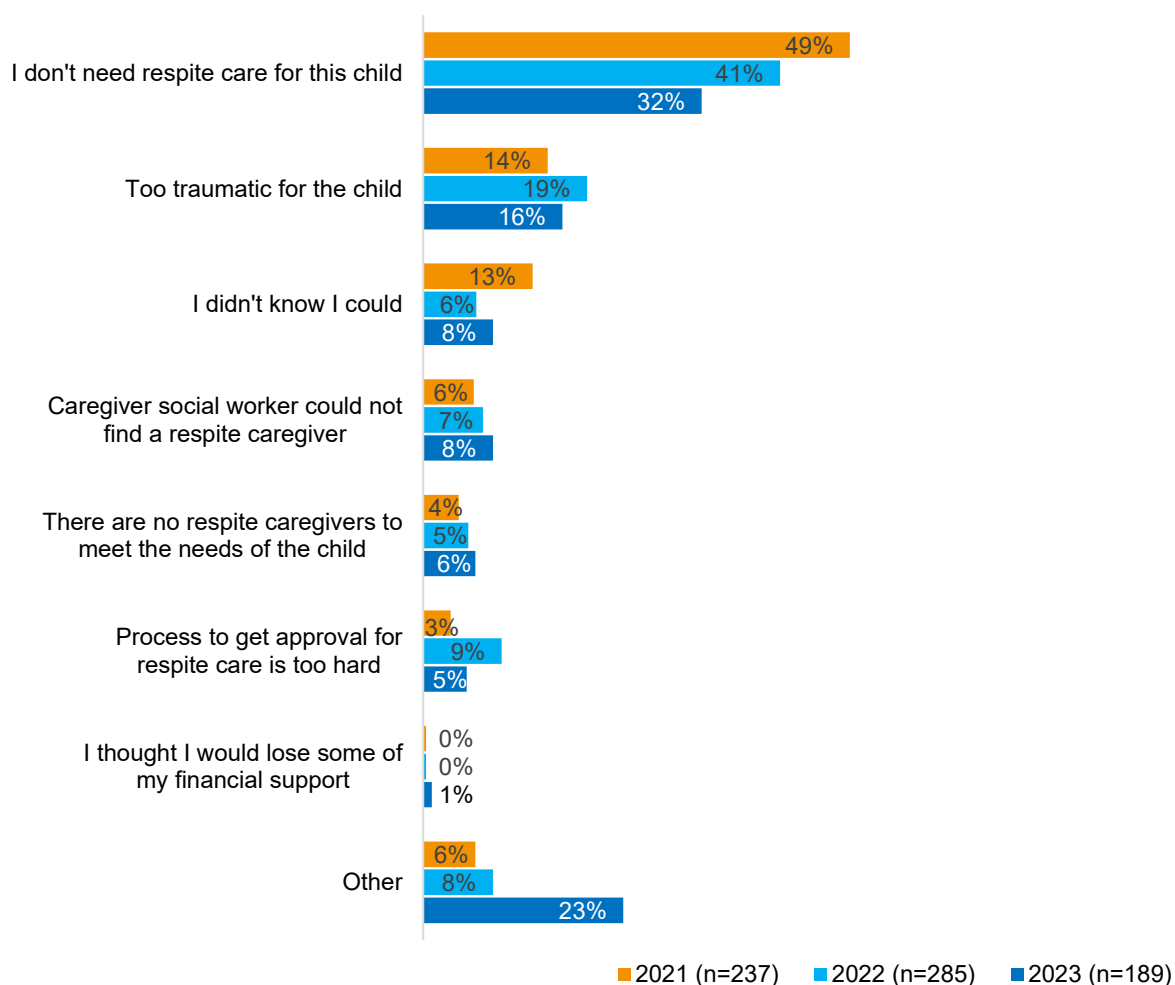


Base: respondents who cared for a child in the last 12 months, excluding respite caregivers, don't know, not answered and not applicable (n=330).

Note this information was collected in the online survey only

The main reason caregivers gave for not using respite care was because they didn't need it (32%), a decrease from 41% in 2022 and 49% in 2021. In 2023, there was an increase in the number of caregivers who responded 'other' (23% compared to 8% in 2022) many of whom specified the reason they had not used respite was because it was not in the best interests of the child. See Figure 21.

Figure 21. Main reasons caregivers had not used respite care in the last 12 months



Base: respondents who have cared for a child in the last 12 months and had not used respite care, excluding respite caregivers, don't know, not answered and not applicable

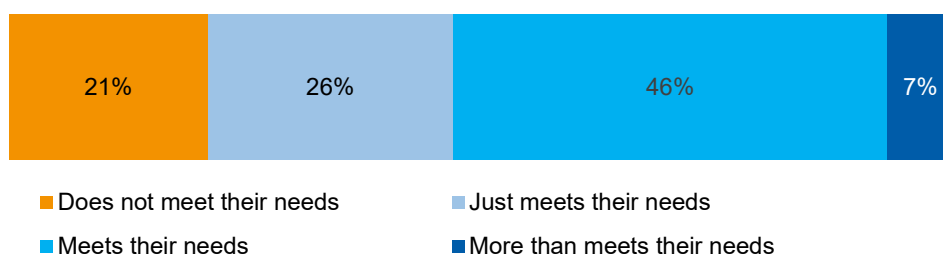
Financial supports

Over half of the caregivers stated the allowances they received met the child's needs

There are a number of allowances available to caregivers to help cover the costs of looking after a child in their care.

Caregivers were asked about the adequacy of the allowances they received to meet the child's needs. In response, 53% of caregivers stated that the allowances either met or more than met the child's needs (Figure 22).

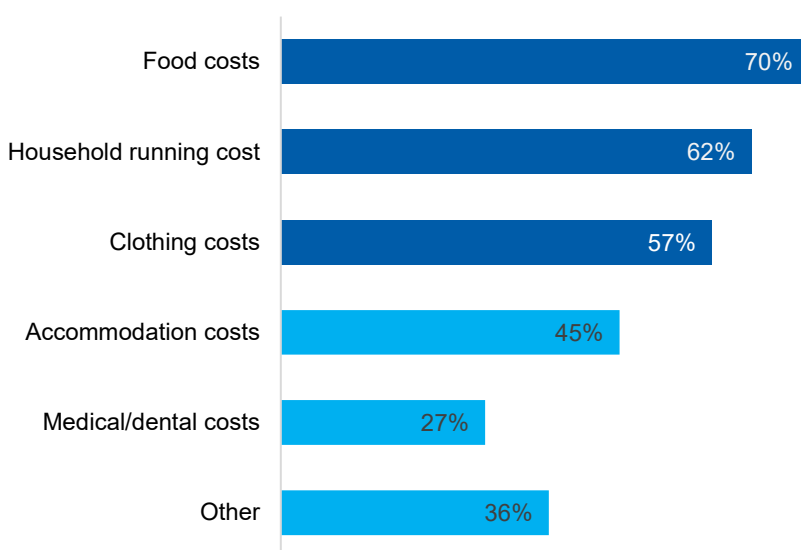
Figure 22. The adequacy of the allowances caregivers receive for looking after the child meet their needs



Base: Respondents who have cared for a child in the last 12 months, excluding don't know, not answered and not applicable (n=427).
Note this information was collected in the online survey only

Caregivers who stated the allowances did not meet their needs (n=89) were also asked what costs an additional allowance would help them with. The top three costs were food costs (70%), household running costs (62%), and clothing costs (57%). The most common costs mentioned by those who responded 'other' were for transport/petrol and holidays/family activities. See Figure 23.

Figure 23. Costs that an additional allowance would help with

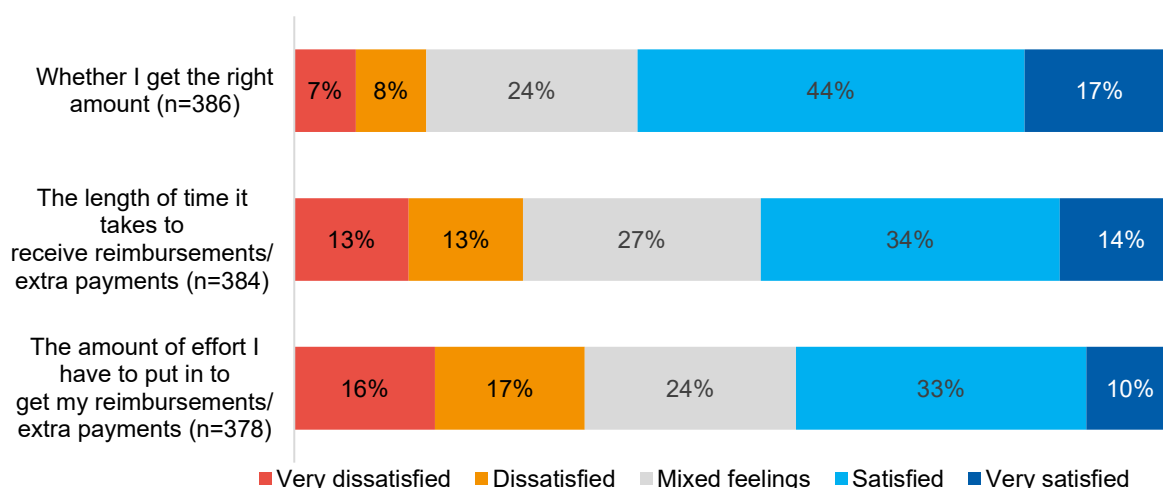


Base: respondents who stated the received allowances did not meet the child needs, excluding don't know, not answered and not applicable (n=89)

Caregivers expressed dissatisfaction with the effort required to obtain extra payments or reimbursements

In addition to the standard care allowance, there are extra payments that the child may qualify for, including buying a school uniform, school fees, club costs, camps, and school stationary. Caregivers were asked about their satisfaction with these reimbursements or extra payments from Oranga Tamariki. Results shown in Figure 24 show that 61% of respondents were satisfied that they received the right amount and 48% with the processing time, but 33% expressed dissatisfaction with the effort required to obtain these reimbursements or payments.

Figure 24. Caregiver satisfaction with the reimbursements or extra payments from Oranga Tamariki



Base: respondents who have cared for a child in the last 12 months, excluding don't know, not answered and not applicable.
 Note this information was collected in the online survey only

Half of the caregivers who responded considered the funds they received for school related costs to be enough but faced additional costs when the child first arrived

Regarding the funds received from Oranga Tamariki over the last 12 months for school related costs, 53% of respondents considered the amount to be enough, while 22% thought it was not enough. Additionally, 25% reported that they didn't have school-related costs.

