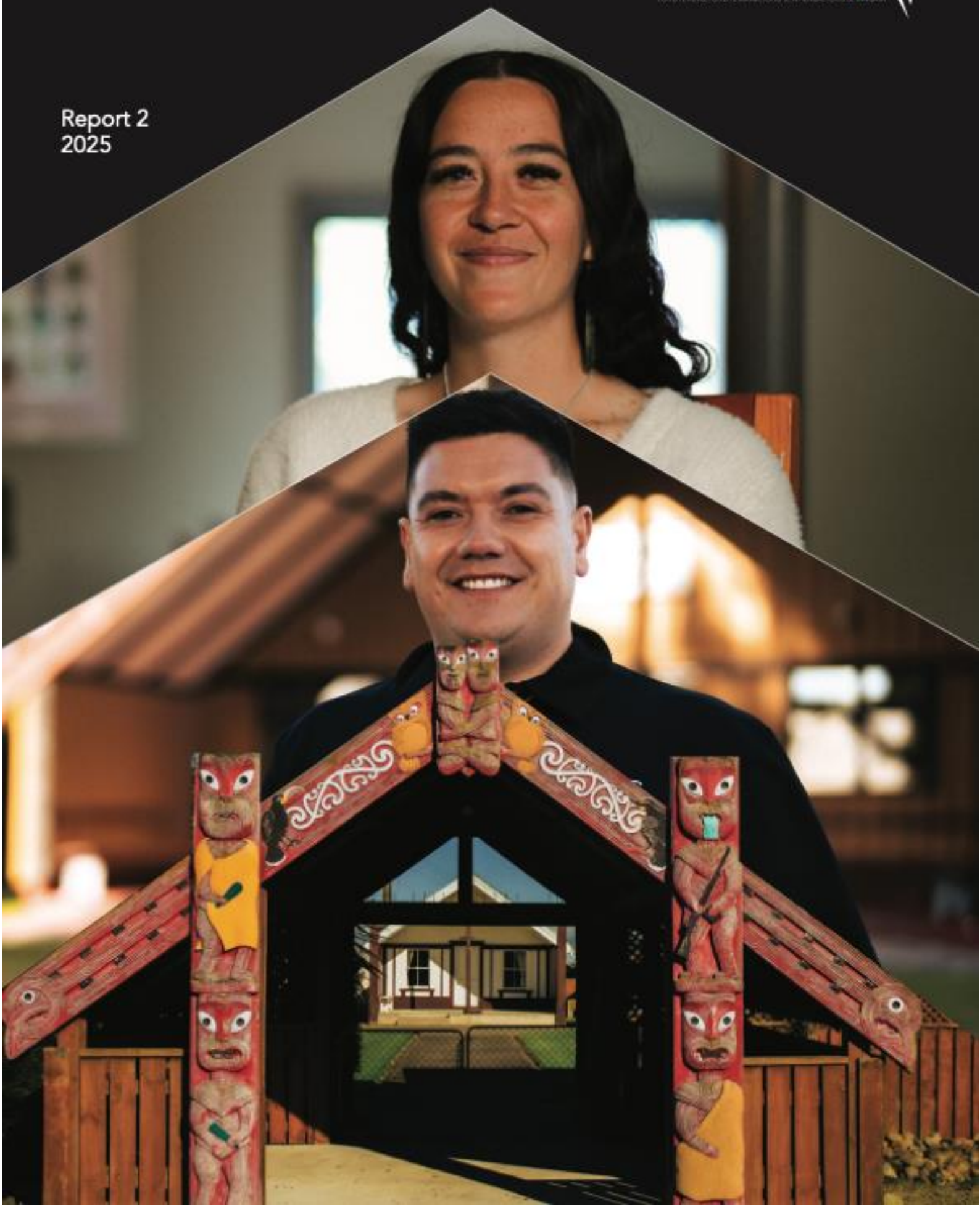



Whānau Voice Survey

Mokopuna Ora



Report 2
2025





This report has been prepared for Te Mātuku Iwi Māori Partnership Board by Te Atawhai o Te Ao Independent Māori Institute for Environment and Health and Baker Consulting Ltd.

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Kupu Whakataki | Introduction

Te Mātuku is the Iwi Māori partnership board (IMPB) for the rohe of Te Ranga Tupua (which includes Whanganui, Ruapehu, Rangitikei and part of South Taranaki), as set out in Schedule 4 of the Pae Ora (Healthy Futures) Act 2022.

Te Mātuku is dedicated to advancing the health and well-being of Māori communities across the wider Whanganui region, recognising the inherent links between cultural identity, whakapapa, whenua, and whānau. Te Mātuku is also committed to addressing longstanding health inequities and ensuring that whānau, hapū, and iwi receive health care that is accessible, culturally attuned and responsive to their unique needs and aspirations.¹

A key function of Te Mātuku is to engage with whānau and hapū about local health needs, which is why a whānau voice survey has been developed with Te Atawhai o Te Ao (an independent Māori institute for environment and health based in Whanganui) to ensure the voices of whānau can be heard directly and help shape local health sector activity.

