

**‘Forgotten world highway, forgotten people’: A qualitative  
research project exploring the experience of poverty in a  
rural community**

**A thesis submitted in partial fulfilment of the requirements for the degree of  
Doctor of Philosophy in Social Work**

**by**

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## ABSTRACT

Poverty has been an intractable issue in Aotearoa New Zealand throughout this century, particularly for families/whānau with children. The tentacles of poverty spread into all aspects of daily life making it a significant issue for social work. While recent poverty research in Aotearoa New Zealand has a predominantly urban lens, this study focuses on living rurally while being poor. This thesis provides insights into the intersection of poverty and rurality in Taranaki's Stratford District through a qualitative thematic analysis. It uses these insights to develop a framework for social work practice with the rural poor in Aotearoa New Zealand.

The research design of this qualitative study is informed by critical theory and feminist perspectives. Both perspectives also enable an analysis of power within society and consider oppression experienced by marginalised populations. I interviewed twenty-eight people living in a rural community in Taranaki using a semi-structured approach. At the same time, I kept a detailed field-work journal. The subsequent thematic analysis of interview transcripts and field-work notes yielded the four main themes that structure the findings section of this thesis.

Participants in this study used a wide range of creative strategies to manage daily life. However, the participants often went without and put their children's needs and the needs of others ahead of their own. Geography influenced participant experience of poverty as the rural poor contended with transport issues and had difficulties accessing services, health care, employment, and education. Additionally, stigma was experienced and internalised by some participants and accounts of intimate partner violence and structural violence were prevalent. A framework for poverty-informed social work practice is proposed as an outcome of this

research and suggestions are made for social work education and social work practice with the rural poor.

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## Glossary

Aotearoa – land of the long white cloud, New Zealand

Awa - river

Hapū – sub-tribe

Iwi - tribe

Kaupapa Māori – an approach which includes the knowledge, skills and values of Māori society (Moorfield, 2020)

Land wars – From the 1840s to the 1870s a series of conflicts which became known as the land wars took place as British and colonial forces fought to take land for settlement (Ministry for Culture and Heritage, 2020).

Marae – traditional meeting area, including meeting house

Mana whenua – those with authority over land or an area

Maunga - mountain

Mokopuna - grandchild

Pasifika – descendent from Pacific Islands

Pākehā – New Zealander of European descent

Patea – burden or pack

Pōwhiri - a process of welcome and engagement

Rohe – region

Tangata whenua – people of the land, Māori who identify with a particular place

Tapu – sacred and restricted

Tino Rangitiratanga - sovereignty

Tipuna – ancestors

Te Ao Māori – a Māori world view

Te Tiriti o Waitangi – the Treaty of Waitangi

Turangawaewae – a place, where through lineage, a person identifies as belonging

Waka - canoe

Whakapapa – genealogical links

Whānau – extended family

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# Chapter One: Definitions and Scope of Inquiry

## 1.1 Introduction

As part of his pōwhiri process on 24 January 2019, the incoming Human Rights Commissioner Paul Hunt stated that poverty is a human rights issue and that “we need to start viewing poverty as a terrible injustice” (Human Rights Commission, 2019, n.p.). Situating poverty as an injustice was a starting point for this research. From the outset of this research I took the position that poverty in Aotearoa New Zealand is a violation of human rights.

The International Federation of Social Workers (IFSW) definition of social work states that “principles of human rights and social justice are fundamental to social work” (IFSW, 2014, para. 1). These principles imply that social workers should concern themselves with poverty. The IFSW’s interest in social justice is reinforced in the Aotearoa New Zealand Association of Social Workers (ANZASW) code of ethics which refers to members advocating for social justice and informing society in general about injustices (ANZASW, 2019). Likewise, the New Zealand Social Work Registration Board (SWRB) requires that social workers demonstrate competence to promote human rights and social and economic justice (SWRB, 2019). This research explores rural poverty, an area in which social and economic injustice is evident and where social workers can practice to affect social change.

Throughout my social work career as a practitioner and educator I have been concerned about the poverty I have witnessed among clients and felt frustrated by the injustice of it. When I began this research in 2014, the National-led coalition government had already been in power for six

years.<sup>1</sup> The coalition promoted a view that work is the way out of poverty as evidenced by the National Party policy fact sheet prior to the 2017 election (Humpage, 2017). The National Party policy on families prior to that election emphasised that incomes and jobs would rise as economic growth would increase the numbers of jobs, the goal being to reduce the number of beneficiaries (National Party, 2017). Between 2017 – 2020 there was a Labour-led coalition whose policies placed a strong emphasis on work as a way out of poverty. This was evident in their response to the economic impact of COVID-19 in 2020-2021 (New Zealand Government, 2020a).<sup>2</sup>

This research focuses on rural poverty. I have a long-standing interest in rural issues and rural social work. I grew up on a sheep and beef farm in the study area, east of Stratford, and I began my career as a rural social worker in a health setting. Following this, I worked as a probation officer and then a child protection social worker in a rural community. The intersection of my interest in rural issues, rural social work, and poverty led me to focus my research on rural poverty.

O'Brien (2013a) discusses the link between social work practice and poverty stating that "poverty is the daily experience of a significant proportion of the individuals, families and communities social work engages with" (p. 53). He comments on the relative silence of social workers about the poor, other than a few practitioners who engage with the media and the political process to advocate for poor clients (O'Brien, 2013a). Likewise, in the United Kingdom (UK) social workers have largely ignored the impact of poverty (Gupta & Blewett, 2008). Morris et al (2018) note that social workers rarely consider poverty as one of the causes of family issues and often do not identify it as a risk factor for children. In Aotearoa New Zealand, Hyslop and Keddell (2018) argue

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<sup>1</sup> National is a centre-right political party. Their coalition included the Māori party, ACT and United Future.

<sup>2</sup> Labour is a centre-left political party. During their first term their coalition included New Zealand First and the Greens political parties.

that social work has increasingly engaged in the surveillance of the poor rather than working in solidarity with them.

This research uses a qualitative approach to explore the lived experience of poverty in the Stratford district—a rural community located in Taranaki, Aotearoa New Zealand. How adults experience poverty and respond to it living in a rural community contributes to knowledge generally about rural poverty and to social work knowledge. I interviewed twenty-eight adults and also drew data from observations during interviews and contemporaneous notes taken in a fieldwork journal. Visual images are used to provide more detail regarding the context of the research area. This research is underpinned by critical theory and feminism and I use theoretical ideas drawn from both traditions in the analysis of the data. Applied thematic analysis was used to identify codes in the data that was subsequently organised into themes.

This chapter starts with definitions of the key terms I used in this thesis. I then outline the aim of the study and research questions. I include a discussion about defining rurality and poverty as well as the ways in which poverty can be measured. The chapter then proceeds to explain the context of the study, namely, the geographic place, before finishing with a summary of each chapter in this thesis.

### 1.1.1 Use of Terms

Several Māori words are used throughout this thesis. Their meanings can be found in the glossary above. For example, when discussing families, I will use the term family/whānau. This nomenclature recognises the language of the indigenous population of Aotearoa New Zealand. While whānau is often used interchangeably with family, it has a wider meaning for Māori and refers to people linked by whakapapa and a shared history which is traced to common ancestors (Walker, 2017). The use of

the term family/whānau is common to Aotearoa New Zealand and is accepted in academic settings when writing about social work.

Aotearoa New Zealand is used when referring to New Zealand. Aotearoa is the name given by Māori to New Zealand and is translated to mean 'long white cloud'. Before the arrival of Europeans, Aotearoa referred to just the North Island (Keegan, 2018). Referring to Aotearoa alongside New Zealand is commonly used by social workers in Aotearoa New Zealand and is part of the name of the professional body, Aotearoa New Zealand Association of Social Workers. Using Aotearoa New Zealand bears witness to the primacy of indigenous identification with this place.

## 1.2 Study Aims and Research Questions

This study aims to make publicly visible the private experience of rural poverty in Aotearoa New Zealand and to work towards social change to improve the position of rural people living in poverty. Social work involves making links between the private troubles of the people we work with and the structural causes of their problems (Hyslop & Keddell, 2018). Social work has a mandate to work with the poor and in solidarity to advocate for economic justice and human rights (Krumer-Nevo, 2016; Morris et al, 2018; O'Brien, 2016).

Over time there has been considerable public, and more recently political, interest in child poverty in Aotearoa New Zealand. In 1994, the non-governmental Aotearoa New Zealand Child Poverty Action Group (CPAG) was established. The aim of this group is to eliminate child poverty "through research, education and advocacy" (Child Poverty Action Group, n.d., para. 2). CPAG research has raised issues and sought policy-based solutions to poverty. CPAG's work has put child poverty in the 'public eye' in Aotearoa New Zealand. However, its focus is on children rather than adults, and it is mostly urban-centric.

This points to an ongoing limitation in the academic literature on poverty: much of what we know about poverty is based on urban settings (Lockwood, 2002; Sherman, 2006). Research about poverty in Aotearoa New Zealand, such as the Family 100 Research Project (Garden, Caldin, Robertson, Timmins, Wilson & Wood, 2014) and a major Foodbank study carried out in 2005 (New Zealand Council of Christian Social Services, 2005), have an urban poverty focus. The 'Family 100 Research Project' gathered narratives of 100 families living in poverty in Auckland, while the Foodbank study obtained data from seven foodbanks throughout the country, all based in cities. Similarly, the Families Commission (2012) carried out research with urban-based families in financial hardship.

While people living rurally experience some of the same issues as people living in urban centres, the literature recognises that there are some unique aspects of rural living that contribute to the experience of poverty (Faber & Miller-Cribbs, 2014; Pierson, 2016; Smith, 2017a; Welfare Expert Advisory Group, 2019). Sherman (2006) discusses differences between the experiences of poverty, and argues that the place a where person lives will affect both their experience of, and how they respond to, poverty. In Aotearoa New Zealand, the Welfare Expert Advisory Group (2019) identifies that beneficiaries in rural locations had “different, and often overlooked issues” (p. 51) compared with their urban counterparts.

My study aims to address the research and knowledge gap about rural poverty by exploring how participants, who are poor and live in a rural community, cope with financial hardship. The notion of place (discussed later in this chapter) is significant as it shapes the experience of participants. This focus supports Sherman’s (2006) contention that where a person lives is a significant factor underlying their experience of poverty.

The findings from this research will be used to further inform social workers in Aotearoa New Zealand about rural poverty. I will propose a poverty-informed social work practice approach for social workers in Aotearoa New Zealand. The findings also signal areas for enhanced social work education and curriculum development in relation to teaching students about working with people experiencing poverty (addressed in Chapter Eight).

### 1.2.1 Research Questions

This study's research questions are:

1. *What is the experience of poverty like for those who live in rural communities?*
2. *What impact does poverty have on daily life in a rural community?*
3. *How do people cope with financial hardship in a rural environment?*
4. *What are the implications for social workers working with people in poverty in rural communities?*
5. *How can social workers practise with the rural poor effectively in empowering and socially just ways?*

The first four questions are addressed in the findings' chapters (Five, Six and Seven) while the final question is discussed in the concluding chapter of this thesis.

### 1.3 Defining Rural

There is no commonly accepted international definition of the term 'rural'. The definition of rural is dependent on the particular geography of a country (Howard, Katrak, Blakemore & Pallas, 2016; Lohmann & Lohmann, 2005; Statistics New Zealand, 2004), especially when a country is either sparsely or intensely populated. Rurality is a fluid concept, changing over time, but also meaning

different things to different people (Lohmann & Lohmann, 2005; Maidment, 2012; Pugh & Cheers, 2010).

Approaches to defining rurality based on population alone are no longer adequate for defining what is rural (Howard et al, 2016; Maidment, 2012). Population-based definitions do not illuminate the social and economic features which differentiate rural locations from urban areas. Prior to 2003, rural was defined in Aotearoa New Zealand as an area which had a population of under 1,000 (Fearnley, Lawrenson & Nixon, 2016). Using this definition, the town of Stratford is urban while the rest of the study district is rural. Moving away from this blunt definition in 2003, Statistics New Zealand developed a set of definitions using a continuum with three urban and four rural categories (see Table 1.1 below) (Statistics New Zealand, 2004). In Table 1.1, the Statistics New Zealand definition has been applied to the study area in the second column.

Table 1.1: Rural/urban continuum in relation to Stratford district

Statistics New Zealand category	Definition and relevance to the study area
Highly rural/remote areas	Have minimal dependence on urban centres. The furthest east of the study area is highly rural/remote.
Rural area with low urban influence	The focus of the area is rural with most of the employment being rurally based.

<p>Rural area with moderate urban influence</p>	<p>Have significant urban influences, notably in employment, but some people are employed in rural occupations. The area surrounding Stratford is a rural area with moderate urban influence as most people are employed in rural occupations; this is an intensive dairying area.</p>
<p>Rural area with high urban influence</p>	<p>A transition area between urban and rural where the employment of residents is in an urban area.</p>
<p>Independent urban community</p>	<p>Where most of the population are not dependent on a main urban area. Statistics New Zealand (2004) defined Stratford as an independent urban community as most people who are employed work in the town.</p>
<p>Satellite urban area</p>	<p>Where the settlements have significant contact with a main urban area.</p>

Significant urban site	A main urban area such as New Plymouth, to the north of the study area on the west coast of the North Island.
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The Statistics New Zealand definition has been critiqued for identifying areas as urban where residents cannot access services that would normally be available in urban communities such as health care (Fearnly et al, 2016). The district of Stratford is a good example of this definitional problem as its residents lack easy access to urban based health services. These definitional anomalies indicate the difficulties of defining rurality in ways which recognise people’s lived experience of a place (Lohmann & Lohmann, 2005; Maidment, 2012; Pugh & Cheers, 2010).

#### 1.4 Defining and Measuring Poverty

In the broader academic literature poverty is described as either absolute or relative (Backwith, 2015; Giddens & Sutton, 2014; McNeill, 2017; O’Brien, 2016). The term ‘absolute poverty’ refers to not having enough income or material goods to meet basic survival needs, which is often how poverty is experienced in low-income countries (Marron, Millar & McKinnon, 2011). Absolute poverty is also referred to as subsistence poverty (Lister, 2004).

Poverty in Western nations is generally defined in relative terms. Relative poverty is not having enough income or material goods to participate in society to the extent considered acceptable at a given time (Backwith, 2015; Marron et al, 2011). Relative poverty is therefore relational and fluid as it changes over time as what is considered essential in society changes. For example, having a cell phone is now considered essential, whereas ten years prior it would have been considered a luxury item (Backwith, 2015; Lister, 2004).

The capabilities approach is another way of conceptualising poverty. Sen (2009) theorised that poverty could be understood by looking at what people were able to do, rather than focusing on their income earnings. Capabilities-based analysis considers if a person has the capabilities needed to do the things they want to achieve. Money is viewed as part of an individual's capability: money enables people to pay for goods and services to live the kind of life they want to, although it is not the only factor defining poverty (Lister, 2004). This perspective recognises that in some societies not all goods are commodified, especially when communities have collective ownership of property and trade in goods rather than use money as a unit of exchange. The capabilities approach has been challenged for its abstraction, lack of connection to real people, and the difficulty of applying the ideas (Backwith, 2015). As an approach to defining poverty, it is difficult to distinguish capabilities from other conditions which affect a person's well-being.

#### 1.4.1 Income Measurement

Another approach to measuring poverty is to consider disposable household income: the amount a household has available to spend on living costs. A disposable household income measure uses an income threshold to determine if a household's disposable income is below or above a level which allows an adequate standard of living (Backwith, 2015). This level is usually set at fifty or sixty percent of a society's median disposable household income (Expert Advisory Group on Solutions to Child Poverty, 2012).

The sixty percent of median disposable household income threshold is often used when measuring poverty in Aotearoa New Zealand, although there are exceptions such as the 2020 Child Poverty Monitor report's use of a fifty percent threshold (Duncanson, Richardson, Oben, Wicken, van Asten & Adams, 2020). After carrying out the New Zealand Poverty Measurement Project (NZPMP)

to establish the measurement of poverty in Aotearoa New Zealand, Stephens, Waldegrave and Frater (1995) concluded that the measure should be relative and set at sixty percent of the median national income. Recently, Boston and Chapple (2014) and Rashbrooke (2013) have reaffirmed the threshold's usefulness, believing it to provide a consistent and realistic measure of relative poverty. In addition, two approaches use an income-based median measure. One median measure is calculated before the cost of housing is deducted from net income, while the other is calculated after the cost of housing has been deducted (Stats NZ, 2019). The latter measure gives a clearer picture of how much disposable income people have access to (Backwith, 2015), particularly important in Aotearoa New Zealand where housing costs are high (Welfare Expert Advisory Group, 2019).

#### 1.4.2 Living Wage

The Aotearoa New Zealand living wage movement advocates for all workers to be paid a fulltime wage rate considered sufficient to afford the necessities of life and also participate in society (Living Wage Aotearoa New Zealand, 2019). The living wage is estimated by calculating what people are likely to need each week to pay for resources such as housing, food, transportation, and childcare. The living wage in Aotearoa New Zealand in 2020 is \$22.10 per hour for an adult working for forty hours per week based on Living Wage Aotearoa New Zealand (2020) calculations. However, the actual minimum wage in Aotearoa New Zealand is \$18.90 per hour (Ministry of Business, Innovation and Employment, 2021).

#### 1.4.3 Material Deprivation Approach

A material deprivation approach to poverty measurement examines patterns of consumption—that is, what people can buy and what they already own. If people do not have and cannot afford specific consumption items widely considered essential in a given society, they are then defined as poor

(Expert Advisory Group on Solutions Child Poverty, 2012). A material deprivation approach starts with a poverty index, but also considers a list of essential items that most people would expect a household to have for a healthy lifestyle, and for household members to be able to participate in society (Backwith, 2015). For example, the Expert Advisory Group on Solutions to Child Poverty (2012) listed the items considered essential for children in Aotearoa New Zealand as including “having a raincoat, sturdy shoes and warm clothes, and being able to repair or replace appliances, visit the doctor and keep the house warm in winter” (p. 3-4). The following items are identified by the UNICEF Office of Research (2016) as being necessary for an acceptable standard of living in Aotearoa New Zealand: ability to pay for unexpected expenses; to have a holiday (for a week or more) annually; to not be in debt in relation to housing or utilities; to have a meal with protein every second day; to have adequate heating, a washing machine, a colour television, a telephone and a car.

A deprivation approach is used to determine areas of need in the health sector in Aotearoa New Zealand, including the Taranaki District Health Board, the statutory body responsible for the provision of health care in the Stratford study area. The Taranaki District Health Board uses a deprivation approach as a tool to aid the planning of service delivery. The tool included geographical differences in the province using the New Zealand Deprivation Index (Leung-Wai & Sanderson, 2009). The Index drew on Statistics New Zealand’s census data to create mesh blocks, which are small geographical units comprising a median population of 90, to determine the extent of economic deprivation or wellbeing of people living in each mesh block. Nine variables are used to measure the extent of deprivation: no internet at home, low household income, individual income derived from a benefit and aged between 18 and 59 years old, no access to a car, lack of living space in a household, living in a home not owned by a family member, aged 18 to 59 and unemployed, aged 18 to 59 and having no qualifications, and being a single parent family (Atkinson, Salmond & Crampton, 2014). The

Deprivation Index in relation to the study area shows there are high deprivation mesh block areas in the east of the study district and some low deprivation mesh blocks close to Stratford town on the ring plain where dairy farming dominates (Atkinson et al, 2014).<sup>3</sup>

## 1.5 Context of the Study

The notion of ‘place’—the space in which people live (Stanley, Larkins, Austerberry, Farrelly, Manthorpe & Ridley, 2016)—is a salient issue for people living rurally where identity is forged by geographic and social identification. The concept of ‘place’ is therefore integral for social workers who practice in rural locations to understand (Vance, 2017). The nature of the ‘place’ where this study was carried out is important. It was not a neutral background to participants’ lives but had a bearing on their daily life (Tuck & McKenzie, 2015). The history, geography, population demographics, infrastructure, and social world in which participants lived affected the way poverty manifested in their lives. In this study the characteristics of the Stratford district impacted on the participants’ daily lives and how they responded to being poor. The ‘place’ in which the study takes place is explored below. This study provides more than a description of the ‘place’. I hope the reader will gain insight into some of the existential features of the region and the meanings attached via the written material and photographs.

### 1.5.1 Topography

Administratively, Stratford District extends eastwards from Stratford township (the main service centre) in the centre of Taranaki to past Tahora in the east as shown in Figure 1.1 below and it is

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<sup>3</sup> On a scale of one to five with five being the most deprived and one being the least deprived, close to Stratford town there are meshblock areas of one which could be considered not deprived, and to the east of the study area there are meshblock areas of five. It is noted that a more recent New Zealand Deprivation Index based on the 2018 census data has been published, the Taranaki District Health Board may update their approach in due course based on the new index.

noted that the Stratford district boundary in the east extends into the Manawatu-Whanganui regional council area (Taranaki Regional Council, n.d.). The Stratford district area incorporates the 'Forgotten World Highway', or State Highway 43, which runs from Stratford to the east of the Stratford district. Stratford District is one of Aotearoa New Zealand's smallest local authority areas at 2,170 square kilometres. It is situated on the volcanic ring plain around Mount Taranaki, as identified in Figure 1.1. Due to volcanic activity in the past, the area closest to the mountain is fertile with plentiful grass growth and the area is consequently dominated by the dairy industry. The edge of the ring plain towards the east of the study area is hill country where sheep and beef farming are the main form of land use alongside forestry. In the far east of the district, there is abandoned farmland currently reverting to bush and some land occupied by original bush (Stratford District Council, 2014). These areas are steep and difficult to farm. The eastern part of the study area was adversely affected by flooding in 2015 and suffered major stock losses as well as damage to roads and slips (Coster, 2015; Federated Farmers, 2015). The 'Forgotten World Highway', named due to its isolation, was built on bridle paths (paths created by repeated use by horse riders) carved out in the 19<sup>th</sup> Century (Bartle, 2005a). The highway is 155 kilometres long and crosses four saddles.



Figure 1.1: Map showing Stratford District Council (in yellow).

There are two significant settlements on the Highway: Toko, close to Stratford in the east, and Whangamomona, in the far east of the study area (Figure 1.2). There is also a settlement at Midhirst to the north of the study area. A more detailed description of these communities is below.



Figure 1.2: Map of study area showing 'Forgotten World Highway' and Iwi locations

### 1.5.2 History

The history of the study area is important as it shapes the values and attitudes of current residents and explains important industry interests and settlement patterns. The habitation of the area is explored from pre-colonisation (1250) through to settlement by Europeans in the late 1800s. The impact of farming, the railway 'opening up the area' for the transportation of people, stock and goods (Walter, 2005), and Whangamomona's establishment of a republic as a response to regional council boundary changes in 1989 (Lambert, 2016b) are outlined.

Prior to colonization, this region was a place of refuge in times of war for local Iwi and used for seasonal food gathering. There was, however, no permanent settlement. The area to the east of Stratford was used for bird snaring and fishing for eels (Walter, 2005). Running through the area is a single file track, known as the Whakaahurangi track, which connects North and South Taranaki. The track was used by war and hunting parties, with an overnight camp area near Stratford (Church, 1990; Stratford Jubilee Executive, 1928; Walter, 2005). This camp is now the site of Whakaahurangi Marae, discussed below. Mount Taranaki's volcanic activity during the 16<sup>th</sup> and 17<sup>th</sup> centuries was a disincentive to permanent settlement as people feared the loss of life from a major eruption.



Figure 1.3: Trail marker for the Whakaahurangi track (Photograph: Lesley Pitt)

The first European settlers in Taranaki were whalers in 1828 and they settled peacefully among the local (indigenous) population. However, from 1841 the Plymouth and New Zealand Company began purchasing land for settlement by British immigrants (Lambert & Lambert, 1983; Sole, 2005) in North Taranaki<sup>4</sup>. Tensions over land grew between Māori and European settlers and

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<sup>4</sup> Commercial companies who brought land in colonies and sold to settlers (Phillips, 2005).

continued until the 1860 land wars in northern and coastal Taranaki. Following the wars the New Zealand government engaged in mass land confiscations in Taranaki to censure Iwi for their resistance of settlement (Ministry for Culture and Heritage, 2016; Riseborough, 2002; Sole, 2005; Wells, 1878). In the Stratford district, some land was confiscated but land was also later sold freely to settlers (Keenan, 2015).

Two Iwi have claims to the Stratford district land. Stratford township falls into the boundary of both Ngāti Maru to its east, and Ngāti Ruanui to Stratford's south. The 'Forgotten World Highway' is in the rohe of Ngāti Maru. The full name of this Iwi is Ngāti Maru-whara-nui, derived from the ancestor named Maru-whara-nui. The Iwi, which is the smallest in Taranaki, have a claim under review by the the Waitangi Tribunal (Te Rununga o Ngāti Maru Taranaki, 2015) for compensation for land loss.<sup>5</sup> Up until the establishment of Wakaahurangi Marae on reserve land in 1975, there were no marae in the study area. In 1988, the Wakaahurangi Marae affiliated with Ngāti Ruanui. The map in Figure 1.2 shows where Iwi are based within Taranaki. It does not define boundaries in lined form as the exact boundaries are to be mapped after the completion of ongoing Treaty settlements (Taranaki Regional Council, n.d.).

Stratford district was settled by Europeans later than coastal Taranaki. New Plymouth and the coast of Taranaki were settled by Europeans early in 1841, and Inglewood, to the north of Stratford, was settled in 1875. Inglewood served as a gateway to the settlement of Stratford, and in the early days of Stratford's construction it took four days to travel from Inglewood to Stratford by bullock, a journey now of approximately twenty minutes by car. Stratford district was densely forested and was not settled by Europeans until the late 1800s. The land on which Stratford is built was confiscated

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<sup>5</sup> The Waitangi Tribunal was established in 1975 to hear grievances against the New Zealand Crown of promises broken in relation to the Treaty of Waitangi (signed in 1840) (Waitangi Tribunal, n.d., n.p.).

following the land wars. In 1865, 352,000 acres of land was confiscated from Ngāti Ruanui and a neighbouring Iwi in retaliation for what was described as rebellion against the Crown (New Zealand Government, 2000). However, land further to the east of the study area, the Toko and Huiakama blocks, were purchased by European settlers through negotiation (Church, 1990).

The site for the township of Stratford was surveyed in 1877, after which native bush was cleared. The town was originally named Stratford-on-Patea after Shakespeare's birthplace, Stratford-on-Avon. To build on the connection to Shakespeare, the streets are named after Shakespearean characters—such as Romeo and Juliet Streets—reflecting the settlers desire to replicate their homeland. In 1879, the rail connection between Stratford and New Plymouth was finished, which assisted the development of the township, increasing the number of houses and businesses (Walter, 2005). The construction of the Kahouri bridge (over Kahouri Stream, see Figure 1.4) on the 'Forgotten World Highway' was completed in 1885 and opened the area to the east of Stratford for development of farms and other economic activity, including forestry (Stratford Jubilee Executive, 1928). Tree felling was the first major European activity in the study area, followed by intense dairy activity with the establishment of co-operative dairy factories. Dairy farming continues to be a significant occupation around Stratford township; the dairy industry is also significant to the economy of Aotearoa New Zealand (Johnson, 2015).



Figure 1.4: Kahouri bridge (Photograph: Lesley Pitt)

The first community to develop in the study area outside of Stratford township was Toko, where a school was built in 1892-3 along with a store and dairy factory. Whangamomona was first settled in 1895, although road and rail access came later. The first European settlers arrived in the Whangamomona area by taking a boat up the Whanganui River and then tracking overland (Hoskin, 2005). Initially this route was the only means of access to the area and for getting produce out to trade. By 1898, there were 187 people in the Whangamomona district (Church, 1990)—a slightly larger population than the 126 who currently live there (StatsNZ, n.d.). In 1902, a hotel was built, and this business continues to be in operation today (Lambert, 2006).



Figure 1.5: Whangamomona Hotel (Photograph: Lesley Pitt)

After World War One, returned servicemen moved into the Whangamomona area as they obtained farms by ballot from the government. The returned servicemen entered their name for a farm, and if their name was drawn out, the farm was allocated to them. Unfortunately, many of these enterprises were unsuccessful and the farmers walked off the land as the allocated properties were often too small to be commercially viable in addition to being difficult to farm (Gould, 1992; Hoskin, 2005; King, 2007; Lambert, 2006). The area is still isolated, and farming remains difficult due to the terrain. The extension of the railway from Stratford towards the east of the study area helped to connect outlying eastern settlements with Stratford. In 1933, the eastward railway was completed and connected to the main trunk line in Taumarauni. Whangamomona became a refreshment stop on that route (Church, 1990; Lambert & Lambert, 1983).

During the depression years of the 1930s, there were high rates of unemployment and poverty throughout Aotearoa New Zealand (Walter, 2005). In response, the government established relief schemes, such as noxious weed clearance, road construction and drainage schemes. The results of this work continue to be useful today, particularly the pastures currently used for sheep and beef farming and the network of tunnels and roads. This response to poverty remains part of the political discourse today in the form of the 'work for the dole' idea. A more recent example is that of Shane Jones, former Regional Economic Development Minister, who raised the possibility of young people working in community schemes to receive an unemployment benefit (Radio New Zealand, 2017).

The depression was followed by World War Two in 1939, and a sizable number of men left the district to go to war in Europe and the Pacific. Fifty-five servicemen who did not return are recognised in the Stratford Hall of Remembrance. In the Strathmore War Memorial Hall, 27 men who died in active service from the district are named. In the eastern most region of the study area, 47 men who did not come home from war are remembered at Whangamomona, Kōhuratahi and Tahora memorials (Lambert, 2006). The absence of these men affected the workforce into the late 1940s and 1950s, and there was a significant shortage of marriageable men across the district as well as a shortage of workers (Lambert & Lambert, 1983; Walter, 2005).



At this time, the number of dairy factories reduced with the consolidation of small co-operatives to increase efficiency of production. This rationalisation further reduced the number of employment opportunities available. At the same time, a range of other technological advancements in the agricultural industry, including the development of rotary milking sheds, further reduced employment opportunities in the district (Peden, 2008b). These changes in the farming industry resulted in rural depopulation of the wider district (Walter, 1994).

Local government reforms in 1989 altered regional boundaries in the district with the easternmost area of Stratford District placed under Manawatu-Wanganui Regional Council control instead of the Taranaki Regional Council (Lambert, 2006). This latter area included Whangamomona, Tahora and Kohuratahi. The people living in those areas saw themselves as part of the Stratford District and protested by declaring themselves a 'republic' and 'ceding' from Aotearoa New Zealand. They elected their own president, and the resultant publicity brought a high profile to Whangamomona (Bartle, 2005b; Lambert, 2006). The first annual 'Republic Day' in November 1989 attracted thousands of visitors. Celebrating 'Republic Day' is now a local tradition held every two years on the occasion of the election of the President of Whangamomona, as is issuing passports to visitors (see Figure 1.6 below).

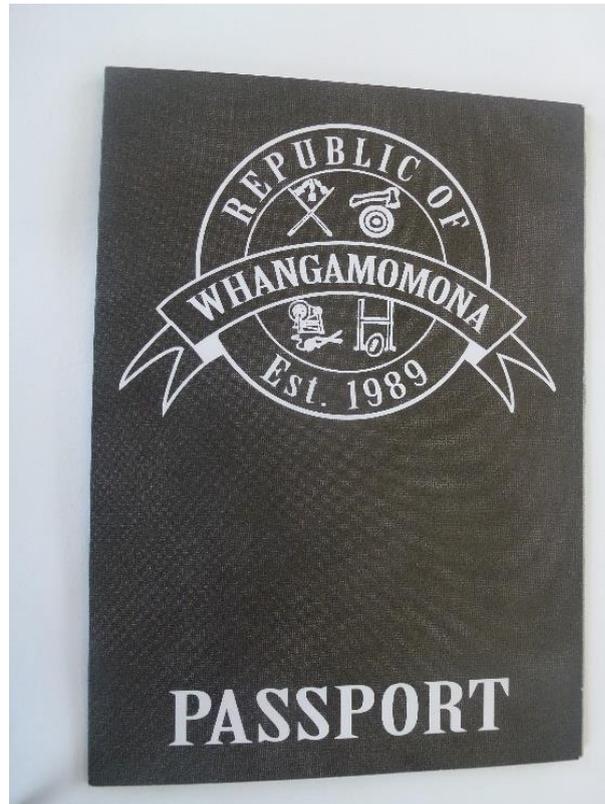


Figure 1.7: Whangamomona passport (Photograph: Lesley Pitt)

## 1.6 Demographics

According to the 2018 Census, the population of Stratford District was 9,747, which amounts to less than one percent of the total population of Aotearoa New Zealand (StatsNZ, n.d.). The population was made up of 4,722 males and 4,752 females, and the median age is 39.6 years. The percentage of the population of Stratford district who identified as European was 91.4 percent, significantly higher than the national average of 74 percent. The percentage of Māori had increased from 11.8 percent at the 2013 census to 14.9 percent in 2018 (the national percentage is 16.5 percent).<sup>6</sup> Pasifika were only 1.4 percent of the study area population compared to 7.4 percent nationally.<sup>7</sup> Other ethnic

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<sup>6</sup> The Aotearoa New Zealand Census allows multiple identity categories to be selected.