Caregivers also faced additional costs when the child first arrived in their care. The main additional costs were related to:

- Additional clothing (62%)
- Furniture (59%)
- Supermarket costs (59%)
- Linen (49%)

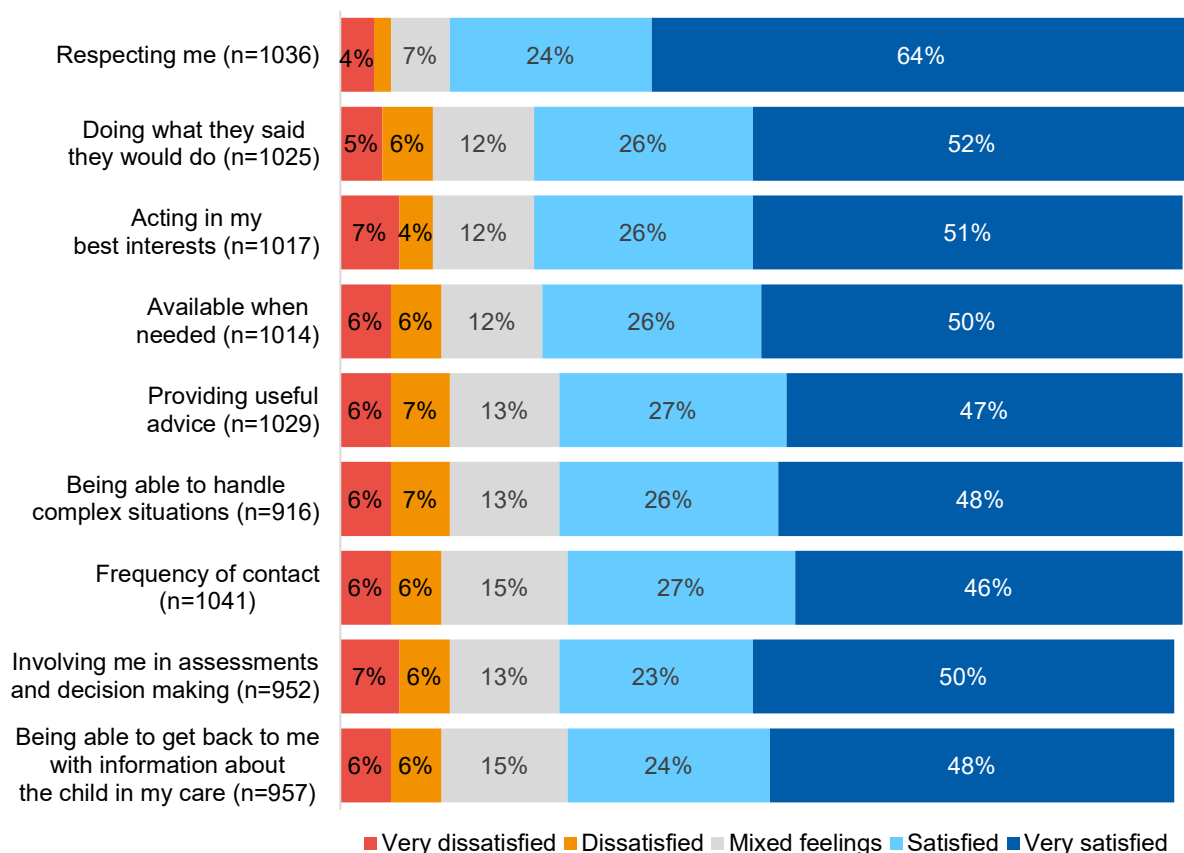
Caregiver's experiences with social workers and Oranga Tamariki

To ensure every caregiver gets the support they need throughout their caregiving journey, caregivers have an Oranga Tamariki Caregiver Social worker who is responsible for supporting caregivers - including caregiver assessments, support plans, and ongoing training and guidance.

Three quarters of caregivers were satisfied with support from their caregiver social worker

Caregivers were asked a range of questions about their experiences and satisfaction with their caregiver social worker. Respondents were most satisfied with their social worker respecting them (88%), doing what they said they would do (78%), and acting in their best interests (77%). On average, 76% of respondents reported satisfaction with the support they received from their caregiver social worker. See Figure 25.

Figure 25. Caregiver satisfaction with their caregiver social worker across several areas

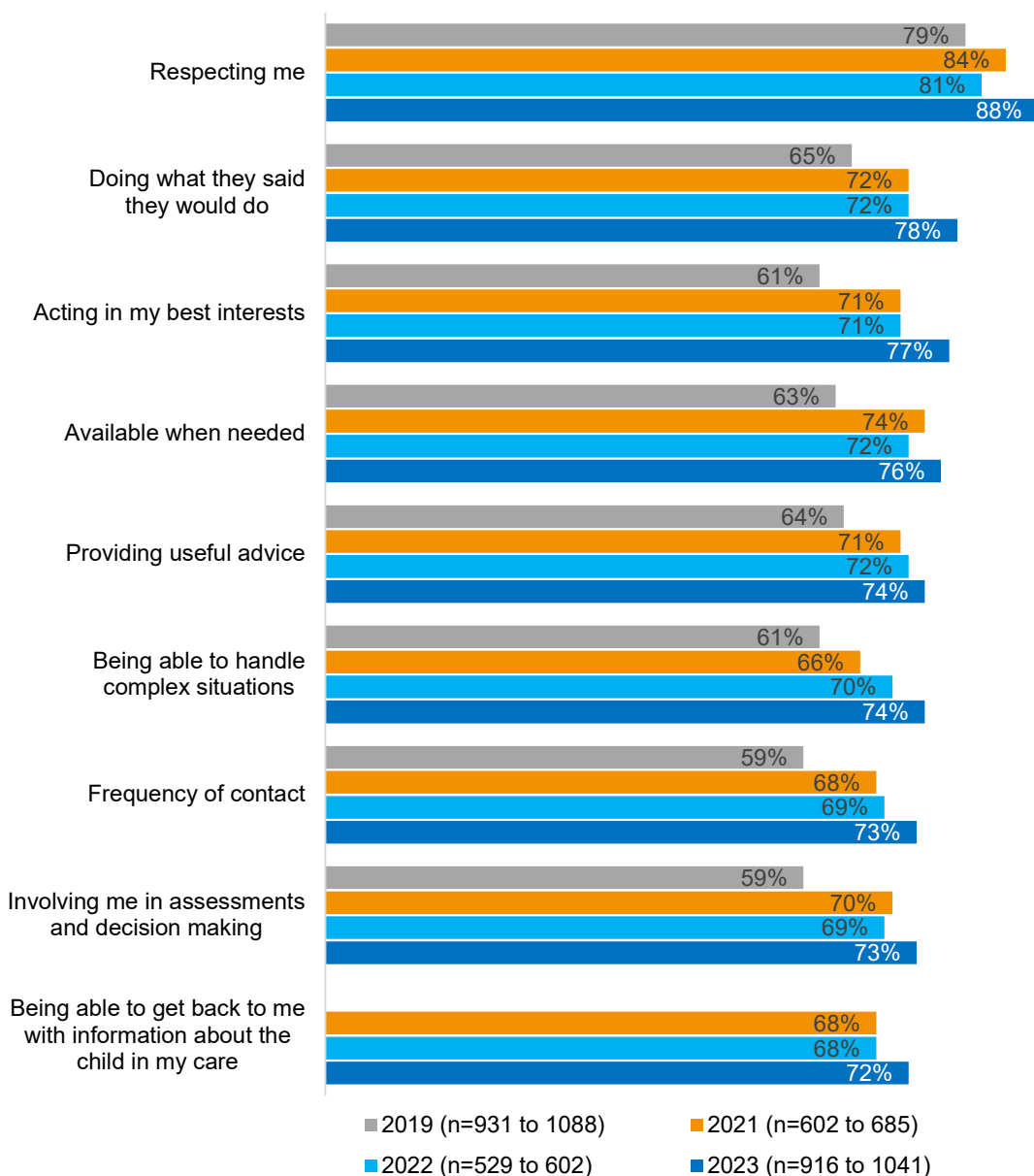


Base: respondents who have cared for a child in the last 12 months, excluding don't know, not answered and not applicable



When comparing the results across years, caregivers' satisfaction with their social worker has significantly⁶ increased across all areas except in the areas of "respecting me" and "being able to get back to me with information about the child in my care". See Figure 26.

Figure 26. Percentage of caregivers reporting that they were satisfied with the caregiver social worker on the areas listed: 2019 to 2023 comparison.



Base: respondents who have cared for a child in the last 12 months, excluding don't know, not answered and not applicable

⁶ "Doing what they said they would do" - F-statistic: 26.25 on 1 and 2 DF, p-value <0.05
 "Acting in my best interests" - F-statistic: 33 on 1 and 2 DF, p-value <0.05
 "Available when needed" - F-statistic: 9.637 on 1 and 2 DF, p-value <0.1
 "Providing useful advice" - F-statistic: 40.26 on 1 and 2 DF, p-value <0.05
 "Being able to handle complex situations" - F-statistic: 118.2 on 1 and 2 DF, p-value <0.05
 "Frequency of contact" - F-statistic: 56.19 on 1 and 2 DF, p-value <0.05
 "Involving me in assessments and decision making" - F-statistic: 15.08 on 1 and 2 DF, p-value <0.1



Nearly half of the caregivers experienced a change in their social worker within the last 12 months, which had implications for caregivers in various ways

Caregivers (n=415) were also asked if their caregiver social worker had changed in the last 12 months and if so, the impact this had on them⁷. Forty-five percent (n=187) of respondents reported that their social worker had changed.

Among those caregivers who experienced a change in their social worker, 51% (n=94) reported that this change had implications for them in various ways.

High social worker turnover affected decision-making and support

A total of 50 comments reported the high turnover had a negative impact for them and meant different decisions were made for the child. As well as being disruptive, this resulted in inconsistency and confusion for the caregiver and child. Caregivers mentioned support and entitlements often changed with new social workers, and burden was on the caregiver to update new social workers. The remaining themes brought up by caregivers discussed not having a social worker currently or not knowing who they were (n=16) or the time it took to rebuild relationships and trust with social workers when turn over occurred (n=18):

“It's having to explain the child's issues over and over when it's already documented and should be read up on before meeting us, and then not knowing what to do for the issues, then taking months to even get an appointment for assessment, and telling this to every case worker it just gets passed on and forgotten about.”