The first of two Te Mātuku whānau voice surveys was conducted in February and March 2025 and had four main topics:

- Preventative health, public health initiatives, and health promotion (which contained eight survey modules, including a module on primary health care);
- Mental health and well-being (which contained two survey modules);
- Mokopuna and kaumātua ora (which contained three modules); and
- Rural health (which was a single module).

This is the second report from Te Mātuku whānau voice survey. This report (Report 2) covers the survey's kahu taurima module, which contained questions on child and maternal health, and questions on childhood immunisation.

In total, 276 Māori from Te Ranga Tupua rohe, aged 16 years or older, responded to the survey, which was in the field between February and March 2025. Respondents could choose for themselves which of the survey modules they would complete. The survey was designed to take between 15 and 30 minutes in total, depending on which modules were selected. Respondents were given a koha to thank them for their time.

Fifteen respondents completed the kahu taurima survey module, and 10 respondents completed questions on childhood immunisation.

The survey methodology is explained in Report 1. Report 1 also contains a summary of the demographic and other information about survey respondents.

¹ Te Mātuku (2024).

The content of this report

This report is split into two main sections.

- **Section one** looks at the kahu taurima survey module and the experiences of hapū māmā, new māmā, and parents of tamariki aged under 5-years.
- **Section two** looks at questions around childhood immunisation.

Kahu taurima – child and maternal health and well-being

Experiences early in life can determine the long-term health and well-being of tamariki. Evidence shows that by investing in whānau during pregnancy and in the first 1,000 days of life, we can make the biggest difference to lifelong well-being.²

However, as noted in the community health plan for Te Mātuku,³ not all whānau have access to the level of care and support they are entitled to during this important time. For example, in 2022 only 60.2% of Māori babies in Whanganui District Health Board (DHB) rohe were enrolled with a primary care provider by the time they were three months old, compared to 91.6% of non-Māori babies.⁴

This survey module was designed to gain more insight into whānau experiences from pregnancy through to tamariki turning 5-years old and starting school.

Fifteen survey participants answered questions for the kahu taurima (child and maternal health and well-being) module of Te Mātuku whānau voice survey.

Table 1: Self-identified status of respondents to the kahu taurima survey module

Self-identified status	Number of respondents
Hapū māmā	3
Wāhine who recently had a pēpi	6
Parent of pre-school tamariki	6
Total	15

Table 1 shows the self-identified status of the 15 participants. Three respondents identified as hapū māmā, six as having recently had a pēpi, and six as a parent of pre-school aged tamariki, which were pre-requisites for completing this module.⁵

These are small numbers and we were not able to complete further analysis about the demographic profile of the survey respondents without compromising the anonymity of respondents.

The small number of respondents also meant that the findings are not able to be analysed in the same way as the first report on Te Mātuku

whānau voice survey, which looked at primary health care. However, there are still valuable insights from what respondents have told us and we have provided these in the form of a narrative or descriptive analysis.

This next section of the report summarises responses under three headings:

² Ministry of Health (2020).

³ Te Mātuku. (2024), p32.

⁴ Curtis, et. al. (2024).

⁵ A further 6 respondents began this survey module but did not meet the pre-requisites and did not complete the questions. These responses are not included in the analysis.

- Hapū māmā journeys
- Experiences of new māmā
- Tamariki (aged under 5) and experiences for parents.

Hapū māmā journeys

In Aotearoa New Zealand, care during pregnancy is free.⁶ This care is provided through Lead Maternity Carers (LMCs) and midwives. LMCs can be a self-employed midwife, hospital midwives, or a private obstetrician. LMCs and midwives are responsible for the care of hapū māmā registered with them throughout their pregnancy, labour and birth. They also care for māmā and pēpi until pēpi is 6-weeks old.

“My midwife has been a breeze, she’s easy to communicate with. She’s also Māori, so carries a lot of Māori practices with her, which has been a beautiful experience so far.”⁷

Whānau support

Whānau support systems help hapū māmā prepare for the arrival of their pēpi. Although few difficulties were identified by survey respondents, one respondent said there were difficulties organising car seats.

Finding a Lead Maternity Carer (LMC) or midwife

Survey respondents shared what was going ‘less well’ for them during pregnancy. Finding a reliable midwife was difficult for one hapū māmā. Finding work during pregnancy was also noted as difficult.

⁶ Care is free those who meet eligibility requirements. Requirements include having NZ citizenship, NZ residency, or holding a 2-year work permit. For more information on maternity services click [here](#).

Hapū māmā are encouraged to enrol with LMCs or midwives as early in their pregnancy as possible, usually in the first trimester (the first 12 to 14 weeks of pregnancy).

The hapū māmā section of the kahu taurima survey module aims to understand the experiences of those currently accessing maternity care. Three people completed this section of the survey.

Generally positive experiences

All three of the hapū māmā survey respondents identified that elements of their pregnancy journey were going well. Two respondents told us their pregnancy experience has been very good and one respondent said that it was “both good and difficult at times”.

One respondent highlighted their positive experiences with a Māori midwife.

All three respondents were able to see an LMC or midwife in the first trimester of their pregnancy. This is positive, given that between 2018 and 2022, only 57.2% of Māori women were enrolled with an LMC in their first trimester in the former Whanganui DHB region.⁸

All three respondents were satisfied or extremely satisfied with their maternity care. All three respondents also felt they had the information they needed throughout their pregnancy so far.