<sup>7</sup> Pasifika – those acknowledging descent from the seven Pacific Island nations which comprise Samoa, Kingdom of Tonga, Cook Islands, Nuie, Kiribati, Tokelau and Fiji (Fraenkel, 2012).

affiliations identified were Asian at 2.2 percent (national percentage was 11.8 percent), and Middle Eastern, Latin American and African identities comprised 0.1 percent of the population (national percentage was 1.5 percent). The percentage of people in the district born overseas was comparatively low at 9.3 percent (StatsNZ, n.d.).

	Stratford district	Rest of Aotearoa New Zealand
European/New Zealander	91.4%	74%
Māori	14.2%	14.9%
Pasifika	1.4%	7.4%
Asian	2.5%	11.8%
Middle Eastern, Latin American and African	0.1%	0.2%
People born overseas	9.3%	25.2%

Table: 1.2: Ethnic composition of study area based on self-identification

The median income per year in Stratford District was \$28,700 according to the 2018 census. The cost of household rent is lower than the national average at \$210 per week, and 54 percent of households live in homes they own (StatsNZ, n.d.). Census data in 2018 show that the

unemployment rate in the district is 3.6 percent, below the national figure of 4.52 percent (StatsNZ, n.d.).

The Stratford District Council (2015) identified a lack of educational and training opportunities available to people in Stratford due to most tertiary providers basing themselves in New Plymouth, a 34 minute drive from Stratford township. Central and South Taranaki are identified as more deprived areas than North Taranaki. Factors contributing to the deprivation include having to travel to access health care and other services lacking in Stratford District (Midland District Health Boards, 2014; Tester, Provoost, Logan, & Roberts, 2015).

There are health inequalities for Māori in comparison with non-Māori living in Taranaki which affect life expectancy. Māori female life expectancy is 75.5 years compared to 82.5 years for non-Māori, while life expectancy for Māori men is 72.4 years as opposed to 79 years for non-Māori men (Ratima & Jenkins, 2012). Nationally, the life expectancy for Māori women is 77.1 years, and 73 years for Māori men. The life expectancy for Māori in Taranaki is therefore lower than the national average for both Māori and non-Māori (Ministry of Health, 2018).

### 1.6.1 Infrastructure

Public transport in the area is limited. There is a bus service (called the Connector Service), which runs from Monday to Friday and operates four return services a day. The route is from Hawera to New Plymouth along State Highway 3, with a stop in Stratford. The bus is funded by a partnership between the district councils in the region, the Taranaki District Health Board, and the Western Institute of Taranaki (WITT). Fares on this bus are discounted and are free for WITT students travelling between Hawera and New Plymouth. This means students travelling either between

Stratford and Hawera, or between Stratford and New Plymouth can travel free (Taranaki Regional Council, 2015).

While Taranaki has freight rail access south on the Marton-New Plymouth line, freight trains do not stop at Stratford. Until 2010 there was a rail link from Stratford eastwards through the study area which connected with the Main Trunk line at Taumarunui. This rail link is no longer used to transport freight or people and is now used by a tourist operator with adapted golf carts on the rail tracks as part of an east Taranaki tour. The closure of the railway significantly affected the region as there is now no public transport available between Stratford and Taumarunui. Freight therefore must be transported by road. There is a small airfield in Stratford where twin engine planes can land, and a number of private airstrips on farms are used for aerial top dressing (Taranaki Regional Council, 2015). Private airstrips are needed on farms due to their geographic isolation and lack of access to public airfields.



Figure 1.8: Railway line near Whangamomona (Photograph: Lesley Pitt)

Transport and access in the area is therefore predominantly by road, mainly via private vehicles. In addition to State Highways, a 600km-long network of roads runs through Stratford District, supported by 152 bridges and 3 tunnels. Thirty-five percent of this road network is unsealed (Stratford District Council, n.d.a). There are also 700 kilometres of unformed roads (paper roads) which are legally roads, but not maintained or used (Taranaki Regional Council, 2015). These figures signal that the area has extensive infrastructure needs in relation to roading quality and transportation. For participants in this study, transportation was an area fraught with difficulties due to cost and distance (discussed in Chapter Six).



Figure 1.9: Temporary bridge over washed out section of the Forgotten World Highway  
(Photograph: Lesley Pitt)

Internet connection in the area is inadequate and the Stratford District Council has stated that it needs to improve for the district to develop economically (Stratford District Council, 2015). In the 2018 Census 78.4 percent of homes had internet access (StatsNZ, n.d.). The area to the east of the study location has only intermittent cell phone access. Stratford has a post-shop and this, along with post boxes, serves the postal needs of the town. Deliveries occur every second day. Rural mail is

delivered via rural delivery (New Zealand Post, 2015), a five-day-a-week service. For the residents of Stratford District, communication can be difficult, particularly for those living in the east of the study area, where gaining help in a crisis is challenging.

### 1.6.2 Economics

Economic growth in the province of Taranaki is above the national average and continuing growth is projected. Growth is driven by the dairy and oil and gas industries (Johnson, 2015). Stratford's largest employers are still in the agriculture sector and the agricultural servicing sector, particularly dairy farming. A drop in the price of milk internationally in 2015 (Rimer, 2015) greatly affected this industry, resulting in a reduction in spending by dairy farmers and staff redundancies (E. Thomas, Stratford Foodbank, personal communication, 28 August, 2015). Attempts are being made to grow tourism (Stratford District Council, 2015), with notable examples including the establishment of a cycle trail using the 'Forgotten World Highway' and the proposed Taranaki crossing project which is a hiking trail. This trail will establish a 41-kilometre walking track from Mount Taranaki to the Tasman Sea (Department of Conservation, 2018). The area to the east of Stratford outside the ring plain is dominated by sheep and beef farming, as it is rugged hill country and unsuitable for dairy farming. There is also some forestry at Te Wera in the middle of the study area (Taranaki Regional Council, 2015).



Figure 1.10: Te Wera forest (Photograph: Lesley Pitt)

The agricultural base of the economy and workforce has resulted in a gap between the wealthy and the poor. A section of the community work as unskilled workers on farms and are transient due to the seasonal nature of their employment (Tester et al, 2015). These workers were the most vulnerable in the 2015 drop in dairy prices as farm owners and share milkers made staff redundant to cut costs.<sup>8</sup>

### 1.6.3 Social World

There are several social services in the Stratford district. The area is serviced by a Work and Income New Zealand (WINZ)<sup>9</sup> site based in Stratford. Oranga Tamariki Services are delivered from Hawera, which is a 26-minute drive from Stratford.<sup>10</sup> While Stratford has a Health Centre run by the Taranaki

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<sup>8</sup> Sharemilkers work on another person's farm for a share of the profits.

<sup>9</sup> Work and Income New Zealand (WINZ) provide financial assistance, via benefits, to those not working or in low wage employment and provide support to look for employment and housing (Ministry of Social Development, n.d.a).

<sup>10</sup> Oranga Tamariki is a state-run child protection and youth justice service.

District Health Board, most health services are provided in New Plymouth at the base hospital and at Hawera Hospital.

Social connections within Stratford are often centred around sport. For example, there is a multi-sports centre which includes a hockey turf and netball courts. Stratford has an eighteen-hole golf course and Strathmore, in the east of the study area, has a nine-hole golf course hosted on a farm. Stratford has a rugby club, fields a premier netball team, and has a football club. There is a local swimming pool which is used for a range of recreational activities. In the east of the study area, an annual rugby union competition for the Dean Cup takes place with teams from Toko, Strathmore and Whangamomona competing. This is an important social occasion in the area (Cleaver, 2017). Other socialising revolves around school activities, public bars, including the Whangamomona Hotel (Figure 1.4 above), and agricultural-related activities such as dog trials and stock sale days.

All these activities have a cost involved, for things such as fees or equipment, and most require people to have transport to be able to access the pursuits. The agriculture-related events are set up for farmers who have stock to sell and can afford to keep and train dogs. For the poor in the community, their ability to participate is limited by their lack of money and not having access to transport. The study location's political orientation is conservative. Stratford is part of the Whanganui electorate and in 2017 the centre-right National Party's Harete Hipango won the seat with 45.6 percent of the vote. In the east in the Taranaki-King Country electorate, National's Barbara Kuriger won 66.4 percent of the vote (New Zealand Parliament, 2017). However, in the 2020 election the Whanganui electorate was won by Steph Lewis from the Labour Party while Barbara Kuriger retained the Taranaki-King Country seat (Electoral Commission, n.d.).

## 1.7 The Notion of Place

This study is conducted in a particular location which is distinct from other places. Human geographers theorise about the notion of place (Kearns, 1991) and have developed a range of different concepts relating to place (Hoelscher, 2011). Place can be viewed as a specific location, using Global Positioning System (GPS) co-ordinates, where examination takes account of the natural features of a place (such as Mount Taranaki), and features that have been shaped or added to by people, such as tree felling and planting pasture (Andrews, 2018; Gesler, 1992). Using this lens is known as the descriptive approach to place. It has, however, been critiqued for being simplistic and not addressing the deeply held connections people have to specific locations (Cresswell, 2004).

In the 1970s, humanist geographers identified place as a space or physical environment that has particular meaning attached to it (Cresswell, 2011; 2008). This meaning is identified as the *sense of place*, including the emotional connections people have to a place (Cresswell, 2004). For humanist geographers, the notion of place explains the way people identify with a location and how that location shapes their identity (Gesler, 1991). Attachment to place is part of a person's identity as attachment grows from their interactions with the environment. From these interactions, meaning grows and is strengthened by the length of time a person lives in a place, alongside the life events they experience there (Jack, 2010). How involved people are in community activities, home ownership, and community cohesion, also affect a person's sense of belonging to a place (Chamlee-Wright & Storr, 2009; Jack, 2010). In this study, participants who had grown up in the Stratford District and experienced significant life transitions there, such as having children, expressed a strong attachment to place.

It is important to note that place has significant meaning for indigenous people (Gombay & Palomino-Schalscha, 2018). In the study area, two Iwi recognise the Stratford district as their tūrangawaewae, or place to stand. For these two Iwi, their identification to place is through whakapapa, and narratives surrounding their tipuna that connect them to settlement of the place (Walker, 2017). In this study, none of the participants identified as mana whenua; that is, their tribal affiliations were not based in Stratford district but were elsewhere in Aotearoa New Zealand.

Discussions about place attachment tend to focus on positive experiences. However, a person may feel ambivalent or negative about a place. Places where negative experiences happen may be as significant as places where positive events occur (Manzo, 2005). For example, a place may represent a location where a person experienced abuse. For some participants in this study, their homes were the site of intimate partner violence, and they consequently expressed negative place attachment.

The notion of place can be interpreted beyond an individual's attachment or identity to be a site where there is collective meaning making (Saar & Palang, 2009). That is, people's identity is shaped and shared with those who come from the same place (Cresswell, 2011). People from Stratford may identify themselves as being from the district, and for those from the districts to the east of Stratford, there is shared meaning about what it means to live in that area. For example, for people living in the Whangamomona area, there is pride in being isolated and resilient as well as living in a place where self-reliance is valued. This can be evidenced in community events such as the aforementioned Dean Cup.

Various scholars argue that place is socially constructed—that is, place exists because of the discourse about it and the meaning given to a location (Cresswell, 2004; Manzo, 2005; Saar & Palang, 2009). Place is the juxtaposition of a site and the human feelings about, and interactions in, a site

which gives it meaning (Stanley et al, 2016). Mount Taranaki has a particular meaning for the residents of the study area. For tangata whenua it is tapu; however this status is not always respected. For example, in 2011 a group took a barbeque to the summit of the mountain and cooked food, which was a breach of tapu (Wilkinson, 2016). The naming of the mountain evidences the process of colonisation. The mountain, known to Iwi as Taranaki, was renamed Mount Egmont in 1770 after the first Lord of the Admiralty, an Englishman who had no connection to the area. However, in 1985 the name reverted to Taranaki after pressure from local Iwi (Taranaki Mouna, n.d.). For other residents the mountain is a symbol of home. For example, they talk of knowing they are home when they see Mount Taranaki.

The way places are named is significant as it demonstrates power and, in this instance, colonisation (Cresswell, 2004; 2011). Those with access to power can control the way a place is viewed and talked about (Gesler & Kearns, 2002; Saar & Palang, 2009). In Stratford township, there are allusions to the settlement of the area by the British with references to Stratford-on-Avon in England. As noted above the streets are named after William Shakespeare's characters and the river running through the town is the Avon River. Naming the town and streets after a place in the United Kingdom excludes tangata whenua who have their own names and relationship to the land. The naming of the town and the streets demonstrates the way language is used to make meaning about a place (Hoelscher, 2011). For this study, it was important to consider the place in which participants lived and the way that place influenced their lives: "humanity has to exist in place" (Cresswell, 2004, p. 50).

## 1.8 Stratford

In the following sections the main settlements in the study area will be outlined to provide further context of the place in which the research was carried out. For participants, the place in which they reside affects the way they live and their access to possible solutions to their poverty. The population of Stratford township is 5,784 (StatsNZ, n.d.) and remains relatively static. As discussed above, Stratford reflects the origins of the European settlers, who mostly came from the United Kingdom.



Figure 1.11: Glockenspiel clock tower, Stratford (Photograph: Lesley Pitt)

Stratford has a Tudor-style glockenspiel (playing clock) which was constructed around an existing tower built in the 1960s (see figure 1.11 above). The tower has mechanised Romeo and Juliet puppets which appear four times a day to perform scenes from the Shakespeare play. The

clock has become a tourist attraction. The glockenspiel was erected in 1996 with a grant from the TSB community trust (previously known as the Taranaki Savings Bank) and is in the centre of the central business district (Lambert, 2016b). The figures were made by Nigel Ogle from Tawhiti Museum and a local engineering firm designed and assembled the tower (Pukeariki, n.d.). The clock is a symbol of the Anglo-centric connection to Shakespeare and Stratford-on-Avon. It serves as a reminder of the town's settler history, the connections to the United Kingdom and the process of colonisation.

There are three state schools in Stratford town, two primary schools and one high school. Stratford School (primary) had a decile rating of 5 and Avon School a decile rating of 1.<sup>11</sup> A decile 1 rating indicates the children at the school fell into the poorest 10% in the country. A decile 10 rating is the opposite of this. Each decile rating between 1 and 10 included approximately 10% of schools across Aotearoa New Zealand (Education Review Office, n.d.). Avon School had a social worker attached to it due to its low decile rating. The primary schools cater from years 1 to 8 as there is no intermediate school in the area.<sup>12</sup> At secondary level, Stratford High School has a decile rating of 4, and the most recent Education Review Office report in 2017 noted a roll of 530 (Education Review Office, 2017a). Stratford High School operates a teen parent unit which caters for up to 25 pupils at any given time.

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<sup>11</sup> School decile ratings were used by the Ministry of Education to determine funding based on the socioeconomic status of the pupils.

<sup>12</sup> Intermediate schools provide education for year 7 and 8 pupils.



Figure 1.12: Teen parent unit, Stratford High School (Photograph: Lesley Pitt)

This unit services the needs of Taranaki. Pupils and their children are transported to and from the unit each day. A state integrated high school, a school of special character, Taranaki Diocesan School for girls, is also located in Stratford. It is a decile 5 school and had a roll of 127 at the most recent Education Review Office report (2015b). St Mary's Diocesan School has a boarding establishment as part of the school and over half of their pupils board at the school (Taranaki Diocesan School for Girls, n.d.).

Most of the social services which provide services to Stratford District are based in New Plymouth or Hawera. However, Tūtaki Inc is a social service based in Stratford established to meet local needs. This service works with youth, families/whānau, and addresses family violence; it also runs holiday programmes and has a community gym which functions as a social enterprise. The idea for the service came from the Stratford District Youth Council in 2003 when the need was identified for youth services and recreation for young people (Tūtaki Youth Incorporated Trust, 2018). This need continues as there are no other youth services in the district. There is also a Community House

located in the centre of the town that provides accommodation for visiting services and houses the Foodbank.<sup>13</sup>

In the past, Stratford had a hospital where minor surgery was performed and medical care provided. The hospital closed in 1998 at a time when a significant number of rural hospitals and post offices were closed throughout Aotearoa New Zealand due to services being centralised in main centres (Bryder, 2019). For the residents of Stratford, their main hospital services are now delivered in New Plymouth. In 2000 a Health Centre opened on the site of Stratford Hospital. Outpatient clinics are held at the health centre alongside ante natal classes and clinics run by the Hearing Association and a podiatrist. There was a maternity service run as part of 'Elizabeth R' Life Care & Village, a private hospital and rest home. However, this service closed in 2014 and women now go to Taranaki Base Hospital located in New Plymouth to give birth (Stratford District Council, n.d.).

## 1.9 Toko

Toko is ten kilometres east of Stratford. It has a school that caters for Years 1–8 students, which is the heart of its community. The school has 144 pupils and a decile rating of 7. This is a dairying area, and the decile rating reflects the high numbers of pupils from affluent farming families. The ethnic composition of the school is 86 percent New Zealand European/Pākehā and 14 percent Māori (Education Review Office, 2018b).<sup>14</sup> Toko School has absorbed three surrounding schools which closed due to low roles: Huinga in 1992, Douglas in 2006, and Matau in 2007 (Toko School, n.d.). Toko also has a playcentre which is attended two mornings a week by up to 33 children ranging from birth to school age (Education Review Office, 2017b).<sup>15</sup>

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<sup>13</sup> Foodbanks provide food 'parcels' for those who request them and are identified as experiencing food insecurity.

<sup>15</sup> Early childhood centre which encourages involvement and participation of parents.



Figure 1.13: Toko School, Toko (Photograph: Lesley Pitt)

In the latter part of the 20<sup>th</sup> Century, there were closures of significant industries in the area. These closures included the dairy factory (1983), sawmill (1987) and railway station (1995). The railway station buildings are now used by an engineering business. There is also a hall, church, hotel, trucking depot, and an automotive workshop in use in the village. The population of the village and surrounding area is 1,350. There are 510 occupied dwellings and 42 unoccupied dwellings in Toko (StatNZ, n.d.). The number of unoccupied buildings is an indicator of the closure of businesses and a declining population in the village.

### 1.10 Whangamomona

The eastern area of Stratford district has experienced rural depopulation (Lambert, 2006). In 1940, Whangamomona had a railway station, post office, three churches, a school, police station, public hall and council chambers. Today it has a Bed and Breakfast and Café, garage and a hotel which provides a bar, food, and accommodation. Approximately 25 full-time residents live in Whangamomona, although there are estimated to be 126 people living in the wider district

(Stratford District Council, 2014). The hotel forms the ‘hub’ of the community and is where the bi-annual Republic Day is centred (Pukeariki, 2005). The only school in the area is the Year 1–8 Marco School, which had a decile rating of 9. The high decile rating reflects that the children currently in attendance are from farming families and are likely to have higher than average family incomes. The school is an important part of the community and a play group is also run using the school’s facilities (Education Review Office, 2015a). There was a nearby school at Tahora, but this closed in 2007 due to low pupil numbers and those students transferred to Marco School.



Figure 1.14: Whangamomona Village (Photograph: Lesley Pitt)

The landscape surrounding Whangamomona has been described as “rugged country, broken, steep hills, narrow valleys plunging to streams flowing through deep gorges, all covered in bush and mud. Wild country that refuses to be tamed” (Hoskin, 2005, n.p.). Although it is a fifty minute drive from Whangamomona to Stratford, people living in this area identify as being part of the Stratford community, shop there, and participate in sport and recreation activities in Stratford (Education Review Office, 2015a).

## 1.11 Midhirst

Midhirst is to the north of the study area, on State Highway 3. Midhirst had a population of 234 as of 2013. The village was established to support the dairy industry (Lambert, 2016a). The dairy factory began as a co-operative by local farmers in 1895. That factory was replaced in 1973 with a multi-storied milk powder factory. However, this was closed in 1983 due to an amalgamation of smaller factories. Milk from the area is now transported by a milk tanker to a factory in Hawera, to the south (Lambert, 2015). Below is a photograph of the dairy factory as it is now, currently unused. Midhirst has a primary school that was established in 1879 with 14 pupils and now has a roll of 109 pupils. The school is considered the hub of the community (Education Review Office, 2018a), although there is also a hotel and community hall in the village.



Figure 1.15: Midhirst Dairy Factory (Photograph: Lesley Pitt)

The study area is sparsely populated, making up under one percent of the population of Aotearoa New Zealand (Stratford District Council, 2014). Population is particularly sparse in the east of the district, where the only settlement is Whangamomona. Māori have moved through the area over centuries, only settling the area permanently in the last 85 years. As noted above the area was

important to Māori as a trade route and source of food. It continues to be important for the provision of food through the dairy industry and sheep and beef farming. The farming industry is serviced by Stratford township, the only significantly populated location in the study area. While unemployment in the area is lower than the national rate, the opportunities for young people for further education are limited. Parts of the study area are affluent due to the dairy industry. However, Stratford itself has several low decile schools and the New Zealand Deprivation Index indicates the district to the east of the study area has significant pockets of deprivation (Atkinson et al, 2014). Participants in this study lived in different parts of the district, with some participants growing up in Stratford township and others in the communities to the east of Stratford. The economic hub of the district is Stratford township, while Midhirst, Toko and Whangamomona provide limited services to the communities around them.

### 1.12 Thesis Structure and Chapter Description

In the following chapters the literature in relation to the study, the theoretical foundations of the research and the methodology will be outlined. The subsequent three chapters will consider the themes identified in the data; daily life for the rural poor, the intersection of poverty and rurality, and violence and oppression. Social work practice with the rural poor will be discussed and a framework for poverty-informed practice in Aotearoa New Zealand presented before the implications from this study for social work education are considered.

The next chapter, Chapter Two, provides a review of the literature and commentary about poverty in Aotearoa New Zealand, including child poverty. Its particular focus is on the state of rural poverty. Aspects of poverty are examined which are relevant to the study, such as the social determinants of health, the experience of stigma, the impact of the environment, housing status,

and crime. Poverty-relevant social work literature is examined and the chapter concludes with a discussion about rural social work.

In Chapter Three, critical theory and feminism are discussed. Principles related to these traditions form the theoretical foundation for this research. Theoretical constructs elaborated include oppression, the notion that the personal is political, patriarchal social structures, and intersectionality. Components of structural violence are outlined as well as theorising about stigma and internalised oppression. In the second half of Chapter Three, the principles of feminist research are described as they inform the way the study was conducted. A discussion of how the interviews were carried out follows, and key aspects of the relationships between myself as a researcher, and the participants, are discussed.

The research design is explained in Chapter Four. Recruitment of participants and the use of intermediaries in the recruitment process, and as a source of data, is discussed. Ethical considerations for conducting this research are explored. Data for this research was gathered through semi-structured interviews and the taking of detailed fieldwork notes. The data was analysed using applied thematic analysis. This chapter ends with a discussion about the trustworthiness of the study as well as noting the limitations of the research design.

Chapter Five, the first of three findings chapters, reports on aspects of daily life for the participants in the research, including how people made ends meet, their daily struggles, and food insecurity. Chapter Five considers the impact of poverty on relationships with family/whānau, friends, companion animals and professionals. In the last section of this chapter, the research participants give advice to professionals about how to work with them based on their experience of poverty.

Chapter Six explores what it means to be poor and live in a rural environment. It describes findings related to the participants' isolation, transportation difficulties and lack of access to services. Other aspects of poverty relevant to the participants' location are traversed, including matters relating to housing, health, coping with disability, education and employment.

Chapter Seven starts by considering the intimate partner violence experienced by participants and the role patriarchal social structures had in the violence. Factors related to internalised oppression and experiences of stigma are discussed. Oppression was internalised by participants and they were exposed to stigma in their community. The research participants' experience of structural violence is outlined, particularly in relation to Work and Income New Zealand (WINZ). Chapter Seven also examines the nature of intersectionality as it relates to the research participants.

The final chapter in the thesis, Chapter Eight, begins with a discussion about social work practice with the rural poor, drawing on the findings of the study. Ways for practicing social work using critical theory and feminism are considered. The chapter proposes a framework for social work practice with the poor in Aotearoa New Zealand based on the findings from the research. This Poverty-Informed Social Work framework offers social workers in Aotearoa New Zealand a different way of thinking about and working with the poor. The chapter concludes with a discussion regarding potential directions for social work education and recommendation for further research in this field.

## Chapter Two: Literature Review: Poverty, Rurality, and Social Work

### **Poverty by Sa'o Otahuhu**

Poverty is just a word . . .  
but a word that means a lot  
not when said  
but when seen.  
Poverty is a cycle  
but an on-going cycle  
not being altered  
but left aside.  
Poverty is on our conscious  
but at the back of our minds  
not acted on . . .  
but why not?

(from: Egan-Bitran, 2010, p. 25, *'This is how I see it': Children, young people and young adults experiences of poverty*).

### 2.1 Introduction

Poverty is a significant problem confronting Aotearoa New Zealand today. In 2018, it was estimated that approximately 682,500 people in Aotearoa New Zealand lived below the poverty line (Ministry of Social Development, 2018). The government-established Welfare Expert Advisory Group (2019, p.7) stated that “many New Zealanders lead desperate lives with seriously inadequate incomes”.

Poverty is also a major problem globally, variously described as the most significant problem

confronting the modern world, the greatest scandal, and the "world's most intractable problem" (Cox & Pawar, 2013, p. 221).

The impact of poverty is not evenly experienced (Rashbrooke, 2013; O'Brien, 2013b). Throughout the world, poverty affects certain groups disproportionately. For example, children, women, people who are disabled and indigenous populations are identified as being more vulnerable to experiencing poverty (Bullock, 2013; Cox & Pawar, 2013). These disproportionate impacts are reflected in the demographics of the poor in Aotearoa New Zealand, where women, children, people with disabilities, and Māori and Pasifika are especially affected (New Zealand Council of Christian Social Services, 2005; O'Brien, 2014; O'Brien & St John, 2014; Rashbrooke, 2013).

Poverty shapes all aspects of a person's life by affecting health, education, housing, parenting and intimate relationships (All Together in Dignity (ATD) Fourth World, 2019; Garden et al, 2014; New Zealand Council of Christian Social Services, 2005; Presbyterian Support Otago, 2008; Rashbrooke, 2013; Simpson, Duncanson, Oben, Wicken & Pierson, 2015). In rural areas, the impact of poverty can be exacerbated by a lack of services or difficulties with accessing them, geographical isolation, difficulties with transport, and stigmatisation as a result of being visibly identified as poor by other community members (Alston, 2000; Beddoe & Keddell, 2016; Bishop's Action Foundation, 2010; Fletcher, Garasky, Jensen & Nielsen, 2010; Howard et al, 2016; Sherman, 2006).

In this chapter, the dimensions of poverty in Aotearoa New Zealand are outlined, followed by a discussion about child poverty and child poverty and health. An account of rural poverty considers the link between being poor and the place in which poverty is experienced, rural Aotearoa New Zealand. It is particularly important to discuss health and the impact of poverty—and vice-versa. For example, the impact of poor housing on health and poverty is discussed in some detail. This

discussion is followed by drawing a link between crime and poverty as well as an account of how the poor are stigmatised in society. Features of structural violence, oppression and internalised stigma are canvassed. Finally, the last section of this chapter considers the role of social work in addressing poverty with specific reference to the rural context.

This literature review was carried out with an initial focus on Aotearoa New Zealand. The search was extended to include international literature relevant to this study. Key words used to search electronic databases and the University of Canterbury library included poverty, poor, deprivation, inequality, social exclusion, child poverty, food insecurity, rural, rural poverty, and rural social work. Electronic databases used included Australia/New Zealand Reference Centre, EBSCOhost, Informit, ProQuest, Sage Journals online, SpringerLink and Taylor & Francis Online. Homelessness was a common theme in the literature and therefore this term was added to the search. The social determinants of health became an emerging theme identified in the review of literature, as were the notions of stigma and structural violence. These terms were also added to the search. As I read the literature, I used references cited to pursue further sources, and identified key authors discussing poverty, particularly in Aotearoa New Zealand. I also searched the websites of social service agencies that publish research reports, including the Salvation Army, the Auckland City Mission, the Christian Council of Social Services, the Child Poverty Action Group and Presbyterian Support Otago. Government department websites were also searched, including the Children's Commission and the Ministry of Social Development and, at a regional level, the Taranaki District Health Board.

## 2.2 Poverty in Aotearoa New Zealand

Several themes were identified in the literature about the experience of New Zealanders living in poverty. These themes included: the connection between debt and poverty (Johnson, 2019); the feminization of poverty (Kingfisher, 2002); the high numbers of children experiencing poverty (Child Poverty Action Group, 2020) and of beneficiaries living in poverty; and the disproportionate numbers of Māori and Pasifika living in poverty (Boston, 2013; Bullock, 2013; English, n.d.; Families Commission, 2012; Garden et al, 2014; Marriott & Sim, 2014; New Zealand Council of Christian Social Services, 2005; O'Brien, 2014; O'Brien & St John, 2014; Rashbrooke, 2013; Williams, Labonte & O'Brien, 2003).

While the majority of poor people in Aotearoa are Pākehā, the numbers of Māori and Pasifika living in poverty are disproportionate to the total number of Māori and Pasifika in the population (Boston, 2013; Boston & Chapple, 2014; Dale, 2017; Duncanson, Richardson, Oben, Wicken & Adams, 2019; New Zealand Council of Christian Social Services, 2005; O'Brien, 2014; Rashbrooke, 2013). This disproportionate distribution is commented on throughout the Aotearoa New Zealand literature (Child Poverty Action Group, 2020; Johnson, 2019; O'Brien, 2014; Plum, Pacheco & Hick, 2019). For example, the Expert Advisory Group on Solutions to Child Poverty (2012) stated that the rates of poverty for Māori and Pasifika children are “around double” (p. 7) those of Pākehā children. Moreover, Māori and Pasifika children are at higher risk of severe and persistent poverty, which is a finding echoed in the Child Poverty Monitor's report, 2020. A UNICEF New Zealand report on children's rights under the United Nation's Convention on the Rights of the Child noted that it is of ongoing concern that Māori and Pasifika families continue to be the groups most affected by poverty (Ludbrook & Jamison, n.d.). For example, in a discussion about foodbank use, the report notes that “Māori are over-represented at each foodbank” (New Zealand Council of Christian Social Services,

2005, p. 2). This trend is also reflected within the Taranaki region. In a report prepared for the Taranaki District Health Board, local Māori are overrepresented in low income statistics, particularly in the group earning less than \$10,000 a year (Leung-Wai & Sanderson, 2009).

In terms of the link between poverty and sole parent families, the Aotearoa New Zealand literature reflects international findings, particularly in relation to female-led households, demonstrating the feminisation of poverty (Boston, 2013; Bullock, 2013; East & Roll, 2015; Kingfisher, 2002; Ludbrook & Jamison, n.d.; Marriott & Sim, 2014; O'Brien, 2014; Plum, Pacheco & Hick, 2019). Lone mothers face barriers in obtaining well paid employment such as a lack of adequate childcare and/or transport (Gray, 2016). Throughout the world women disproportionately bear the burden of poverty as the result of discrimination and abuse, a lack of, or limited, control over their lives, limited access to resources, and inequality within their households (Bullock, 2013; Kingfisher, 2002). There are variables between countries. For example, women in some European countries, such as Albania and Armenia, experience less food insecurity than men, while in some Northern European states, such as Germany and Norway, women have relatively low rates of food insecurity compared to other women globally (UN Women, 2018).