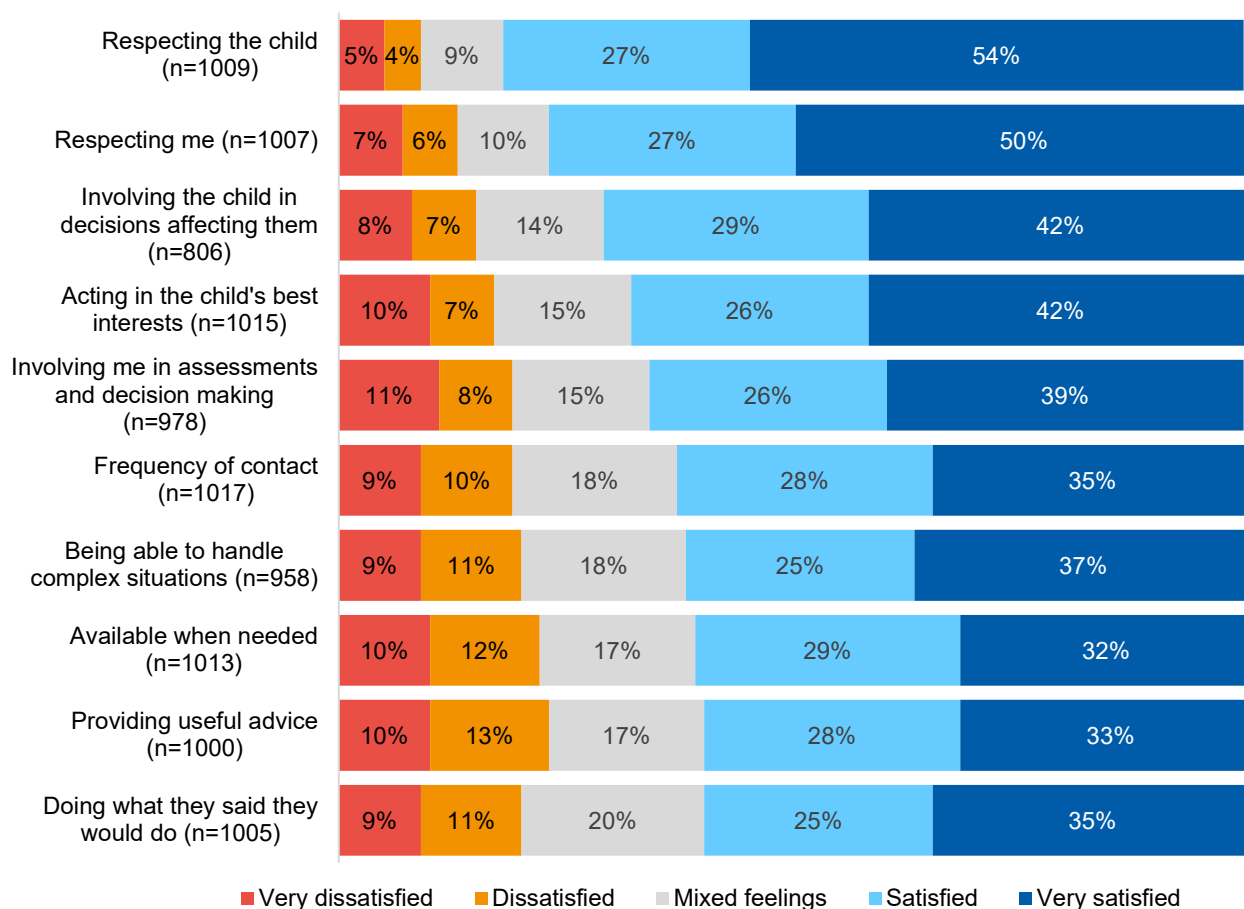
However, it is also important to note that 33 comments talked about how the change of social worker was positive, in terms of having a better-quality social worker now than previously:

Caregivers were largely satisfied with the child's social worker

Caregivers were also asked a range of questions regarding their experience and satisfaction with the child's social worker. Caregivers were most satisfied with the child's social worker respecting the child (81%), respecting them (77%), and involving the child in decisions affecting them (71%). On average, 67% of respondents were satisfied with the child's social worker across all areas asked about. See Figure 27.

⁷ Note this information was collected from the online survey only.

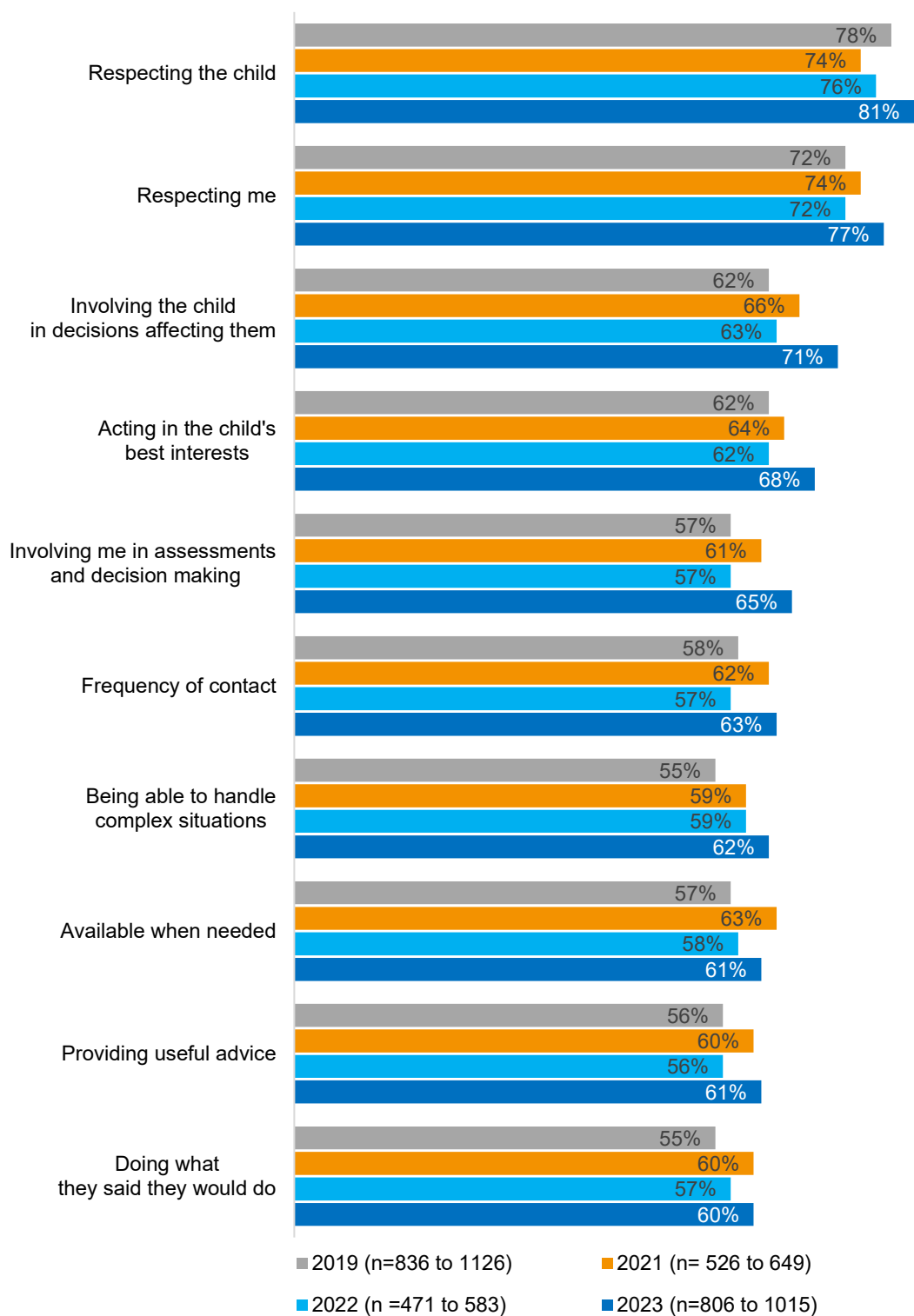
Figure 27. Caregiver satisfaction with the child’s social worker across several areas



Base: respondents who have cared for a child in the last 12 months, excluding don't know, not answered and not applicable

When we compare the results to the 2019 and 2022 surveys for this question, we see that caregivers’ satisfaction with the child’s social worker had slight increases in most areas (note, these increases were not statistically significant). See Figure 28.

Figure 28. Percentage of caregivers reporting that they were satisfied with the child's social worker on the areas listed. 2019 to 2023 comparison



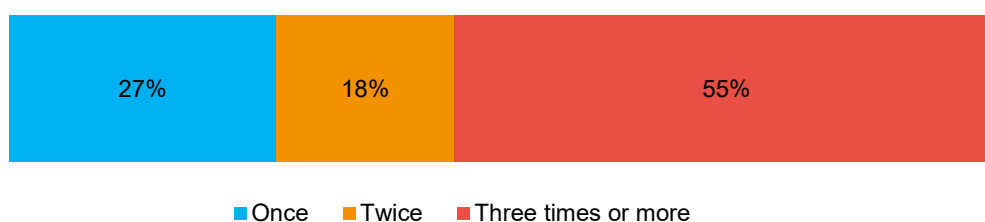
Base: respondents who have cared for a child in the last 12 months, excluding don't know, not answered and not applicable



More than half of the caregivers experienced a change in the child social worker within the last 12 months

When asked if the child's social worker had changed in the last 12 months, 55% (n=219) confirmed such a change⁸. Among these respondents, 55% reported that the child's social worker had changed three times or more in the last 12 months. See Figure 29.

Figure 29. The number of times that the child's social worker has changed



Base: respondents who said the child's social worker had changed in the last 12 months, excluding don't know, not answered and not applicable (n=209)

High social worker turnover was unsettling for the child

Caregivers were asked to explain the impact the change in social worker had on the child. A total of 40 caregivers commented that the frequent change of social workers impacted the child's trust and the longevity of the relationship. It was said the changing of social workers created feelings of abandonment and loss of importance for the child and was retraumatizing:

“Child does not trust social workers. Does not let his guard down to allow any sort of relationship for fear of social worker leaving - which they all eventually do.”

A further 26 comments talked about the time it took for the relationship to build with social workers. A familiar enough relationship needed to be established before it was said children could feel heard by their social workers:

“Has taken quite some time to be comfortable with the transition to new social worker on each occasion. Became annoyed when his choices about going to stay with family were not heard.”