Experiences of new māmā

This section of Te Mātuku whānau voice survey sought to gain insights of maternity and child health services for those who have recently

⁷ Survey respondent.

⁸ Curtis et. al. (2024).

given birth. Six people completed this section of the survey.

Pregnancy went well for most new māmā

Five of the six new māmā respondents could identify things that went well during their pregnancy journey and giving birth. Most of the responses to the survey questions

highlighted the roles played by whānau, partners, and their midwife.

*"I had a supportive and informative midwife and whanau."*⁹

*"Great midwife, informative and caring services."*¹⁰

When asked what didn't go so well, one person mentioned the impact of Covid-19 and one person said their hospital stay did not go well.

One new māmā survey respondent talked about a range of issues they experienced with the health system during their pregnancy, including:

- Difficulties booking scans (*"appointments were always full at the scan place and every time I was able to get an appointment it would always be for weeks past the scan date needed"*)¹¹
- Requirements to travel to Waikato for tests and scans
- Inaccurate medical records (*"they had me down at 14 weeks gestation when I was 22 weeks"*)¹²
- Difficulties with their midwife, particularly when the midwifery appointment would be with a midwife other than the one they had signed up with (*"I had arranged for her to be my midwife, not her 2 other [colleagues]"*).¹³

Five out of six new māmā were happy with their maternity care

Te Mātuku whānau voice survey asked respondents to indicate on a scale from extremely satisfied to extremely dissatisfied how they felt about their maternity care.

Figure 1: How satisfied were you with your maternity care?

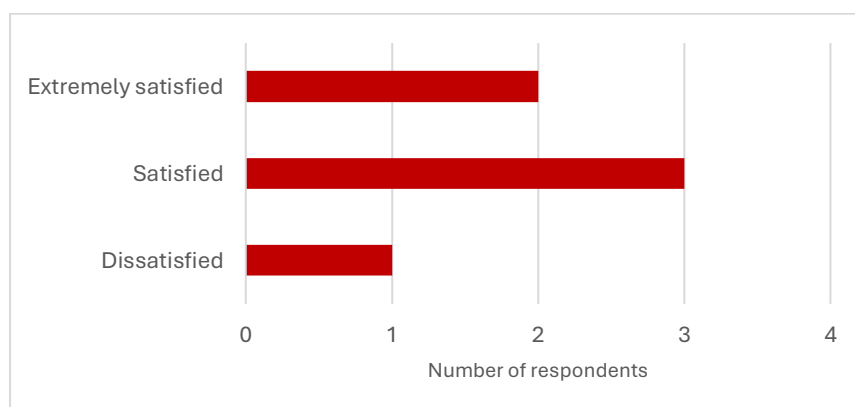


Figure note: n=6.

⁹ Survey respondent.

¹⁰ Survey respondent.

¹¹ Survey respondent.

¹² Survey respondent.

¹³ Survey respondent.

As Figure 1 shows, half of all respondents (3) were satisfied with their maternity care, and two were extremely satisfied. One person was dissatisfied.

The survey also asked respondents about their overall experience (from pregnancy, birth, to after giving birth) and had the same results (most respondents had a good or excellent experience, one respondent had a poor experience, and no one said they had a very poor experience).

Although based on very small numbers, this is generally consistent with the findings of a Research New Zealand report (*New Zealander's Experiences and Perceptions of the Maternity and Perinatal System 2022 – A Summary Report*)¹⁴ that showed satisfaction with an LMC at every stage of their maternity and perinatal¹⁵ journey was high: 79% of all mothers and birthing parents and 76% of Māori were satisfied with the overall experience of care.

Half of all respondents (3) found it very easy to find an LMC or midwife, and one said it was neither easy nor hard.

Two respondents said that they found it hard to find an LMC or midwife.

Only four of the six respondents were able to see their LMC or midwife in the first trimester of their pregnancy. And only four of the six respondents felt they had all the information they needed during their pregnancy.

Birthing experiences

All six survey respondents gave birth in a mix of hospital settings, but not all in Whanganui (four at Whanganui Hospital, one at Taranaki Base Hospital, and one at Taumarunui Hospital).

As Figure 2 shows, all respondents were satisfied or extremely satisfied with their delivery experiences in hospital.

Figure 2: How satisfied were you with your delivery experiences in hospital?

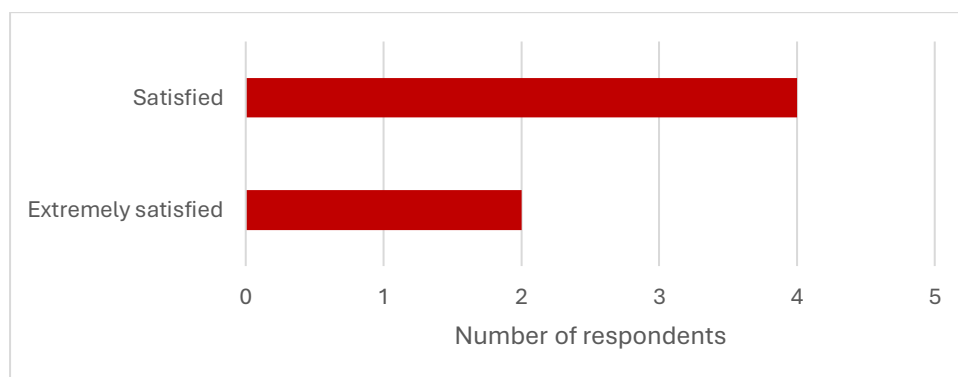


Figure note, n=6.