In Aotearoa New Zealand the relationship between households living on a benefit and experiencing poverty is high (Child Poverty Action Group, 2020; Welfare Expert Advisory Group, 2019; Wynd, 2014a). Benefit rates are identified in the literature as inadequate as they do not allow for basic needs to be met (Bradford, 2012; Boston & Chapple, 2014; Garden et al, 2014; Johnson, 2019; O'Brien, 2014; Welfare Expert Advisory Group, 2019). The use of benefit sanctions, which are applied when beneficiaries are identified as failing "to fulfil their work obligations" (Ministry of Social Development, 2019, para. 1), can add to hardship for beneficiaries when their income is reduced (Child Poverty Action Group, 2020; Garden et al, 2014; Johnson, 2016; Welfare Expert Advisory

Group, 2019; Wynd, 2013; 2014). O'Brien (2013b) stated that benefits should be "at a level that would allow recipients to participate in New Zealand society and to have a sense of inclusion" (p. 217). O'Brien therefore advocated for increases in benefit levels to reduce poverty, as did the Welfare Expert Advisory Group (2019). Those living in families/whānau reliant on income support are the most likely in Aotearoa New Zealand to live in substandard housing, have poor clothing, and face difficulties accessing health care due to cost (Child Poverty Action Group, 2020; Child Poverty Monitor, 2018).

The link between poverty and poor housing is clear in the literature (Duncanson et al, 2019; Garden et al, 2014; Rua et al, 2019; Welfare Expert Advisory Group, 2019). Pasifika and Māori are particularly impacted by living in inadequate housing. In 2020, the New Zealand government noted that 20 percent of Pacific children and 13 percent of Māori children live in houses which are damp and mouldy compared to 5 percent of European children and 4 percent of Asian children (New Zealand Government, 2020b). Poor housing is characterized by overcrowding and damp and poorly insulated conditions, which contribute to the poor health outcomes discussed later in this chapter (Duncanson et al, 2019; Johnson, 2014; Welfare Expert Advisory Group, 2019). Living in substandard housing with overcrowding was discussed in the Auckland City Mission's qualitative study on poverty, Family 100 Research Project (2014). Garden et al (2014) commented on the long term impact of living in overcrowded and substandard houses, stating that it had "direct, detrimental and, at times, severe implications for a person's physical and mental wellbeing" (p. 15). Johnson notes that this study was conducted in Auckland where there is a significant housing shortage (Johnson, 2019; Welfare Expert Advisory Group, 2019). High housing costs also contribute to poverty and to the accumulation of debt (Welfare Expert Advisory Group, 2019).

The connection between servicing debt and experiencing poverty was also an important theme in the literature (Children’s Commissioner, 2013; Chile, 2002; Dale, 2014; English, n.d.; Families Commission, 2012; Johnson, 2019; New Zealand Council of Christian Social Services, 2005; Presbyterian Support Otago, 2008; Rua et al, 2019; Williams et al, 2003). Living in poverty increases vulnerability to debt (Child Poverty Action Group, 2018; Williams et al, 2003). Increasing debt to pay for living costs has been identified as a concerning trend among beneficiaries who keep increasing their debt as they borrow money to ‘make ends meet’ (Bradford, 2012; Johnson, 2019; O’Brien, 2013b; Presbyterian Support Otago, 2008; Welfare Expert Advisory Group, 2019). The source of the financial support exacerbates the debt as the poor often use fringe lenders and inadequately regulated pawnshops (Johnson, 2019; Rua et al, 2019; Williams et al, 2003). Lack of regulation of the financial marketplace perpetuates poverty as people pay higher rates of interest and often spiral further into debt (Dale, 2014; Presbyterian Support Otago, 2008). In 2019, the Salvation Army added debt and the use of fringe lending to its ‘State of the Nation’ report due to concerns about debt from fringe lenders leading “to ruinous debt” (Johnson, 2019, p. 51). The recently introduced Credit Contracts Legislation Amendment Act (2019) was developed in response to concern about the behaviour of fringe lenders charging unreasonable interest rates and penalties, impacting people living in poor areas. This Act places a limit on the amount of interest which can be charged for a loan (New Zealand Parliament, 2019).

Food insecurity is directly linked to poverty and contributes to poor mental and physical health (Carter, Lanumata, Kruse & Gorton, 2010; Garthwaite, 2016). Food insecurity is defined as not having enough food or being unable to afford nutritionally sound and safe food (Carter et al, 2010; Graham, Hodgetts, Stolte, & Chamberlain, 2018; New Zealand Government, 2020b; Rua et al, 2019; Rush, 2019), and is linked to social inequality and injustice (Jackson & Graham, 2017). The poor can

use food parcels from foodbanks as a way of ‘making ends meet’; however, the process of accessing this support can be demeaning (Garthwaite, 2016; Graham et al, 2018).

Food insecurity impacts poor children with inadequate nutrition being identified as an aspect of childhood poverty in Aotearoa New Zealand (Boston & Chapple, 2014; Child Poverty Monitor, 2013; Garden et al, 2014; Graham et al, 2018). As a result of inadequate nutrition, vitamin deficiencies have been noted in children from Aotearoa New Zealand along with a rise in obesity (Rush, 2019). The poor are more likely to be obese, or what Chaufan et al (2015, p. 34) call “plump poverty”. The link between poverty and obesity is attributable to the intake of energy-dense food which has poor nutritional value but is more affordable than healthy food such as fresh fruit and vegetables (Chaufan et al, 2015; Graham et al, 2018). Obesity in childhood is also linked to adult diabetes and cardiovascular disease (Turner & Asher, 2014).

In Aotearoa New Zealand it has been found that parents who are poor have good awareness of nutrition and are able to cook well with limited resources (Graham et al, 2018; Jackson & Graham, 2017). For many parents, food for themselves is considered discretionary but parents will endeavour to ensure their children get to eat (Graham, 2019; Graham et al, 2018; Jackson & Graham, 2017; Ministry for Women, 2018; New Zealand Government, 2020b; Wells, 2011).

### 2.2.1 Child Poverty

Significant numbers of services, groups and individuals throughout Aotearoa New Zealand have pointed to the large numbers and high rates of Māori and Pasifika children experiencing poverty (Child Poverty Action Group, 2020; Marriott & Sim, 2014; O’Brien, 2014; Simpson et al, 2015). The Child Poverty Action Group and the Commissioner for Children have been involved in advocacy and research about child poverty in Aotearoa New Zealand since the 1990s. Despite this work, there has

not been any substantive change in child poverty in the past ten years and the underlying causes of poverty have not been addressed (Child Poverty Action Group, 2020; Johnson, 2019; Statistics NZ, 2019). Using a measure of 50 percent of the median income after housing costs were deducted, data shows that 23 percent of children in Aotearoa New Zealand live in poverty (Duncanson et al, 2019). A material deprivation approach has identified that 13 percent of children live with material deprivation (Johnson, 2019).

Affected children and young people living in poverty in Aotearoa New Zealand have been asked what being poor means for them (Egan-Bitran, 2010; Office of the Children's Commissioner & Oranga Tamariki, 2019). In a study carried out in 2010, the themes children and young people identified were a lack of money, food and essential items; social exclusion; lack of health care and/or poor health; living in poor and/or damp houses and moving a lot; being rejected, bullied and excluded by their peers; and not being able to participate fully at school and having to look after siblings while parents work and sometimes missing out on school because of this (Egan-Bitran, 2010). Alongside these issues, the children and young people also identified abuse, neglect, and family violence, being raised in gangs, and experiencing stigma due to living in poverty (Egan-Bitran, 2010). These findings were similar to those found in a recent study about children and young people's views on well-being (Office for the Children's Commissioner and Oranga Tamariki, 2019). Within this most recent study, young people talked about their experience of poverty and homelessness, not participating in activities such as sport or music due to poverty, of feeling shame about being poor, and not having enough money for food and personal hygiene products, bills and petrol (Office for the Children's Commissioner and Oranga Tamariki, 2019). The 2010 study included place as an area of inquiry and found that the young people living in rural areas talked about a lack of services and lack of public transport (Office for the Children's Commissioner and Oranga Tamariki, 2019).

In response to concern about rising rates of poverty for children in Aotearoa New Zealand, several initiatives designed to meet the needs of children living in poor households have been initiated. Kids Can is one such initiative. Established in 2005, Kids Can seeks to ensure children have what they need to participate in school or early childhood education. Kids Can provides food, raincoats, shoes and health care products to children in schools where many children come from low income areas (Kids Can, n.d.). Kids Can is a charity and uses child sponsorship to raise funds. Another initiative is the Kick Start breakfast programme which is supported by Fonterra (a dairy production company) and Sanitarium (a breakfast cereal company). Fonterra and Sanitarium provide the products for the Breakfast clubs and the schools provide volunteer workers (KickStart Breakfast, 2019). While short term and partial hunger needs of children are met by such programmes, they do not adequately address food insecurity among children overall, and some of these programmes provide an opportunity for marketing within schools by profit-making businesses (Wynd & O'Brien, 2014). As a response to Covid-19 in 2020 a free and healthy school lunch programme in schools was established targeting low decile schools. This programme was funded by the Covid-19 Response and Recovery Fund (New Zealand Government, 2020).

### 2.2.2 The Impact of Childhood Poverty on Health

Food insecurity and poverty have a detrimental effect on the health of children. Poverty is a leading factor in the ill health and deaths of children in Aotearoa New Zealand (Child Poverty Action Group, 2020; Turner & Asher, 2014). This includes high rates of deaths from injuries and a disproportionate number of poor children dying from sudden unexpected death in infancy (Simpson et al, 2015). A child living in poverty is 1.4 times more likely to die than a child growing up with more financial resources (Turner & Asher, 2014). Poor children are also more likely to be admitted to hospital with serious skin infections and gastroenteritis, which are diseases related to poverty (Child Poverty

Action Group, 2020). Poor children are also the least likely to be immunised (Turner & Asher, 2014). Other illnesses that impact poor children disproportionately are bronchiolitis, which is a viral chest infection of babies, and bronchiectasis, a chronic lung disease which results in permanent lung damage (Dale, 2017; Simpson et al, 2015). A child from a poor family is eleven times more likely to develop bronchiectasis than a child raised in a financially secure situation (Turner & Asher, 2014). Children living in poverty are also more likely to be living in overcrowded conditions, sharing bedding and towels and having limited access to washing facilities, and are more likely to have poor nutrition as a consequence of poverty (Ministry of Health, 2019; Turner & Asher, 2014).

Not only does childhood poverty affect childhood health, there are long term health impacts that appear throughout the lifespan regardless of socioeconomic status as an adult (Blane, 2006; Poulton & Caspi, 2005; Watt, 2007). For example, material deprivation in childhood increases the likelihood of type 2 diabetes mellitus as an adult, a chronic disease which affects the uptake or production of insulin which regulates blood sugar (Raphael, Daiski, Pilkington, Bryant, Dinca-Panaitescu, & Dinca-Panaitescu, 2012). Other poverty-related illnesses that germinate in adulthood after being seeded in childhood include cardiovascular disease, dental decay, obesity, and mental illness (Turner & Asher, 2014). There is, therefore, a negative cumulative impact of poverty on health: the longer the period of time a child is poor, the greater the impact on their health. A life course, longitudinal study carried out in Aotearoa New Zealand with babies born in 1972-3 with 1,000 participants, found more disease in adults who experienced poverty during their childhood compared to those who had not experienced childhood poverty (Poulton & Caspi, 2005; Watt, 2007). Some of the purported reasons for the correlation between childhood poverty and poor adult health were the lack of health care in childhood, lack of health promoting parenting practices, and the

impact of stress on biological development (Poulton & Caspi, 2005). The health impacts of poverty are exacerbated for the rural poor as they have less health services available to them.

### 2.3 Rural Poverty

As stated in Chapter One, place, or the location where people live, is significant in relation to how poverty is experienced. For example, in the United States, rural communities have higher rates of poverty than urban areas and certain regions are particularly poor, such as Appalachia, some southern states, such as Louisiana, New Mexico and Arkansas and North and South Dakota and Missouri (Blakely & Locke, 2005). In Aotearoa New Zealand, a Salvation Army report which considered the advantages and disadvantages due to geography found that rural poverty in Aotearoa New Zealand was more significant in Northland, the Gisborne area, and in the Hawkes Bay (Johnson, 2015).

In a Samoan qualitative study about rural poverty, aspects of poverty affecting participants included a lack of household assets, a lack of access to community facilities, and difficulties meeting social and cultural obligations (Tuilapea, 2006). In Samoa, hunger was not an issue as all respondents had access to food staples, such as fish and coconuts. This finding is different to research in Aotearoa New Zealand where food insecurity is a factor (Garden et al, 2014; Graham et al, 2018). Food insecurity was also not an issue for participants in a Russian study as access to land due to land redistribution at the end of the Soviet Republic meant the rural poor were able to grow food. However, as a consequence of people's access to land, in Russia incomes "have become increasingly demonetarized" (Wegren, O'Brien & Patsiorkovski, 2003, p. 274) and people are paid for their labour in produce. The Russian study found that ineffective use of the land allocated contributed to the high rates of poverty (Wegren, O'Brien & Patsiorkovski, 2003). Both the Russian and Samoan studies highlight how context influences the experience of poverty; in both studies participants' access to

land reduced the impact of poverty on their lives, however, this is not the case in Aotearoa New Zealand (Atkinson et al, 2015; Johnson, 2015).

The impact of family and other support systems such as childcare and social services are discussed in literature about rural poverty. In relation to the rural poor in the Appalachian region of Kentucky, the belief that close family ties provided a buffer against poverty was noted (Rowles & Johansson, 1993). However, in the Samoan study mentioned above, it was found that social commitments and obligations, such as those required for funerals or ceremonies, can exacerbate poverty (Tuilapea, 2006). Similarly, as found in this thesis, while family systems could provide support in managing poverty, they could also be a source of stress and financial pressure.

Cultural factors are also important to consider in relation to rural poverty. Culture in this instance is being used in the sense of everyday life and the values, beliefs and behaviours shared by people who consider themselves a member of a wider social group (Connolly, Crichton-Hill & Ward, 2005; Hugman, 2012). Differences between the way rural poor and urban poor behave can be attributed to some degree to cultural variations. In rural communities in Aotearoa New Zealand, there can be pressure to conform to acceptable standards of behaviour, such as having a strong work ethic, or to participate in acceptable activities, such as sport or voluntary work (Smith, 2017). Likewise, in an ethnographic study carried out in the Golden Valley, California, it was noted that “public assistance use is less common among the rural poor than the urban poor and often carries with it a powerful stigma” (Sherman, 2006, p. 893). In the Golden Valley, community survival strategies for the rural poor were based on actions considered acceptable within the community, such as being self-sufficient through gardening, hunting, fishing and bartering, rather than seeking financial assistance through welfare.

Multiple issues associated with employment in rural communities have been identified in the literature, such as lack of jobs, a lack of variety in the available work, and the employment available being difficult to access (Faber & Miller-Cribbs, 2014; Howard et al, 2016; Pugh & Cheers. 2010; Wendt & Zannettino, 2015). These issues were reflected in a study carried out in rural Taranaki which identified limited opportunities for employment and barriers to obtaining paid work, such as a lack of transport, lack of qualifications, and not having access to a computer or the internet (Ngaruahine Health Service, 2016). Globally, there has been a reduction in traditional forms of employment in rural areas and alternatives, such as working in the service industry, are often low paid (Pugh & Cheers, 2010; Smith, 2017a; Van Katwyk & Oleary, 2017). In the United States, economic restructuring and the increased use of technology in farming (Ginsberg, 2014; Smith, 2017a) have resulted in higher rates of underemployment and unemployment in rural areas (Smith, 2017a). Within the study area, improvements in agricultural technology has resulted in reduced employment opportunities and this is not likely to change in the future (Grimmond, Bell & Yap, 2014). As is the case for the study area in this thesis, the lack of transport to find and maintain work often contributes to rural poverty (Faber & Miller-Cribbs, 2014; Ngaruahine Health Service, 2016).

The availability of reliable transport and the cost of transportation was also identified as an issue for the rural poor in the literature reviewed (Fletcher et al, 2010; Milbourne, 2004; Pawar & McClinton, 1999; Rowles & Johansson, 1993). Access to, and the cost of transport contributed to the isolation of the rural poor and reduced their earning capacity (Van Katwyk & Oleary, 2017), particularly when goods cannot be transported to market. In the aforementioned qualitative Samoan study, a lack of transport and poor roading resulted in isolation and difficulties selling produce (Tuilaepa, 2006). This is similar to Western countries where a lack of access to reliable transportation or access to transportation from friends, family or public transport (Alston, 2000; Blakely & Locke,

2005; Carmichael & Kennard, 1999; Howard et al, 2016; Smith, 2017) had a far more significant impact on rural dwellers than on their urban counterparts. Not being able to drive, difficulty getting a driver's license, and no finances to buy a vehicle, are all issues in relation to transport for the rural poor (Fletcher et al, 2010; Milbourne, 2004; Pugh & Cheers, 2010). These factors limit employment and education options that directly influence personal agency, wellbeing and potentially the lifecourse trajectory of rural people living with few resources (Fletcher et al, 2010). In this regard examination of the social determinants of health is particularly relevant.

## 2.4 Social Determinants of Health

Poverty impacts health status (Deller, Canto & Brown, 2015; Simpson et al, 2015), therefore the social determinants of health are explored in the following section. The social determinants of health are "the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life" (World Health Organisation, 2015, para. 1). Poverty influences where people live, what they eat, where they work and how often they access health care. The forces and systems referred to in the World Health Organisation quote include social policy and political systems, social norms and the current economic status of a country or region. Several interrelated factors make up the social determinants of health including the environment, social, political, cultural and economic factors. It has been argued that social factors are more significant than genetic predisposition or personal choice in determining health status (Craig, Bejan & Muskat, 2013).

In the neo-liberal capitalist political climate which currently prevails in Aotearoa New Zealand (Humpage, 2017), health is seen as the responsibility of the individual—that is, to eat well, exercise and pay for health care when required. Consequentially, public health policy in western countries has focused on individual responsibility for lifestyle choices (Cohen & Marshall, 2017). While there is

some responsibility on individuals to take charge of their own health and health needs, structural factors impact the individual profoundly (Bowen & Walton, 2015; Heinonen, Metteri & Leach, 2009; Sagger & Gray, 2007). There are differences in life expectancy between the affluent and poor, and between and within countries (Bywaters, 2014). Factors identified as contributing to health problems also pertinent to the lives of participants in this study were inadequate housing or homelessness, a lack of nutrition and food insecurity, fuel poverty, bed sharing for children, lack of access to healthcare, low income, unemployment and poor work conditions (Bambra, Gibson, Sowden, Wright, Whitehead & Petticrew, 2010; Beddoe & Maidment, 2014; Heinonen et al, 2009; Howden-Chapman, 2017; Shaw et al, 2006). The above factors are interconnected, as poor health can lead to unemployment and poor health can also be caused by unemployment (Heinonen et al, 2009). The individual is not able to change structural factors, but they are held individually responsible for their health status in relation to current public health policies (Humpage, 2017).

Poverty increases the likelihood of becoming sick and of not accessing health care (Crichton-Hill, McCall & Togliaso, 2014; Heinonen et al, 2009; Hill, 2008; Turner & Asher, 2014). In Aotearoa New Zealand, the Family 100 Project found a strong connection between being poor and having poor health (Garden et al, 2014). The link between poor mental health, addiction and poverty is also noted in He Ara Oranga: Report of the Government Inquiry into mental health and addiction (Paterson, Durie, Disley, Rangihuna, Tiatia-Seath & Tualamali'i, 2018). The Family 100 Project research conducted in Aotearoa New Zealand also reflects findings in national and international literature identifying health issues related to poverty such as inadequate housing, fuel poverty and food insecurity (Backwith, 2015; Blane, 2006; Bowen & Walton, 2015; Chaufan, Yeh, Ross & Fox, 2015; Coburn, 2004; Craig et al, 2013; Howden-Chapman, Viggers, Chapman, O'Sullivan, Barnard & Lloyd, 2012; Garthwaite, 2016; Heinonen et al, 2009; Saggars & Gray, 2007; Sewpaul, 2008; Turner &

Asher, 2014; Walter & Sagggers, 2007; Watt, 2007). However, the Family 100 Project study was a qualitative project carried out in Auckland, so the experience of poverty in Auckland may not be directly applicable to those living in rural Aotearoa New Zealand.

The relationship between health, class and poverty is described in the literature as a social gradient of health (Bambra et al, 2010; Braveman, & Gottlieb, 2014; Craig et al, 2013; Shaw et al, 2014). This gradient is a sliding scale where health status correlates to economic status: “those at a lower level of the socioeconomic spectrum—measured by income, education or occupation—experience worse health than those at socioeconomic levels higher than them” (Sagggers & Gray, 2007, p. 13). There is a link between health and wealth or poverty; the poor experience more ill health than any other socioeconomic group (Bravemen & Gottlieb, 2014; Craig et al, 2013; Shaw et al, 2014; Walter & Sagggers, 2007; Watt, 2007). The higher on the social hierarchy an individual is, the less likely they are to die at any given point. Inversely, the less affluent a person is, the worse the morbidity and mortality outcomes (Williams, 2007). The social gradient of health is measured by rates of illness and death (Backwith, 2015). Inequality in relation to health is complex and caused by the interplay of factors in people’s lives (Beddoe & Maidment, 2014; Braveman & Gottlieb, 2014; Marmot, 2006). For example, living in a mouldy house, having a poor diet, and not having enough money for heating may result in respiratory illness (Howden-Chapman, 2017). For rural dwellers, these intersecting factors are compounded by the inadequate standard of health services provided in rural areas, shortages of services, and transport difficulties (Alston, 2000; Howard et al, 2016; Tester et al, 2015).

As previously discussed, Māori and Pasifika are disproportionately represented among the poor in Aotearoa New Zealand, and consequently disproportionately experience poor health. Health disparities between Māori and non-Māori increased at the end of last century, as measured by life

expectancy, deaths from cancer, and cardiovascular disease rates (Robson, 2008). These differences between the health status of Māori and Pasifika and the rest of the population are linked through a complex mix of economic status, employment, and the ongoing impact of colonisation and racism (Robson, 2008). Pasifika collectively are most disadvantaged in terms of health: their health is poorer than the rest of the New Zealand population with higher rates of diabetes, heart disease and stroke, and a comparatively high rate of infant mortality (Crichton-Hill et al, 2014). The health disparities between Māori and Pasifika and the rest of the population in Aotearoa New Zealand requires urgent attention alongside improvements in the social gradient of health, an outcome that was also evident in this study. Accessible and affordable housing is crucial for good health, particularly for children or adults with compromised health or pre-existing health conditions such as asthma.

## 2.5 Housing and Health

The state of a person's housing, or their lack of housing, influences their physical and mental health (Beard, Tomaska, Earnest, Summerhayes & Morgan, 2009; Beddoe & Maidment, 2014; Gibson, Abraham, Asher, Black, Turner, Waitoki & McMillan, 2017; Howden-Chapman, 2015; Ministry for Women, 2018). As noted earlier, a range of housing issues affect health. For example, damp housing has a significant impact on respiratory function. Families sharing homes is one way people try to 'make ends meet', and this often results in overcrowding. This is also detrimental to people's health as it increases the likelihood of skin conditions, eczema, asthma and the spread of infectious diseases (Dale, 2017; Duncanson, Oben, Wicken, Richardson, Adams, & Pierson, 2018; Garden et al, 2014; Shaw et al, 2006). Heating a cold, poorly insulated house potentially comes at the expense of money spent on food, health care and prescriptions (Ngaruahine Iwi Health Service, 2016; Wells, 2011). As with overcrowding, being homeless increases the chance of a person becoming unwell.

The homeless are at high risk in relation to their physical and mental health (Raphael et al, 2012). Statistics New Zealand (2009) defines being homeless as being “without shelter, in temporary accommodation, sharing accommodation or living in uninhabitable housing” (p. 6). Homeless people are likely to die sooner than the housed and have multiple health problems: “the street homeless are 25 times more likely to die in any given period than the people who walk past them on the street” (Shaw et al, 2006, p. 216). The homeless have high rates of substance abuse and increased risk of HIV and hepatitis, high rates of skin problems, increased risk of suicide and being victims of violence (particularly for women and those living rough) (Shaw et al, 2006). In a 2015 study with the homeless in West Auckland, the majority of participants identified as having health issues including mental illness, arthritis, heart conditions, asthma, autism, head injuries, cancer, stress, diabetes, ear problems, sleeplessness and dental decay (Harris, 2015).

## 2.6 Environment, Health and Poverty

There is a strong relationship between the people’s living environment and their subsequent health status. People who live in disadvantaged areas have an increased risk of asthma-inducing exposure to pollution and allergens (Agola & Awange, 2014; Braveman & Gottlieb, 2014; Dominelli, 2012; Gray & Coates, 2015; Hetherington & Boddy, 2013). Poor people are also more likely to live in areas affected by floods, droughts, mudslides and tsunamis (Agola & Awange, 2014; Gray & Coates, 2015; Hetherington & Boddy, 2013; Ng, Wilson & Veitch, 2015). Australian studies of rural communities noted the long-term impact on physical and mental health of extreme weather events (Boetto & McKinnon, 2013; Ng et al, 2015). Stratford district, in June 2015, was also affected by flooding that impacted on low lying houses and the hill country to the east of the area which suffered significant mudslides (Federated Farmers, 2015). This particular event affected roads and the capacity for travel, as well as damaging culverts, fences and stock feed (Rural Support Trust Taranaki, 2015).

While the flooding that occurred in the Stratford district was localised, it was part of the impact of global warming. Climate change was identified by the World Health Organisations Commission on the Social Determinants of Health (2008) as a macro level social determinant of health. The Commission noted that climate change-linked adverse events, such as flooding, affected poor people disproportionately. For example, the impact of Hurricane Katrina was harsher on the poor who lacked the resources to enable them to leave the area (Baum & Fisher, 2010). Furthermore, those who are poor have less opportunities to adapt to climate change (Boetto & McKinnon, 2013; Beard et al, 2009), have fewer options in a crisis situation, and may not have reliable transport to leave an affected location (Alston, 2015). As there is a link between the climate system and health inequalities (Commission on the Social Determinants of Health, 2008) tackling climate change may improve the social determinants of health. The poor have less resources to deal with the effects of climate change and they are also more likely to be impacted by crime.

## 2.7 Poverty and Crime

In addition to their being a link between poverty and crime (Bevan, 2015; Workman & McIntosh, 2013), the criminal justice system in Aotearoa New Zealand penalises the poor more than it does the affluent (McIntosh & Goldmann, 2017). The Dunedin life course study of over 1,000 New Zealanders found that people are three times more likely to offend if they grow up poor, children and young people who grow up in deprivation, and contend with transience and violence, are at greater risk of offending (McIntosh & Goldmann, 2017).

Crime rates are higher for both victims and offenders in poor communities (Office of Social Services, 2018; Workman & McIntosh, 2013). This does not mean that the poor are all offenders, but that poverty is part of a range of intersectional processes and factors which predispose people to offending (McIntosh & Goldmann, 2017). Other factors include peer influences, parental neglect,

coming from a family where offending is prevalent, and having impulsive personality traits. For women, there are additional factors, including experiences of abuse and family violence, substance abuse, and mental illness (Bevan, 2015). In Aotearoa New Zealand, poverty is one of the situational factors which predispose women to offending, alongside a lack of support, substance abuse, and conflict within intimate relationships (Bevan, 2015).

The Family 100 research project (Garden et al, 2014) identified a link between poverty and experiences with the justice system. For the poor, being fined for any offense is disproportionate to their income. Participants in the Family 100 research project thought that there was a bias against the poor within the justice system. Participants identified having convictions also made it difficult to obtain employment. For some participants in the Family 100 research, the difficulties arising from poverty and having previous convictions made imprisonment seem a viable alternative to paying fines (Garden et al, 2014; Workman & McIntosh, 2013). For example, 5,150 people remitted their fines debt to community service in 2013—that is, they replaced their fine with an alternative sentence (Ministry of Justice, 2013). Being poor, therefore, often results in people moving further into the criminal justice system.

The Aotearoa New Zealand criminal justice system has been identified as a site of institutional racism (McIntosh, 2018; Stanley, & Mihaere, 2018). For example, Māori are twice as likely to be remanded in custody as Pākehā, and the Māori imprisonment rate is seven times higher than the rate for non-Māori (McIntosh & Goldmann, 2017; Workman & McIntosh, 2013). Pasifika are also overrepresented in offending rates. Research with Pasifika youth offenders found that they were mostly male, had experienced family violence in their upbringing, and were highly likely to have grown up poor (Ioane & Lambie, 2016; Ioane, Lambie & Percival, 2016). Māori are over-represented in the criminal justice system due to a complex mix of policing practices, the negative portrayal of

Māori in the media, stigma, poverty and the “ongoing adverse effects of colonisation” (McIntosh & Goldmann, 2017, p. 260). Offending can result in stigma, particularly in conservative rural communities.

## 2.8 Stigma

Stigma is a word used in early Greek and Roman society and medieval Europe to describe the bodily scars, tattoos, clipped ears, brands or burns that identify those who should be shunned by ‘normal’ members of society (Hinshaw, 2007; Hinshaw, Cicchetti & Toth, 2007; Jones & Corrigan, 2014; Leff & Warner, 2006). Marking a person in some physical way created a visual sign that a person was blemished. As a sign of social disgrace, it was a cue that a person should be avoided, especially in public places (Coleman, 2006; Goffman, 1963; Hinshaw et al, 2007). While the physical marks of the Greeks and Romans are no longer used in society, the shame and disgrace felt by stigmatised people continues.

Goffman (1963), using social interactionism, described stigma in his book *Stigma: Notes on the Management of Spoiled Identity*. According to Goffman, stigma has a spoiling effect on a person’s identity, thereby resulting in a person who is no longer treated as an individual but as part of a stigmatised group. Goffman (1963) described three types of stigma: physical deformities, issues of character, and stigma relating to race, nationality or religion. Goffman’s second category, issues of character, is pertinent to the poor, that is, deficiencies of character are often invoked to explain why people are poor.

The notion of difference is a prerequisite for stigma to arise. People who are stigmatised are seen as ‘other’, and as abnormal (Coleman, 2006). The stigmatising process identifies members of groups as inept, odd, shameful or undesirable, and they are therefore marginalised (Jones &

Corrigan, 2014). The process of othering affects social acceptance and social relationships, pushing people to avoid the stigmatised. Goffman's (1963) view was that both 'normals' and the stigmatised arrange their lives to avoid social contact with each other. One Canadian mixed method study that explored poverty and social isolation found that people who were poor were more likely to experience social isolation and stigmatisation compared to people who were financially secure. The poor participants in the Canadian study had minimal involvement in their community or in supporting others, and had less contact with their families than other study participants (Stewart, Makwarimba, Reutter, Veenstra, Raphael & Love, 2009). The Aotearoa New Zealand Family 100 research project also found that shame resulted in participants self-excluding from social and family events as they were not able to contribute what was expected (Garden et al, 2014).

There is debate about Goffman's social interactionist analysis of stigma. Goffman's theorising about stigma acknowledges social structures but does not take a challenging, critical position. Critiques of Goffman's theorising about stigma note he does not pay enough attention to the power dynamics inherent in neo-liberal capitalist societies where the society itself contributes to stigma, as evidenced with the poor, but is also applicable in the context of mental illness (Tyler & Slater, 2018).