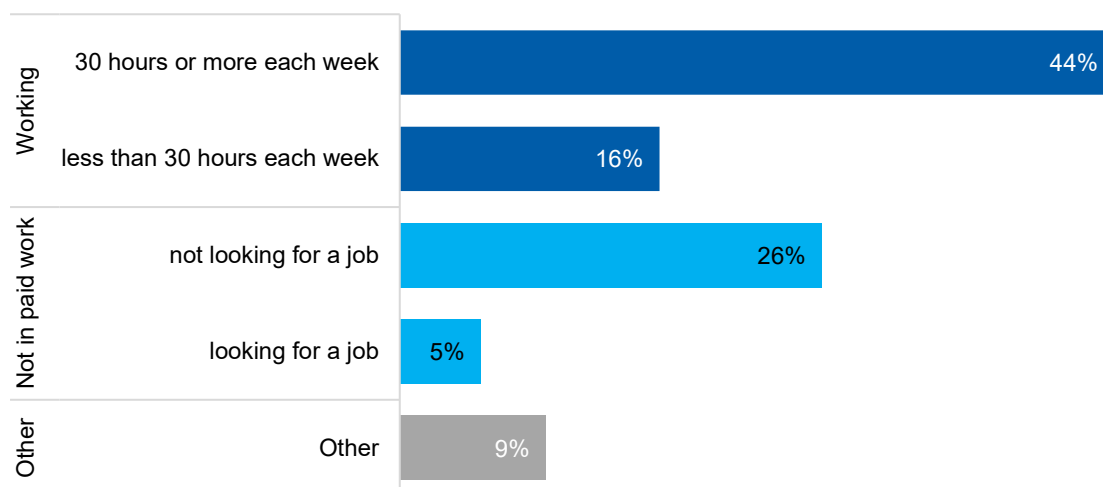
⁸ Note this information was collected from the online survey only.

The impact of caregiving

Most caregivers reported that caregiving had not impacted their employment situation

In the survey, caregivers were asked about their current employment status. As shown in Figure 30, 60% of respondents were employed, with 44% working full-time and 16% working part-time. While 26% were not engaged in paid work or job-seeking.

Figure 30. Caregivers reported employment status



Base: respondents who have cared for a child in the last 12 months, excluding don't know, not answered and not applicable (n=420). Note this information was collected in the online survey only

Caregivers were asked whether caring for the child in question had impacted their employment situation. Fifty-six percent (n=476) of respondents reported no impact. However, for a third of caregivers there was an impact, with 22% (n=186) reducing their working hours, and 11% (n=94) stating that they had to leave their job.

Comparing these figures to those of previous surveys, a larger proportion of respondents in the current survey reported that caring for the child had not impacted their employment situation (46% in 2022 and 51% in 2021).

Caregiving had not impacted on housing for most caregivers

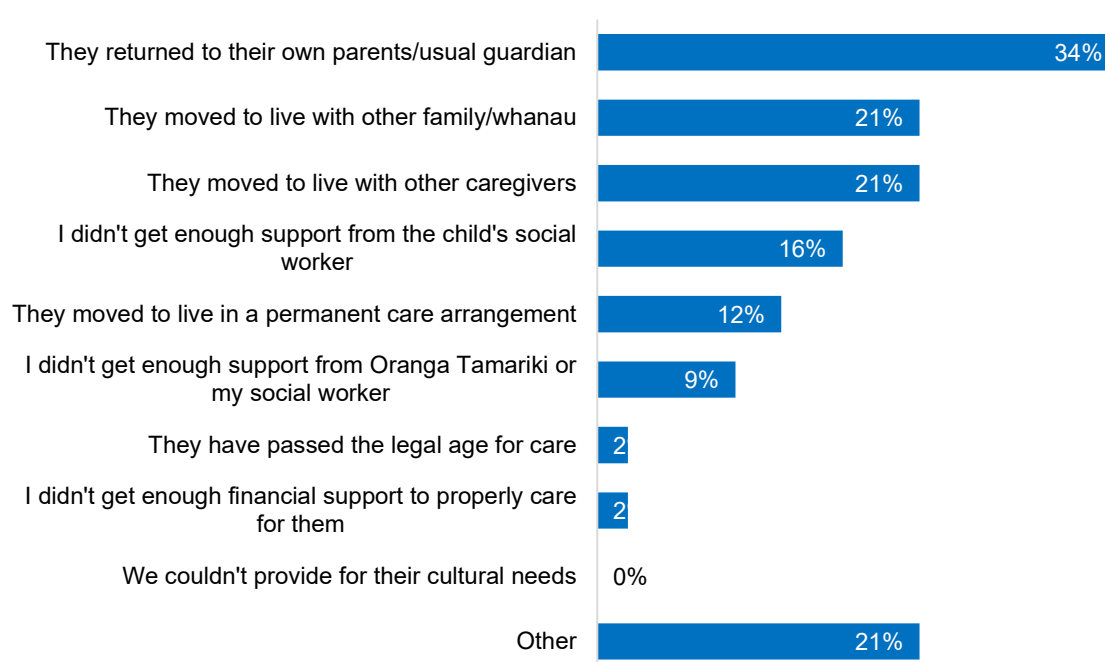
Caregivers were also asked whether caring for the child had impacted their housing situation. Most respondents (85%, n=741) indicated that their housing situation remained unaffected, representing an increase from 79% in 2021 and 78% in 2022. A small proportion (7%, n=57) reported renting or purchasing a larger house in response to their caregiving role, and 5% (n=45) mentioned relocating to a different area.

Ending the caregiver journey

A change in care arrangements was the primary reason for a child leaving their caregiver's care

Just over a quarter of respondents (n=97) reported that they had a child in their care leave in the past 12 months. As shown in Figure 31, the primary reason for a child's departure was a change in care arrangements such as returning to their own family/whānau, moving to live with other family/whānau, and moving to live with different caregivers.

Figure 31. Reason for a child leaving the caregiver's care

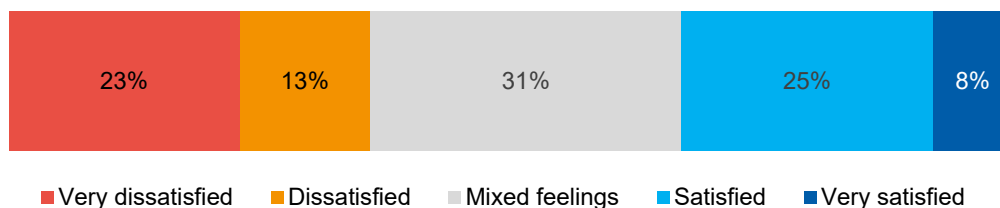


Base: respondents whose child left their care in the last 12 months, excluding don't know, not answered and not applicable (n=97).

Note this information was collected in the online survey only

When asked if they felt satisfied with the support received from Oranga Tamariki during the child's departure, 33% of respondents expressed satisfaction, while 36% felt dissatisfied. See Figure 32.

Figure 32. Caregiver satisfaction with the support received from Oranga Tamariki when the child left their care



Base: respondents whose child left their care in the last 12 months, excluding don't know, not answered and not applicable (n=95). Note this information was collected in the online survey only

Over half of caregivers would recommend caregiving to others

Non-whānau caregivers were asked whether they would recommend becoming a caregiver through Oranga Tamariki based on their experiences, 57% (n=213) of respondents affirmed they would, but 23% (n=86) indicated they would be unlikely to and 20% (n=77) would maybe recommend it.

Caregivers that wouldn't recommend caregiving had a variety of reasons for doing so

In the open text questions, some caregivers (n=199) spoke about how the negative impacts of caregiving had affected their recommendation of caregiving to others.

Negative impact on wellbeing, challenges accessing support, social workers, and navigating the system were often stated as reasons they wouldn't recommend caregiving

The main reasons caregivers gave for not recommending being an Oranga Tamariki Caregiver were due to⁹:

- the impact on the caregiver (n=84)
- a lack of support (n=39)
- issues with Oranga Tamariki and the system (n=38)
- feeling caregiving is only for people with specific traits (n=39)

The impact on the caregiver

It was identified in comments that the impact on the caregiver was a large reason for caregivers not recommending caregiving to others. Impact on the caregiver included statements that caregiving was challenging and demanding or had negatively

⁹ Note: the n= the total number of times a comment was coded under each theme and caregiver's comments were coded into multiple themes

affected their mental health, relationships with other family members or mental health.

A lack of support

Many caregivers stated they were looking after a child with high needs and receiving limited support to do this from Oranga Tamariki. Caregiver burnout and reduced wellbeing to the caregiver and their family were also stated as reasons for not recommending caregiving:

“It’s incredibly frustrating caring for a child with complex needs without the support and resources that OT is supposed to provide.”

“It is very challenging looking after a child with early trauma. It depletes your energy and can reduce your own wellbeing.”

Issues with Oranga Tamariki and the system

Some caregivers discussed that the system wasn’t working for them or the children in their care. They discussed feeling like they were fighting the system, or discussed the burden of bureaucratic processes and policies:

“Because of some of the regulations that some of the social workers follow, the government policy and OTs policy can make life difficult for caregivers and in some cases heart breaking”

Feeling caregiving is only for people with specific traits

While many did state caregiving was rewarding, they said they would only recommend caregiving to those who are aware of what caregiving would involve and to potential caregivers who have the right “traits”, such as having a support system and high resilience to the ups and downs of caregiving:

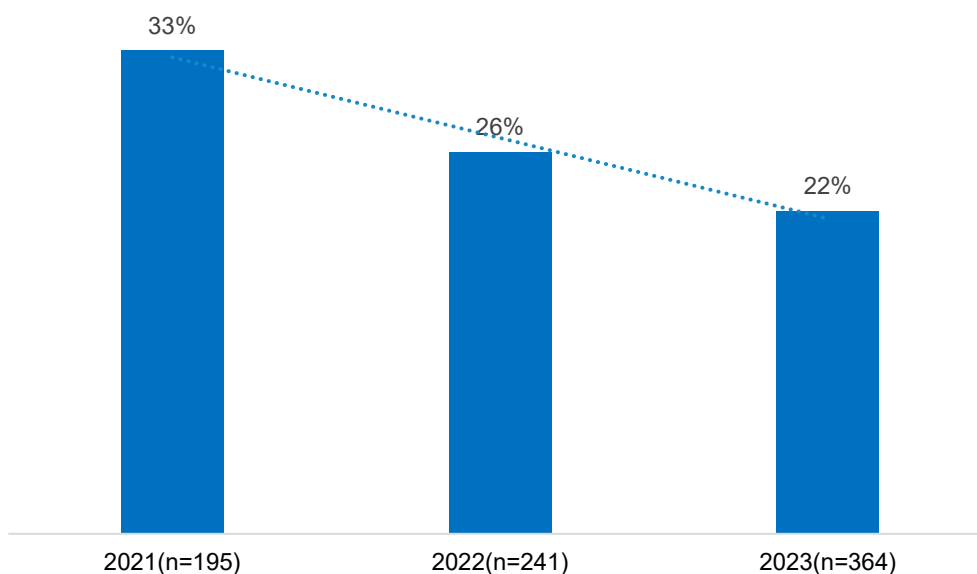
“It is a very demanding job, it has often put a lot of stress on our family, particularly our marriage. So, I only recommend it to people if they are aware of this. But it is rewarding.”