One respondent commented on the workload of a midwife who helped her.

*"She was on by herself and was running between rooms to tend to all of us. She then had to come with me in the ambo to Waikato hospital. I really liked her and she did a great job for the busy day she had."*¹⁶

¹⁴ De Bonnaire, C., et. al., (2023).

¹⁵ The period of time from becoming pregnant until a year after giving birth.

¹⁶ Survey respondent.

After-birth care

After the pēpi is born, LMCs and midwives are responsible for visiting a new māmā and pēpi at least seven times (either at the hospital or at home), for referring the pēpi to a Well Child Tamariki Ora (WCTO) provider (generally after 5 weeks), and for helping to enrol the pēpi at a general practice (for doctor or nurse practitioner services).

All six respondents had been referred by their LMC or midwife to a Māori provider for WCTO care, although three also said they had been referred to Plunket (a mainstream provider of WCTO services). It may be that this question was interpreted as being about what services the LMC or midwife told the respondents about, rather than what services they were formally referred to, as one respondent said:

“She let me pick between the two but told me about both”.¹⁷

Five out of six respondents felt well prepared for the arrival of their new pēpi. While most people said it was not difficult to find the items they needed for pēpi, one person mentioned having some difficulty in accessing car seats, and another talked of the need for warmer clothing for pēpi (*“I feel shops just sell standard cotton clothing and so that’s all I really had but nothing that was good for warmth”*).¹⁸

New māmā health and well-being

Te Mātuku whānau voice survey asked about new māmā physical health and mental health needs after having their pēpi. Respondents were evenly split on whether they had physical or mental health needs after the birth of their pēpi (3 respondents said they did, and 3 respondents said they did not).

As Figure 3 shows, two thirds of respondents (4) said that their physical health or mental health needs were supported after having their pēpi.

Figure 3: Were your physical health or mental health needs well supported after having your pēpi?

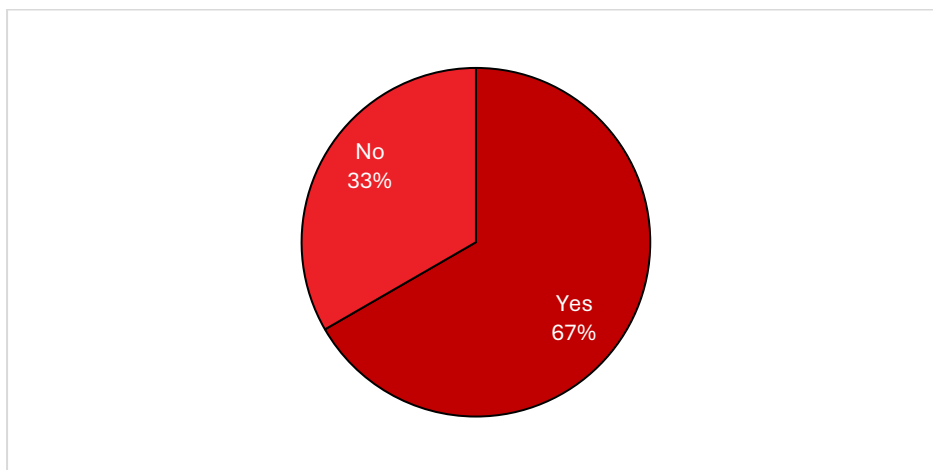


Figure note, n=6.

When asked what could have been done better to support their physical health or mental health, two māmā provided suggestions (with four respondents having no suggestions).

The two suggestions were:

- More support with pēpi, more education about parenting
- More support in hospital, especially for māmā who need urgent care after giving birth.

¹⁷ Survey respondent.

¹⁸ Survey respondent.

*"I wasn't able to get surgery done until day-3 postpartum, due to having to go through the emergency department first and the lengthy wait times. It would have been so much better if there was a unit on standby specifically for Mums who needs urgent treatment after giving birth."*¹⁹

Tamariki health and well-being

Te Mātuku whānau voice survey asked parents about their experience with tamariki health services.

The survey focused on the Well Child Tamariki Ora (WCTO) programme. For all tamariki in Aotearoa New Zealand, the health system offers services from about six weeks to 5 years of age through the WCTO programme. This programme is free to whānau.

WCTO visits cover:

- Tamariki growth and development
- Whānau health and well-being
- Immunisation information
- Oral health (teeth and gum) checks
- Early childhood education
- Vision (sight) and hearing checks
- Health and development checks for learning well at school.

In most areas of the country, whānau can choose to have WCTO services from a Māori provider or the national mainstream provider (Plunket).²⁰

Six parents filled in the tamariki health survey module.