In Aotearoa New Zealand, stigmatisation of the poor began with European settlement. Charitable organisations provided financial assistance only to the deserving poor and not the underserving. The deserving poor were deemed to be of good, moral character (O'Brien, 2008). The British settlers brought with them the notion of individual responsibility from Victorian England (Bassett, 1998) where families were expected to provide for their own. The Destitute Persons Ordinance of 1846 provided some relief by allowing those without family support to present their case for financial assistance to a Magistrate or Justice of the Peace. Bassett (1998) notes that there were 28 "indigents in Auckland receiving daily rations from the Government" in 1850 (p. 31). In the

1870s and 1880s, people in Aotearoa New Zealand suffered from low wages, poverty and unemployment as part of a worldwide depression (Bassett, 1998; Jackson & McRobie, 2005; King, 2003). Changes in demand for agricultural produce and the development of refrigeration allowed the growth in export of agricultural products, thereby greatly improving the economy by the end of the 19<sup>th</sup> Century (King, 2003). The notions of personal and familial responsibility continued to dominate thinking into the 20<sup>th</sup> Century, and people were stigmatised if they were perceived to be socially deviant (Jones & Corrigan, 2014; King, 2003). The belief that the way out of poverty was through work was evidenced by the 1930s work schemes for the unemployed (discussed in Chapter One). Despite what people may have done formerly as an occupation, people were expected to carry out manual labour, such as contributing to forestry and making roads (King, 2003). In this way, the poor were easily identified and degraded.

Beneficiaries are 'othered' and seen as somehow inferior and lesser citizens (Beddoe & Keddell, 2016; Davis & Wainwright, 2005; Hyslop, 2016; Jo, 2012; O'Brien, 2016). The media and some right-wing politicians describe beneficiaries as lazy and feckless individuals who take from the rest of the population (Cunningham & Cunningham, 2014; Garthwaite, 2016). When the doctrine of blaming poverty on the individual is not challenged by social workers and other professionals, the stigma experienced by the poor is reinforced (Beddoe & Keddell, 2016; Gillies, 2008; Hodgetts, Chamberlain, Tankel & Groot, 2013; 2014; Jo, 2012; Jones & Novak, 2014; Krumer-Nevo, 2009).

Social stigma occurs when the public accept a stereotype, a category of people who are distinguished from the norm, and they then discriminate based on this (Burke, 2006). Social stigma results in feelings of judgement from others (Gray, 2016). The idea of welfare dependents and feral families has been promulgated by the media and used by the state in developing welfare policy

(Beddoe, 2014). Social stigma can extend to those associated with the stigmatised person or group, such as family members or professionals who work with the group (Hinshaw et al, 2007).

Self-stigma is the internalisation of structural and social stigmatization, and is experienced as shame (Gray, 2016). Shame leaves people vulnerable to internalise stigma which can result in the loss of hope (Gray, 2016; Jones & Corrigan, 2014). Internalisation of stigma is an acknowledgement by a person that they are not normal, that they do not fit in society, and have in some way failed (Burke, 2006). The flow-on effects of self-stigma can be self-hatred, shame and poor self-esteem (Beddoe, & Keddell, 2016; Goffman, 1963; Gray, 2016). People experiencing self-stigma feel they are failures and therefore do not seek social contact or employment, thus confirming their sense of failure (Green, 2009).

Stigma can be acutely experienced by people living in rural communities where traditional value systems predominate (Pawar & McClinton, 1999; Smith, 2013). Research found that “for those with low moral capital, the stigma of their pasts and present became the barriers to their future” (Sherman, 2006, p. 900). Stigma and shame were also discussed by Lockwood (2002) in a study carried out with rural communities in Tahiti. She found that from a “rural Tahitian worldview poverty is an aberration propagated by specific individuals” (Lockwood, 2002, p. 217). This individualizing of blame resulted in social marginalization.

Not all those who are stigmatised internalise the stigma applied to them, as the process is dynamic and complex. Some members of stigmatised groups use cognitive and behavioural strategies to cope with stigmatisation, for example, by embracing an outsider identity and positioning to resist the labelling of others (Thoits, 2011). The slutwalk anti-rape movement is an example of women embracing a stigmatised label (Mendes, 2015). Those who resist stigma are able

to challenge the structures which label them. When people make links between their personal experiences and the political world, they are able to understand their experiences as a social construction. They can externalise it, thereby providing some protection from self-stigma (Dowie & Gibson, 2006). The experience of stigma due to being judged for not fitting societal norms is linked to structural violence.

## 2.9 Structural Violence

While the enforcement of stigma results in the process of othering, structural violence is behaviour which is also based on othering. The poor lack social and economic power, which makes them vulnerable to the power of the state (Hart, 2008). Lack of power exposes the poor to the force of the state, and places them “at risk for assaults” (Farmer, 2003, p. 18). These assaults have been labelled structural violence, a term first used in 1969 by Galtung and Latin American liberation theologians (Farmer, 2004).

Structural violence is a broad concept (Kelly, 2005) referring to “insults to basic human needs, and more generally to life” (Galtung, 1990, p. 292). A violation of human rights as well as social inequality is at the core of structural violence and occurs when these violations are not recognized or when they are tolerated (Farmer, 2003; 2004; Hodgetts, Chamberlain, Groot & Tankel, 2013; Sturgeon, 2012). As opposed to direct, physical violence, structural violence is indirect and manifests itself in the form of institutionalised sexism, racism and inequalities in relation to life chances and resource access (Farmer, 2003; Hodgetts et al, 2013).

Hodgetts et al (2013) argue that the poor are subjected to actions by the state which are degrading and abusive. The poor experience “innumerable small indignities” (Farmer, 2003, p. 25) in their dealings with the state. The actions of the state towards the poor embody violence because

they involve monitoring, regulation, and control. Most participants in this study had significant dealings with state administration and mechanisms in different ways that are reported on in Chapters Five, Six and Seven.

As structural violence is hard to identify, people who experience it may not trust their intuition in relation to their experiences, instead blaming themselves for their situation (Sarang, Rhodes, Sheon & Page, 2010). That is, their sense of powerlessness and shame would be attributed to their own poor decision making rather than as a result of social structures and political decision-making. The sense of invisibility of the lived experience of structural violence adds to its assault on the poor. The invisibility of structural violence can result in those who are victimised or marginalised in society believing they deserve to be poor and that poverty is part of the natural order of things (Farmer, 2003; Hodgetts et al, 2013).

The imposition of structural violence is executed by those with access to power within society and through technocratic systems. Beneficiaries in Aotearoa New Zealand are sanctioned for failing to comply with a range of state-imposed expectations, such as attendance at meetings or training, or failing drug tests (Wynd, 2014a). There has been some reduction in the application of sanctions after the election of the Labour-led coalition in October 2017. However, approximately 8500 sanctions were nevertheless applied in 2018 (albeit 6000 less than the previous year) (Child Poverty Action Group, 2019). These punishments are imposed at a distance by state employees who “often fail to see how their actions can wreak havoc in the lives of the poor” (Hodgetts et al, 2013, p. 3). The use of trespass notices were also used by WINZ, which one participant in this study experienced. The lack of dignity in the WINZ environment, criticism and disinterest from staff, is evidence of structural violence (Jo, 2012). Added to this, WINZ offices do not have adequate facilities such as toilets, drinking water, or privacy screens for clients to use (Garden et al, 2014; Gray, 2017a). The lack of

basic amenities is symbolic of the lack of regard WINZ management have for people using their services and suggests to them that they are not deserving of privacy or comfort.

Galtung (1990) identified four components of exploitation inherent within structural violence. The first component is penetration, which is when power is used from within the social structure. In this study, penetration was evident in the activities of WINZ and observations of this impact is discussed in Chapter Seven. The second component of structural violence identified by Galtung (1990) was segmentation, which is giving the poor only a partial view of the world. Information given to the poor is limited and distorted in favour of those with access to power, for example, those who are well educated are able to support their children to navigate the education system to obtain tertiary qualifications and enter professional employment. Thirdly, Galtung (1990) identified fragmentation as part of structural violence. Fragmentation is the exercise of keeping the poor apart from each other. By individualising poverty and advocating personal responsibility, the poor do not collectivise their experience. In this study, participants talked about other people who were poor, particularly beneficiaries, in critical ways, indicating divisions among the poor rather than a sense of having a shared experience. Finally, Galtung (1990) identifies marginalisation as an aspect of structural violence. The poor experience structural violence as they are pushed to the edge of society. Participants in this study talked about marginalisation in relation to education, employment, and social networks.

Galtung (1990) argues that the four concepts named above can work in unison to produce structural violence, but each concept can be considered structural violence in its own right. Paul Farmer (2016), a physician anthropologist, also used the notion of structural violence to understand the suffering of the poor in third world countries and in his homeland, the United States of America.

Farmer (2010) argued that poverty becomes embedded in a society which makes it a form of structural violence.

There is also a connection between the structural violence directed towards people and structural violence perpetrated against nature (Farmer, 2001; 2009; Galtung, 1990). Global warming, environmental destruction through war and industry, species extinction, and exploitative acts against the environment are ways in which structural violence is perpetrated against the natural world. Environmental destruction has a greater impact on the poor than on more affluent people (Dominelli, 2012). This can be seen when natural disasters, such as that shown in Figure 2.1 below, impact on the poor who are unable to pay for insurance. In natural disasters those who are poor and on the margins of society are further excluded (Noble, 2016) and less able to recover from the emotional and physical damage wrought by events, such as the flooding in the Stratford district in figure 2.1 (Tudor, 2013).



Figure 2.1: Flood damage in the study area in 2015 (Photograph: McBride, 2015).

Surveillance is used by the state to monitor its citizens and is an aspect of structural violence and discussed by Foucault (1980).

### 2.10 Panopticon

The application of power, including power exerted by the state, has been examined by Foucault (1970, 1980). Using the metaphor of a panopticon, Foucault (1970) illuminated how power can operate without the explicit use of violence. The panopticon was an architectural design for prisons created by Jeremy Bentham in the 18<sup>th</sup> Century. A panopticon prison was designed around a central tower, with cells surrounding the central tower which were backlit, thus allowing a supervisor from the central tower to see into each cell while ensuring the supervisor remained out of sight of the inmates. This design allowed inmates to be seen but not see into the central tower, and to not have contact with other inmates (Foucault, 1970). The panopticon model was designed to “induce in the inmate a state of conscious and permanent visibility that assures the automatic functioning of power” (Foucault, 1970, p. 201). As inmates believed they were always being watched they controlled their own behaviour (Foucault, 1970). Because oppression was internalised by inmates, there was no need for prison guards to be repressive, the inmates repressed themselves. The design of the panopticon, and the sense of constant surveillance produced was what Foucault (1970) described as the “homogenous effects of power” (p. 202). Where people repress themselves, such as blaming themselves for being poor, the panopticon affect is evidenced.

Foucault (1970) used the panopticon metaphor as a way of describing disciplinary power that operates at all levels of society. Foucault (1980) discussed the internalisation of power through the perception of surveillance and the use of science to establish standards of normal behaviour. He argued that during industrialisation, a punitive apparatus was established to distinguish between the normal and abnormal, and that human sciences were a “nineteenth century effort in discipline and

normalisation” (Foucault, 1980, p. 61). As people became aware there was a norm that they were being measured by, they strived to meet this standard through self-regulation (Bay, 2014; Tremain, 2006). In this research, participants talked about being aware that employment and financial success were norms they were being measured against and falling short of. Foucault (1970) regarded this process as the internalisation of authority, whereby people punish themselves when they deviate from social norms—similar to the process of internalised stigma where people absorb the attitudes within society towards them. The judges of normality are entrenched within social systems and institutions and included, according to Foucault (1970), social workers, doctors, judges, and educators (Bay, 2014). For some participants in this study, the failures to comply with prescribed norms within social systems and institutions were a source of considerable embarrassment and are discussed in Chapters Seven. Through rules, appointments, check-ups, assessments, and surveillance, beneficiaries absorb the objectives of those with access to authority and measure and control themselves, thereby reflecting processes of disciplinary power (Foucault, 1970; Osaka, 2014). In Aotearoa New Zealand by far the largest number of social workers are employed in statutory organisations (SWRB, 2020) and as such have direct involvement in the way the state influences the lives of individuals and families living in poverty.

### 2.11 Poverty and Social Work

For social workers, the majority of their clients are likely to be experiencing poverty (Backwith, 2015; Hosken, 2016; O’Brien, 2013a). Poverty is likely to have a significant impact on the way people live their lives, parent their children, and on their other relationships (Cunningham & Cunningham, 2014, p. 27). Social workers are in a key position to understand and advocate for the poor as they “know about life in poverty more than [...] other human service professionals” (Krumer-Nevo, Weiss-Gal, & Monnickendam, 2009, p. 318).

Given that social workers have so much direct contact with the poor, it is surprising that the profession has remained relatively silent about the issue of poverty (Krumer-Nevo, 2016), and that it appears to have become the “wallpaper of practice” (Office of Social Services, 2018, p. 4). Poverty has become normalised and social workers may have become desensitised to it (Krumer-Nevo et al, 2009; Morris et al, 2018). The very reason people often require social work services is something that social work profession fails to address (Backwith, 2015; Gupta & Blewett, 2008; Krumer-Nevo et al, 2009; Morris et al, 2018; Reichert, 2007).

The ‘climate’ created by neo-liberalism has de-politicised poverty and encouraged an individualised discourse (Beddoe & Keddell, 2016; Gupta, 2015; Jo, 2012; Morris et al, 2018), which social workers sometimes accept as accurate (Delavega, Kindle, Peterson & Schwartz, 2017). The poor are encouraged to find solutions to their problems without consideration of their economic position or the political nature of their situation (Blumhardt & Gupta, 2017; Cunningham & Cunningham, 2014; Gupta, 2015). Focusing on the individual takes a pathological approach, that is, that poor people have a culture (underclass) which sets them apart from the rest of society, and this culture perpetuates their own poverty (Backwith, 2015; Morris et al, 2018). Social workers drawing on a pathological approach in practice focus on helping people adjust to their deprivation, rather than address the structural causes of poverty (Hyslop & Keddell, 2018; O’Brien, 2017).

Five key aspects of working with the poor are identified by Pierson (2016). Firstly, it is important to obtain income and resources for people. Secondly, clients’ social support and networks need to be strengthened. Thirdly, all work with clients should be integrated with the work of other organisations in order to provide resources such as food. Fourthly, the establishment of ways in which the poor can participate in the community and finally practice should be community-based, focusing on the places in which people live. Peirson (2016) uses social exclusion, a term adopted in

the United Kingdom, to talk about poverty. Social exclusion is a wide term for those who are cut off in some way from mainstream society. Other social work scholars, such as Krumer-Nevo (2016), use a human rights approach which is more congruent with the critical theory theoretical lens used in this research (see Chapter Three).

A poverty aware paradigm (PAP) advocated for by Krumer-Nevo (2016) urges social workers to take the position that poverty is a breach of human rights and that it is more than material deprivation, but a process of stigmatising and of silencing. Using the PAP, social workers can push back against the stigma of poverty and acknowledge the shame clients' may be feeling (Gupta, 2015). The starting point for PAP is building a strong relationship with clients, hearing their perspective, fostering partnerships, and working in solidarity with the poor (Krumer-Nevo, 2016). While the solutions may not be easy or straightforward, being willing to stand with people and represent their needs and views is critical (Jones & Novak, 2014; Saar-Heiman, Lavie-Ajayi & Krumer-Nevo, 2017).

An anti-poverty practice framework proposed by the Northern Irish Department of Health (Office of Social Services, 2018) identified the strength-based perspective and anti-oppressive practice as the key to working with the poor, with their framework focused on empowerment. Likewise, in 2019 the British Association of Social Workers published an anti-poverty practice guide for social workers (BASW & CWIP, 2019). They advocate for anti-oppressive practice with relationship-based approaches, focusing on hearing people's stories. Advocacy is identified as a key aspect of anti-poverty practice and social work in rural communities (McCarten, Morrison, Bunting, Davidson & McIlroy, 2018) to ensure that clients "socio-economic rights" (BASW & CWIP, 2019, p. 19) are met.

## 2.12 Social Work in Rural Communities

While there is significant international literature about rural social work, there is limited literature within Aotearoa New Zealand. Most recently, Hollis-English and Selby (2015) wrote about social workers in rural schools in Aotearoa New Zealand. Before that, Smith (2010 & 2013) wrote about the lives of rural dwellers in Southland, while Pitt (2010) wrote about social work in Taranaki. Carmichael and Kennard (1999) also wrote an article about child protection practice in the rural Wairarapa. Themes within this literature noted that rural people in Aotearoa New Zealand experienced transport difficulties, lacked access to services, and were isolated and stigmatised. The literature also described rural people as demonstrating significant resilience and capacity for coping with hardship.

There are some similarities between rural social work in Australia and in Aotearoa New Zealand; however significant differences between rural Aotearoa New Zealand and Australia are also highlighted in the literature. For example, in Aotearoa New Zealand there are no fly in, fly out communities or desert settlements<sup>16</sup> and Aotearoa New Zealand is also not affected to the same extent as Australia, to date, by global warming. However, there are issues affecting both clients and social workers that are shared across both countries. These include isolation, issues of maintaining confidentiality in small communities, lack of services, difficulty accessing services, stigma, and discrimination. Rural social workers in both countries need to be generalist in their practice approach, and may experience blurred boundaries and have dual or multiple relationships within the community and with their client groups (Alston, 2000; 2007; Green, 2003; 2007; Hollis-English & Selby, 2015; Howard et al, 2016; Maidment, 2012; Mendes & Binns, 2012; Munn & Munn, 2003; Pitt, 2010; Smith, 2010; Zubrzycki, 2006).

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<sup>16</sup> Fly in and fly out communities have a work force who move in and out of the area for short periods in order to work. This is often a feature of the mining industry in Australia (Bay & Jenkins, 2012).

For the rural poor, lack of services is exacerbated by their economic position (Howard et al, 2016; Mendes & Binns, 2012). In rural Australia, there is both a lack of services and difficulty in accessing services (Gregory, Green & McLaren, 2008; Howard et al, 2016). Lack of services and lack of access to services contributes to the often-precarious nature of being poor in a rural community (Mason, 2006; Pierson, 2016). In the Stratford district, there are a lack of services in comparison with those available in other parts of Aotearoa New Zealand. Earlier research in the Stratford area found that “health services beyond the GP practice are minimal, and the services and supports for families exist at very low levels, if at all” (Tester et al, 2015, p. 9).

### 2.12.1 Generalist Practice

Social workers in rural communities often have to be generalist in their practice; limited services in the community necessitate that social workers provide a wider range of services than they might if working in an urban environment (Daley & Avant, 2013; Hollis-English & Selby, 2015; Howard et al, 2016; Pugh & Cheers, 2010). This means working with a wider range of issues rather than having a specialist orientation towards a particular field of practice (Locke & Winship, 2005). This approach may require forming alliances with other professionals to work on rural issues, including engaging in interdisciplinary work. For example, rural poverty requires a response from health professionals, educators and social service professionals, all of whom work with the consequences of poverty and are witness to it in their communities (Beddoe & Burley, 2012; Maidment & Bay, 2012).

Alongside working with a wide range of issues, rural social workers are required to carry out a wide range of roles beyond case management and brokerage. Counsellor is one role identified by Hollis-English and Selby (2015) which social workers working in rural communities may be expected to fulfil. Rural social workers also require skills in advocacy, research and community development (Alston, 2005; Maidment & Bay, 2012).

### 2.12.2 Community Development

To deal with a lack of services in rural areas, community development approaches are useful (Howard et al, 2016; Maidment & Bay, 2012; Mendes & Binns, 2012; Vance, 2017). Community development can be used as an approach to empower communities by making use of local skills and the self-reliant values evident in rural places (Mendes & Binns, 2012; Pugh & Cheers, 2010; Wildman, Valtora, Moffatt & Hanratty, 2019). A community development approach was used to address social isolation and nutritional deficit experienced by the elderly in one economically deprived rural area in northern England (Wildman et al, 2019). The project used a strength-based approach to identify assets in the community. After the community assets were identified, a range of activities were developed which were co-designed with potential clients. The range of activities included lunch clubs, a men's breakfast club, healthy eating courses, sessions on growing food, and help with shopping (Wildman et al, 2019). Similarly, in the United States, the 'Turning the tide on poverty' project was used to address poverty in 20 rural counties in the south eastern part of the country. Like the asset-based approach used in North England, the starting point was hearing from local people living in poverty. Discussions were held to listen to people's experience of poverty, and then action plans were developed. The action plans included education, community beautification, the establishment of food pantries, and small business development (Worthy & Beaulieu, 2016). In Australia, a community development approach has been taken in rural communities in response to climate change and pending petroleum shortages. Based on the transition town movement begun in the United Kingdom, communities explored new ways of life which were less fuel dependent and more sustainable. Initiatives arising from one transition town project included carpooling, re-skilling workshops, developing community gardens and food re-distribution (Bay, 2013). This movement addressed some issues affecting the poor but the participants in the movement were mostly

educated, older women (Bay, 2013). There is potential to adapt this approach to work with rural communities where economic deprivation is prevalent.

The importance of social workers actively listening to the members of the community is emphasised in literature about rural social work (Alston, 2007; Howard et al, 2016). In relation to intimate partner violence in rural communities, social workers hearing the way violence is talked about and viewed in that community is an important starting point (Wendt, 2009). The context of the work is important in rural social work, making the starting point of practice about understanding the community in which the work is being carried out rather than assuming urban approaches will be effective (Alston, 2007; Howard et al, 2016).

The limited range of research about rural social work in Aotearoa New Zealand, and the absence of social work literature about rural poverty in Aotearoa New Zealand, is a gap in knowledge that I will address in later chapters. In particular, I will focus on how best to practice social work in rural communities with those experiencing poverty. Blakely and Locke (2005) suggest that social workers should advocate for the rural poor and that the “myths and stereotypes associated with rural poverty . . . should be replaced with facts” (p.37). This research will contribute to this broader understanding of rurality and the experience of poverty in order to improve the lot of some of the most marginalised citizens of Aotearoa New Zealand.

## Chapter Three: Theory: Critical Theory, Feminism and Feminist Research

*This, then, is the great humanistic and historical task of the oppressed: to liberate themselves and their oppressors as well. The oppressors, who oppress, exploit and rape by virtue of their power, cannot find in this power the strength to liberate either the oppressed or themselves. Only power that springs from the weakness of the oppressed will be sufficiently strong to free both (Freire, 1993, p. 26)*

### 3.1 Introduction

The theoretical perspectives informing this study are critical theory and feminism. An understanding that certain groups in society are privileged over others is a core principle and analytical insight of critical theory and feminist positioning (Denzin & Lincoln, 2008; Kincheloe, McLaren & Steinberg, 2012). Critical theory and feminist positions share a view that we come to know the world as a consequence of our relationships with others and our interactions with the world. What we know, therefore, is situated within our social, geographic and historic time (Daftary, 2018; Hesse-Biber & Leavy, 2007; Witkin, 2011). As is the case for how we understand the causes of poverty, the way knowledge is understood to be constructed in this study was not neutral or objective (Bentz & Shapiro, 1998; Foucault, 1980)—rather it was shaped by my own worldview, which is congruent with critical theory and feminism. The critical theorist and feminist standpoints also critique systems of domination and oppression within relationships and in society (Dominelli & McLeod, 1989; Fook, 2003; Gannon & Davies, 2012), thereby providing a valuable lens for this study's analysis of the social injustice of poverty. Both theories acknowledge the importance of advocating for social justice, that is, challenging discrimination and oppressive social structures and advocating for equity and a fair and inclusive society (Nipperess, 2017).

This study's research questions inquire into how people in a rural community experience poverty. I use concepts from critical theory which explore marginalisation and alienation to assist the understanding of these experiences and a feminist methodology to which offers a gender lens and a consideration of intersectionality. Standing (2011, n.p.) identifies the role of a feminist researcher as the translator between the private world and the "public world of academia, politics and policy" (Standing, 2011, n.p.). As a translator between the private and hidden world of the rural poor and the public world, I aimed to give participants in the study a voice. This methodology endorses consciousness raising and works towards social change within interviews with participants (Fraser & MacDougall, 2017; Jayaratne & Stewart, 1991; Lather, 2007; Reinharz, 1992; Ribbens & Edwards, 1998). Feminism offers theoretical concepts such as the personal is political, exploration of patriarchy, and intersectionality to understand women's experience of poverty. Feminism has been considered part of the critical theory tradition as, like critical theory, it critiques society and shares with critical theory the use of consciousness raising, liberation from oppression and a questioning of power structures within society (Brookfield, 2005); however, critical theory scholars draw on the ideas of Marx whereas feminism has a focus on gender politics (Brown, Western & Pascal, 2013; Letherby, 2003). A significant area of difference between Marxism-informed critical theory and feminism is that the ideas of Marx have roots in economic materialism whereas the feminist perspective focuses on the analysis of gender and a critique of patriarchal social structures (Cimino, 2014).

This chapter starts with a discussion about critical theory including an examination of critical theory in research. Following this, it discusses key concepts used in the study drawn from the feminist tradition. These include: the personal is political, patriarchal social structures, intersectionality, and the questioning of binaries and either/or positions. Feminist methodology is

then discussed. In concluding the chapter, I identify my positioning as a researcher with attention paid to my insider/outsider status.

### 3.2 Critical Theory

Critical theorists attend to systems of power and domination in society (Brookfield, 2005; Healy, 2000). As indicated by its name, critical theory is about critiquing existing social structures as well as current thinking and knowledge. Critical theory is not a single theoretical view, but a wide range of thought based around emancipation and making links between the personal and the political. Peoples lived experience, the personal, has a direct connection to the dominant political ideologies and structures in society (Briskman, Pease & Allan, 2009).

Critical theory can trace its origins to Frankfurt, where a social research institute was established in the 1920s (known as the Frankfurt School) as a response to Nazism and the dominating political systems of the 20th Century (Healy, 2000; Kemmis, 2008; Trede & Higgs, 2010; Willis, 2007). Scholars associated with the Frankfurt School include Adorno, Horkheimer, Marcuse and Habermas (Bronner, 2011; Brookfield, 2005). While these scholars offered different critiques of society, they all drew on the work of Marx to inform their analysis (Honneth, 2009). Since the 1920s, critical theorists have raised social and political issues relevant to a particular time and place (Trede & Higgs, 2010), which makes it a relevant theory for this study on poverty—a social issue of our time.

Critical theory in the twenty-first century includes a critique of society based on materialism (taken from Marx) alongside a critique of ideology and knowledge construction, drawn from Foucault's ideas and those of other post-modern scholars (Briskman, Pease & Allan, 2009; Healy, 2000). Habermas, who was part of the Frankfurt School, argued that knowledge was "constituted through interests" (Trede & Higgs, 2010, p. 248) which is similar to Foucault's (1970; 1980) views

about power and knowledge. Foucault argued against the universalism of truth claims (regimes of truth) made by structural theorists such as Marx. Foucault stated that it is “not a matter of emancipating the truth from every system of power. . . but of detaching the power of truth from the forms of hegemony, social, economic and cultural, within which it operates at the present time” (Foucault, 1980, p. 133).

The liberation of the oppressed, as articulated by Freire in the quote at the start of this chapter, is at the core of critical theory. Freire, as other critical theorists before him, drew on the ideas of Karl Marx (Agger, 1991; hooks, 1995). Through his work with peasants in Brazil, Freire developed a philosophy of liberation and social transformation (Crotty, 1998). Freire used the concept praxis—working alongside people for social change—in his work with the poor in Brazil, where he advocated for “action and reflection of men upon their world in order to transform it” (Freire, 2003, p. 62). Freire (1993; 2007) sought to make the personal political which is the aim of this study, to make public the lived personal experiences of people who live rurally and experience poverty.

Understanding social injustice and working to create a more just and fair society is the aim of critical theory-based and feminist research (Kemmis, 2008). The focus on social justice and linking the personal with the political is congruent with the International Federation of Social Workers’ [IFSW] (2019, para. 1) definition of social work which states that “principles of social justice, human rights, collective responsibility and respect for diversities are central to social work”. Social justice addresses the inequalities inherent in social hierarchies which privilege some groups over others (Bell, 2010; Webb, 2019). Research driven by a social justice agenda is active in seeking an equal society by working against oppression (Fook, 2003). Congruent with social work's social change and

social justice agenda, critical theory offers an analysis of structural injustices, oppression and structural violence (Dow & McDonald, 2003; Granter, 2019).

Critical theorists challenge political and economic systems based on neo-liberal capitalism (Brookfield, 2005; Giroux, 2011; Honneth, 2009). Within the western world, including Aotearoa New Zealand, neo-liberal capitalism is a driver of comparatively high rates of poverty (Canella & Lincoln, 2009; Cummins, 2018; Humpage, 2017; Webb, 2019). Neo-liberal capitalism is an economic system with the marketplace at its core with an emphasis on public sector austerity and privatisation of services (Tuck & McKenzie, 2015). Within the “competition-driven market model” (Farmer, 2003, p. 5), individuals are viewed as rational, autonomous agents who make decisions based on economic preferences. As a system, neo-liberal capitalism is geared towards private ownership of wealth and the accumulation of more private wealth through surplus production (Agger, 1991; Curtis & Galic, 2017; Ferguson, 2008; Madison, 2012). It is argued that wealth created as a result of increased production trickles down to those at the bottom of the economic hierarchy, mostly through job creation (Brookfield, 2005; Ferguson, 2008; Giroux, 2008; Rashbrooke, 2013; Rua et al, 2019).

Scholars in the critical theory tradition challenge this trickle-down idea arguing that neo-liberal capitalism is flawed and in reality what trickles down to those at the bottom is minimal (Brookfield, 2005; Farmer, 2003; Webb, 2019). Giroux (2011b) extends this argument further noting that wealth, in fact, flows upwards to those who already have a disproportionate amount of resources. Cornel West (2004) and bell hooks (2003) argued that western societies are captured by the ideology of neo-liberal capitalism and consumerism which are damaging to people’s mental and spiritual health and destructive to the natural world. In this research, the impact of neo-liberal capitalism on people’s lived experience is explored, looking at the ways in which neo-liberal

capitalism is experienced in the daily lives of rural dwellers and examining how rural New Zealanders learn to cope with financial hardship and the impact of global capitalism.

Neo-liberal capitalism has been absorbed as natural within Aotearoa New Zealand society (O'Brien, 2013b). Gramsci's concept of hegemony offers an explanation for this acceptance, that people 'buy in' to their own oppression, and the dominant ideas of neo-liberal capitalism became absorbed into collective thinking (Brookfield, 2005; Giroux, 2011a; Madison, 2012; Shayne & Leissle, 2014). This assimilation of ideas results in people internalising their own oppression (internalised oppression is discussed in Chapter Two). The ideology of neo-liberal capitalism has become legitimised and its precepts are made to look normal or 'common sense' despite the fact that as a system it creates inequality and benefits the wealthy (Agger, 1991; Brookfield, 2005; Giroux & Giroux, 2008; Giroux, 2011a; Granter, 2019; Humpage, 2017; Rashbrooke, 2013). The neo-liberal capitalist view is that poverty is the result of individual fault and individual inadequacy on a number of fronts. Critical theorists, on the other hand, view poverty as a failure of economic and political systems rather than a failure of individuals (Giroux, 2011a).

The process of challenging the 'personal failure' discourse involves making transparent the link between personal experience and the dominant forces of the political and economic systems (Ferguson, 2008; Giroux, 2001; 2011a; Healy, 2000). If people are aware of the political nature of poverty, the sense of individual responsibility and failure may be reduced (Brookfield, 2005). This research was conducted with this position in mind.

Working with people to explore their situation within the economic and political context is an important part of uncovering hegemonic forces and enables individuals to understand their oppression; a process Freire calls conscientisation (Dowie & Gibson, 2006; Freire, 1993). Through

conscientisation, people gain clarity about the connection between the personal and political (discussed later in this chapter) (Freire, 1993; Healy, 2000; Martin, 2014; Mills, 1959; Moosa-Mitha, 2005; Weiler, 2001; 2008). In this research, participants were affirmed for the way they managed poverty and encouraged to consider that the reason they were poor was not their personal ineptitude but a result of the political system within Aotearoa New Zealand.

The literature is not clear about how to go about conscientisation, which is a complex process requiring people to grasp political concepts and create links between their own experiences and the experiences of others. While Freire (1993) developed his thinking about conscientisation working with peasants in Brazil, these processes may not be appropriate for other cultures or in other parts of the world, or people may have their own understandings of the world and not want to participate in conscientisation (Brookfield, 2005). Another criticism of research based on critical theory is that while it has been effective in critiquing society, it has been less effective in transforming it (Willis, 2007). Feminist scholars, with a gender-based perspective, have critiqued some critical theorists, for example, Freire and Foucault, for their sexism and focus on class at the expense of other forms of oppression (Brookfield, 2005; Grimshaw, 1993). By focusing on a critique of neo-liberal capitalism, an analysis of patriarchy can be marginalised, although a number of critical theorists such as hooks (2000) and Giroux (2011a) discuss neo-liberal capitalism and patriarchy simultaneously.