“I would not go randomly recommending fostering to anybody, it really takes a lot of grit.” “...it takes a certain kind of person.”

There has been a drop in non-whānau caregivers considering stopping their caregiving role since 2021

Non-whānau caregivers were also asked if they were thinking about discontinuing to be a caregiver for Oranga Tamariki. Most respondents (78%, n=285) reported that they were not considering stopping. However, 22% (n=79) of respondents indicated that they were thinking of discontinuing, there has been a downwards trend in the proportion of caregivers considering stopping their caregiving role since 2021. See Figure 33.

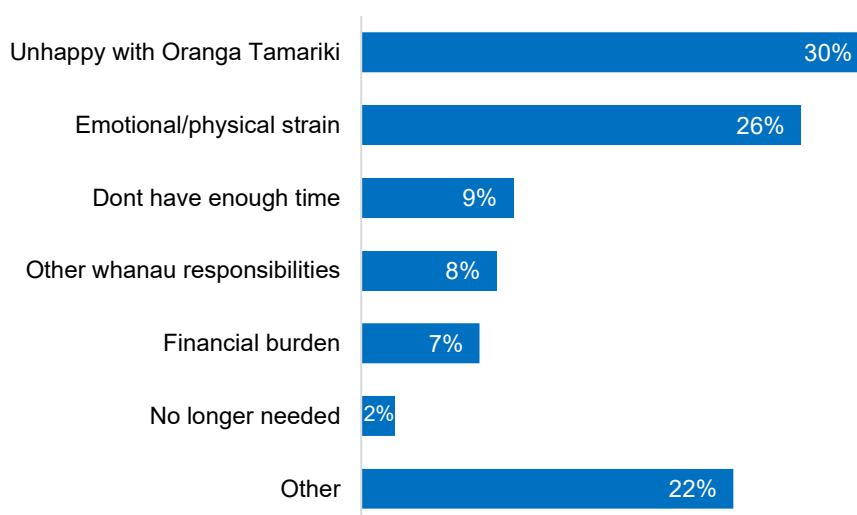
Figure 33. Percentage of non-whānau caregivers who were considering stopping being an Oranga Tamariki caregiver. 2021 to 2023 comparison



Base: respondents who are Fostering/Adoption caregivers, excluding don't know, not answered and not applicable

Those considering stopping being an Oranga Tamariki caregiver were asked about the factors influencing this consideration. Thirty percent of respondents stated that they felt unhappy with Oranga Tamariki, and 26% mentioned emotional/physical strain. See Figure 34.

Figure 34. Reasons non-whānau caregivers were considering stopping being an Oranga Tamariki caregiver



Base: fostering/Adoption caregivers who were thinking of stopping being a caregiver for Oranga Tamariki, excluding don't know, not answered and not applicable (n=79)

Supporting caregivers better

Satisfaction with the social workers, caregiver preparedness and the overall wellbeing of the child may be the key drivers of caregiver satisfaction

To understand the factors influencing caregiver satisfaction, a multiple linear regression analysis¹⁰ was conducted using a forward stepwise approach. The dependent variable in this analysis was Question 5 in the survey: “how satisfied are you with the support Oranga Tamariki provides you as a caregiver when you are caring for children through Oranga Tamariki?”. Independent variables were derived from other questions in the survey, with some highly correlated variables initially removed. Each independent variable was sequentially introduced into the model, with inclusion determined by the significance of the score statistic, which contributed the most to improving the model fit. The process continued until no additional variables could significantly enhance the model fit. To address the missing data, the median values of each variable’s column was use for replacement. Details of this approach are contained in Appendix 1.

The results of the regression analysis indicated the following nine potential key drivers of caregiver satisfaction, with a model fit of 45%. These drivers include:

- How would you rate your satisfaction on the following with the social worker for the child you are thinking of? - Doing what they said they would do
- All things considered, how well do you think Oranga Tamariki prepared you to care for this child when they first came to you?
- How would you rate your satisfaction with your current caregiver social worker - Providing useful advice
- How would you rate your satisfaction on the following with the social worker for the child you are thinking of? - Available when needed
- When they first came into your care, how would you rate Oranga Tamariki on providing information about the child’s specific support needs? Health and wellbeing
- How would you rate your satisfaction on the following with the social worker for the child you are thinking of? - Acting in the child’s best interests
- How would you rate your satisfaction with your current caregiver social worker - Being able to get back to me with information about the child in my care
- In the last 12 months, would you say this child’s wellbeing was...

¹⁰ Regression analysis is a statistical process for analysing the relationship between two or more variables. It helps to understand the importance or impact of a ‘driver’ (the independent variable) by measuring its contribution to explaining variance in another variable (the dependent variable). See more details in Appendix 1.

- When they first came into your care, how would you rate Oranga Tamariki on providing information about the child's specific support needs? Cultural identity

These identified drivers may be grouped into several themes as outlined below.

Satisfaction with social workers

Caregiver satisfaction may be positively influenced by their contentment with both the child's social worker and their own caregiver social worker. This highlights the pivotal role these professionals play in the caregiving experience.

Caregiver preparedness

The perception of preparedness of caregiving when the child first arrives may also influence caregiver satisfaction. Adequate preparation and providing the background information about the child may be essential for caregiver satisfaction.

The overall wellbeing of the child

The caregiver's perception of the child's wellbeing may also contribute to the overall satisfaction.

While these drivers shed light on caregiver satisfaction, it is important to interpret the findings with caution. Unmeasured factors not included in the model could also influence caregiver satisfaction. Additionally, there are some limitations to the regression model, as it does not guarantee the exclusion of irrelevant variables or ensure the selection of the best predictors of caregiver satisfaction. Further research may be warranted to gain a comprehensive understanding of the complexities surrounding caregiver satisfaction.

Conclusion

The Oranga Tamariki Caregiver Survey provides an overview of Caregiver's characteristics, support needs and satisfaction with Oranga Tamariki. The findings from the 2023 survey indicate that around half of the caregivers surveyed reported positive experiences and feelings towards Oranga Tamariki across many aspects included in the survey. However, another half either had mixed feelings or gave negative ratings to questions, indicating positive experiences are not universal, and there are areas for improvement to ensure all caregivers feel satisfied and valued.

However, views of the social workers caregivers interact with were mostly positive, and most were satisfied with both their caregiver social worker, and the child's social worker. Around half of caregivers had experienced turnover of social workers which negatively impacted on relationships, progress, and trust.

The survey also highlights that the children in the care of the caregivers surveyed have varying support needs, often due to a disability or long-term health need. The majority of caregivers had asked for support from Oranga Tamariki, but under half felt that the support received was enough. This highlights caregivers may not always be getting the support that they need to care for children's complex needs.

interactedOverall, the Oranga Tamariki Caregiver survey points to many areas where caregivers are reporting positive interactions and highlights some areas where more support may be needed for caregivers to care for the children in their care.

Appendix 1: Survey Method

Target population

To be eligible to be sampled for the survey a caregiver must have had a child currently in their care or have had a child in their care within the last 24 months. Caregivers with incomplete or no valid contact details were excluded from the final sample numbers. As of February 2023, approximately 2,500 caregivers met these eligibility criteria.

Sampling frame

The survey adopted an approach aiming to reach all eligible Oranga Tamariki caregivers. Symphony Research had tried to reach out to all eligible caregivers for a phone interview. Those who did not participate in the phone interviews, except those who refused, were invited to take an online survey, which ensured all caregivers had the opportunity to participate.

Data collection

The survey was carried out through both phone and online surveys between March and July 2023.

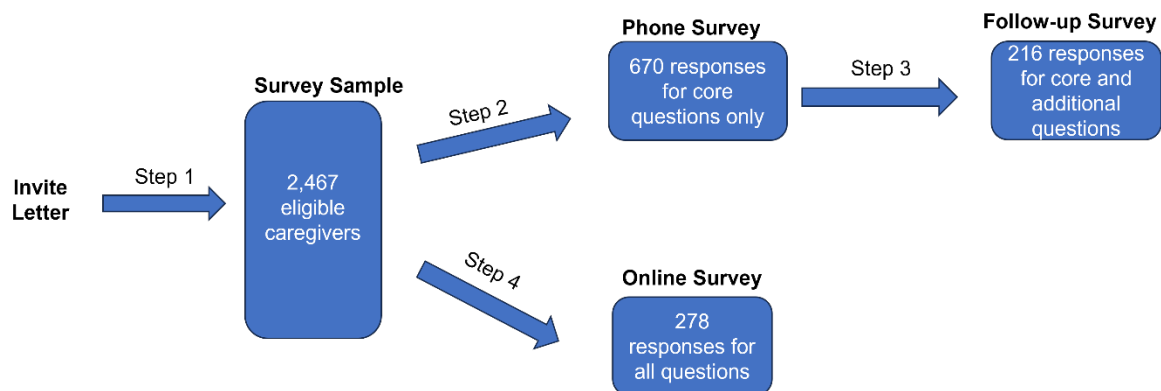
The phone survey had a duration of approximately 20 minutes and was designed to capture a portion of the questions to avoid excessive survey length. The phone survey was conducted in two stages:

1. Caregivers were sent a pre-notification letter and information sheet from Oranga Tamariki in February 2023, which introduced the upcoming survey and offered the opportunity to opt out if desired.
2. The phone interviews were conducted by Symphony Research using computer-assisted-telephone-interviewing (CATI) between March and May 2023. Multiple callbacks were made to each telephone number, ensuring maximum participation.

Following the phone survey, an online survey was built by Oranga Tamariki on Qualtrics and administered between June and July 2023. The online survey was accessible to two groups of caregivers:

1. Caregivers who had participated in the phone survey and wished to answer follow-up questions not included in the phone survey.
2. Caregivers who did not take part in the phone survey – these caregivers were invited to take part in an online survey which included questions asked in the phone survey and additional follow-up questions.

Caregivers who preferred a hard copy of the survey were accommodated. As an acknowledgement of the time taken to complete the survey, caregivers had the option to enter a draw to win Prezzy® cards, with one \$250 card and five \$50 cards available.



- In step 1, a pre-notification letter was sent to all eligible caregivers, introducing the upcoming survey.
- In step 2, a phone interview containing subset of core questions was conducted, and 886 responses were collected.
- In step 3, an online follow-up survey containing additional questions was conducted with caregivers who participated in the phone survey, 216 of the 886 phone survey respondents participated in the online follow-up survey.
- In step 4, an online survey containing all questions was shared with caregivers who did not participate in the phone survey, and 278 responses were collected.

Response rates

The survey received a total of 1,164 responses by the fieldwork close date. Out of the 2,476 eligible caregivers, this corresponds to a response rate of 47%. See Table A1.