- Two thirds of the respondents (4) said that they were fully informed about all the health checks and immunisations for their tamaiti (child) up to age 5.
- Most respondents (5) said that the WCTO service supported them to ensure their tamaiti had health checks and vaccinations on time.
- Two thirds of respondents (4) said that they received support to enrol their tamaiti in the dental programme.
- Most respondents (5) said that their tamaiti did not have any other health issues or needs during their development.

One parent indicated that they did not have access to the full range of WCTO supports:

*"After being handed over to Tamariki Ora I was hardly contacted by the kaimahi at all. I think we had two visits total and then she got in touch when she was ready to "exit" my pēpi."*²¹

¹⁹ Survey respondent.

²⁰ In Whanganui, there are Māori providers offering WCTO services in Ohakune and Marton, and Plunket offices in Whanganui. For information on current WCTO service available by region, click this [link](#).

²¹ Survey respondent.

The B4 School Check, which is a core contact of the WCTO service, aims to identify and address any health, behavioural, social, or developmental concerns which could affect a child's ability to get the most benefit from school, such as a hearing problem or communication difficulty. It is available for tamariki when they turn 4 years old.

Two thirds of survey respondents said that their tamaiti had a B4 School Check before they started school.

Immunisation is also part of the WCTO programme. Questions on immunisation are discussed separately, in the next section of this report.

Navigating the wider health system

Te Mātuku whānau voice survey asked parents what aspects of the health system were easiest when it came to their tamaiti. Only four out of the six respondents gave substantive responses.

- Two respondents said that the dental service had been “quite simple”.²²

- One respondent said that immunisations had been easy.
- One respondent said that access to Tamariki Ora nurses and primary health care had been positive.

“My medical centre is really good with same day appointments for my tamariki.”²³

The survey also asked parents what aspects of the health system had been most challenging for them. In response, seeing a doctor, and the related costs, were mentioned by three respondents.

“Trying to get my pēpi seen at WAM/A&E. We aren't particularly panic prone but taking my pēpi in and then being sat in the waiting for hours and then be told that they'll give her paracetamol and send her home is frustrating. I wouldn't take her in unless I thought it was necessary so to feel like I was being dismissed is frustrating.”²⁴

Immunisation

²² Survey respondent.

²³ Survey respondent.

²⁴ Survey respondent.

In Aotearoa New Zealand, a series of immunisations is recommended to protect tamariki from 13 preventable diseases before they are 5 years old.

The diseases are:

- Diphtheria
- Tetanus
- Whooping cough
- Polio
- Hepatitis B
- Hib (Haemophilus influenzae type b)
- Rotavirus
- Pneumococcal disease
- Meningococcal B
- Measles
- Mumps
- Rubella
- Chickenpox.

All of these immunisations are on the National Immunisation Schedule and are free for all people under 18 years of age.²⁵

Immunisation coverage rates in Te Ranga Tupua rohe are currently lower than the national rates at every milestone age. Immunisation coverage rates for pēpi and tamariki Māori are lower still. For example, at 6 months:

- 65.3% of all babies are fully immunised across the country
- 69.0% of all babies are fully immunised in the Central Region (which includes Whanganui)
- 60% of all babies are fully immunised in the Whanganui District (based on the former district health board boundaries), and
- 48.6% of pēpi Māori are fully immunised in the Whanganui District.²⁶

Te Mātuku whānau voice survey sought to learn more about parent and whānau experiences with immunisation, including the experiences of those who decided not to vaccinate their tamariki.

In the survey, parents with pre-school aged tamariki 6 weeks old were able to answer a module of questions on childhood immunisations. Ten respondents completed this part of the survey.

Most parents chose to immunise their pēpi and tamariki

Figure 4 shows that 80% of respondents (8) said that they had chosen to immunise their pēpi and/or pre-school aged tamariki. Two respondents said that they had chosen not to immunise their pēpi and/or tamariki.

²⁵ For more information on the National Immunisation Schedule, click [here](#).

²⁶ This data is taken from the Immunisation Coverage Data for the 12-month reporting period ending December 2024. It is available online, click [here](#).

Figure 4: Have you chosen to immunise your pēpi/tamariki?

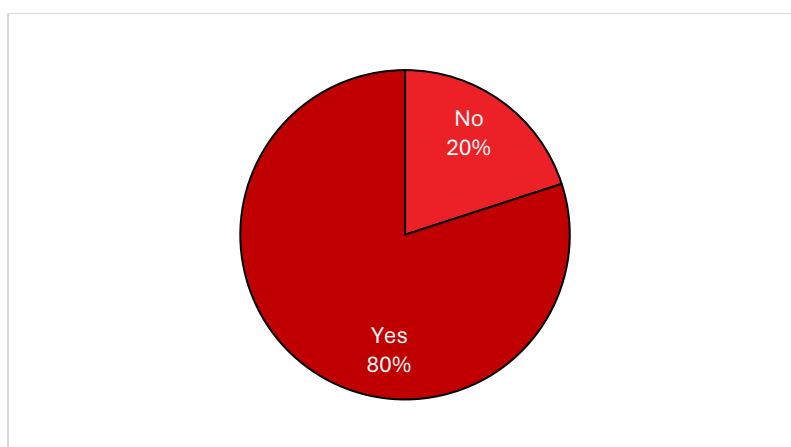


Figure note, n=10.