### 3.3 Critical Theory in Research

An analysis of power and a focus on liberation are integral to using critical theory within research. Critical theory was useful for this study as it provided tools for the structural analysis of poverty. The basic assumptions of research based on critical theory include: all thought is affected by power relations which need to be considered within the historic and social context; facts are not separate to

ideology or values; neo-liberal capitalism and consumption affect how we view the world; language affects our awareness and interpretation of our experience of the world; certain groups in society are privileged over others; oppression is multiple and hierarchies of oppression are unhelpful; finally, mainstream research is often unwittingly involved in oppression (Kincheloe et al, 2012). Each of these assumptions is explored below.

The first assumption is that all thought is affected by power relations that need to be considered in their historic and social context (Kincheloe et al, 2012). Applying critical theory to research involves acknowledgement that knowledge emerges out of the context from which it evolves: knowledge is never neutral, but is historically, geographically and culturally specific (Anderson-Nathe, Gingeri & Wahab, 2013; Bentz & Shapiro, 1998; Crotty, 1998). Within each environment or context in which the research takes place, power relations influence what can be known and how it can be known (Bryant, 2015; Canella & Lincoln, 2009; Lather, 1991; Marcellus, 2003; Shayne & Leissle, 2014; Willis, 2007). Knowledge itself is not neutral but is influenced by power regimes (Bay, 2014; Foucault, 1980), which in Aotearoa New Zealand have supported a discourse focused on economic growth (Humpage, 2017; Kelsey, 2015).

Research based on critical theory draws on post-modern ideas about power and knowledge creation (Foucault, 1970; Grabe, 2019; hooks, 2003). Foucault (1980) challenged the way knowledge was constructed and argued for an “insurrection of subjugated knowledges” (p. 81), knowledge which he described as low ranking, naïve, and at times disqualified. By allowing subjugated knowledges to emerge, Foucault believed there could be struggle against oppressive structures (Bay, 2014). Questions about power and knowledge are crucial in research based on critical theory where the aim is to give space to marginalised or excluded knowledge (Bookfield, 2005; Kincheloe et al,

2012). In this instance, the research seeks to give voice to the subjugated knowledge of the poor who live rurally.

While carrying out research informed by critical theory, the researcher should be critical of themselves and their research process by questioning who benefits from the research, maintaining awareness of the power dynamics between researcher and participants (Anderson-Nathe et al, 2013; Denzin & Lincoln, 2008; Rose, 2015). In this research, continuous journaling was used to reflect upon the power dynamics within the research process (discussed in the following chapter). Journaling was used as a process of self-observation (Anderson-Nathe et al, 2013) to consider the impact of my own values on the research process. There were times where my own world view was different to participants. For example, some participants viewed their poverty as a result of their own failings, where-as I held a view that poverty was a result of oppressive social structures and a neo-liberal capitalist political system.

The second assumption about research informed by critical theory is that facts are not separate to ideology or values (Kincheloe et al, 2012). Research is not neutral and claims of objectivity may obscure privileged and dominant biases (Bentz & Shapiro, 1998; Daftary, 2018). Research using critical theory takes the position that the research process is not value free (Anderson-Nathe et al, 2013; Epstein, Hosken & Vassos, 2018) as ideology permeates all aspects of life (Lather, 1991). Research carried out using critical theory is overtly political (Lather, 1991; Rose, 2015; Willis, 2007), therefore it was important that I was transparent with the participants about my political position. While carrying out this research I was open about my view that poverty is a political issue and that a belief in social justice underpinned the research (Bryant, 2015; Denzin & Giardina, 2009; Sikes, 2013).

The third assumption is that neo-liberal capitalism and consumption affect how we view the world (Kincheloe et al, 2012). At the centre of critical theory is a critique of neo-liberal capitalism and an awareness that consumption is a form of panacea, keeping 'the masses' entertained and distracted (Giroux, 2008; Kincheloe et al, 2012; Willis, 2007). What Giroux (2001, p. 62) called the "rampant culture of consumption" inherent in neo-liberal capitalism has been explored by critical theorists such as Freire (1993, p. 40) who stated, the "oppressors develop the conviction that it is possible for them to transform everything into objects of their purchasing power." Consumption, and the marketing led campaigns to persuade people around the globe to consume, have allowed neo-liberal capitalism as a system to grow (Fanon, 1967; Giroux, 2001; 2011b). However, consumption itself has been shown to be flawed in that consumption does not lead to pleasure or satisfaction for the individual consumer. Instead it leads to stress and debt for people who do not have the means to pay (Jones & Novak, 2014). The poor are excluded from a neo-liberal capitalist system as they do not make profit or have the income to partake in consumption to any extent (Freire, 1993; Hyslop & Keddell, 2018).

The fourth assumption of critical theory informed research is that language affects our awareness of the world (Kincheloe et al, 2012). Reality is socially constructed in that reality is not an objective truth but what people perceive it to be in how they talk about the world (Brookfield, 2005; Crotty, 1998). Language is used to make meaning of experiences and communicate that meaning to others (Crotty, 1998). Critical research involves the questioning of articulated assumptions and 'taken for granted truths' about the world (Bay, 2014; Kemmis, 2008).

The fifth assumption of critical theory in research is that certain groups in society are privileged over others (Kincheloe et al, 2012). The position taken by a critical researcher is that power structures exist and privilege some members of society while disenfranchising others (Giroux,

2011b; Webb, 2019; Willis, 2007). Research using critical theory is charged with naming and addressing these inequities (Canella & Lincoln, 2009; Denzin & Giardina, 2009; Shields, 2012). Poverty is an inequality, where some members of Aotearoa New Zealand society are living on significantly less than others (Welfare Expert Advisory Group, 2019; Rashbrooke, 2013). Therefore, a study which considers and explores this inequity fulfils a critical research agenda.

The last assumption of critical theory in research is that oppression is multiple, that hierarchies of oppression are unhelpful in understanding and being able to challenge oppression, and that mainstream research is often unwittingly involved in promoting oppression (Kincheloe et al, 2012). The intent of research informed by critical theory is to make aspects of the social world visible which are hidden (Denzin & Lincoln, 2008; Freire, 1993; Kline, Dolgon & Dresser, 2000; Moosa-Mitha, 2005; Shannon, 2013), and to support and advocate for participants (Shields, 2012). Critical theory is overtly political holding the view that research is neither neutral nor objective (Bentz & Shapiro, 1998; Daftary, 2018).

Positivist research approaches are considered politically neutral (Anderson-Nathe et al, 2013; Shayne & Leissle, 2014). As a consequence of this perception of neutrality, power imbalances can be reproduced through research to the detriment of research participants (Bell, 2012; Shannon, 2013; Sobottka, 2013; Sumner, 2003). Research informed by critical theory makes no claims to neutrality or objectivity, rather the political position taken as part of the research is acknowledged (Daftary, 2018; Shannon, 2013). In this research while I was clear about power differences I used a feminist approach in interviews which allowed space for participants to control what they talked about as well as where they were interviewed and for how long (discussed further later in this chapter). Naming overtly the political position taken in this research created space for participants and myself to discuss the

political nature of their lived experiences of poverty. This direct application within the research interviews made critical theory appropriate to use as a theoretical lens for this research.

Researchers using critical theory have been critiqued for perpetuating the power structures they seek to alleviate by seeming to know more than research participants about their oppression and assuming research participants want to understand their situation through a political lens (Canella & Lincoln, 2009; Willis, 2007). I was aware there was potential for the imposition of my ideas about poverty on the research participants. In order to address this potential issue, I used a self-reflexive process of journal writing to consider power issues which arose and I was clear with participants about power dynamics. I was also cognisant of the way I presented myself (I did not wear expensive clothes or jewellery) and the language I used was straight forward. The participants were fully informed about the scope and motivation behind this research process, my background and interest in the area. Participants controlled what was discussed and were able to, and did, say when they did not want to talk about topics. For the reasons identified above, critical theory was a suitable theoretical approach to apply in this research as it allowed for an understanding of participants lives based on a recognition of the impact of social, political and economic systems on their daily lives and decision making. Similarly, a feminist position takes into account the impact politics has on everyday life.

### 3.4 Feminism

Like critical theory, feminism is not a unilateral body of knowledge but an overarching term for a wide range of positions. Feminist positions range from liberal feminism with its focus on legislative change to protect the rights of women, through to feminist separatists who argue for a utopia away from the presence and influence of men (Brown et al, 2013; Bryson, 1992; East & Roll, 2015; Letherby, 2003). Nevertheless, while there are a wide range of views within feminism, what is

common to all is the centrality of gender politics (Letherby, 2003). Feminists share a focus on inequalities based on gender and a desire to make positive change for women (Crotty, 1998; Ramazanoğlu & Holland, 2002; Stanley & Wise, 1993). This section will consider the development of feminist thought and then explore four key concepts written about by feminist scholars that shape the analysis and interpretation of data in this research. These concepts include the notion that the personal is political, patriarchal social structures, intersectionality and the questioning of binaries.

The first wave of feminism was significant in Aotearoa New Zealand as it resulted in enfranchisement of women (Bryson, 1992 & Middleton & May, 1999). First wave feminists achieved some liberal goals but did not challenge the way gender was constructed (Bryson, 2003 & Yates, 2008). During this movement feminists focused on women's participation in education and the workforce (Cimino, 2014) and in Aotearoa New Zealand, on voting rights and issues relevant to women such as married women's property rights and temperance (Coleman, 2008).



Figure 3.1: Kate Sheppard, leader of first wave feminist movement in Aotearoa New Zealand (Ministry for Culture and Heritage, 2018).

The second wave of feminism began in the late 1960s to early 1970s in the United Kingdom and the United States of America (Bryson, 2003; Cree & Phillips, 2019; David & Clegg, 2008; Middleton & May, 1999; Middleton & Weiler, 1999; Weiler, 2001 & Yates, 2008). Like a number of social movements, second wave feminism emerged in Aotearoa New Zealand later than other western countries such as the United States of America and the United Kingdom. The arrival in Aotearoa New Zealand of the second wave of feminism around the mid-1970s had an impact on the thinking of some academic women (Middleton, 1993), and like their predecessors in the first wave, second wave feminists favoured liberal reforms (Middleton, 1993; Middleton & May, 1999). Liberal feminists sought equality for women and focused on legislative and policy changes including equal opportunity programmes, pay parity with men, access to affordable childcare, and women being appointed to leadership positions in the private and public sector (Middleton, 1992). Their focus was on individual women's rights and gender equity (Middleton, 1993; Middleton & May, 1999).

Unlike the first wave of feminism, the second wave included radical feminists who challenged gendered social structures, and identified the traditional roles of women in the family and education as sites of women's oppression (Jones et al, 1990; Middleton, 1993; Middleton, 1992; Middleton & May, 1999 & Tisdell, 2003). Radical feminists emphasised women's oppression and celebrated gender differences (Jones et al, 1990 & Middleton, 1993). They borrowed the idea of consciousness raising from emancipatory politics (Jones et al, 1990). Through consciousness raising, women began to learn about themselves and understand that their everyday concerns were shared. This enabled them to situate their experiences in a political context. Hence the adoption of the slogan the 'personal is political'. The connection between personal troubles and public issues was first proposed by C. Wright Mills in *The Sociological Imagination* (1956), and later popularised by American feminist essayist Carol Hanish (1970). Outcomes from consciousness raising groups included social action,

such as the establishment of women's refuges and women's studies programmes, and the publication of Broadsheet magazine in Aotearoa New Zealand from 1972 until 1997 (Middleton, 1993; University of Auckland, n.d.).

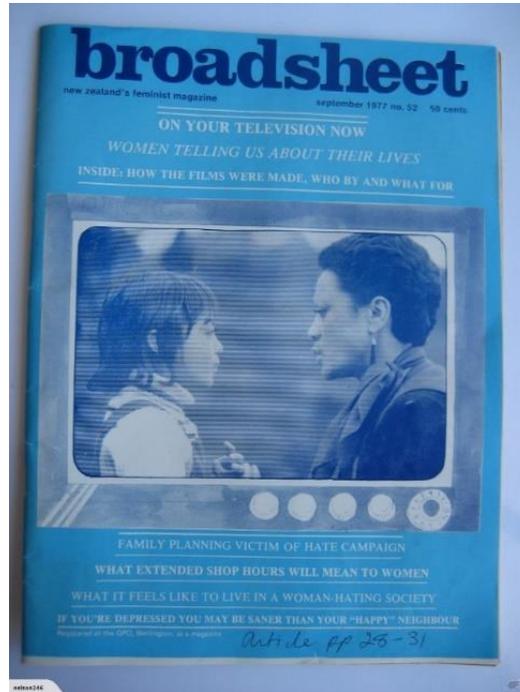


Figure 3.2: Cover of Broadsheet magazine (Photograph: Lesley Pitt)

Marxist and socialist feminist scholars considered issues of class and labour through a gendered lens (Luxton, 2014). As Marx's idea were criticised for gender blindness and an emphasis on men as workers (Brookfield, 2005), Marxist and socialist feminists paid attention to aspects of women's lives which concerned work conditions with occupations such as domestic labour (Luxton, 2014; Stanley & Wise, 1993). There are different views within Marxism and socialist feminism about whether patriarchy (discussed later in this chapter) and neo-liberal capitalism are two separate forces or are intertwined (Bryson, 2003), whether there is a capitalist patriarchy, or whether patriarchy exists as a separate social structure. What a Marxist and socialist feminist position identified was that women's oppression was "bound up with the economic system" (Bryson, 2003, p

211). Neo-liberal capitalism depends on social reproduction in that workers should arrive at the workplaces rested and cared for and also that a new generations of workers are available to replace them (reproduction and childcare). This unpaid work and these roles are predominantly carried out by women (Luxton, 2014).

While Marxist and socialist feminism went some way to acknowledging the differences between women, particularly in relation to class, the more general failure of feminism to acknowledge these differences resulted in the fracturing of the feminist movement. In Aotearoa New Zealand, Māori feminists argued that white women did not have the right to speak for them. In fact, some Māori women argued that white feminists were themselves oppressive (Middleton, 1992) as this statement from Mead (1996, p. 299) makes clear: “our rage as an oppressed group is directed at dominant white structures which sit over us, this includes white women as much as white men”. This position aligned with feminists of colour such as bell hooks who was writing about the struggle of black women within the feminist movement in the United States of America. Black and third world feminists asserted that they were treated as outsiders in the feminist movement. They did not accept their outsider position, however, and challenged the power dynamics which had led to it (Ali, 2009). In order to consider the intersection between race, gender and other identity positions, the notion of intersectionality (discussed below) was proposed and developed. This notion of intersectionality has direct relevance to this research.

Colour was not the only ground on which the feminist movement fractured; the politics of identity construction also had a significant impact. Maher and Tetrault (1996) describe this standpoint feminism where identities such as working class and feminist, or lesbian and feminist, became pivotal. Fixed identity politics was challenged by post modernism, a movement which allows for diversity and celebrates differences in positionality such as race, class and sexual identity (Flax,

1992; Lather, 1991; Maher & Tetrault, 1996 & Weiler, 2008). Post modernism gave space for the different types of feminism to co-exist without the essentialist arguments about which oppression was most significant (Davies, 1994; Flax, 1992 & Jones et al, 1990). The postmodern view of power challenged structural feminist views of oppression and post-modern feminists argued that by acknowledging differences and multiple subject positions, women can have multitudinous points of resistance to domination (Weedon, 1997). Postmodern feminists challenged the use of binaries, discussed later in this chapter.

There is a link between gender and poverty, something which the feminist literature has described as the feminisation of poverty (Brooks & Hesse-Biber, 2007; Phillips, 2009). The term refers to poverty becoming a female problem (Pearse, 1978). One area in which poverty among women is significant is in relation to sole parent, women-led families (Boston, 2013; New Zealand Council of Christian Social Services, 2005; O'Brien, 2014; Stewart et al, 2009). In the 1970s, Pearse (1978, p. 28) noted that "almost half of all poor families are female-headed". This continues to be the case in some countries, although the Nordic states are an exception to this (Kim & Choi, 2013). In Aotearoa New Zealand, women have inequitable incomes in comparison to men and have less access to income. This is a consequence of welfare policy in Aotearoa New Zealand and the way in which paid and unpaid work is organised in this society (Maidment, 2016). In this study, ten of the participants were women parenting alone.

Women's role as carers results in them bearing "the brunt of poverty more than men" (Phillips, 2009, p. 495) and this makes a feminist analysis pertinent to this study. Women are more likely than men to provide informal and unpaid care for other family members (Bryson, 2003). The provision of care means women are less available to participate in the paid workforce and therefore have less capacity to save or reap the benefits of workplace superannuation schemes and other

employment conditions (Maidment, 2016). In this research, the majority of women participants were providing unpaid care for children or grandchildren, although it is noted that two of the men in the study were also providing unpaid care, one participant for his wife and the other for his grandchildren. Below, concepts drawn from the feminist perspective are examined. These concepts include the idea that the personal is political, the notion of patriarchy, intersectionality and the questioning of binary opposites.

### 3.4.1 The Personal is Political

As mentioned above feminist scholars have drawn on C. Wright Mills theorising about the connection between personal troubles and public issues (Summers, 2008). Mills (1959, p. 5) stated “the individual can understand [their] own experience and gauge [their] own fate only by locating [themselves] within [their] period, that [they] can know [their] own chances in life only by becoming aware of those of all individuals in [their] circumstances”. Mills (1959), described personal troubles as having to do with the self and a person’s immediate relations with others. In describing public issues, Mills’ (1959) stated that they were the organisations and institutions of a society at any given historical time. The idea that personal troubles can be understood as public issues (Mills, 1959) was adopted by the second wave feminist movement and ‘the personal is political’ became a slogan used by the movement (Bryson, 2003; Letherby, 2003). During the 1970s and 1980s the establishment of consciousness raising groups encouraged women to talk about their personal problems. Women discovered that their personal troubles were shared and through collective action they could seek political solutions. Personal experience and individual oppression were reframed as having political dimensions (East & Roll, 2015; Eisenstein, 1984).

The notion that the personal is political tool is a useful tool of analysis. The personal experiences of women who live in poverty reflect the political context in which they experience

poverty. For example, women in this study made choices to forgo their own health care to ensure there was money for the needs of their children. While this is a personal choice, it is a decision made within the constraints of poverty in the context of the politics around accessible health care, income support benefit levels and the minimum wage in contemporary Aotearoa New Zealand (Health and Disability System Review, 2020).

#### 3.4.2 Patriarchal Social Structures

In this study women described experiences where patriarchal social structures impacted on their lives—for example, through the experience of intimate partner violence. Kate Millett (1971), a second wave feminist, developed a theory of patriarchy, using a word derived from the Greek word *patriarchies* which means head of the tribe (Bryson, 2003). The traditional perspective of patriarchy is the control by a powerful elder male over an extended family or kinship network which includes domination over household economic production (Bryson, 2003; Whelehan, 1995), or, at its simplest, the domination of women by men (hooks, 1982). Millett (1971) argued that sex was a category and there existed a social order in which “males rule females” (p. 25). The social order where men dominate women was sustained through hegemony where the roles ascribed to women were accepted and fulfilled (Dominelli, 2002).

While patriarchy may have some benefits for men, as a social structure it can be as destructive for men as well as for women. Patriarchy can constrain men by forcing them to adopt gender roles that they may not be comfortable with or are not in a position to carry out (Averett, 2009). In this research, none of the male research participants were employed which challenges the patriarchal notion that men provide financially for their family, the role of ‘breadwinner’ ascribed to all men by patriarchal ideologies (Bryson, 2003; Letherby, 2003; Millet, 1971).

The inclusion of men allows for a wider understanding of the experiences of patriarchy and the distress it causes some men (Ackerly & True, 2008; 2010; Hurtado & Sinha, 2008; Price, 2010). To reveal, recognise and understand patriarchy, both men's and women's perspectives are useful (Price, 2010). Five men participated in this research. While they may have had privilege due to their gender, they did not experience privilege from their income status. All five men experienced obstacles to gaining the full benefit of male privilege (Hurtado & Sinha, 2008). The obstacles for the male participants in this study related to race, disability, class position and their offending histories. Their intersecting identities shaped their lived experiences and the way they experienced patriarchy.

The idea of patriarchy has been critiqued by third wave feminists who argue that patriarchy is a meta-narrative of modernity which oversimplifies the complexities and contradictions in women's lives (Lopes, 2019). Patriarchy has also been linked to racism (hooks, 1990) in the way in which "racism denies men of color the power and privilege that dominant men enjoy" (Crenshaw, 1991, p. 1258). The nexus between sexism and racism is explored through an examination of intersectionality below (Hesse-Biber & Leckenby, 2004).

### 3.4.3 Intersectionality

All women do not share the same position in society. This challenges the idea of some feminists who argue that 'woman' is a category which results in oppression. Women of colour, lesbian women and women who have experiences which may not be shared by all women, such as being poor or disabled, experience a range of oppressions (Crenshaw, 1997; Cimino, 2014). Challenges have also been made by third wave feminists, who have critiqued their second wave predecessors, for essentialising the concept 'woman' and failing to attend to differences between women (Benhabib, 1992; Carastathis, 2014; Cree & Phillips, 2019; Stanley & Wise, 1993). The notion of an essential experience of women has now been, for the most part, dismissed in favour of a recognition of the

“plurality of women’s lived experience” (Brooks & Hesse-Biber, 2007, p. 20). When the plurality of women’s experiences is acknowledged, the fluidity inherent in the concept of ‘woman’ is accepted and allows for a recognition of intersectionality (Daftary, 2018).

The term intersectionality was introduced by Kimberlé Crenshaw (1989), a black American legal scholar. After providing legal representation for three black American women in employment discrimination cases, Crenshaw developed the metaphor of an intersection to understand her clients’ experience (Carastathis, 2014; Crenshaw, 1989; 1991). She theorised black women’s oppression using the intersection as a metaphor, hence intersectionality, and challenged the marginalisation of black women by the feminist movement (Alexander-Floyd, 2012; Carastathis, 2014; Carbado, Crenshaw, Mays & Tomlinson, 2013). Crenshaw (1991) explored the way black women (along with other women of colour) faced both sexism and racism, alongside challenges of class, in their struggle for liberation. The “intersectional identity as both women *and* of colour” (Crenshaw, 1991, p. 1244) resulted in women of colour being marginalised. Separating out experiences of sexism from experiences of racism resulted in a failure to capture the lived experiences of black women, whereas, exploring the juncture of racism and sexism resulted in a stronger understanding of lived experiences (Crenshaw, 1991; 1997).

Intersectionality is defined by Alexander-Floyd (2012, p. 9) as “the commitment to centring research and analysis on the lived experiences of women of colour for the purpose of making visible and addressing their marginalisation”. Intersectionality includes an analysis of power and consideration of how the dynamics of power result in the positioning of women (Cho, Crenshaw & McCall, 2013; Crenshaw, 1991; 1997; Carbado et al, 2013; Daftary, 2018). The experience of simultaneous oppression is captured by consideration of the interweaving systems of oppression (Carastathis, 2014; Crenshaw, 1997).

Intersectionality is an acknowledgement of differences between women and a “naming and appreciation of the influences and complexity of interlocking identities” (Anderson-Nathe et al, 2013, p. 287). Subordination as a result of the intersectionality of identities is not intentional but is the consequence of interacting vulnerabilities which causes disempowerment (Corus, Saatcioglu, Kaufman-Scarborough, Blocker, Upadhyaya & Appau, 2016; Crenshaw, 1991). People can experience oppression in multiple ways and some people are both simultaneously oppressed and privileged. For example, middle class women may experience oppression due to their gender but privilege due to their class (Dill & Kohlman, 2012). In this study, male participants experienced privilege due to their gender but oppression due to poverty. Two of the men experienced oppression due to their race.

Three aspects of intersectionality have been identified by Choo and Marx Ferree (2010). The first aspect is a focus on inclusion and on giving voice to the oppressed, particularly those who Choo and Marx Ferree (2010) describe as “multiply-marginalised” (p. 131). In this study there has been a focus on giving voice to people who are marginalised by poverty but are also oppressed due to other factors including geography. The second aspect of intersectionality identified by Choo and Marx Ferree (2010) is analytic interaction which encourages the understanding of forms of oppression as integrated rather than separate. As most participants in this study experienced oppression in more than one aspect of their lives, intersectionality was a helpful theoretical concept in understanding the oppression that impacted on their daily lives. The last aspect of intersectionality identified by Choo and Marx Ferree (2010) is institutional primacy, which encourages a wide lens when considering oppression and to avoid just looking for one site, such as the family. Participants in this study experienced oppression in multiple sites, including within their families, in housing, in employment, at WINZ, in education, and in health care.

#### 3.4.4 Questioning of Binaries

Unlike feminists who consider the category 'woman' to be a fixed position (as opposed to men), a post-modern feminist stance challenges this binary, questioning whether categories such as man and woman exist as opposites (Anderson-Nathe et al, 2013; Bryson, 2003; Gringeri & Roche, 2010). The use of other binaries, for example, rich/poor or rural/urban, are challenged from a post-modern feminist position, since they are regarded as mechanisms to divide and constrain (Benhabib, 1992; Gannon & Davies, 2012; Stanley & Wise, 1993). In relation to this research, binaries of rich/poor or victimiser/victim placed the participants in subject positions which were fixed and not reflective of their lives.

The concept map (Figure 3.3) illustrates how the principles of critical theory and feminism are integrated to inform this research endeavour. The area in the middle of the map shows the nexus where concepts from both theories are shared. Critical theory and feminist theory have in common a shared understanding that knowledge is fluid and understandings of the world are social in nature and contextualised to a particular time and place. Also shared is the concept that language, the way words are used to describe and label, is the way in which understanding of the world is gained. The notion there is one 'truth' to be discovered is challenged from both positions, leading to a critique of the positivist approach to research, where the researcher is an objective outsider seeking to find out the 'truth' about what is being studied. Both perspectives take an overtly political stance based on social justice and seek social change. Conscientisation is a process shared by critical theory and feminism with both theories focused on praxis, the idea that reflection on society should lead to action (Freire, 1993; MacKinnon, 2009). In reflecting on society, both perspectives advocate for the interrogation of power and the way power is used to oppress and to resist oppression.

Figure 3.3: Concept map of epistemological and theoretical research influences



### 3.5 Feminist Research

In this section of the chapter, I will explore my use of a feminist methodology in this research.

Feminist methodology allows for an overtly political approach, congruent with research informed by critical theory (Anderson-Nathe et al, 2013; Shayne & Leissle, 2014). The slogan ‘the personal is political’ is fundamental to feminism as discussed above (Stanley & Wise, 1993), and is a concept used throughout this research. A feminist research process has been described as “seeking to transform private knowledge into a more publicly based resistance, or at least a diversification and undermining of hegemony” (Ribbens & Edwards, 1998, p. 13). As such feminist research is critical, transformative, seeks social change and requires researchers to be self-aware and reflexive (Diver & Higgins, 2014; Fine, 1992; Seibold, Richards & Simon, 1994; Shayne & Leissle, 2014; Undurraga, 2012).

Validating the experiences of women is the intent of feminist research, particularly those experiences that have been denied (Fonow & Cook, 1991; Reinharz, 1992; Smith, 1990). The reality of poverty in Aotearoa New Zealand is denied by right-leaning politicians as evidenced by a headline in *The Guardian* newspaper (International Edition) on 6 September 2016: “New Zealand needs migrants as some Kiwis are lazy and on drugs, says PM” (Ainge Roy, 2016, n.p.). This headline demonstrates the stigmatising public discourse about beneficiaries being people who are unemployed or poor because of their individual inadequacy. I was concerned that participants in this research may feel they were going to be criticised and considered failures, therefore I wanted to start interviews by reassuring participants I was not going to judge them. Participants appeared to relax after I stated my view about poverty being an injustice and they were often interested in this view (Fraser & MacDougall, 2017; Reinharz, 1992). As a feminist researcher informed by critical theory, I was aware of the way in which the dominant political ideology in Aotearoa New Zealand,

neo-liberal capitalism, framed experiences and influenced how people made meaning of their lives. Enabling participants to talk about their lives and experience of poverty was a way to gently challenge hegemonic thinking if participants had accepted their own oppression and normalised it (Clandinin & Rosiek, 2007; Fraser & MacDougall, 2017; Riessman, 2001). When participants diminished their hardship in interviews, it provided an opportunity to explore this hegemonic thinking which helped them to identify the injustice of their situation. This was evidenced when participants talked about being grateful for their benefit. In response to this, I suggested their benefit was a right rather than a privilege.

The belief that reality is socially constructed rather than a 'truth' which can be known is part of the feminist position (Berger & Quinney, 2005; Speedy, 2008). Participants in this research told stories of survival, resistance, creativity and competence which were counter to the dominant stories within society about the poor as inadequate individuals. Poverty can be stigmatising (Dowling, 1999; O'Brien, 2013a; O'Brien, Dale & St John, 2011), therefore it was crucial this research did not reinforce stigma or powerlessness for participants (Fraser & MacDougall, 2017; Josselson, 2013; Kvale, 2005). To counter stigmatisation, the process of interviewing was one of affirmation and validation (Josselson, 2013; Speedy, 2008). Feedback after interviews indicated that participants felt validated through the interview process and became conscious of how well they had coped with poverty.

Intersectionality was discussed earlier in this chapter and an awareness of the intersecting nature of oppression was drawn on during the research. A "commitment to avoid essentialist views of experiences" (Pitre & Kushner, 2015, p. 286) meant being aware of the social location of participants and of their particular experience of oppression (Hirschmann, 2012; Yuval-Davis, 2016). The social location of participants at the time of interview was not fixed but represented that particular time and place in their lives (Doan, 2010; Gordon, 2016; Paulson, 2016; Pitre & Kushner,

2015). For example, one participant became employed full time after participating in this study which changed the economic position of her whānau. While some participants had experienced life-long poverty, others had not and for different reasons had become poor. Participants' situations changed for a number of reasons such as their relationship status, employment, pregnancy and if how many children they cared for changed. One participant experienced poverty after she and her children moved to a home with her partner and his children.

Traditionally, feminist literature advocates a 'for women, by women' approach to research (Reinharz, 1992). However, Price argued that "as many differences exist between women as between men and women" (Price, 2010, p. 82). Men were included in the sample for this research in recognition that commonalities of experience are evident between poor women and poor men (McDowell, 1999; Paulson, 2016). The lives of rural men are impacted by patriarchy, particularly poor men, which can be explored by using a feminist analysis as discussed above (Price, 2010). The five men who were interviewed for this research were experiencing oppression caused by poverty alongside women (Ackerly & True, 2008; Hurtado & Sinha, 2008). As the men in this study were poor, they did not have the same access to power and patriarchal privileges that other men in the community had (Hurtado & Sinha, 2008). The men were interviewed using the same approach as the women and there was little difference in the nature of interviews between male and female participants. Gatrell (2006) also used a feminist approach in her research with men and women and "noticed surprisingly little difference between interviews with male and female respondents" (p. 248). Of the five men interviewed, three were interviewed with their partners and two were interviewed on their own.

Feminist researchers advocate for reciprocity between researchers and the researched (Oakley, 2016). When carrying out feminist research 'giving back' to participants is considered

important (Lather, 1991). 'Giving back' to research participants demonstrates reciprocity through give and take between researchers and participants. The giving of vouchers (discussed in the next chapter) was one way in which reciprocity was demonstrated, alongside advocacy when appropriate, such as writing letters of support for participants to give to their WINZ case managers. The idea of giving back in research is fluid and "difficult to track" (Diver & Higgins, 2014, p. 5). Feminist researchers may be left with a sense that they have taken more from participants than they can give back (Oakley, 2016).