Table A1 sample sizes and response rates across surveys

Survey	Collection Period	Sample Size	Number of Responses	Response Rate
2023 Survey	March-July 2023	2,476	1,164	47%

Representativeness of responses

To assess the representativeness of responses, the proportions of respondents were compared to the population for caregiver type, ethnicity, and region. The results indicate that respondents were not representative regarding caregiver type, with non-whānau caregivers being over-represented. Māori caregivers were slightly over-represented in the responses. However, proportions of respondents in each region are similar to those for the population of all eligible caregivers. See Tables A2 to A4.

Table A2: Ethnicity of respondents

Ethnicity	Response breakdown count (n=1,164)	Response breakdown % (n=1,164)	Population breakdown % (n=2,476)	Difference (% points)
Māori	471	41%	36%	+5%
Non-Māori	693	59%	64%	-5%

Table A3: Respondents by caregiver type

Caregiver Type	Response breakdown count (n=1,164)	Response breakdown % (n=1,164)	Population breakdown % (n=2,476)	Difference (% points)
Whānau	618	47%	63%	-16%
Non-whānau	546	53%	37%	+16%

Table A4: Region of respondents

Region	Response breakdown count (n=1,160)	Response breakdown % (n=1,160)	Population breakdown % (n=2,476)	Difference (% points)
Bay of Plenty	88	8%	8%	0%
Canterbury Region	169	15%	15%	0%
Central Auckland	58	5%	6%	-1%
East Coast	136	12%	11%	1%
Lower South Region	89	8%	7%	1%
North and West Auckland	89	8%	8%	0%
South Auckland	70	6%	7%	-1%
Taranaki-Manawatu	141	12%	11%	1%
Te Tai Tokerau	67	6%	6%	0%
Te Tai Tokerau/Auckland	1	0%	0%	0%
Upper South Region	42	4%	3%	1%
Waikato	113	10%	9%	1%

Weighting

Survey data were weighted to ensure that the sample is representative of the population of caregivers in the Oranga Tamariki caregiver database in terms of their relationship to their Oranga Tamariki child and ethnicity.

For weighting, two care type groupings (whānau/non-whānau) and two ethnicity groupings (Māori/non-Māori) were used. These groupings are based on self-reported data from survey questions that inquired about the caregiver's status as a whānau caregiver and their ethnicity.

Among ethnicity groupings, 'Māori' refers to caregivers who selected Māori as the sole ethnic identity or any one of their ethnic identities in the survey. 'Non-Māori' refers to caregivers who have not selected 'Māori' for any of their ethnic identities. This approach of classification was employed to assign weights to each response. It is important to note that this approach might not have accounted for individuals identifying with multiple ethnic groups. Respondents had the option to indicate more than one ethnic group in the survey, with further details available in the data tables linked to this report.

Margin of error

After adjusting for the design effects of weighting the data, the maximum Margin of Error at the 95% confidence estimate for the achieved sample of n=1,164 caregivers is +/- 2%.

Comparisons to previous surveys

Caution needs to be taken when comparing the results from the 2023 surveys to the survey conducted in previous years (2019, 2021, 2022). This is because changes have been implemented in the survey, encompassing alterations in various questions, methodologies, and response rates.

Statistical testing

Statistically significant differences are commented on in this report. Statistical testing is used to determine whether a difference represents a true difference and is not due to random variation.

- Statistically significant differences at the 95% confidence level are presented.
- Where no commentary about statistical significance is included, it can be assumed that differences are not statistically significant.
- Comparisons to previous surveys involved significant tests with the overall trend over time.

Coding of open questions

Open questions came from both the online and telephone versions of the survey. Telephone responses were transcribed verbatim and combined with the online responses into Nvivo, a popular qualitative coding software. Thematic analysis was

then performed on each open text question. Inter-coder reliability checks between both coders were performed before reporting.

Notes about the report

- 'Caregiver' is used for ease of reference throughout the report to refer to all Oranga Tamariki caregivers who responded to the survey. These may include people caring for children in their own whānau or extended family..
- Throughout the survey 'child' was used to describe children and young people of all ages. Children and young people in care can be aged up to 18 years old. Young people can also choose to be with caregivers up until they are 21 years old.
- When a caregiver was, or is, looking after multiple children, they were instructed to think about the child who has the next birthday and reflect on their experiences while caring for that child.
- Some questions were only asked of caregivers who had become a caregiver within the last 12 months and some only to caregivers who currently had a child in their care.
- For the results shown in this report 'don't know,' 'not applicable,' and 'prefer not to say' responses have been excluded.
- Percentages in the tables and graphs are based on weighted data to ensure that the survey results are representative of the population.
- It's important to note that percentages in the report may not always add up to 100% due to rounding or the allowance for multiple answers.

The 'n=' figure is provided throughout the report to denote the number of responses received for a specific question or response, offering context when percentages are used. Note that not all questions were asked in both the phone and online survey, which resulted in the differences in the base "n=" for different questions.

Appendix 2: Invitation letter

DATE

<Addressee's Name>
<Address Line 1>
<Address Line 2>
<City> <postcode>



Kia ora <named respondent>,

We are inviting all our caregivers to give us feedback through a Caregiver Survey.

Caregivers are vital for children in our care to heal and thrive. Your aroha, attention and care make a huge difference in their lives.

We want to make sure that you have the support you need to meet the needs of the tamariki and rangatahi in your care, so we value hearing your thoughts and about your experience.

How to take part

An independent research company, Symphony Research, will be conducting the survey on behalf of Oranga Tamariki.

Symphony Research will be contacting caregivers for a telephone survey during February, March, and April 2023. The survey should take about 25 minutes, depending on how much you'd like to share. They will phone you and you can agree the most convenient time for you to talk with them – they are able to call you back if the time they call doesn't work for you.

If you are not able to complete the telephone survey, a short online survey will be available later in April, after the telephone survey has been completed. We will let you know more about this soon.

If you do take part in the telephone survey, you can choose to go in the draw to win a Prezzy® card – there is one \$250 and five \$50 cards to be won.

For any questions that relate directly to your role as a caregiver please contact your Caregiver Social Worker or call Oranga Tamariki on 0508 CARERS (0508 227 377).

We really value your feedback and would like to thank you for taking the time to share your thoughts with us.

Ngā manaakitanga,

Janet Smart
General Manager
Caregiver Recruitment and Support | Oranga Tamariki

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FREQUENTLY ASKED QUESTIONS

Why was I invited to take part in the survey?	Oranga Tamariki are interested in finding out if caregivers are getting the support they need. We understand that you are currently, or have recently been, a caregiver of a child under the care of Oranga Tamariki. If this is incorrect, please contact Symphony Research on 0800 952 156.
My partner / another Oranga Tamariki caregiver in my household didn't receive a letter. Can they also answer the survey?	We have sent out one letter per household. If there is more than one caregiver in your household, please answer the survey about your shared experiences.
Will my answers be kept confidential?	Yes, please be assured that no information that could identify you or your tamariki will be used in any reports developed from this research. Symphony Research is conducting the survey and will only give information that will identify you to Oranga Tamariki if you say they can. Nothing you say will be passed on in a way that identifies you unless you ask for this to happen.
Can I change my response?	If you would like to change one of your responses, please call Symphony Research on 0800 952 156.
I don't want to complete this survey. How can I stop communication regarding this survey?	That is OK – the survey is voluntary. If you would like to be removed from the survey list, please call Symphony Research on 0800 952 156.
How do I know when I'll be contacted?	Symphony Research will be contacting you Monday-Friday between 9am-8pm, Saturday-Sunday between 12pm-7pm, excluding public holidays.
Can I request a call back or book in a date /time to be called that works for me?	Yes. You can request a call back or book in a date/time with Symphony Research.
Will my personal information be protected and kept confidential?	<p>Symphony Research are acting on behalf of Oranga Tamariki. They are a trusted research organisation approved to conduct research on behalf of government agencies. They have been provided with caregiver contact details for the purposes of conducting this survey.</p> <p>Symphony Research take the protection and security of your personal information very seriously. They follow strict guidelines for handling personal information, meet obligations under the Privacy Act, and follow security protocols related to confidentiality of information. In conducting this survey, Symphony Research will abide by the principles of the Privacy Act, the AMSRS Code of Professional Behaviour and the Research Association New Zealand guidelines. Symphony Research is also bound by the principles of The Research Society's (TRS) Code of Professional Behaviour which govern the collection, retention, use, disclosure and transfer of information about subjects of, and participants in market and social research.</p> <p>If you choose to participate in the survey, <u>all of</u> the information and opinions you provide will be used only for research purposes, treated as confidential, and will not be passed on to any other parties except as may be required by law.</p> <p>Under the Privacy Act 2020 you have a right to access to <u>all of</u> the information you choose to provide through this research. You can also make changes to the information that you have provided. You can do this by contacting Symphony Research on 0800 952 156.</p>

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Appendix 3: Questionnaire

The below questionnaire contains the combined questions from both phone and online survey methods for the 2023 Caregiver Survey. Core survey questions are highlighted and labelled.

Number	Question	Answer options/categories
Q1	In which of the following age groups do you belong?	Less than 18 years 18-24 years 25-29 years 30-39 years 40-49 years 50-59 years 60-69 years 70 years or over
Q2 CORE	Which ethnic group, or groups, do you belong to?	Māori Samoan Cook Island Māori Tongan Niuean Tokelauan Fijian Tuvaluan Chinese Indian New Zealand European Other (please specify) Prefer not to say

Number	Question	Answer options/categories
Q2a	Could you please tell us about any iwi that you whakapapa to? (This information helps Oranga Tamariki know more about the background of their caregivers. This question is optional.)	
Q120	Including yourself, how many approved Oranga Tamariki caregivers are there within your whānau or household who can help care for the children that you are looking after through Oranga Tamariki?	1 2 3 More than 3 Don't know/not sure
Q4	How many people in your household, including yourself, are in each of the following age groups?	0 to 17 years 18 to 25 years: 26 to 64 years 65+ years
Q5 CORE	Overall, how satisfied or dissatisfied are you with the support Oranga Tamariki provides you as a caregiver when you are caring for children through Oranga Tamariki?	Very dissatisfied Dissatisfied Mixed feelings Satisfied Very satisfied Don't know
Q5a CORE	Please tell us a little bit about why you gave the response?	
Q6 CORE	Overall, how valued do you feel by Oranga Tamariki?	Very under valued Under valued Mixed feelings Valued Very valued Don't know