The survey asked about the quality of information available on childhood immunisation to help whānau make decisions on whether to immunise their pēpi and/or tamariki.

Figure 5: How satisfied are you with the information you received about childhood immunisation?

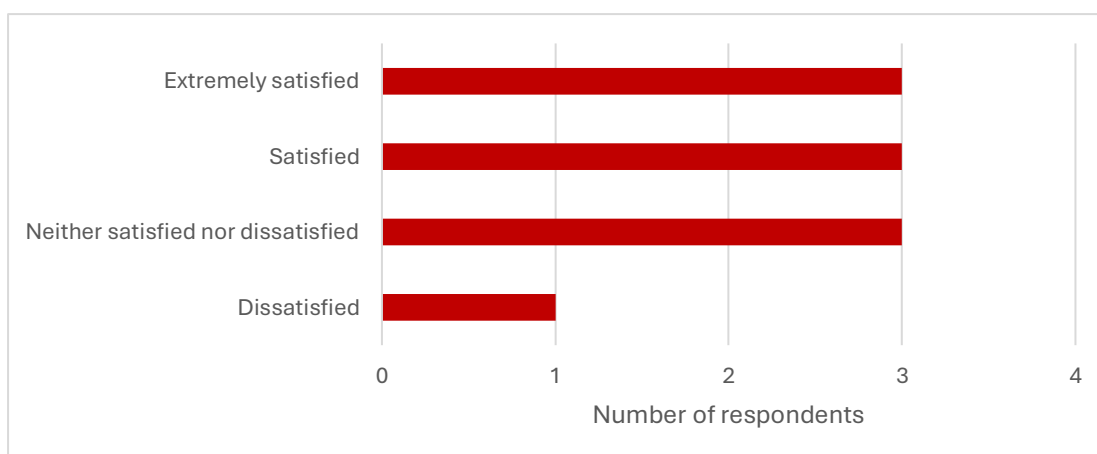


Figure note, n=10.

As set out in Figure 5, 60% of respondents (6) were satisfied or extremely satisfied, 30% of respondents (3) were neither satisfied nor dissatisfied, and one respondent was dissatisfied.

Those who chose not to immunise their pēpi and/or tamariki indicated the following factors that influenced their decisions: a lack of information on the risk and benefits of the vaccines and their side effects, bad experiences with past immunisations, and a lack of trust in the available healthcare providers.

Accessing immunisation services

When it came to accessing immunisation services, those respondents who chose to immunise their pēpi and/or tamariki mostly arranged this through their usual providers.

Figure 6: How did you select a provider to immunise your pēpi/tamariki?

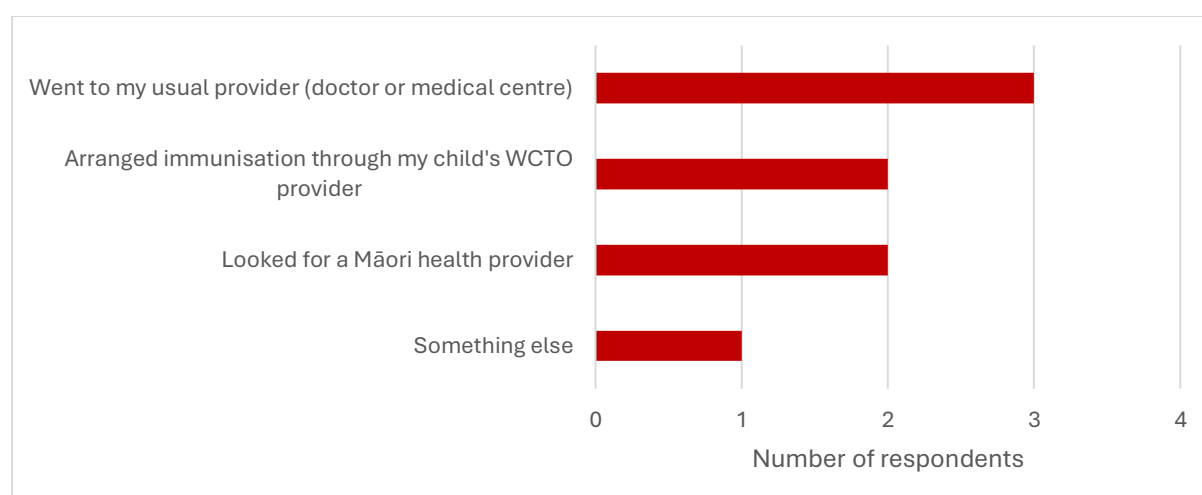


Figure note, n=8.

As Figure 6 shows, 38% of respondents (3) went to their usual doctor or medical centre and 25% (2) had immunisation arranged through their WCTO provider. Two respondents said they looked for a Māori provider for the immunisations.

Most respondents said that they did not encounter any barriers to getting immunisations for their pēpi and/or tamariki (4 respondents). Those who did identify barriers to immunisations highlighted:

- Transport or services being located too far away
- Difficulties taking time off work
- A lack of trust in available providers or bad past experiences.