The need to be detached and removed, encouraged in some other forms of research, is not supported in feminist research (Oakley, 1981; Stanley & Wise, 1993). A feminist approach allows for the presence of the researcher, and for the inclusion of "the researcher as a person" (Reinharz, 1992, p. 240). If a researcher is detached and removed, they may present as odd or cold (Stanley & Wise, 1993). Part of a feminist approach is to be engaged with research participants and build relationships based on trust. When participants trust a researcher and have a relationship with them, they may be more inclined to be open in their disclosures and talk freely of their experiences (Diver & Higgins, 2014; Fonow & Cook, 1991; Goerisch, 2017; Hesse-Biber & Leckenby, 2004; Reinhartz, 1992). Feminist researchers critique the idea of an objective and detached researcher in favour of acknowledgement of subjectivity and the incorporation of "subjective elements into the research process" (Jayaratne & Stewart, 1991, p. 98). In this study I did not act as a detached gatherer of data, rather I was engaged with participants and showed them I was not only interested in what they had to say, but I was also interested in developing a relationship with them (Mies, 1991; Reinhartz, 1992).

In some interviews, I acknowledged the interconnectedness between myself and the participant. For example, my mother had played golf regularly with a participant's grandmother and I acknowledged this link. The development of trust and building purposeful relationships with

participants was enhanced where there were connections outside of the research relationship. However, some participants did not show an interest in making connections in this way. This was especially the case for participants who had moved into the community and did not have long term or familial links in the community, as opposed to those born in the study area who did.

In-depth qualitative feminist interviewing gives participants some control over the interview process and the power to decide what to talk about and how to talk about it. A flexible approach was taken in interviews. At times this was not useful to the research but was in the best interests of the person being interviewed. For example, one interview was ended before the conclusion of the interview as the participant's family arrived to transport her to the supermarket. As this was a free trip essential for her to meet her needs, the interview was concluded early.

The power dynamics within interviews can be subtle. The researcher sets the agenda and shows interest in certain topics and not others (Presser, 2005), but participants are in control of what information they share and how they talk about their experiences. In relation to feminist interviewing, feminist researchers have argued that relationships should be non-hierarchical and based on processes of reciprocity and sharing of experiences (Bhopal, 2010; Niskodé, Pasque & Nicholson, 2011). In reality, the power dynamic between researchers and participants can be difficult to mitigate. In this research, attempts were made wherever possible to 'even out' the power difference. However, distinctions between the participants and myself were present and likely impacted interviews. There were differences in relation to privilege which were evident in interviews, such as my level of education being higher than all participants in the study.

The concept of partial identification rather than total identification is outlined by Mies (1991). She argues that researchers can empathise with participants but cannot ignore their differences and

the access to power they have as a researcher. Partial identification and the 'evening out' process was apparent with a participant who made it clear he was willing to talk about poverty in return for being able to talk about what he wanted to discuss, his relationship problems with his partner. The power dynamic in the relationship between myself and this participant was based on an arrangement where each of us could meet our needs. Prior to our interview this man had not had an opportunity to talk with someone outside his family about his relationship.

A number of participants made the statement that they were helping with my research, which represented a shift of power in that they positioned themselves as being active contributors to the research process. This aspect of feminist research practice is discussed by Fraser and MacDougall (2017) who argue that research should disrupt power relations and allow participants to talk about themselves in ways where they have agency and are able to express their hopes and dreams for the future. Being aware of possible power dynamics meant that power differences were not exacerbated or power used in harmful ways (Goerisch, 2017). For example, when interviewing young women, I accepted there was a significant difference in age between us. However, connections were made with them in areas of shared experience, such as motherhood or growing up in farming communities. The youngest participant in the study said that it was good to have "someone different to talk to" than the people she had contact with in her every-day life.

Feminist interviewing should be an affirming and personally empowering experience for participants (Clover, 2011; Lather, 1991; Pini, 2002). I looked for opportunities to validate participants. One participant had Parkinson's Disease and attended a day centre where she painted; I admired her artwork on the wall. I was shown into her spare room where she had more paintings. In another participant's home, I was also shown her painting. I affirmed her ability although her subject matter, Christian scripture, was not part of my world view. While I do not share this participant's

world view, I was appreciative of the significance of her faith to her and the sense of meaning and community it provided.

Differing world views posed a problem between myself and one participant during an interview when she expressed racist ideas. I did not want to directly challenge her views as I was a guest in her home. I chose instead not to comment on what she was saying and led the conversation in another direction. My role as researcher was not to challenge her value base, and while I do not agree with her position, our relationship was based around her role as the interviewee and my role as the interviewer (Finch, 1984). There was also an issue of trust in the relationship and I wished to maintain her trust in me (Clover, 2011; Reinharz, 1992).

Feminist researchers comment on the way race, class, and age can affect the research process (Bhopal, 2010; Fraser & MacDougall, 2017). Differences in race, class and age were present in most interviews. Four interviewees described themselves as Māori, identifying four different Iwi affiliations, none based in the study area. One participant stated he had grown up in Africa and another identified as British. Generally, participants chose not to identify their ethnicity within the interview. There were class differences based on level of education and previous occupations between me and some (but not all) of the participants. Participants had been employed in a variety of roles: a banker, an early childhood teacher, in an accounting role, and as a secretary. Another participant had a tertiary qualification as a chef but was unable to obtain work. Likewise, another had qualifications in horticulture but was not working. My level of education was higher than participants and I have worked in social work and tertiary education as an adult. I grew up on a farm in the study area which was owned by my father. As I had a middle-class upbringing, I was careful not to talk, dress or act in ways which reinforced class differences. As a social worker, I have always presented myself in ways which minimise difference, including making sure the language I use is easy

to understand. I was mindful that the status and identity of the researcher has an impact on the relationships built during research and the above examples are evidence of this (Bhopal, 2010; Fraser & MacDougall, 2017; Undurraga, 2012). While researchers cannot hide or change their identity, they can be aware of their range of intersectional positions (Fraser & MacDougall, 2017).

Downplaying professional status was discussed by Reinharz (1992) who argued it is appropriate to do so when working with people who have low levels of trust in professionals. Some participants had contact with social workers in the past and one participant had her children removed from her care by the Department of Child, Youth and Family (now known as the Ministry for Children, Oranga Tamariki). As I was seeking to build a trusting relationship with participants, I did not want to be perceived as a powerful professional but as a person who they felt comfortable talking with.

### 3.6 Positioning of the Researcher

Paying attention to the interconnections and relationships between participants and researchers is an integral part of feminist research (Huisman, 2008; McDowell, 1999; Reinharz, 1992). Part of building relationships with participants required a personal investment from myself (Diver & Higgins, 2014; Finch, 1984; Huisman, 2008; Letherby, 2003; Stanley & Wise, 1993) and sharing of personal information. For example, one participant had a dog, so I talked briefly about my dog in order to make a connection with him. If a participant was not interested in my self-disclosures based on their facial expressions and lack of response, I stopped. Overall, I kept self-disclosure to a minimum and if self-disclosure was not of benefit to the participant or our conversation, I did not talk about myself. I was aware that self-disclosure would increase my own vulnerability (Reinharz, 1992), therefore the aspects of myself which were disclosed were those things I might consider discussing in a public setting.

One participant appeared to dislike social workers as her family had contact with Oranga Tamariki in the past. In this instance, I was careful about how I asked questions. The need for care in this interview was important and this was made clear when I used her deceased dog's name during the interview. She asked me forcefully how I knew her dog's name. When I told her that it was because she had used it earlier in the conversation and that I had remembered it, she relaxed. This was the only interview in which I felt the participant was suspicious of my intentions.

### 3.7 Being an Insider/Outsider Researcher

Insider research is defined as research carried out by people who are already members of the community they are studying (Humphrey, 2012). Within this research, I was both an insider and outsider in the community where the research was conducted. I grew up in the community where the study was carried out. While members of my family continue to live there, I am now also an outsider as I no longer live in the area. Feminist researchers acknowledge that insider/outsider status is a complex and contradictory dynamic which is fluid and intersects with structural differences (Doucet & Mauthner, 2008; Goerisch, 2017).

As with other marginalised populations, the participants were at times wary of me if they perceived me as an outsider. Smith (2013), talking about a rural community in Aotearoa New Zealand, said "there is usually an initial reluctance to newcomers" (p. 20). I told participants that I grew up in the area, and, when appropriate, made connections through my family. I was aware during one interview that I had known a relation of the participant at school. This connection was not current (it was prior to the participant's birth) but the conversation gave her a familial link she could use to situate me and 'check me out' with her family member if she wanted to. In this situation, I was clear that I would not share information from our interview with her family or my own.

### 3.8 Conclusion

Using feminist principles in the research required that I acted with sensitivity to the participants needs. Feminist researchers address uneven power relations in research through reflexivity and an awareness of power and positionality (Diver & Higgins, 2014). Reciprocity is encouraged within feminist research and I gave back to participants by building positive relationships, advocacy at an individual and societal level, and through the provision of grocery vouchers (discussed in the next chapter).

Consciousness raising and working to create social change to improve the lives of those who are studied and the wider population (in this instance, the rural poor) are a part of research processes informed by critical theory and feminism. This approach necessitates gaining a deep awareness of the way in which peoples' lives are political and understanding how theoretical concepts such as patriarchy, intersectionality and the notion that the personal is political provide a way of understanding of the lived experience of oppression.

## Chapter Four: Research Design

This chapter provides a detailed account of the how this research was conducted, including the qualitative approach used, how decisions were made about data collection processes, and the method used for data analysis. The chapter begins with a discussion about the role of stakeholders and others who were identified as having knowledge about poverty within the Stratford district. Some stakeholders were also intermediaries in the recruitment process. Focus is placed on the way participants were recruited and interviewed and how their safety was secured using a strong ethical framework. Demographic information about the twenty-eight participants is then outlined. The chapter then goes on to explain how visual images are used in the thesis to provide a sense of the place in which participants live. I discuss the data collection process, which included semi-structured qualitative interviews, transcription of the interviews and the taking of fieldwork notes. Writing fieldwork notes was a critical component of the research and the use of the fieldwork journal for critical reflection is explored in some detail.

This chapter also examines the importance of having a strong ethical foundation for research involving marginalised participants and considers Te Tiriti o Waitangi considerations. As this research involved interviewing participants about a sensitive subject, their protection was crucial. The chapter details the applied thematic approach to analysing the interviews and fieldwork notes. An applied thematic approach provides a structured process for developing themes from large amounts of qualitative data (Guest, MacQueen & Namey, 2012). A brief summary identifies key themes from the coding process explored in greater depth in Chapters Five, Six and Seven before a commentary on the trustworthiness of the research, which focuses on the authenticity of the interview data collected and analysed. The chapter concludes with a discussion about the limitations of the research design.

## 4.1 Methods

A qualitative approach was used in this study where the experiences and perspectives of people experiencing poverty was gathered (Bhopal, 2010; Finch, 1984; Letherby, 2003; Reinharz, 1992). Qualitative research is a way of “making the world visible” (Denzin & Giardina, 2010, p. 14) and this study provides visibility and captures the voices of twenty-eight poor people who live rurally. The purpose of qualitative research is to provide rich data, to describe people in their environment, and to understand their daily lives (Holosko, 2019; Patton, 2015).

A narrative approach was initially proposed for this study as it may have been a familiar format for rural participants who would be used to story-telling as a way of communicating (Merritt & Turner, 2013; Smith, 2013; Towney, 2005). As fieldwork progressed it became evident that the nature of interviews resembled in depth qualitative interviewing using feminist principles rather than narrative interviewing. While initially it was thought the story telling nature of narrative research (Lawlor, 2002; Lewis & Adeney, 2014) would be helpful, it was clear that the material nature of poverty could be better addressed by qualitative interviewing using a critical theory lens. The linguistic focus of a narrative approach did not lend itself to the thematic nature of the research, where what was said by participants would need to be collectivised in order to advocate for policy change in relation to rural poverty.

## 4.2 Stakeholders

The research engaged with stakeholders, sometimes referred to as key informants. Stakeholders can be either lay people or professionals (Brereton et al, 2017) and can be helpful with informing the design of research and may also be involved in the dissemination of research findings (Brereton et al, 2017; Tolley, Ulin, Mack, Robinson & Succop, 2016). Stakeholders were identified as people who

would potentially be interested in the research and who had knowledge about the subject of the research.

The meetings with stakeholders were held in the early stages of the research process at a time when the study scope and focus were being developed. The purpose of the stakeholder meetings was to establish what work was being done with the poor in Stratford district, to find out what the stakeholders considered were key issues for the poor they worked with or had contact with, and to find out what services were available in the area. Some stakeholders had knowledge about poverty in the Stratford district but were not directly working in the area, such as the manager of a community development organisation who oversaw projects in Taranaki including Stratford district. Discussions with stakeholders were useful as they had particular knowledge of the study area and could identify issues relevant to the poor in the area. For example, a religious leader had concern about the impact of transience on the children in the Stratford district.

Stakeholders I spoke to included: the manager of a youth and family service in the Stratford area; a person who staffed a foodbank; a counsellor with a private practice in Stratford; the manager of an organisation which was involved with community development throughout Taranaki; a religious leader; a Community Development Advisor; a photographer who had taken portraits in the research area; the fieldworker of an organisation supporting adults who have been imprisoned and their families; the manager of an organisation which distributes food in the area; a community researcher, a WINZ advocate and a family social worker associated with a social service agency. It is noted that some stakeholders suggested others who might be useful to talk with. For example, the manager at the community development agency suggested I meet with a religious leader in the Stratford district.

Information was gathered from stakeholders about their experiences of working with the rural poor in Stratford district or about their contact with the rural community, such as in the case of the photographer. Detailed fieldwork notes were taken after these conversations to ensure the content of the conversations were recorded for later reference. However, these meetings were not recorded and the notes taken were used as a memory prompt rather than as data used in findings. Some stakeholders, like those who worked in social service delivery roles, were asked if they would be willing to be intermediaries in the recruitment of participants. These stakeholders, therefore, had a dual role in relation to the study. If stakeholders did not have direct contact with potential participants, they were not asked to be intermediaries in recruitment. Stakeholders provided useful contextual information about the Stratford district and about their awareness of poverty in the area which helped inform the focus of the semi-structured interview schedule.

#### 4.3 Recruitment of Participants

This section explores the process used to recruit participants for the study. The recruitment approach was part of the ethics application approved by the University of Canterbury Human Ethics Committee on 26 March 2015 (see Appendix 1). An important consideration as part of the recruitment was the safety and needs of participants. Having an intermediary meant that I did not directly approach participants, although one participant asked me directly, in person, if she could participate. This participant was a support person for her friend during her friend's interview. After her friend's interview, she said she was keen to participate in the study and was supplied with an information sheet and consent form, and an interview time was arranged.

As noted above, some of the stakeholders were asked to be intermediaries. The stakeholders decided whether or not they would assist in recruiting participants based on the conversations I had

with them and from the information contained within the participant information sheet and consent form (see Appendix 2) supplied to them. As only a small number of participants were recruited by stakeholders, other professionals working in the Stratford district were approached to be intermediaries. They were contacted to ask specifically if they could refer potential participants to the study and were not part of the individual stakeholder meetings. The research was explained to all intermediaries, whether or not they were stakeholders, and they were provided with participant information sheets and consent forms both for their own information as well as copies to pass on to potential participants. While it was intended that the use of intermediaries would recruit enough participants for the study, it did not generate the numbers needed for an adequate sample. Consequently, snowball sampling was then implemented. The reasons for difficulties recruiting participants in this study will be discussed later in this chapter alongside factors which proved useful to recruitment.

A snowball sampling approach engages participants in recommending further participants through their contacts (Babbie, 2017; Davidson & Tolich, 2003; May, 2011). It can be particularly effective in accessing hard to reach populations (Sadler, Lee, Lim & Fullerton, 2010). At the end of each interview, I asked participants if they knew anyone else who might be interested in taking part in the study. If they indicated they might know people who would be interested in participating, I left information sheets and consent forms with them. Participants were positive about recruiting others and were helpful in the recruitment process. The nature of snowballing and the small community context meant participants knew about each other and that they were participating in the same study. At times, this meant participants made reference to each other during interviews, and made comments which supported each other's interview material (such as in relation to intimate partner violence discussed in Chapter Seven). Snowball recruitment was useful in gaining access to research

participants and ensured that participants knew I was trustworthy and a safe person to talk to. There were ethical issues in relation to participants knowing each other, and issues of consent, such as whether participants knew what they were consenting to in agreeing to participate in the research. In regards to participants having existing relationships, I was careful to ensure I did not discuss other participants when interviewing and in this way kept strong boundaries around each interview. In relation to consent, I checked consent in my first contact with participants which was when they sent me a text message. If they wanted to continue to an interview, I then went over the consent process before beginning the interview to ensure their consent was informed.

At no time did I make direct contact with potential participants to seek their willingness to take part in the research, although as stated above, one participant asked me if she could take part in the study. If a potential participant was given a research information sheet from a friend, family member or social service or social worker, they made contact with me, usually via text message, volunteering to take part in the study. A target of twenty people was set for recruitment of participants and this target was met. In the end twenty-eight participants were interviewed. This was considered a large enough sample size to draw out meaningful themes from the interview data (Clandinin, 2013; Pinnegar & Daynes, 2007). Most participants lived in the Stratford district and the area surrounding the Forgotten World Highway. Some were beyond it, but still within the surrounding districts. Participants outside the Stratford district were interviewed where it was considered their stories contributed to the study and they met other criteria of the study, that is, they lived rurally, experienced poverty, and were willing and able to participate.

The wordiness and complicated nature of the information sheet may have created a barrier to recruitment as lengthy information sheets can be a barrier to research participation. This barrier was commented on by Renert, Russell-Mayhew and Arthur (2013), who, in discussing their own

research, described how they changed their recruitment material after receiving feedback that their information sheet was difficult to understand. With this in mind, prior to each interview, I verbally described the study and ensured participants understood what they were consenting to. This process was also helpful in building trust by being able to outline my interest in the topic when first meeting participants.

#### 4.3.1 Role of Intermediaries

During the proposal stage prior to the commencement of this research, social workers and social service workers in five non-government organisations working in the Stratford district were approached to ask if they would be willing to distribute information sheets to potential participants. Workers in these organisations gave a commitment to supporting the research with referrals for suitable participants. When the proposal for the research and ethical approval was obtained, I approached the staff in these organisations again. Two of the organisations had personnel changes from the time I talked with them, and these changes in staff may have potentially compromised the effectiveness of participant recruitment. Recruitment was also impacted by the decision of the manager of one social service organisation to only permit ex-clients of the service to be approached to participate in the study.

Gatekeeping affected recruitment in this study. The gatekeeping of social service workers in relation to recruiting research participants has been discussed in literature (Herzog, 2012; Nicholson, Colyer & Cooper, 2013; Renert et al, 2013). Intermediaries may have been too busy to recruit participants, suspicious about the research, not considered it relevant or were protective of their client group and concerned about what would be said about their own work and services. All of these factors appeared to impact on recruitment of participants by intermediaries for this research.

The desire to protect clients was evidenced through an email response from a stakeholder indicating that she was not willing to ask people she knew to participate in the study. She said that she made the decision in light of the need to protect privacy, and in her view, that being interviewed for this study would undermine a person's dignity. In another example of gatekeeping a social service practitioner when provided with the information sheet about the study, stated she was unwilling to give this to her client group as she considered the use of the word "poverty" in the recruitment material to be stigmatising. However, in order to ensure recruitment for the study did not stigmatise potential participants, during the pre-test interviews with people who would potentially meet the inclusion criteria for the research, the use of the word poverty was discussed and the feedback from them was that they felt comfortable with the term poverty as it accurately described their experience.

When recruitment for the study was difficult and the study did not have enough participants, it was decided to approach staff in other social services working in the study area. Approaches were made to fifteen other social service agencies and professionals and five churches. I provided information sheets and consent forms to each service and church organisation to pass on to potential participants. A worker from one of the agencies posted on their Facebook page a request for research participants, to which two people responded. A request was also made at a meeting of the Taranaki branch of ANZASW which resulted in the recruitment of four participants who attended a support group run by branch members. The Local Advisory Group of the Bachelor of Social Work degree at WITT was also approached with a request for participant recruitment. The study was outlined to members of the Local Advisory Group and they were provided with introductory letters and consent forms to supply to potential participants.

#### 4.3.2 Research Incentives

To encourage participation I decided to use an incentive to assist recruitment of participants. Research incentives have been helpful in recruiting hard to reach populations in other studies (Killawi, et al, 2014; Renert et al, 2013 Slomka, McCurdy, Ratliff, Timpson, & Williams, 2007). Each participant, or couple, was given a \$50 grocery voucher to recognise their contribution to the research and their expertise. There is discussion in the literature about the use of incentives and the types of incentives used (Killawi, et al, 2014; Renert et al, 2013). While incentives are recognised as helpful in recruitment, they can be seen as compromising the free giving of consent and may result in participants contributing for the incentive rather than a genuine desire to take part in the research (Nicholson et al, 2013). I regarded the voucher to be a demonstration of reciprocity. Giving the voucher was a tangible way in which participants could be given something at the time of interview to acknowledge their contribution to the study (Nicholson et al, 2013). The vouchers were appreciated by participants, some of whom indicated they were using the voucher as a way of managing their budget. I also showed my appreciation to participants for their contribution to the study, both at the time of interview and by sending a thank you text the day after their interview.

#### 4.4 Participants

Of the twenty-eight participants in the study, five of them were male. Twenty-two of the participants were New Zealand European, four were Māori, one was British, and one participant was from Africa. While the person from Africa shared their country of origin during the interview, it has not been included to protect their identity. Three participants were under 20, five were between 20 and 30, eleven were between 30 and 40, four were aged between 40 and 65, and five participants were over

65 at the time of interview. Table 4.1 below provides participant information including name (a pseudonym), age bracket, self-identified ethnicity, and each participant’s housing status.

Table 4.1: Participant demographic information

<b>Name</b>	<b>Age</b>	<b>Ethnicity/Nationality</b>	<b>Housing</b>
Emily	15-19	New Zealand European	Boarding with family
Hannah	15-19	New Zealand European	Rental accommodation
Sally	15-19	New Zealand European	Homeless
Ashley	20 -24	New Zealand European	Rental accommodation
Moana	20-24	Māori	Rental accommodation
Daniel	20-24	New Zealand European	Rental accommodation

Amy	25-29	New Zealand European	Rental accommodation
Kayla	25-29	New Zealand European	Rental accommodation
Hine	30-34	Māori	Rental accommodation
Brittany	30-34	New Zealand European	Rental accommodation
Steph	30-34	New Zealand European	Own home
Megan	30-34	New Zealand European	Rental accommodation
Nicole	30-34	New Zealand European	Rental accommodation
Kyle	30-34	New Zealand European	Own home

Aroha	30-34	Māori	Own home
Jennifer	35-39	New Zealand European	Rental accommodation
Crystal	35-39	New Zealand European	Own home
Kelly	35-39	New Zealand European	Rental accommodation
Jason	35-39	New Zealand European	Rental accommodation
Michelle	40-44	New Zealand European	Rental accommodation
Lisa	40-44	New Zealand European	Rental accommodation
Karen	50-54	New Zealand European	Own home

Susan	55-59	New Zealand European	Own home
Pat	65-69	New Zealand European	Own home
Rawiri	65-69	Māori	Boarding
Carol	70-74	British	Own home
Robert	70-74	Born in Africa	Own home
Nancy	75-79	New Zealand European	Own home

The relationship status of participants was diverse. Twelve were single, three were in relationships but did not live with their partners, and thirteen participants were married or in de facto relationships. Nineteen of the participants had in their care either their own children, stepchildren, grand-children or other children to whom they were related. One participant had children who were not in their care, but who they saw regularly. Two other participants had children who were in the care of a family member.

In relation to income, twenty-three participants were beneficiaries (one of these participants worked when her employer needed her assistance, earning less than \$80 per week). Three participants had a partner in full time employment, and two had part time employment and their

partner was employed full time. Fifteen participants rented their home, ten participants owned their home, two were boarding, and one was homeless at the time of the study.

Five participants talked about injuries or health issues which affected their mobility and one participant lived with a head injury as a result of intimate partner violence. Diabetes was the most common illness named by participants with five people reporting they had the condition. One participant had type 1 diabetes while the other four had type 2 diabetes. Four participants identified that they had depression, one participant had post-traumatic stress disorder, and two participants said they had addictions. Two participants had asthma, two had heart conditions, and one participant was in what she described as the late stages of Parkinson's disease.

#### 4.5 Use of Visual Images

Maps and photographs have been used in the presentation of this research to evoke in the reader a sense of place; that is, the context in which the research was carried out (Oh, 2012). The intent of using visual images in the documentation of this research was to engage with readers and enhance their understanding of participants' lives (Leigh, 2016; Mulcahy, 2015). Photographs and maps have been used to show places of significance to support the written descriptions of them and to contribute to the understanding of the context of the study (Collier & Collier, 1986; Leigh, 2016; Pink, 2007; Rose, 2015). Maps visually show the geographic location of the study and photographs have been incorporated to convey a sense of the nature of the environment in which participants lived. Photographs can capture what can be difficult to express in words, especially in relation to the ambiance of a place (Tinkler, 2014). In this way, visual images can contribute to meaning making beyond language (Hinthorne, 2014).

While photographs provide a visual account of places (Leigh, 2016; Tinkler, 2014), they also convey a different view or way of thinking about a location or topic (Leigh, 2016; Tinkler, 2014). Indeed, Hinthorne has described photography as “visual field notes” (Hinthorne, 2014, p. 509). The use of photographic documentation has a long history in ethnographic research as a way of bringing social issues to the fore (Bryant, 2015; Pink, 2007).

I was aware that photographs are constructions shaped by the photographer’s point of view (Leigh, 2016; Tinkler, 2007) and as such they are subjective and dependent on the ‘eye’ of the person taking the photograph in their choosing of the image (Collier & Collier, 1986; Leigh, 2016; Pink, 2007). It is important to note that any photograph is partial and captures a moment in time (Gallagher & Kim, 2008; Leigh, 2016; Tinkler, 2007). Photographs, including digital photographs, are not copies of observed reality but constructions based upon the equipment used and the choices of the photographer about what to photograph and how to go about taking the photograph. In this research, I have taken photographs and used them to demonstrate the landscape of the study area, such as the one below taken from the Pohokura Saddle to the east of Stratford.



Figure 4.1: Top of the Pohokura Saddle (Photograph: Lesley Pitt)

The decision of where to take the photograph from and what to include in it was based on practical considerations such as ease of access from the road and suitable vantage points. The above photograph was taken from the top of Pohokura Saddle where there is room to park on the side of the road and a good vista of the hill country. The top of the saddle was chosen as a place to photograph as the vista is a good representation of what the land looks like in the east of the study area.

Other photographs were taken to demonstrate an aspect of life within the community. Fostering social connectedness was a way in which participants in the study coped with poverty. Many relied on informal support networks in order to survive. The following photograph is of a sign for the Dean Cup, a yearly rugby union competition between three communities in the east of the study area, Whangamomona, Strathmore and Toko (discussed in Chapter One).



Figure 4.2: Sign for the Dean Cup (Photograph: Lesley Pitt)

No photographs have been taken of participants or their homes or other identifiers in order to protect their identities (Leigh, 2016; Rose, 2015).

## 4.6 Data Collection

### 4.6.1 Conducting the Interviews

A loose structure and flexible approach was used during interviews (Oakley, 2000). While there was a schedule of questions (see Appendix 3) which could be asked during interviews, the conversations were semi-structured, and the questions only referred to if the conversation stopped. Questions were kept 'in the background' as they were counter to a feminist approach in which participants have time and freedom to tell their stories. Interview questions, when asked, were in everyday language, clear and purposeful (Kvale, 1996; Merritt & Turner, 2013; Riessman, 1993). Elliott (2005) advocated using simple questions which relate to lived experiences. The style of interviewing was conversational as this style is effective in building connections and encouraging participants to talk about their lives (Devault, 2004; Finch, 1984).

Participants controlled where and when interviews were conducted. Giving participants control is consistent with a feminist approach to research where, as a researcher, you seek to reduce the power between participants and yourself (Letherby, 2003; Stanley & Wise, 1993). Interviews were generally during school hours if participants had children. The majority of participants chose to be interviewed in their home as this may have been where they felt most secure (Letherby, 2003; Undurraga, 2012). When interviewing people in their homes, I asked them where they would like me to sit, giving power to the participants to place me in their space. Some participants placed me at the kitchen table, others in the lounge room. In one instance I sat on the deck outside as this participant wanted to smoke cigarettes while we talked. As an experienced social worker, I am used to visiting people in their homes therefore interviewing in this way was familiar. There are potential safety issues when interviewing people in their homes (Herzog, 2012; Letherby, 2003); however no safety issues arose. Interviewing participants in their homes can also be problematic due to interruptions (Shedlin, Decena, Mangadu & Martinez, 2011). In this research, an interview briefly stopped while a gas heater was connected in a rental home and another interview was interrupted by visitors, resuming when the visitors left.

Carrying out interviews in participants' homes had a number of advantages and was a way of allowing participants to feel in control and comfortable (Renert et al, 2013), thereby helping them to maintain personal power within the interview (Oakley, 1981). Being in participants' homes allowed them to point out items they were talking about, which was helpful in relation to gathering data. Being able to see the environment in which people lived was useful as it provided the context for what was being discussed. For example, during one interview, I was shown ripped curtains which the participant could not afford to replace.

At times, interviewing in homes meant there were others present or who appeared during the interview. The effect of the presence of others is difficult to measure. Generally, if other people were on the property where the interview was held they were not present in the room. However, one participant had her adult daughter present for part of the interview and another participant had her friend present, which increased the participant's level of comfort. Another participant's teenage grandson was in the house for the duration of the interview, being home from school due to ill health. He went to a bedroom shortly after the interview started at the request of the participant. Other participants had their children or grandchildren present, often watching television.

As a researcher, I considered it important to limit my impact on the lives of participants and to create an environment which was as relaxed as possible (Oakley, 1981; Speedy, 2008). Interviewing participants in their homes required engaging with children and animals, things such as patting dogs or playing with pre-school children. In one interview, a baby was breast fed while her mother and father talked. During another interview, a child was fed morning tea, and in another interview the participant put away her dishes as she talked. A fluid rather than structured process allowed participants to 'get on' with the things they needed to.

Three interviews were not in participants homes. One took place in a café, one in a whānau room at a school, and the other in the home of a participant's friend. This last participant was homeless. Her friend was not at home at the time of the interview. On one occasion, where the participant had no vehicle, I transported her (and her partner) to the supermarket at the conclusion of the interview. Their home was a significant distance from the supermarket, therefore a 'free ride' was helpful to them and this was a way in which I could demonstrate reciprocity (Diver & Higgins, 2014; Gupta & Kelly, 2014).

It appeared participants became more relaxed as the interview progressed. Josselson (2013) notes that when participants feel accepted and comfortable with the researcher they are more likely to be open in sharing details about their lives. It was important to create this environment of openness rather than defensiveness. I was aware of the feminist underpinnings when interviewing, that research conversations should be clear and grounded while also being gentle and safe (Gannon, & Davies, 2012; Letherby, 2003).

Prior to commencement of the interview, the time required was made clear to participants. Interviews lasted between 30 minutes to two hours, with the majority of interviews lasting around one hour. Two interviews were two hours long as participants had indicated they wanted to continue the conversation. The length of qualitative interviews is debated in literature, with Elliott (2005) arguing that they should not go over ninety minutes. This is to keep the intrusion into participant's lives to a minimum and to ensure participants are not fatigued by the interview process (Elliott, 2005; Gill, Stewart, Treasure & Chadwick, 2008). Most participants looked ready to end their interview at around one hour, although some participants appeared keen to continue the interview for longer and two walked me to my car in order to do so. Where participants seemed keen to continue talking, I carried on the conversation until it reached a natural conclusion as this is part of a feminist approach whereby participants should get some personal satisfaction from the interview (Oakley, 1981). There were a number of factors which influenced the length of the interviews in this research, most importantly, the depth of sharing by participants of personal information and the enthusiasm of the participant to continue the interview. In one instance, a participant was required to prepare lunch for a group she was part of which ended the interview, and on a number of other occasions participants' children required attention, thereby ending the conversation.