Number	Question	Answer options/categories
Q6a CORE	Please tell us a little bit about why you gave the response?	
Q7	Thinking back to when you first became a caregiver, and the preparation that Oranga Tamariki supported you with, how prepared did you feel you were?	Very under prepared Under prepared Mixed feelings Prepared Very prepared Don't know
Q7a	Have you become an Oranga Tamariki caregiver in the last 12 months?	Yes No Not applicable
Q8	How satisfied or dissatisfied were you with the following... <ul style="list-style-type: none"> • The information provided to make an informed decision to apply to be a caregiver • The time it took for my application to be completed • Keeping me up to date on the progress of my application • The learning I received to understand the caring role • The time it took for the caregiver social worker to complete the assessment with me 	Very dissatisfied Dissatisfied Mixed feelings Satisfied Very satisfied Don't know
Q9	For the most recent child you are caring for through Oranga Tamariki, which of the following did you receive? <ul style="list-style-type: none"> • The contact details of the child's social worker and the caregiver social worker • Set up with a Care Allowance • The child's All About Me Plan 	Yes No Don't know

Number	Question	
	<ul style="list-style-type: none"> • The My Right My Voice booklet • Talked through any specific health or education needs with the child's social worker • Started a Caregiver support plan • Filled out 'Welcome to our home' booklet 	
Q11 CORE	How old is the child that you are specifically thinking about?	Under 1 year old 1-3 years old 4-6 years old 7-9 years old 10-13 years old 13-15 years old 16-17 years old 18 years or older I have not looked after a child in the last 12 months, so this doesn't apply to me
Q12 CORE	Which ethnic group, or groups, does the child belong to?	Māori Samoan Cook Island Māori Tongan Niuean Tokelauan Fijian Tuvaluan Chinese Indian New Zealand European Other (please specify)

Number	Question	Answer options/categories
		Prefer not to say
Q12a	Could you please let us know any iwi that the child whakapapa to? (This information helps Oranga Tamariki know more about the background of the child. This question is optional). Please select one answer.	
Q13 CORE	In the last 12 months, would you say this child's wellbeing was...	Poor Fair Good Very good Excellent Don't know
Q14 CORE	Thinking about the child's whakapapa and whānau connections, which of the following best describes your relationship with the child?	Whānau/family Hapū/ iwi Other connection, eg, family friend Not personally connected and not related Other (please specify)
Q15 CORE	What best describes your relationship with this child?	Grandparent or great grandparent Aunt or uncle or great aunt or uncle Niece or nephew Cousin Sibling (step or biological) Other relative/in-law (please specify) Whāngai Don't know
Q16 CORE	Were you aware of this whakapapa and family connection before the child came into your care?	Yes No Don't know

Number	Question	Answer options/categories
		Not applicable
Q16b	Did you receive the support that you needed to do this? Please select one answer.	Yes No Don't know/Can't remember Not applicable
Q16c	Could you please let us know what support you have needed to connect the child to their birth family?	
Q17 CORE	What type of care have you, or are you, providing for the child you are thinking of? You can select more than one category if you have looked after the child in different ways.	Respite Emergency Transitional/short term Oranga Tamariki Family Home Long-term Permanent/ Home-for-life Other (please specify) Don't know Not applicable
Q18 CORE	How long ago did this child first come to live at your house with you? They may have come and gone several times, so please think back to the very first time.	Less than 1 year 1 year or more Don't know/can't remember Not applicable
Q20 CORE	Even if you already knew this child before they came into your care, how would you rate Oranga Tamariki on providing information about this child's history and background when they first came to your care?	Very dissatisfied Dissatisfied Mixed feelings Satisfied Very satisfied Don't know

Number	Question	Answer options/categories
Q21 CORE	<p>When they first came into your care, how would you rate Oranga Tamariki on providing information about the child's specific support needs?</p> <ul style="list-style-type: none"> • Learning and development • Sports, interest or hobbies • Cultural identity • Past neglect, abuse or trauma • History in care • Health and wellbeing 	<p>Very dissatisfied Dissatisfied Mixed feelings Satisfied Very satisfied Don't know</p>
Q22 CORE	<p>All things considered, how well do you think Oranga Tamariki prepared you to care for this child when they first came to you?</p>	<p>Very poorly Poorly Just OK Well Very well Don't know</p>
Q23 CORE	<p>Please tell us a little bit about why you gave that response and how you think Oranga Tamariki could have prepared you better to care for this child.</p>	
Q24	<p>This question asks about support the child you are thinking of might need. In the last 12 months have they needed support with any of the following...</p>	<p>Their formal education/ childcare/ schooling Healthcare services Responding to their behaviour Transport Financial support Cultural support needs Connection with whakapapa Legal support Support for whānau visits Other (please specify) Not applicable</p>

Number	Question	Answer options/categories
Q24a	Are any of these supports needed because of a disability or long-term health condition that the child you are caring for has? Please select one answer.	Yes No Not applicable
Q24b	Which of the following was that related to? Please tick all that apply.	<ul style="list-style-type: none"> • Physical impairment (e.g., difficulties with mobility) • Sensory impairment (e.g., hearing loss, low vision) • Psychological/psychiatric limitations (e.g., anxiety disorders, depression) • Intellectual disability (e.g., fetal alcohol spectrum disorder) • Learning, remembering or concentration difficulties (e.g., language difficulties) • Other impairments, please specify • Not applicable
Q24c	If you said the child needed support with their health care in the last 12 months, which of the following was that related to? Tick all that apply.	<ul style="list-style-type: none"> • Primary health care (e.g. visiting GP) • Secondary health care (e.g. hospital and specialist services) • Mental and emotional health • Oral health • Other health care services (please specify)
Q25	If you said the child needed support with their formal education/childcare/schooling in the last 12 months, which of the following was that related to?	<ul style="list-style-type: none"> • Engaging with school – staying in school, attendance, suspensions/expulsion • Resources and equipment (eg, stationery) • Behavioural (eg, peer relations, challenging behaviour) • Transport - to and from school or for special lessons • Support from school and staff

Number	Question	Answer options/categories
		<ul style="list-style-type: none"> • Before and/or After school care • Extracurricular activities (eg, fees, uniform, equipment) • Other (please specify) • Don't know
	In the last 12 months, did you ask Oranga Tamariki for support for the child? Please select one answer.	Yes No Don't know
Q26	In the last 12 months, if you did ask for support for the child from Oranga Tamariki, what amount of support did you get?	None Not enough Mixed levels of support Enough More than enough Don't know
Q28	This question asks about support you might need when caring for the child. In the last 12 months, excluding social workers, where else have you received support from?	Family/whānau/friends My hapū, iwi or other cultural group My church Peer support from other caregivers The 24/7 Caregiver advice and guidance line 0508CARERS Caring Families Aotearoa/Fostering Kids NZ organisation Grandparents Raising Grandchildren organisation A counsellor, a psychologist A disability support specialist A lawyer (in relation to the child I am caring for) Other (please specify)
Q29	In the last 12 months how often have you had contact (face to face, phone call, text etc) with your caregiver social worker from Oranga Tamariki? Note: This is your caregiver	None Once a week Twice a month

Number	Question	Answer options/categories
	social worker not a social worker assigned to the child/children you are looking after.	About every 2 or 3 months About every 4 to 6 months It's been more than six months Don't know Not applicable
Q30 CORE	<p>How would you rate your satisfaction with your current caregiver social worker on the following:</p> <ul style="list-style-type: none"> • Frequency of contact • Available when needed • Providing useful advice • Acting in my best interests • Being able to handle complex situations • Respecting me • Doing what they said they would do • Involving me in assessments and decision making • Being able to get back to me with information about the child in my care 	Very dissatisfied Dissatisfied Mixed feelings Satisfied Very satisfied Not applicable Don't know
Q30a	In the last 12 months, has your caregiver social worker changed?	Yes No Don't know/can't remember
Q30b	Has this change had an impact on you?	Yes (please specify) No
Q31 CORE	<p>How would you rate your satisfaction on the following with the social worker for the child you are thinking of? Note: We are now asking about the social worker assigned to the child you look after...</p> <ul style="list-style-type: none"> • Frequency of contact • Available when needed 	Very dissatisfied Dissatisfied Mixed feelings Satisfied Very satisfied Not applicable

Number	Question	Answer options/categories
	<ul style="list-style-type: none"> • Providing useful advice • Acting in the child's best interests • Being able to handle complex situations • Respecting me • Doing what they said they would do • Involving me in assessments and decision making • Respecting the child • Involving the child in decisions affecting them 	Don't know
Q31b	In the last 12 months, has the social worker for the child you are caring for changed?	Once Twice Three times or more Not sure Not applicable
Q31c	Has the fact your child's social worker changed had an impact on.... <ul style="list-style-type: none"> • The child you are caring for? • You as the caregiver? 	Yes No Not sure Not applicable
Q31d	Please tell us a bit about the impact that it has had on the child.	
Q31f	Please tell us a bit about the impact that it has had on you as the caregiver.	
Q32	In the last 12 months, how much respite care have you used for this child?	None 1 to 3 days 4 to 20 days More than 20 days

Number	Question	Answer options/categories
		Don't know I didn't know I could
Q33	If you have not used respite care for this child in the last 12 months, please select one option that best describes the reason for this.	I don't need respite care for this child Too traumatic for the child Caregiver social worker could not find a respite caregiver There are no respite caregivers to meet the needs of the child Process to get approval for respite care is too hard I thought I would lose some of my financial support Other (please specify) Don't know
Q34	If you have used respite care in the last 12 months, was the respite caregiver already known to the child?	Always Sometimes Never Don't know/unsure I haven't used respite care in the last 12 months
Q35	All caregivers are now able to have up to 20 days of respite care in a year without it changing their financial support. Has this new change led to you having more respite care?	Yes No
Q37	Which one of these best describes your current work situation?	Working on average 30 hours or more each week Working on average less than 30 hours each week Not in paid work, and looking for a job Not in paid work, and not looking for a job (for any reason, such as being retired, a homemaker, a caregiver, or a full-time student) Other (please specify)
Q38 CORE	In the last 12 months has caring for this child had an impact on your employment situation?	No impact Yes – I reduced/ limited my hours Yes – I had to leave my job

Number	Question	Answer options/categories
		Yes – I changed jobs Yes – I have increased my hours Other (please specify) Don't know
Q40 CORE	In the last 12 months has caring for this child had an impact on where you live?	No impact Yes – rented/bought a bigger house Yes – moved in with whānau Yes – moved to a different area Other (please specify) Don't know
Q42	How well does the allowances you receive for looking after this child meet their needs? Please select one answer.	Does not meet their needs Just meets their needs Meets their needs More than meets their needs Don't receive allowances Don't know
Q43	If you feel you need more financial support, please select the areas that this money would cover.	Accommodation costs (rent, mortgage etc) Household running cost (power, water, gas, heating etc) Food costs Clothing costs Medical/dental costs Other (please specify)
Q44	In addition to the standard care allowance there are extra payments that the child may qualify for, including for buying a school uniform, school fees, club costs, camps, school stationery etc. Thinking specifically about these reimbursements or extra payments from Oranga Tamariki, how satisfied or dissatisfied are you with...	Very dissatisfied Dissatisfied Mixed feelings Satisfied Very satisfied Not applicable