Experiences of immunisation services

Te Mātuku whānau voice survey asked participants about how the immunisation process went for them and their pēpi and/or tamariki. This included understanding how the immunisers explained information to them, how comfortable they felt and their level of overall satisfaction.

Most respondents were satisfied or extremely satisfied with the immunisation service they received.

Figure 7: Overall how satisfied are you with the immunisation service you received?

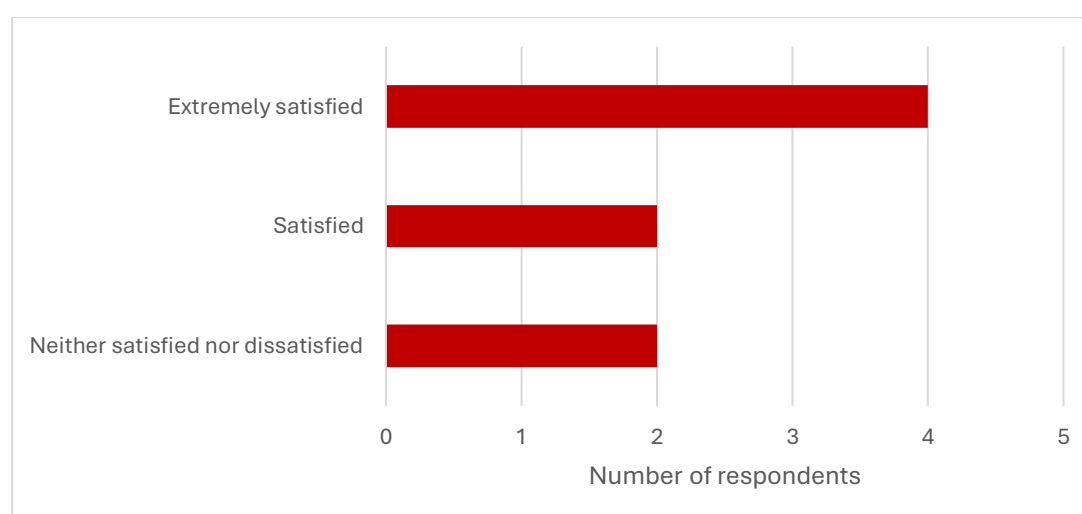


Figure note, n=8.

As Figure 7 shows, 50% of respondents (4) were extremely satisfied with the immunisation services, and 25% of respondents (2) were satisfied. The final 25% of respondents (2) were neither satisfied nor dissatisfied. No respondents were either dissatisfied or extremely dissatisfied.

The survey responses also indicate:

- Seven out of the eight respondents thought that their immuniser had given them all the information they needed.
- All respondents were made to feel comfortable by their immuniser.
- Seven out of the eight respondents thought that their immuniser had explained the purpose of immunisation.

Future immunisations

Seven out of the eight respondents to this part of the survey said that they would go back for future immunisations.

Seven out of eight respondents also said that reminders about immunisations are helpful. In the survey, most respondents said they currently get reminders from the immunisation services, including from:

- Their regular healthcare provider (3 respondents)
- Their WCTO provider (2 respondents)
- Other child health care service reminders (eg Plunket) (1 respondent).

Te Mātuku whānau voice survey asked about how immunisation reminders can be made easier or more helpful.

Figure 8: How can immunisation reminders be made easier or more helpful for you?

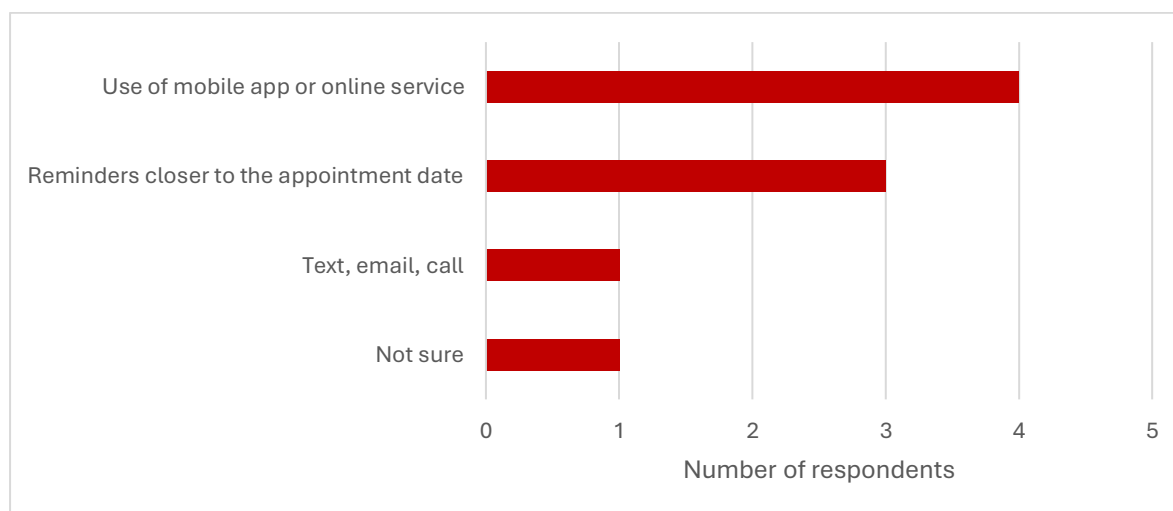


Figure note, n=8. Respondents were able to select multiple options.