When participants provided feedback after the interview it was positive and they reported that they had enjoyed the experience. For example, one participant sent a text the day after her interview stating that I was “an easy going lady and incredibly easy to talk to” and a male participant’s feedback was “to sit and talk to you is really helpful to me”. This was encouraging as providing the opportunity to talk about their lives and leaving participants feeling validated and appreciated was important and is fundamental to a feminist research process (Josselson, 2007).

#### 4.6.2 Relationships with Participants

Participants were carefully approached with an awareness that they may feel shy or awkward (Josselson, 2013) talking about poverty and the impact it had on their lives. The issue of suspicion was also taken into account, with it being likely that participants would wonder why they were asked to be involved in research and how their information would be used (Renert et al, 2013). Merritt and Turner (2013) carried out a study about doing research with rural men in Australia and their participants talked about being slow to open up to people and having a general distrust of outsiders. These Australian research participants did ‘assessments’ of the researcher before deciding whether or not they would be open with them. Some participants in this research appeared to assess my trustworthiness as was noted when they watched carefully how I reacted to things they said.

Forming relationships with participants was a significant part of the interviewing process. As I was using a feminist approach, the relationship between myself and the participants was warm, friendly and connected (Finch, 1984; Landman, 2006; Letherby, 2003; Oakley, 2016). As some participants were recruited via a snowballing approach the establishment of trust was easier as the participant had already been told I was a trustworthy person by a friend or family member. When participants were referred by social service workers, more effort was needed in the early stages of

interviews to establish trust. In those instances, I allowed time for people to get to know me and started with neutral topics like the weather or the schools their children attended.

The way people are invited to participate in a study can affect the depth and quality of the data gathered and set the tone for the relationship (Chase, 2005; Gupta & Kelly, 2014). As a researcher, I was aware that my access to the participant group was limited, partial and conditional (Diver & Higgins, 2014; Manias & Street, 2001; Rose, 2015). Developing the relationship with participants started from the first point of contact, which was a text message with the majority of participants. Two participants were contacted by telephone as they did not have a cell phone (both these participants were over 65). I found the use of text messaging helpful as it gave participants time to think about how they would reply and was less intrusive than telephoning directly. Text messaging also appeared to be participants' preferred method of communication. On two occasions email addresses were known and the texts were followed up with emails. Careful attention was paid to the tone of text messages and email communication to ensure it was warm and invitational.

Each interview was started by reassuring participants that they could limit what they talked about and they should share only what they felt comfortable disclosing. Participants were able to further restrict what was included in the study when a written transcript of their interview was sent to them enabling them to take out content. There were occasions when people disclosed personal information after the recording device was turned off. This was often more sensitive information, such as about experiences of childhood abuse.

To participate in research is to be exposed and potentially risk feeling shamed (Harrison, MacGibbon & Morton, 2001; Josselson, 2013). A sense of shame can occur as a result of internalised stigma from the neo-liberal discourse prevalent in society, discussed earlier (Beddoe & Keddell,

2016). Therefore, every attempt was made to ensure participants felt safe and secure during their interview (Harrison et al, 2015), and were able to talk about their experiences in a way that gave them agency (Fraser & MacDougall, 2017). My intention as an interviewer was not to leave people exposed but rather to leave them with a sense of having made a contribution and having been heard (Merrill & West, 2009; Oakley, 1981). One participant made the statement that she felt like she had a 'voice' through her participation in the research.

Honesty with participants is crucial (Lewis & Adeney, 2014). In this study, attention was paid to clarity with participants about the purpose of the research and why I was interested in the particular geographical area (Harrison et al, 2015). Feminist researchers should "seek to make naked" (Rose, 2015, p. 153) their thoughts, feelings, background and world view to show transparently their position throughout the research process (Harrison et al, 2001). As a feminist researcher using an emancipatory approach, I disclosed part of my own life story when it was appropriate and invested myself in the research (Oakley, 1981; Finch, 1984; Reinharz, 1992; Stanley & Wise, 1993). I was also aware that my multiple subject positions and those of the participants could situate us differently in society and that it was up to me as the interviewer to break those barriers down where I could. I did this through my use of straightforward but friendly language, being interested in who each participant was and their experiences, dressing in casual clothes and making connections wherever possible. While participants did not ask a lot of personal questions, there were times when I shared my experiences. Most often this was about parenting. An example of this is the following disclosure I made to a participant during a conversation about the cost of formula milk for children: "Yeah, I had a formula-fed child, and it's really expensive". Demonstrating integrity to participants was important. I was punctual, polite, empathic, humble in my approach and

reliable (Diver & Higgins, 2014). Throughout the research the well-being of participants was a paramount consideration in the way things were done (Rose, 2015).

#### 4.6.3 Reciprocity

As discussed in the previous chapter, reciprocity is a core value of feminist research (Huisman, 2008). In relation to reciprocity in this research, I supplied one participant with a letter of support for her application for payment of a bond by WINZ. This participant (who was 19), talked about difficulties she was experiencing obtaining housing during her interview. She wanted to have her own accommodation and was finding living with her mother unacceptable, particularly as it involved sharing a room with her pre-school son. As the participant had no advocate, I offered to write a letter for her to support her case for WINZ to pay the bond for accommodation she had sourced. I also wrote another letter for participants (a couple) to support their application to WINZ for assistance with debt relief. Providing these letters created an ethical challenge in relation to power and reciprocity. As a critical and feminist researcher, I was aware of the need to avoid demonstrations of power and hierarchies (Diver & Higgins, 2014). Providing letters could be viewed as reinforcing the power difference between myself as a professional and the participants. While the process of reciprocity was complex and occurs within an uneven power dynamic (Goerisch, 2017), I considered these offers of advocacy made *in situ* demonstrated care and reciprocity towards participants in a practical way (McIntosh & Morse, 2009). These participants did not have contact with a social worker who could advocate for them.

#### 4.6.4 Transcription

Data is turned from a recorded conversation into a “new form” (Wiffin, Bailey, Ellis-Hill & Jarrett, 2014, p. 22) via transcription. The interviews were transcribed in a raw form, that is, what was said in

the interviews was transcribed. The transcription of the interviews was carried out by a professional transcription service. The person transcribing the audio recordings signed a confidentiality agreement (see Appendix 5).

Each participant was sent their transcript to ensure they were satisfied it was accurate and contained an acceptable description of what they said during their interview—a process which enhanced collaboration and trust (Callary, 2013). The returning of transcripts formed part of a reciprocal and respectful research process (Hesse-Biber & Leavy, 2006; Merritt & Turner, 2013), whereby stories are shared with, and given back to, participants. One participant returned her transcript with added thoughts and editing changes. Other participants returned scripts with minor adjustments, for example, a request to change ‘yeah’ to ‘yes’ or to remove short amounts of text. The transcripts were used as data to inform the applied thematic analysis.

#### 4.6.5 Taking Fieldwork Notes

Fieldwork journals are used in social research to record the fieldwork process as it takes place. The journal is a tool to capture what occurs during fieldwork as well as a place in which to reflect on those experiences (Bolton, 2005; Emerson, Fretz & Shaw, 1995). A fieldwork journal was used throughout this research and journaling had a number of purposes. The journal was used to note observations made during interviews, as an aid to memory, and as a tool for self-reflection. My journal has been a repository for observations I made during interviews and for reflection.

The journal was taken into the field. When there were two interviews in one day journaling was useful as notes could be recorded directly after each interview. My recall was better straight after each interview, so I wrote my fieldwork notes immediately after interviews which reduced the possibility of confusing interview data and ensured I did not need to rely on recall (Emerson et al,

1995). Each journal entry was dated, and the pseudonyms of participants recorded in order to track activities. The notes in the fieldwork journal resulted in a creation of my reality about the field and my experiences of the fieldwork process (Emerson et al, 1995). The reality constructed was my own, as another researcher may have noticed and written about different aspects of fieldwork. The journal, as a tool, helped me to make sense of the research experience. Within the journal, the loose threads and seemingly meaningless thoughts and feelings illuminated insights I gained during the research process.

As stated above, observations made during the interviews were recorded in the journal. The following is a journal entry relating to an interview with a participant on July 2, 2015:

Lives down a long driveway which is rough. I was struck by the state of the house. . .

The house looked damp and the kitchen was old with broken cupboards. We sat at the table – there were two chairs – mine was an old office chair.

Writing in my journal about this interview environment enabled me to return to the image of the participant's home. Observations of housing were an important aspect of the data collection in this study as poor housing and poverty are linked (Egan-Bitran, 2010; Expert Advisory Group on Solutions to Child Poverty, 2012; New Zealand Council of Christian Social Services, 2005). Other observations included activities undertaken by participants during the interviews. For example, I noted my distraction when the six-month old son of a participant performed a roll on the floor. I was impressed by his dexterity. The journal also included observations made as a result of meetings with social service workers. For example, a food distribution service worker showed me their food store, including multiple loaves of bread in their freezer, and this observation was recorded.

Also recorded in the journal were notes about the process of interviews and significant 'happenings', including interruptions such as the arrival of visitors. Qualitative research is referred to as messy (Emerson et al, 2001) and events during interviews were evidence of this, such as when visitors arrived. At other times, additional people were present when I arrived for interviews. The following is an extract from an interview on July 25, 2015:

We talked at the dining room table and for part of the time the tv was on as Susan's grandson was watching it. Her grandson left the room and Susan turned the tv off.

During the interview Susan bottle fed the baby and winded him. He vomited a lot but eventually went to sleep when she rocked him.

In the above extract Susan appeared to have talked more openly after her grandson left the room and it was important to consider that the fractiousness of the baby may have been a distraction.

Significant things said or events that happened before or after the digital recorder was turned on were also recorded in the fieldwork journal. For example, at the end of her interview Emily made a phone call to a friend to say she could now afford to pay for her son's birthday cake—possibly this was as she had just received the grocery voucher. Journaling enabled recording of conversations and activity from the time of first meeting participants to leaving them. This was done in order to provide a memory prompt if required later in the research project and as part of my reflective practice after interviews.

The fieldwork journal was also used to record early thoughts and feelings. This enhanced my self-awareness of my reactions to participants (Borg, 2001; Emerson et al, 1995). Sometimes these notes were brief thoughts, such as: "I wonder if she's lonely – kept talking on doorstep". Other notes included early thoughts about potential codes which were written as lists such as, self-sacrifice for

partners, resilience, keeping the car on the road, going without medical care. These notes, while being a memory prompt, also formed part of the development of codes (Dwyer, Piquette, Buckle & McCaslin, 2013). It became evident after the first cluster of five interviews that difficulties dealing with WINZ was a potential code. From this point on, participants were asked directly in interviews about their experiences of dealing with WINZ, which allowed further exploration of this code. Within qualitative research, the interview schedule can change in response to what was said in earlier interviews (DiCicco-Bloom & Crabtree, 2006; Gill et al, 2008; Opie, 2003). This was the case for this study as I often used what participants had said in earlier interviews to formulate lines of inquiry in later interviews. For example, I did not ask directly in the first few interviews about participants' experiences with WINZ, but I did in later interviews as it became clear this was a site of tension.

A further function of the journal was to assist me to process my emotions as a researcher. I used the journal to write about how I felt when 'things went wrong' as in the following extract from 30 September 2015 shows:

Need to buy new recorder and buy more vouchers. Really struggling with this financially. No give in the budget and these extra costs really hurt. Feeling disheartened and despondent. Hard to feel motivated to write.

Journal writing therefore provided a way of expressing feelings and analysing my thoughts (Borg, 2001; Hanrahan, Cooper & Burroughs-LANGE, 1999; Tjora, 2006). The fieldwork journal entries enabled me to work through the emotions involved in carrying out the research, particularly as I was living at a distance from the University and did not have day-to-day support from my supervisors.

Several writers have discussed journals as research tools which engage researchers in reflexivity, a process of considering subjectivity in the context of research (Friedemann, Mayorga &

Jimenez, 2010; Hanrahan et al, 1999; Ortlipp, 2008). Within my journal I considered myself in relation to the participants and explored areas of similarity, such as coming from the same background, and differences such as age, class or ethnicity. Journaling as part of this research was an “encounter with self” (Banks-Wallace, 2008, p. 24) and used to consider how my actions affected interviews. The following was noted directly after an interview on November 12, 2015:

Hannah started talking about her financial position before the tape was on. When I got the tape on it seemed to put her off for a while.

Other journal entries involved more detailed reflection and functioned as a way of obtaining some distance from experiences, such as this entry from November 24, 2015:

In my last written section for Jane and Yvonne [Supervisors] I had written a sentence to the effect that the only reason people talked to me was for the voucher. I wondered what triggered this. I think there have been times when it's felt a bit sleazy – I give you money in return for your story, a financial transaction for intimacy. I noticed when people talked about using the voucher in my presence, like when Ashley asked for a ride to the supermarket rather than home. Steph said she was using the voucher to help with her budget. The downside of vouchers – how freely are people participating or are they agreeing to talk to me because they are desperate. Isn't this why I am doing this? Poverty has people selling their stories for \$50. There's a part of me that likes the honesty of it. It's an exchange and I can expect something. I would feel worse, I think, if I wasn't giving anything. That would leave me feeling like I was just taking from participants. The voucher is a symbol of reciprocity, my appreciation of their time and knowledge.

The use of vouchers as an incentive was an aspect of the research I felt ambivalent about and wanted to explore, particularly in relation to the power between myself as a researcher and participants. Writing about this in the fieldwork journal provided clarity. The journaling for this research provided a space in which to become clear, to discover meaning, and understand complex interactions such as the use of vouchers (Banks-Wallace, 2008; Borg, 2001; Janesick, 1998; Ortlipp, 2008).

Critical reflection was a tool I used as a researcher to check myself and ensure I was not perpetuating stigma and poverty-ism. I had noticed that participants were not offering me a drink while I was visiting. I reflected on this and commented in my journal after five interviews were completed on 20 August 2015 “not being offered a coffee/hot drink – people can’t afford it”. The reason hot drinks were not offered was confirmed by Jennifer, during her interview, who told me if she wanted a coffee, she would visit a friend. I noted in my journal that Lisa used the last of her supply of milk to make me a cup of coffee and was apologetic that she was not in a position to offer a second cup. Not being able to offer hospitality was identified by some participants as embarrassing. They talked about not being in a position to offer hospitality as contributing to their social isolation as they did not invite family members or friends to visit or for meals. By using critical reflection, I was able to identify that the lack of hospitality was a consequence of participants’ poverty rather than a lack of manners.

#### 4.7 Ethical Considerations

Ethical approval for the study was granted by the Human Ethics Committee of the University of Canterbury on 26 March 2015 (see Appendix 1). The research is informed by the Treaty of Waitangi via the principles of tino rangatiratanga and the importance of consulting mana whenua. Decision

making in the research study was shaped by Snook's (2003) five ethical principles of research carried out with people outlined below. The sharing of stories and experiences by participants was experienced as a privilege for me as a researcher and came with a responsibility of ethical care (Clandinin, 2013; Sikes, 2012; Speedy, 2008). Informed consent will be discussed before addressing reciprocity between myself and participants.

#### 4.7.1 Te Tiriti o Waitangi

As a registered social worker working in Aotearoa New Zealand, I am committed to the principles of Te Tiriti o Waitangi and maintaining relationships which are mana enhancing (ANZASW, 2019; Social Workers Registration Board, 2020). As some participants were Māori, it was important to ensure the research process was independently assessed as being a safe process for participant engagement. Article Two of Te Tiriti o Waitangi advocates for tino rangatiratanga. To achieve this within the research, consultation with mana whenua within the study area and through the Māori research consultation process within the University of Canterbury was imperative (ANZASW, 2019; Orange, 2013). Tangata whenua representatives were consulted in the planning of the research (Snook, 2003). The hapū (sub-tribe) of Whakaahurangi Marae in Stratford, the only marae in the Stratford district, approved the research. An academic working at WITT who was knowledgeable in Kaupapa Māori research approaches was consulted and he agreed that the project was safe for Māori to engage in.

The research proposal was approved by the Māori Research Advisory Group of the University of Canterbury Human Ethics Committee on the 22 January 2015 (see Appendix 4). The research was aligned with the Aotearoa New Zealand Social Work Association (ANZASW) Code of Ethics (2013) and the revised Code of Ethics (2019). The Code of Ethics supported the importance of consulting with

tangata whenua, and stated that research should be grounded in the principles of Te Tiriti o Waitangi as per Article 8.1 of the ANZASW 2013 code of ethics, which requires that all research “is informed by and grounded in the articles of Te Tiriti o Waitangi” (ANZASW, 2013, p. 15). The articles of Te Tiriti o Waitangi include the principles of tino rangitiratanga, citizenship and protection. These principles underpinned this research process.

#### 4.7.2 Snook’s Five Research Principles

Snook (2003) identified five basic ethical principles for carrying out research with people. The five principles are: no harm is done to research participants, all research participation must be voluntary, the anonymity or confidentiality of research participants must be protected, the researcher must avoid deceit, and that data should be analysed and reported accurately (Snook, 2003). These five principles will now be discussed in relation to this study.

##### *Doing No Harm*

In relation to the first principle of doing no harm, I was aware of the impact of myself as a researcher in relation to participants. Researchers need to have awareness of how they respond to research participants (Warne & McAndrew, 2010). In this research, interview participants were accepted and listened to with empathy, care, and compassion (Josselson, 2007). In this research, participants were asked to discuss a topic which was potentially stigmatising. Therefore, I was aware that participants could feel vulnerable and exposed (Zingaro, 2009). Because of this, it was important that participants retained as much control over the research process as possible.

Participants determined the course and content of interviews with prompting if they were unsure about what to discuss. It was also made clear to them that they could choose whether or not to answer questions. While participants controlled what was discussed, I was aware of my purpose and did not probe about sensitive topics which were unrelated to the purpose of the study. However, participants sometimes raised sensitive subjects. For example, a participant told me about her history of sexual abuse. I acknowledged what she had said and expressed empathy before she moved the conversation on to another subject. As a researcher, it was important to me that participants were affirmed and validated throughout the interview process (McIntosh & Morse, 2009), and during interviews I sought opportunities to do this. For example, when a participant talked about helping others with their budgeting, I suggested she had the skill and knowledge to become a budget advisor and this comment reinforced what she had been told by others.

Building rapport with participants can create a risk for them, where they may feel encouraged to share personal information which they may not otherwise disclose (O'Shaughnessy & Krogman, 2012). I was aware that participants should not be exposed unfairly (Finch, 1984). During interviews, I watched for signs of discomfort and gently moved the conversation to another topic if what we were talking about appeared to cause distress. If a participant had been distressed during an interview, I would have referred them to a relevant social service for support. However, this situation did not arise. One referral was made for a participant, with his consent, to a social worker as it was evident that during his interview he had an unmet need to talk about his relationship with his partner.

Being safe and respectful throughout the research process required that I, as a researcher, reflected on the impact I had on research encounters (Warne & McAndrew, 2010). This was done

through ongoing self-reflection (Bold, 2012; Elliott, 2005; Josselson, 2007) that included the use of a reflective research journal. The research journal was used during the data gathering process as a tool to be clear about my viewpoint (Callary, 2013). Thesis supervision and professional supervision, which is part of my employment as a social worker, were also used as spaces to reflect and as an external source for checking on the safety of participants.

*Anonymity or Confidentiality of Research Participants must be Protected*

Within qualitative research there can be no absolute promises made that participants will not be identified (Neuman, 2003; Singleton, Straits & Straits, 1993), although every effort in the research process must be used to safeguard participant identity. As this research was carried out in a rural district, participants are at risk of being recognised more easily than if they had lived in a metropolitan area. Participants were in the best position to know what information about them could be considered identifying. Post interview, to provide an additional safeguard for confidentiality, participants were sent a copy of their interview transcript to check, and were encouraged to take out any material they considered might identify them, or that they were not comfortable with entering the public domain (Callary, 2013). Some participants returned transcripts with editing changes, but there were no requests to remove information. This process was used to ensure that participants maintained control over their information (Callary, 2013).

There was a request for the withdrawal of information made during fieldwork. I interviewed a participant and the digital recorder failed therefore it was agreed to carry out another interview. On my arrival for the second interview the participant informed me she did not want the inclusion of an event which would have identified her, as the event was common knowledge in the community. In order to protect her, the second interview which was successfully recorded was carried out without mention of this incident.

Participant identifiers were kept to a minimum and only first names were used with participants where possible. Participant surnames were not necessary for the research and I did not ask for them unless required—for example, surnames were needed when writing advocacy letters for WINZ. Each participant had a pseudonym and identifying information has been removed from published data (Snook, 2003). One participant chose her own pseudonym, while the others were chosen from the most popular baby names in the decade of the participants' birth. Selecting names in this way creates congruence between the name and experience of each participant. Other identifiers such as places where participants or their children lived have also been removed to protect participant identities.

The data was protected and cared for while used for this research. Hard copies of data were kept secure in a locked cabinet and electronic data was stored in a password protected computer. Interviews were transcribed by a professional transcription service. The transcriber signed a confidentiality agreement prior to commencement of transcription.

#### *Avoid Deceit*

Snook's (2003) fourth principle is to avoid deceit. I avoided deceit by using honest, clear and transparent processes (Trahar, 2009). This transparency involved being clear with participants about myself, my background, the aims of this research project and potential use of the information gleaned (Chase, 2005; Trahar, 2009).

#### *Research Findings Reported Accurately*

Participants checked the interview transcripts to ensure what had been recorded was what they wanted to have included in the study (Lawlor, 2002). Checking of transcripts by participants meant that there was a faithful reporting of the data—the last ethical imperative identified by Snook (2003).

### 4.7.3 Informed Consent

The process of receiving informed consent requires that participants' involvement in the study is voluntary. They also need to be informed about what is being asked of them in terms of their participation, how their identities will be protected, and how their information will be stored (Cresswell & Poth, 2018). Participants also need to be informed that they can withdraw at any time. In the following section, I describe in more depth issues pertinent to informed consent, such as: the use of written consent forms and ongoing consent, researcher responsibility, discussion about age and consent, and the use of research incentives.

At the start of interviews, all participants were supplied with a hard copy of the consent form. Only two participants chose to sign the consent form. This may have been because participants were not used to reading formal documents. Research participants choosing not to sign consent forms is discussed by Reeves (2007) who found, in a study with young fathers, having them read and understand a consent form was unrealistic. Not using signed consent forms is also discussed by Josselson (2007) who stated that forms themselves can be problematic in research as they remind participants of the power difference between themselves and the researcher. Ethical decisions are made in the context of research and it was considered that enforcing the signature on a consent form would create a barrier between myself as researcher and participants and would not genuinely enhance the process of informed consent (Bold, 2012). Instead, detailed explanations were given at the start of each interview about what participants were agreeing to and I made sure that participants knew that they could withdraw from the research at any time. A verbal checking process was used as confirmation and I used phrases like "does that make sense to you?" or "is all that clear?" to ensure participants understood what they were consenting to. Consent information was revisited at the end of interviews, and at this time it was reinforced with participants that they could

withdraw from the study and I would not use their information. This relates to Snook's (2003) principles that all research participation must be voluntary and avoid deceit.

Consent in this study was viewed as an ongoing process. In qualitative research where, due to the nature of semi-structured interviewing, it is not always possible for participants to know exactly what they are consenting to prior to taking part in the research (Clandinin, 2013; Josselson, 2007). As such, the consent process needs to be returned to throughout the interview process and beyond. It was my responsibility as the researcher to check consent was genuinely informed. I was responsible for making sure participants were aware of the aims of the research, understood my background, knew who I was accountable to, what was to be discussed in interviews, and what would happen to their information (Creswell & Poth, 2018). Avenues for participants to make a complaint if they were not happy about the research process were noted in the information sheet, but also discussed during a verbal explanation of the research and consent process. Doing this ensured Snook's (2003) principles of voluntary participation and that no harm is done to research participants.

The age of each participant was a factor to consider when seeking informed consent in research. Three participants were under the age of 20, therefore I needed to check that they understood what they were consenting to so as to ensure their participation was voluntary. The ability to provide informed consent was dependent on each person's capacity to understand the research process, with emphasis placed on ensuring that they knew they were not under any obligation to take part (Smith, 2008). The participants in this research, including those aged under 20, were all capable of understanding what taking part in this study entailed.

Another aspect of consent that was considered was the use of research incentives. As discussed earlier in the chapter, a grocery voucher was provided to each participant at their

interview. The use of incentives in research may from some viewpoints dilute informed consent as it can appear that participation is being bought. Snook (2003) argued that payment does not violate informed consent as money in western societies is viewed as the acceptable way to compensate people for their time and knowledge. In research with homeless women carried out in Great Britain, Abrahams, Williamson, Morgan and Cameron (2013) gave a cash payment of 20 pounds to each of their research participants. These researchers found that while the women may have initially agreed to participate because of the money, the participants in their research considered the experience of being part of the research equally rewarding (Abrahams et al, 2013). In a recent study carried out in Aotearoa New Zealand with sole parent beneficiaries, a \$50.00 grocery voucher was also used (Gray, 2017a), with this level of incentive being identified by study participants as being appropriate.

While the participants in this study appreciated the grocery voucher, they commented to me that the interview had value to them for reasons other than receiving the incentive. The interview process provided participants with an opportunity to talk about their experiences and a chance to help others (McIntosh & Morse, 2009). While the interview itself may have been a positive experience for participants, the grocery voucher ensured they were left feeling their time and sharing of themselves had been valued.

#### 4.8 Applied Thematic Analysis

Thematic analysis emerged in qualitative research in the 1970s. From the 1970s until the 1990s, researchers wrote about themes emerging from the data without describing a comprehensive process for identifying themes (Braun & Clarke, 2006; 2016; Willig, 2013). Boyatzis (1998) outlined guidelines for the process of analysing data using themes which Braun and Clarke subsequently expanded upon in their article 'Using thematic analysis in psychology' published in 2006. The result

was that thematic analysis is now widely used in analysing qualitative interview data (Braun & Clarke, 2014).

In this study, thematic analysis, which considers what is said rather than how it is said, fitted with the critical and feminist theoretical principle of making the personal political. Themes from this research will be used to advocate for policy changes to meet the needs of the rural poor in Aotearoa New Zealand. The identified themes and codes form the basis of the discussion and recommendations from the research which will be discussed in the chapters which follow.

One form of thematic analysis is applied thematic analysis (Guest et al, 2012). Applied thematic analysis was useful in this study for managing the large data set and provided a clear set of guidelines for undertaking the analysis process. This method is not linked to any particular theoretical position, is flexible, and can be used for analysing data gathered using a variety of theoretical positions (Guest et al, 2012). Applied thematic analysis is useful for identifying and drawing out complexities of meaning from data and identifying themes or patterns (Guest et al, 2012). The use of applied thematic analysis enabled me to identify patterns within the data which would subsequently be coded, with the codes being organised into themes during the writing process (Fareday & Muir-Cochrane, 2006; Guest et al, 2012).

The first stage of the data analysis was listening to the recorded audio interviews. This enabled me to 'get close' to the data. At this stage I wrote tentative notes that took the form of mind maps for each interview (See Appendix 6). This process increased familiarity with the data prior to the development of codes (Whiting & Sines, 2012). It was also particularly important as the interviews were transcribed by a professional transcriber. I used these mind map notes to form some initial, tentative codes (See Appendix 7). Alongside the mind map notes, some ideas about potential

codes were taken from my reflective journal. For example, I noted the following tentative potential codes on 21 July 2015 after four interviews: lack of sustained, long term support; family violence; addiction; WINZ; making things stretch; going without; and resilience. These potential codes were adapted and defined in the second step of the data analysis process. For example, family violence became two separate codes, intimate partner violence and child abuse.

The second step of the data analysis process was the creation of a codebook. The codebook, which was kept as a word document, was used as a means of organising the data into categories using codes (Guest et al, 2012). The codebook was created for use as a “data management tool” (Crabtree & Miller, 1992, p. 99). It has been described by Guest et al (2012) as the central component of applied thematic analysis. The purpose of the codebook was to create an efficient system to capture the coding process in one place and to provide clarity about each code, including the boundaries around each code (see Appendix 8) (Guest et al, 2012).

For clarity about the meaning of each code, definitions were developed to build on the code label. Each code had a short definition written which captured briefly what the code was intended to describe and a full definition followed in the form of a brief descriptive paragraph identifying the main characteristics of the code (Guest et al, 2012). Below is an example definition from the code book:

Code label: Being locals – from Stratford. Short definition: Participants who were ‘born and bred’ in the Stratford district. Long definition: Some participants had moved into the area but others were born and had lived there for all, or most, of their lives. They identified with the community and the geography (for example, the mountain),

and had family and friends in the community. Part of their identity was tied into where they lived.

Code definitions were important to reduce the ambiguity between codes and were a way of progressing from descriptions of data to the analysis (Guest et al, 2012). It is worth noting that a code is not the same as a theme. A code is the description and a unit of text which has a meaning (Willig, 2013). Not all codes were incorporated into themes as some codes sat outside the themes. For example, 'childhood abuse' and 'technology' were codes which did not fit into a theme. These codes have subsequently not been incorporated into the larger body of the research as they did not relate directly to the research questions.

Two types of codes were developed during the data analysis. The first set of codes were descriptive, describing an experience or feeling, such as, 'Going without', and the second set were analytic codes, which were interpretive and conceptual in that they included an aspect of theory or critique, such as 'internalised oppression'. Codes were developed from using different sources and stimuli. For example, the code of 'debt' was informed by the literature review, 'oppression' from the theoretical approach used, and the code 'relationships' was derived from the interview transcripts and fieldwork field work journal.

An open coding process was used (Bold, 2012; Wiffin et al, 2014). This means that codes were not set in concrete at the outset but could be altered, deleted, changed or built upon (Bold, 2012). The codebook was treated as a living document and evolved as codes were refined through the data analysis process (Guest et al, 2012). More codes were added as the data analysis progressed until, on completion, there was a total of 87 codes.

The third step in the data analysis process included making detailed notes in the margins of the transcripts. The notes made in the margins of the transcripts informed the development of codes. Notes were also written in the margins of the fieldwork journal. Figure 4.

3 below shows a page from my journal with notes written in red.

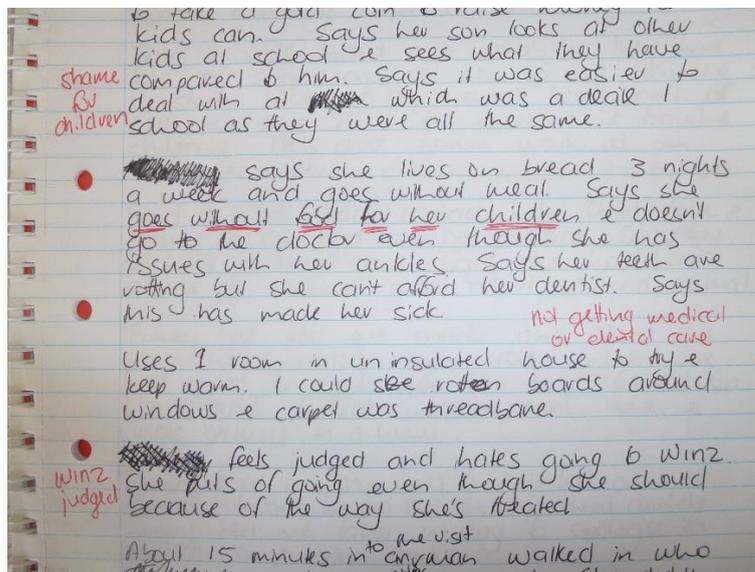


Figure 4.3: Page from journal (Photograph: Lesley Pitt)

The fourth stage in the analysis process was to use a computer software programme, NVivo, to identify where segments of text elaborated codes or represented a code. As the transcripts from twenty-eight interviews produced 705 typed pages it was a large amount of data to manage. While my initial preference was to manually code the data, I decided that this would be best handled by using a computer software programme. The NVivo software programme provided an electronic way of identifying codes within data. Using the NVivo software meant sections of text relating to each code were stored together making data easy to retrieve for each code. The 87 codes were then clustered into four themes and 23 subthemes (see Appendix 9 for examples of mind maps of codes).

The interview transcripts were read line by line to identify segments of text related to codes already in the code book or potential codes that could be added to the codebook, the latter being inducted from the data (Fereday & Muir-Cochrane, 2006; Guest et al, 2012). An example of new codes being inducted from the data was 'planning ahead' as several participants talked about ways they planned assiduously to cope with poverty. It was not initially a code but became one. Some sections of text, representing a noteworthy extract of discussion, were identified and labelled with a number of codes if more than one code was appropriate. For example, a segment of text discussing experiences at WINZ was coded under 'Dealing with WINZ', 'Accessing resources' and 'Experiences of structural violence'.