Number	Question	Answer options/categories
	<ul style="list-style-type: none"> The length of time it takes to receive reimbursements/ extra payments Whether I get the right amount The amount of effort I have to put in to get my reimbursements/ extra payments 	Don't know/can't say
Q45	In the last 12 months has a child you cared for through Oranga Tamariki left your care?	Yes No
Q46	Why did the child leave your care?	<ul style="list-style-type: none"> They returned to their own parents/ usual guardian They moved to live with other family/whānau They moved to live with other caregivers They moved to live in a permanent care arrangement They transitioned out of care We couldn't provide for their cultural needs I didn't get enough financial support to properly care for them I didn't get enough support from Oranga Tamariki or my social worker I didn't get enough support from the child's social worker Other (please specify)
Q47	How satisfied were you with the support Oranga Tamariki provided you during this time of change?	Very dissatisfied Dissatisfied Mixed feelings Satisfied Very satisfied Don't know
Q49	In the last 12 months, have you taken part in any learning opportunities to help you as a caregiver?	Yes No Don't know/can't remember

Number	Question	Answer options/categories
Q51 CORE	Would you recommend becoming an Oranga Tamariki Caregiver?	Yes No Maybe Don't know Not applicable
Q51a CORE	Please tell us a little bit about why you gave that response.	
Q53 CORE	Are you thinking about stopping being an Oranga Tamariki Caregiver?	Yes No Not sure/Don't know Not applicable
Q54 CORE	Why is that?	No longer needed Don't have enough time Financial burden Emotional/physical strain Other whānau responsibilities Unhappy with Oranga Tamariki – please specify Other - please specify Don't know
Q56	were you aware that young people can remain with their caregivers after they turn 18 years of age? This is called Transitions Service.	Yes No/not sure
Q57 CORE	Were you aware that young people can also remain and/or return to a caregiver until they are 21 years of age?	Yes No/not sure
Q58	Would you be willing to care for a young person who is 18 to 21 years old? Please note this question is to help us to understand how some people might be willing or able to	Yes, if they were already in my care Yes No I'm not sure

Number	Question	Answer options/categories
	help. Your answer does not commit you to anything and Oranga Tamariki will not contact you about your response.	
Q60 CORE	Would you be happy for Oranga Tamariki to follow up with you on the information you have provided in this survey?	Yes No
Q61 CORE	Would you be happy to be invited to take part in future research?	Yes No
Q62 CORE	Would you be willing to have your responses from this survey linked to Government data held by Statistics New Zealand. If you agree to this, any information that could identify you will be removed, and the data can only be used for research purposes.	Yes No
Q80	Has your social worker shared the Prepare to Care learning programme with you?	Yes - I have completed the programme Yes - but I have not completed the programme No Don't Know/Can't Remember
Q81	<p>How useful did you find the Prepare to Care learning programme for the following...</p> <ul style="list-style-type: none"> • Understanding the role of the caregiver • Knowing what to expect when caring for children who have experienced trauma • Understanding what support is available 	Not at all useful Slightly useful Moderately useful Very useful Don't know
Q81a	Please let us know if there was anything else in the Prepare to Care learning programme that could have been helpful	
Q83	When did you first see a copy of the child's All About Me plan (previously called a Care Plan)?	Before they first came to live with me When they first came to live with me In the first few weeks after they came to live with me In the first few months after they came to live with me

Number	Question	Answer options/categories
		Six months or more after they came to live with me I have never seen it Don't know
Q84	<p>How would you rate the child's All About Me plan on the following...</p> <ul style="list-style-type: none"> • Being up to date • Accuracy and completeness of information • The opportunity to provide input/feedback into the care plan 	Very dissatisfied Dissatisfied Mixed feelings Satisfied Very satisfied Don't know
Q85	Do you have a Caregiver Support Plan?	Yes No Don't know/can't remember Not applicable
Q86	<p>Please rate how much you agree or disagree that your Caregiver Support Plan...</p> <ul style="list-style-type: none"> • Reflects the needs and ideas of you and your whānau • Supports you and members of your whānau who help with caregiving • Helps you and your whānau meet the needs of children in your care • Maintains your wellbeing as a caregiving whānau • Gets regularly updated with your caregiver social worker to reflect the changing needs of you and your whānau 	Strongly disagree Disagree Mixed feelings Agree Strongly agree Don't know
Q88 CORE	Overall, how satisfied are you with your dealings with the social worker for the child you are thinking of?	Very dissatisfied Dissatisfied

Number	Question	Answer options/categories
		Mixed feelings Satisfied Very satisfied Don't know
Q90	Which benefit, if any, are you receiving from Work and Income?	Jobseeker Support Sole Parent Support Supported Living Payment Superannuation Other (please specify) None of these Prefer not to say
Q91	Please say if you have any of the following qualifications which directly support you as a caregiver, for example, counselling or teaching qualifications or a degree in childhood development.	Bachelor's degree Diploma Certificate Other (please specify) None of these Prefer not to say
Q92	What additional costs did you face when the child was first placed with you?	Furniture Linen Additional clothing Supermarket costs Health specialist costs Education specialist costs Other - specify No additional costs
Q93	In the last 12 months, have you needed to access additional assistance from Work and Income? E.g. food grants or emergency, dental treatment, clothing and bills.	Yes No Don't know/can't remember

Number	Question	Answer options/categories
		Prefer not to say
Q93a	What was the assistance related to?	
Q94	In the last 12 months, is the amount of assistance you receive from Oranga Tamariki for school related costs sufficient for covering school uniforms, stationery and extracurricular costs for the child in your care?	Yes No Prefer not to say Child does not have school related costs Not sure
Q95	New caregivers receive a set up grant of \$350 to prepare them to care for children. Which of the following best describes how you feel about this grant?	Did not receive enough for set up costs Received just enough for set up costs Received enough for set up costs Received more than enough for set up costs Did not receive set up grant Don't know Not applicable as I have been a caregiver for longer than 12 months
Q96	In the last 12 months, have you taken part in any learning opportunities to help you meet the individual needs of the children in your care?	Yes No Don't know/can't remember
Q97	If there was a choice, what would be the way you would most like to learn more about your caregiving role? You can tick two choices.	<ul style="list-style-type: none"> • Caregiver support groups to share experiences and learn from each other • Virtual sessions with experts at different times of the day and recorded so you can watch it when you like • Wananga with Kaupapa Māori delivery • Kanohi-ki-te-kanohi (in person) sessions with experts, as well as social workers, teachers, and others in the community connected to children in your care • Learning that is just for your whānau in your home • Books, websites, videos

Number	Question	Answer options/categories
		<ul style="list-style-type: none"> Learning that goes over multiple weeks with the same group of people No preference Don't know
Q99	<p>Oranga Tamariki provides me learning opportunities...</p> <ul style="list-style-type: none"> That meet my cultural needs and values That help me understand the importance of mana tamaiti, whakapapa and whanaungatanga 	<p>Strongly disagree</p> <p>Disagree</p> <p>Mixed feelings</p> <p>Agree</p> <p>Strongly agree</p> <p>Not applicable</p>
Q101	<p>Do you feel connected to other Oranga Tamariki caregivers and their whānau? By this we mean being able to share experiences, support and learn from each other.</p>	<p>No/not sure</p> <p>Not at all connected</p> <p>Slightly connected</p> <p>Moderately connected</p> <p>Very connected</p> <p>Don't know</p>
Q101a	<p>How could Oranga Tamariki support you better to connect to other Oranga Tamariki caregiving whānau?</p>	
Q104	<p>Please rate your satisfaction with how your current caregiver social worker has...</p> <ul style="list-style-type: none"> Worked with you and your whānau to understand areas of learning that would help meet the needs, strengths, or aspirations of children in your care Listened to your knowledge about the child's individual needs Included in your Caregiver Support Plan the things you do to help meet the child's individual needs 	<p>Very dissatisfied</p> <p>Dissatisfied</p> <p>Mixed feelings</p> <p>Satisfied</p> <p>Very satisfied</p> <p>Not applicable</p> <p>Don't know/can't say</p>

Number	Question	Answer options/categories
	<ul style="list-style-type: none"> Talked with you about learning opportunities that could support you and your whānau to better understand and meet the needs of children in your care 	
Q105	Which, if any, of these specific areas would you like to learn more about to help you with your caregiving role?	Caregiver training Preparing to care Ways to care Trauma-training Fetal Alcohol Spectrum Disorder (FASD) Suicide prevention Other (please specify) None of these Don't Know
Q106	If you are caring for a child through permanent care/home for life, have you had a Permanent Caregiver Support Service plan developed?	Yes No/not sure I am not a permanent care/home for life caregiver for this child
Q107	Were you aware that financial support can be provided to caregivers if a young person remains with a caregiver after they turn 18-years-old and until they turn 21-years-old?	Yes No/not sure
Q108 CORE	Were you aware that a young person can have a transitions worker from around 16-years-old until they turn 21-years old?	Yes No/not sure
Q109	In the last 12 months, have you taken part in any Oranga Tamariki provided learning opportunities?	Yes No/not sure
Q121	Do you recall reading online or receiving the Caregiver Kete when you first became a caregiver?	Yes No Don't know / not sure

Number	Question	Answer options/categories
Q122	If you read Caregiver Kete, how useful did you find it in helping you understand what being a caregiver would be like?	Not at all useful Slightly useful Moderately useful Very useful I did not read Caregiver Kete Don't know / can't say
Q125	Did your social worker talk to you beforehand about the topics that would be discussed in the Prepare to Care learning programme to help you know what to focus on?	Yes No Don't know / can't remember
Q126	Thinking back to when the tamariki first came into your care, how quickly did you receive the first Foster Care allowance payment?	Within the first 24 hours of the tamariki coming into my care Less than a week More than a week after the tamariki first came into my care Don't know/Can't remember Not applicable as the child has been in my care for longer than 12 months
Q140	Did you know that there were options about how you could take part? For example, just with whānau, in a group, done at home or another location.	Yes No Don't know / can't remember
Q141	Did you get to decide the best way for you and your family/whānau to take part in the Prepare to Care learning programme?	Yes No Don't know / can't remember
Q142	Another purpose of this survey is to reach out to caregivers that may be in need of support. Are you happy for your name to be linked to this survey's information in order for someone from the Caregiver Recruitment and Support team to follow up with you on the information you have provided?	Yes No