As Figure 8 shows, the most popular suggestion was for immunisation reminders to come through an app or online service (50% or 4 respondents). Three people suggested that reminders could be given closer to the appointment date to be more effective.

Concluding comments

This report outlines the findings of Te Mātuku whānau voice survey in relation to mokopuna ora, covering:

- Kahu taurima – child and maternal health and well-being, and
- Childhood immunisation.

While only a small number of people responded to these two survey modules, the answers still provide helpful insights into the experiences of whānau with pēpi and tamariki under 5 years of age in Te Ranga Tupua rohe.

Child and maternal health services appear to be working well for whānau overall.

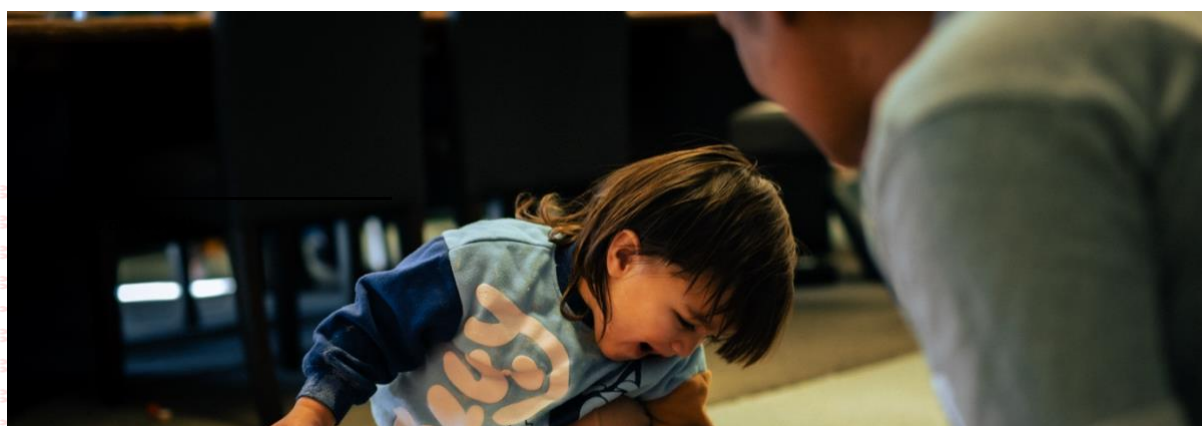
Across both survey modules, respondents generally had positive experiences. Hapū māmā and new māmā were generally happy with their maternity care. Several respondents were particularly positive about the care they received from their midwife.

The most difficult part of the pregnancy journey for both hapū and new māmā appears to be finding a Lead Maternity Carer (LMC) or midwife. This is reinforced by health sector data that tells us only 57.2% of Māori women were enrolled with an LMC in their first trimester of pregnancy in the former Whanganui DHB region.²⁷

However, having found an LMC or midwife, new māmā said they were happy with their birthing experiences and support after giving birth. Most new māmā were also able to get the things they needed for their pēpi, although new car seats and warmer clothes were highlighted as being more difficult for a small number of respondents.

When it came to Well Child Tamariki Ora (WCTO) services, most respondents were positive about their experiences. Most respondents indicated that their WCTO service supported them to ensure their tamaiti had health checks and vaccinations on time. There were also positive responses about access to dental services through the WCTO programme.

In the immunisation module of the survey, eight out of ten respondents said that they chose to immunise their pēpi and/or tamariki. And those eight respondents had positive experiences (with no respondents saying they were dissatisfied). However, only seven out of those eight respondents who had opted for immunisation said they would do so in the future, suggesting there could be lost opportunities to keep whānau engaged in immunisation services. This could be the subject of future inquiry for Te Mātuku.



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Online resources

Information on the services available to hapū māmā and whānau is available on the Te Whatu Ora website, here: <https://info.health.nz/pregnancy-maternity/finding-out-you-are-pregnant> (accessed June 2025).

Information on Well Child Tamariki Ora providers throughout the country is available on the Te Whatu Ora website, here: <https://info.health.nz/services-support/pregnancy-birth-and-children-services/well-child-tamariki-ora/well-child-tamariki-ora-providers#apply-for-listing-in-the-well-child-tamariki-ora-directory-2973> (accessed June 2025).

The WCTO Quality Improvement Framework reports are updated six-monthly and are available on the Te Whatu Ora website, here: <https://www.tewhatauora.govt.nz/for-health-professionals/clinical-guidance/specific-life-stage-health-information/child-health/well-child-tamariki-programme/well-child-tamariki-ora-quality-improvement-framework> (accessed June 2025).

Information on the National Immunisation Schedule is available on the Te Whatu Ora website, here: <https://info.health.nz/immunisations/national-immunisation-schedule> (accessed June 2025).

Immunisation coverage data is available on the Ministry of Health website, here: <https://www.tewhatauora.govt.nz/health-services-and-programmes/vaccine-information/immunisation-coverage> (accessed May 2025).