Finally, the codes were analysed and clustered to create the themes and subthemes that could be interpreted and considered in relation to the research questions (Guest et al, 2012). Themes and subthemes were also evident when there was a great deal of repetition, commonality and overlap between segments of text. Twenty-seven potential themes were initially identified. This number was then narrowed down to the themes of 'making ends meet', 'relationships', 'rural issues' and 'oppression and violence'. There are another 23 subthemes that, together, form each theme. For example, under the theme of 'rural issues' the subthemes are 'living in Stratford', 'isolation', 'transport', 'access to services', 'employment', 'education', 'housing' and 'disability'.

A definition was written for each theme and subtheme to assist with the organising of codes and clarity in delimiting what is relevant for each theme and subtheme. For example, the definition of structural violence was:

It has been referred to as an insult to people and their basic needs and way of life.

People experience structural violence when dealing with state agencies such as WINZ

or other powerful organisations. It involves the application of power with negative consequences for the person experiencing it. People may not be aware that what they are experiencing is an assault to their dignity.

In establishing themes, some codes were grouped together to form themes, while other codes formed sub-themes. Some codes were discarded when it was evident that they were not useful for answering the research questions or dealt with an issue outside the scope of the research. A risk identified by Crabtree and Millar (1992) with the above process is that information can be missed if it 'falls outside' the codes. This risk was mitigated by reading and re-reading the data when coding, and again when interpreting the data in the last stage of the process.

Silences were also contemplated in terms of what was missing from the data and what participants had not talked about. I was interested in what participants did not discuss and what was taken for granted. An illustration of this was that most participants did not talk about being angry at the political system, although a few participants talked about some instances when they had felt angry in their dealings with WINZ in particular. Other anomalies within the data were revisited and differences between codes considered. For example, some participants talked about their families/whānau as helping them make ends meet, whereas other participants had tense relationships with members of their family/whānau. I reflected on this and have included different types of relationships participants had with their family/whānau in the discussion in Chapter Five. Both were relevant to the experience of rural poverty and contribute to answering the research questions.

## 4.9 Trustworthiness

In this section of the chapter, I discuss the quality and rigour of the research. Feminist researchers consider whether or not their research makes the lives of women (and in this instance, men as well) better (Acker, Barry & Esseveld, 1991). Another measure of the quality of feminist research is whether the research is a faithful reflection of the lives of participants (Acker et al, 1991; Lather, 2007).

The notion of trustworthiness was used in relation to this research rather than concepts of reliability and validity that are discussed in the research literature but are more appropriately applied to quantitative research (Johnson & Parry, 2015). The nature of this research, a qualitative exploration of rural poverty, meant that it could not be replicated again in exactly the same way as might be expected for a 'reliable' quantitative study, as each participant's story and experiences were unique and fluid (Pinnegar & Daynes, 2007). Lincoln and Guba (1985) identify a number of criteria for trustworthiness in research, namely, credibility, confirmability, dependability and transferability. The notion of credibility is about ensuring a study is rigorous and the approach used is suitable for the study questions (Lincoln & Guba, 1985; Loh, 2013). In this research, credibility was attended to in a variety of ways. Prior to starting the fieldwork, a research proposal was presented to a panel of University of Canterbury academic staff in December 2014 and confirmation to proceed was given by them. Skype and Zoom meetings, of about an hour in duration, were held once per month throughout this research with my academic supervisors who furnished feedback about the research in person as well as in writing. Their comments and opinions were a significant force in shaping the study and ensured the study maintained academic rigour.

Two pilot interviews (mentioned earlier in this chapter) were conducted with people who were beneficiaries living in New Plymouth (a city to the north of the study area) before the research proper began. These interviews were conducted to check the suitability of the data collection process and ensure the interview questions were relevant for answering the research questions. The pilot interviews contributed to the credibility of the study by confirming the interview process and the efficacy of the interview questions (Elo, Kääriäinen, Kanste, Pölkki, Utriainen & Kyangäs, 2014; Gill et al, 2008; Shenton, 2004). The two interviewees provided feedback about the approach used, which they considered helpful, and accordingly did not suggest any changes to questions or the interview process. Recording the interviews guaranteed the words of the participants were captured to allow for accuracy, authenticity and credibility. Accuracy and authenticity was strengthened by having all the participants check transcripts (discussed above), which is cited in literature as an effective way of ensuring credibility (Elo et al, 2014; Loh, 2013; Noble & Smith, 2015; Shenton, 2004).

Confirmability was the second principle identified by Lincoln and Guba (1985) which is assurance the data represented what participants intended to convey (Elo et al, 2014). As noted above, participants checked their transcripts for accuracy. Checking with participants that the transcripts reflected their intended meaning is cited by Kornbluh (2015) as being the most important way of establishing trustworthiness.

Dependability, the third principle identified by Lincoln and Guba (1985), refers to the likelihood that if a study was repeated using the same methodology and in a similar location with participants experiencing poverty, the results would be similar (Elo et al, 2014; Loh, 2013). The dependability of this study cannot be verified, however, the findings were supported by similar studies on rural poverty in Australia (Alston, 2000), a study carried out on health in an Iwi rohe in

Taranaki in 2016 (Ngaruahine Iwi Health Service, 2016), and a qualitative study with urban poor in Aotearoa New Zealand (Garden et al, 2014).

Lincoln and Guba's (1985) final criteria for trustworthiness is transferability of research in terms of how the study may be used by others. Can the research be used by social workers working with the rural poor? Can the findings be transferred to another location and used successfully? Transferability can be achieved by providing rich descriptions of the context of a study, hence the detailed description of the location of the study (see Chapter One), with the use of photographs and maps (discussed earlier in this chapter) to augment understanding of the context in which the research was conducted (Loh, 2013). Chapter Eight of the thesis includes a discussion of the implications of the research findings for social work practice for rural communities in Aotearoa New Zealand.

Trustworthiness in qualitative research can also be seen in the accurate reflection of the meanings discussed by participants (Leitz, Langer & Furman, 2006). When people speak in their own vocabulary and framework about their experiences, it is valid and accurate (Elliot, 2005). Authenticity is at the heart of this research, focusing on believability, "quality, power, and authority" (Lewis & Adeney, 2014, p. 170) of participant contributions. Seeking authenticity requires an interview process which accepts participants' expertise, without assumptions and is open to counter and alternative ideas and stories (Lewis & Adeney, 2014; Speedy, 2008). At times, this meant accepting the contradictions between the experiences of participants. An example of one contradiction was in relation to participants' encounters with a food distribution agency where some participants had positive stories to share about their dealings with the service, while one participant said she found her experience degrading and would never go back.

#### 4.10 Limitations of the Research

The analysis of the data using an applied thematic approach is one limitation of this research as the focus was on what was said rather than how it was said. Examining how participants talked about their experience of poverty, rather than what they said about it, would have brought a sociolinguistic lens to the analysis (Chase, 2005; Trahar, 2009). The spoken word does not read well and within conversations there are pauses and non-verbal language which add to meaning. Potentially this meaning was lost in the process of having transcripts made from audio recordings and then analysed and broken down into sections of code. Within this process, the eloquence of the interviews in their entirety can be lost (Standing, 2011). As stated earlier, drawing from critical and feminist theory in this research generated a collectivising of the participants' stories through themes in order that their shared experiences could be used to advocate for the rural poor (Chase, 2005; Dutta, 2014; Sumner, 2003). This collectivising meant a focus on the collective wisdom of the participants rather than the linguistic nuances of individual interviewees.

In relation to generalisability to the wider population, having just twenty-eight participants and the use of one geographical area limited the potential for the findings from this research to be generalised (Sojonky, 2010). This study is however contextual (Riessman, 2005), specific to the location and the particular historical point in time in which the participants live (Lawlor, 2002). The data was sought for its rich authenticity and detail, but in order to obtain this kind of data generalisability was sacrificed. However, readers of the research can determine for themselves the extent to which this study may be generalised. This is described as a common-sense approach to generalisability (Elliott, 2005).

When using qualitative interviewing, issues of 'truth' can arise as the information contained in each interview transcript is not checked against other data. It is possible that participants could have made up their stories or had poor recall of events. However, each participant's talk was accepted as that person's recall of their experience and their information was not checked for accuracy as this would have been a betrayal of trust (Callary, 2013). The resulting data collected represented each participant's contextualised, lived experience (Chase, 2005; Riessman, 2005). It has been argued elsewhere that semi-structured interview data has internal validity because participants provide the details of their own experiences (Acker et al, 1991; Elliott, 2005; Lather, 2007; Letherby, 2003; Ribbens & Edwards, 1998). Participant use of their own framework and vocabulary strengthens internal validity—the interviews, while partial and fragmented, were the meaning making of each participant (Chase, 2005; Czarniawska, 2004; Kimpson, 2005). In this research, notions of trustworthiness and authenticity replaced the positivist view of validity (Sojonky, 2010).

#### 4.11 Conclusion

The goal of this research was to work towards social change to improve the position of rural people living in poverty (discussed in Chapter Eight). The idea that individual interview data can be used for social justice is congruent with feminist research, which is about overcoming oppression and exploitation (Jayaratne & Stewart, 1991; Letherby, 2003; Mies, 1991; Reinhartz, 1992). The intent of this study was to give a group of marginalised people a voice so that others (outsiders) would have an opportunity to hear what they had to say. The interview data gathered for this research will be shared with social work practitioners and students, social policy advocates, and a wider audience through presentations and publication.

There were several research boundaries that influenced the way the research was carried out. The limited geographical area explored, my theoretical ideas, the use of a feminist methodology, semi-structured interviewing, and applied thematic analysis, all impacted on the way data was gathered and the nature of the stories told. However, the advantage of this approach was that an in-depth picture of the lived experience of poverty in the Stratford district has been captured.

## Chapter Five: Daily Living, Making Ends Meet, Entrapment and Relationships

This chapter is the first of three which presents the findings from this research. Chapter Five explores the ways in which participants made ends meet and identifies the strategies they used to cope with being poor. Participants used a range of approaches to deal with poverty, including selling possessions, buying second-hand goods, managing with the resources they had, and going without. Help from others was another tactic used, with support provided by family members/whānau, friends and professionals. During the interviews, participants talked extensively about their children, grandchildren, partners, family systems/whānau and companion animals. Some families/whānau were helpful, while others were a source of pressure and thus not all participants had help from family/whānau. Being isolated from family/whānau, sometimes due to violence or for other reasons, made it hard for participants to manage.<sup>17</sup> At times, participants incurred debt to buy things needed for daily life, including food. Participants talked about the way poverty led to a sense of entrapment and powerlessness and how this made life a struggle.

The chapter begins by discussing the strategies participants used to cope with poverty on a day-to-day basis. These strategies included budgeting, the selling of possessions and shopping carefully, going without, and accepting food insecurity. Next the idea of entrapment is explored, with debt featuring as an important element. This discussion is followed by reports on the impact poverty had on participant relationships with their families/whānau and friends, including how poverty

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<sup>17</sup> When reporting the findings under eight participants will be referred to as 'few', eight to eighteen participants will be referred to as 'some' and eighteen to twenty-eight participants will be represented by 'most' or 'all'.

influenced the nature of reciprocity in participant relationships and relationships with companion animals. Finally, I consider the role social service professionals had in the lives of participants.

## 5.1 Strategies used to make ends meet

Participants used a variety of approaches to make ends meet to provide for themselves and their families/whānau and companion animals. All participants used the income and resources available to them as effectively as they could and were careful in how they managed their income and their families/whānau resources. While participants budgeted carefully, sold possessions, and went without food and other material goods, a significant number of participants experienced food insecurity.

### 5.1.1 Budgeting

Participants talked about budgeting carefully, and ‘putting things off’ until they could afford them. This echoes the findings of the Expert Group on Solutions to Child Poverty (2012) which commented that there is no evidence to support the notion that the poor fail to manage their finances effectively. Nancy is one example of someone who budgeted carefully and talked about putting off visiting her doctor until she could pay for it:

**Nancy:** *You have to be a little bit wise about how you do it, how you spend things. I had to go to the doctor last week – I’ve been having a bit of trouble with my heart the week before, when I should have been at the doctors, but I went a week later. Oh, I hate bloody doctors. I hate hospitals too. Anyhow, he growled at me.*

Like Nancy, Robert and Carol also talked about managing their money carefully, and about going without to make ends meet. Strategies used to cope financially in the short term, however, can be expensive in the long term:

**Robert:** *I've got to do that today. I've got to buy a couple of lightbulbs. But instead of having three, if one goes, then you just leave it and make do with two. We've got a vehicle to register and what I'll do, because we're just over a week away from next payday, I'll just register for a week. I've never done that before. That's just the way you work, because that's what you have to. And it's not cheap doing it that way. Things we used to do, we can't do. We buy the cheapest bread, the cheapest milk, anything. And sometimes in the second week I'll have to buy a smaller milk just to tide us over, and then I do without milk in my coffee and things like that.*

As Robert pointed out, poverty can be expensive in the long-term if one only has the choice of paying what is due immediately. While careful budgeting and planning were useful for participants in the short term, it did not always prevent a downward spiral of struggle. As indicated by Robert, poverty reduced choices and the options available may be costly, such as short-term car registration. As well as the pressure of vehicle costs on budgets (discussed in Chapter Six), several participants talked about the pressure of paying for children's birthday celebrations. Kayla talked about both these pressures:

**Kayla:** *I budget \$50 for gas a week and I try not to let my car go under half a tank, just in case something does go wrong and I need to get Mia [daughter who has health issues] to the hospital. Other than that I really only pay my board and I'm still not left with much at the end of the week. I've been buying things for Mia's birthday party*

*tomorrow for the last two months so that I've got enough food. Then when the time comes round you need a warrant and rego and you've got nothing there you don't even have anything to save for, for when that times does come. I can't even put five bucks away a week for when that time comes and of course me being me, both my warrant and rego were due in the same week – next week! And I'm like, oh no, how do I manage that one?*

Buying groceries was an area where participants budgeted carefully. Hine put a lot of energy into spending the least money for the most return when buying groceries:

***Hine:** We go into New Plymouth once a week to do my shopping and I don't shop at Pak'n'Save, because even their milk is a lot dearer than Countdown. I think if you're buying bulk cheap stuff, not specialised foods like I have to [her daughter is gluten intolerant], it would be a lot cheaper to shop there, but I shop at New World and Countdown. And what I do is I go through a list. I write down everything that I need and I write down the prices from both supermarkets. If I don't have a price for New World I put it on the bottom of my list so that I can put the Countdown price, cos you can find every single item is priced at Countdown online. They have 'Browse the aisles' so you can actually see what each product is worth. I write down the bottom what the Countdown price is and if I can find it cheaper at New World I'll get it at New World. And that's how I shop. Once I've finished comparing that list then I recheck my list again and decide do I really need this, can it wait till next week? Then I cross that off the list. And then whatever's left is what I get. And that's what I try and do.*

Hine's grocery shopping process was time consuming but effective and demonstrated part of her skill as a budgeter. I noted in my journal on the October 15, 2015 that during her interview Hine showed me her grocery shopping system and I commented to her that she had the skills to assist others with budgeting.

Participants often considered a range of options to make ends meet. Amber talked about breast feeding as a way of saving money and had considered using cloth nappies however the cost of buying them precluded it. While using cloth nappies may have saved money in the long term (as with growing vegetables), the starting out cost was too high for it to be a viable option.

***Amber:** I breast feed. It's not even a want any more. We can't afford formula. I'd actually love for her to be weaned but, what is it, like \$20-30 a tin? That lasts nothing. We tried and she wouldn't even take some of the formulas, she hated them. There's only one that she liked. I can't even remember what it was. It wasn't worth it, cos I am pretty sure it was a \$35 a tin. I tried the whole cloth nappy thing, but I don't know, it's too time consuming with so many other children. I find it hard to be able to clean them as much as you can by hand even. I've tried to stick them in the washing machine and they say not to stick them in by themselves and all this and even then it's like the start-up costs of having to buy them. Someone said you need at least 25 nappies and you can't really find those, the old, old nappies and stuff that don't leak out everywhere. I've tried some of the red line ones but I don't know if the covers were right or what, but she pooped everywhere. And I just got so stressed and it wasn't fair on the kids cos I was getting angry about the fact that I had to clean up poo everywhere - so it's not even worth it. Luckily, you do have things like [Supermarket] have lowered their prices on nappies and for their [Supermarket's own brand]. If it wasn't for things like that, we*

*probably couldn't afford nappies, cos you can't afford things like [brand of nappy].*

*They're so expensive, I must say once she's toilet-trained it's gonna be so much easier.*

### 5.1.2 Selling Possessions/Second-hand Shopping

Selling possessions was also a strategy used by participants. Crystal talked about “cleaning out”, which involved selling possessions, including her freezer. While Crystal referred to selling the freezer as part of “cleaning out”, it was an indication that she sold belongings out of necessity rather than a desire to reduce clutter—a freezer is a basic household appliance. Talking about selling her possessions as “cleaning out” was a way Crystal avoided the stigma of poverty (discussed in Chapter Seven). By framing the selling of her possessions as a “clean-out”, Crystal resists being othered, that is, being viewed as different to normal citizens with higher incomes (Abel & Fitzgerald, 2010; Garthwaite, 2016; Pierson, 2016). Crystal seemed to avoid the idea that she may be poor possibly because acknowledging it may mean being stigmatised (Gupta, 2015; Hodgetts, Stolte, Chamberlain & Groot, 2017). By describing selling her possessions as “clearing out”, she avoided the stereotypes about poverty.

**Crystal:** *I know it sounds hard, but I didn't need the freezer. I'm just getting rid of lots of stuff. I've been here 13 years, so it was a good chance to have a good clean-out and get rid of stuff and have a garage sale and get rid of precious things – no, just joking. I've been able to have money like that. It's helped me.*

Alongside selling possessions as a way of making ends meet, participants took advantage of all available opportunities to obtain cheap goods and services. The approaches used reflected resourcefulness amongst the rural poor, a finding established in earlier international research (Canvin, Marttila, Burstrom & Whitehead, 2009; Jones & Novak, 2014). Participants in this study

were creative and practical in finding ways to manage and provide for their children. Buying goods from second-hand shops was one of the strategies used.

***Nicole:** Her brother and his friend broke the bike that she [daughter] was actually riding, so we went up to the Hospice shop. Luckily there was a push-bike – not a proper one, with wheels – so she’s got that. I don’t know what I’d do without Hospice shops. They make my life. I don’t even think I could manage without second-hand shops.*



Figure 5.1: Hospice shop, Stratford (Photograph: Lesley Pitt)

### 5.1.3 Going Without

As well as going without food (discussed below), participants talked about not having enough money for treats or to get to activities because of the transport costs. Steph explained the social exclusion that arises when having to go without. Her husband is in full time employment, and she works part time from home while caring for their two pre-school children.

**Steph:** *Then you get into a position where you actually really don't have any money and so you've done all your bills and everything and then you've got nothing and you can't take the kids for an ice-cream or you can't buy some petrol to go to New Plymouth [30 minutes drive]. All those little things - and they're the things that give you that balance of happiness in your life. Not spending all the time, but being able to do the things you want to be doing and some sort of reward for the work that my husband is doing and the work that I'm doing - some sort of reward that the money's not all just going to everyone else.*

Like Steph, Amber also talked about going without social contact or participating in leisure activities and her child not going to day-care on days when they cannot afford the petrol to get there.

**Amber:** *To be honest, every fortnight at least once we can't go somewhere cos we don't have gas [petrol]. My girl goes to day-care and sometimes I have to ring them up and say sorry, I just don't have gas. Luckily, one of my friend's girls go to the same one so sometimes she'll take her for me. I think it definitely affects my friendships too, because if you get invited somewhere you have to think whether or not you can afford to. Do you wanna come to this workshop? Hey, we're gonna have a movie night. No, I can't afford to. Even if I could afford that, I probably couldn't afford a babysitter.*

Going without for Amber, and other participants, had an impact on friendships and enjoyment of life. Participants in this study talked about going without in order to provide for their children. This reflected findings from 2008 study in Dunedin (Presbyterian Support Otago) which found that parents did not eat so that their children had food. In this study, Hannah, who was one of the youngest participants and was parenting alone, talked about going without for her child.

***Hannah:** I don't know, we don't get enough spending money. We can't just go out and buy us a pair of shoes or go out and buy us clothes. It's always kids first, or food and stuff.*

Other participants also talked about going without food, notably parents talked about not eating to ensure their children could.

#### 5.1.4 Food and Food Insecurity

The connection between food insecurity and poverty has been demonstrated in earlier research (Carter et al, 2010; Jackson & Graham, 2017; Rush, 2019). However, food insecurity has not yet been considered in a rural context in Aotearoa New Zealand. This study demonstrates that food was where participants had discretionary money, and therefore, it is where spending was cut. For the participants in this research, buying groceries was planned carefully in order to reduce spending. The photograph below is of one of the supermarkets in Stratford. It is worth noting there are two supermarkets in Stratford but not a budget grocery store. The nearest cheap supermarket is in Hawera, a 27km drive from Stratford township.



Figure 5.2: Supermarket in Stratford (Photograph: Lesley Pitt)

For some participants, a way of making ends meet was compromising on the quality of food they bought. Participants were aware of the health risks of eating food that was high in calories, processed, and of poor quality. The same understanding of nutrition was observed by Jackson and Graham (2017) in their study about food insecurity in Hamilton, Aotearoa New Zealand. These authors noted that participants in their study ate food that was carbohydrate heavy, “such as instant noodles and dollar loaves of bread” (Jackson & Graham, 2017, p. 79). Cheap carbohydrate-based food is inexpensive compared to proteins, vegetables and fruit, and can be filling (Ministry of Health, 2019; Wynd, 2011). In this study, buying cheap food was more difficult as there is no budget supermarket in Stratford. Daniel and Moana talked about dollar loaves of bread in their interview and of making hard choices about food.

**Moana:** *Buys bugger all. Our trolley's mainly processed meats in cans, the dollar bread.*

**Daniel:** *I buy three of them a week. That does us...*

**Moana:** *That does us like three days. We're through a loaf of bread a couple of days.*

While planning and careful budgeting does help, when there is not enough money, going without food becomes the next option (All Together in Dignity Fourth World UK, 2019; Graham, 2019; Ministry of Health, 2019). In this study, adults went without food to ensure their children and companion animals had enough to eat. The Hamilton study mentioned above also found that “parents routinely go hungry . . . compromising their own nutritional needs in order to feed their children” (Jackson & Graham, 2017, p. 81). Aroha described this in her interview:

**Aroha:** *Everyone has a plateful of food and I try and make mine about that, so that I know that everyone else gets fed, or else I tell a white lie and I'll just say, oh I've had mine, when really I haven't and I'm just going to have some toast later.*

Megan also talked about going without food, and not eating nutritious food so her daughter had food to eat when her son is with his father during weekends:

**Megan:** *Weekends, when I don't have my son, I just get food for my daughter. So quite often during the weekends I don't eat, cos I need to make sure that meat is saved for when my son gets back and to last us. So I don't generally eat food during the weekends and if I do, it might be a sandwich or a packet of noodles. I never actually really dip into the kids or the big meals or anything like that, cos otherwise fuck me, I'm screwed. What am I gonna feed my kids? Fresh air sandwiches for dinner?*

Parents going without to ensure children had enough food was common among participants in this study. Parents depriving themselves to meet the needs of their children was counter to stigmatising media comments that parents waste their money and would have enough if they

budgeted better (Beddoe, & Keddell, 2016; Hodgetts et al, 2017). In the following quote, Jennifer—whose partner is in full time work—talked about using the support of a food distribution service carefully as any more than three food parcels a year would require a return to budget advice and WINZ.

*Jennifer: Then we have to go to WINZ, so we're saving our three [food parcels] for when we really need them. Because if we use those three and then we come to a week, if [partner] gets sick and he can't go to work, then we're gonna have no income. Which means we're going to need those for those food parcels. So we're saving them as long as we can, because once we use those three, that's it. Because we've got no other support, so it's pretty much they're our only 'go to' if we need them. And there's only so long [partner] can stay healthy and not get any bugs and have days off work, and because he hasn't been there long enough to just take leave, we just have to keep going. So we're saving them for when we absolutely have to use them. Because if we use them now and then three or four weeks down the track he can't go to work, well, we're completely bugged then. And only having three chances to get food parcels isn't a lot.*

Jennifer was working hard to use the resources available to her sparingly and intelligently for the best interest of her family. The challenging nature of obtaining resources, including food, was commented on by Hodgetts et al (2013) who stated that poor families have to navigate services which are not co-ordinated, complex and sometimes toxic.

Participants talked about using resources available as a way of managing. Two talked about gardening and one participant used the land they had to grow livestock for meat and eggs. Having

resources to use in this way may be an advantage some rural dwellers have over those who live in urban environments, including those in the Hodgetts et al (2013) study. Aroha lives in a village and they have enough land to have their own livestock:

***Aroha:** We buy the cheapest meat there is. In saying that, we've also killed our own animals for meat. That's a good thing. The bonus of having land is that we have a pig that we're fattening up to kill. We have chickens that are kind of laying. They're temperamental. Every time the damn neighbour moves his cow next to them, they stop laying. They don't like the cows and they stop laying. They stopped laying for four weeks and I was like, can you just move your cows? And I think I've actually got an intolerance to lamb now, because every time I eat it my tummy gargles. I ate so much of it cos we couldn't afford to buy any other meat or food so we were eating pretty much... The kids were like, 'aren't we having potatoes'? You're just having roast lamb. That would be nice - you look forward to a roast, it's lovely. It's like, nooo.*

While lamb is generally considered a luxury meat in Aotearoa New Zealand, Aroha had grown tired of eating it as it was all the food the family had for a period of time.

## 5.2 Entrapment

Participants' spoke about "just getting by" and a sense of being trapped, with poverty limiting their options and opportunities. For participants in this study, being poor meant reduced alternatives when shopping, including for food, and a withdrawal from social contact and activities due to poverty. Hine described her lifestyle as being a "hermit". The sense of entrapment—being unable to escape from a situation—experienced by participants in this study was also evidenced in a Dunedin study about poverty carried out in 2008. Presbyterian Support Otago found that their participants

identified life as a constant struggle (Presbyterian Support Otago, 2008). This notion of entrapment was also reflected in Garthwaite's (2016) study. She explored foodbank use in the United Kingdom and argued that poverty impacts the dignity of people. Megan, a sole parent, articulated a sense of entrapment when she talked about the choices she had to make:

**Megan:** *And now I'm tempted to pull her out of day care because I can't afford it. I can't afford that bill anymore. And that's more stress on me, because that's my daughter literally with me 24 fucken 7. Not to mention when it's really shitty weather I have to have my son at home because I'm not walking them to kindy [pre-school] in that weather. I'm like, oh my God, oh my fucken God. I hate it. I hate not having enough money to do the basics. I really do. It's not fair. I'm sure there's other parents with worse situations than I am, but I've also met other parents that are in the same situation as I am, but they're fortunate enough to have support and to have vehicles. I've got neither and that makes it extra hard.*

As well as talking about her own difficulties, Megan recognised the struggles of others who are poor. It was common in this study for participants to acknowledge the struggles of others living in poverty and that there may be people worse off than themselves.

#### 5.2.1 Living in Debt

A strategy which contributed to the sense of entrapment was living in debt, where participants borrowed money in order to survive. Borrowing money to pay for day-to-day expenses was an indication that incomes for beneficiaries and low wage workers in Aotearoa New Zealand were too low. This finding is reinforced by the Welfare Expert Advisory Group (2019) report to the Ministry of Social Development about social security in Aotearoa New Zealand. The Welfare Expert Advisory

Group (2019) report identified that due to low benefit levels of debt are high among beneficiaries.

Kayla talked about borrowing money to buy necessities after the premature birth of her daughter.

**Kayla:** *I didn't have a choice. I needed clothes. I needed prem. clothes, for Mia, [daughter] and I thought, well they're not helping me [WINZ]. I'm gonna have to find money elsewhere, so I took out a loan which I obviously have to pay back and that's taken a big chunk out of my benefit a week. But I think if I didn't have that payment I'd be okay.*

Access to finance has become easier this century and people can access funds with minimal financial security (Legge & Heynes, 2009). However, legislation passed in December 2019 (Credit Contracts Legislation Amendment Act, 2019), will place some limits on the amount of interest a loan can accrue (New Zealand Parliament, 2019). Participants in Garden et al's (2014) study were also financially aware that any debt they incurred would be difficult to pay back and that the fringe lenders they borrowed money from were exploitative. Participants in this study were financially literate, they were aware of the cost of debt, and understood interest rates.

**Brittany:** *I once got a Q Card, just to get by. I was buying food with it. And now I'm in debt with that and cos I can only afford \$10 a week on it, the interest keeps adding up so I'm not actually paying anything off. I'm just paying the interest.*

Some participants in this study incurred debt in relation to healthcare and consequently chose not to go to the doctor because of the debt owed.

**Robert:** *Our present bill at the doctor's is over \$300 and at the chemist is about \$100 so it all climbs up. In fact, you can't afford to do anything except the basics. That's what we have to do.*

Michelle had previously lived in geographic isolation with her partner and children. Other than correspondence school, boarding school was the only option available for secondary schooling for her daughter. Her daughter is now an adult, but Michelle continues to pay off the debt from her boarding fees. Although this debt was incurred while she was living with her ex-partner (daughter's father), Michelle has now been made liable for the total debt as her ex-partner is currently serving a lengthy prison sentence.

**Michelle:** *I'm still in debt. Because we were out in the middle of nowhere – that's another cost for school. Courtney [daughter] had to go to boarding school for high school and they said, 'Oh yeah, it will be only eight grand a year.' That was only for boarding. The Government gave me half for that, so we were paying \$88 a week – I don't know, four grand a year or something – so that was quite a lot and that didn't include her uniform, which was god damn near a grand, or the books. And when I came here, I'm like, right, I'm pulling her out, I can't afford it. And they were like, 'no, we have a domestic violence thing where you only have to pay a grand a year,' and I'm like, 'I suppose I could do that.' I'm still paying back probably for another 10 years what I owe. They took me to Court, even though they knew what it was... And they still kept ringing, 'Can you put it up from 5 to 10 at least, or just give it to us.' When I moved here, I didn't give them my new address, because it annoyed me that much. So I don't hear from them now. It must... \$5 a week, it was 14 grand I owed in the end. It went down to seven and he [ex-partner] went to Court because they realised that his name was on it too.*

While Michelle had a debt to an education provider and Robert to his doctor and pharmacist, other participants had borrowed money from WINZ. For participants in this study, debt to WINZ was

viewed as preferable to paying interest for credit cards or to finance companies. However, participants had no control over how the debt was paid back to WINZ as workers made the decisions about repayment of loans and this money was taken out of their benefit payments.

Debt for Lisa became overwhelming and unmanageable. She was declared bankrupt which is a legal process in which an official administers a persons' finances and can sell their property in order to pay creditors (New Zealand Insolvency and Trustee Service, 2017). Lisa was aware of the seriousness of being bankrupt and described her attempts to avoid it.

*Lisa: I used to be quite proud of my credit rating. I had two credit cards and I was rather proud of how I had credit references. And then when I lost my job due to injury and mental illness, my total debt was \$4,000; and I was, 'Someone please just help me, \$4,000 is not a lot of money', 'Just, Q Card, please let me pay you as much as I can - stop the interest. Just stop the interest for a while. I'll get back on my feet, but please just stop it for now'. No, no, no. The other one was a bit more lenient, but Q Card was shocking. And my final option was - I tried for the Non Asset procedure first and they refused because I had KiwiSaver. The bankruptcy place said, 'get the money from KiwiSaver.' I rang Kiwi Saver and said, 'Look, my bills are \$4,000, I've got six and a half sitting there, please can I get the \$4,000 to pay these bills? I even had a letter from my doctor saying, this is causing her mental anxiety and it's pretty bad - I was in tears every day. And they said no - just like that: no, you can't have it. So I had to go bankrupt and I thought, how ridiculous.*

For Lisa, debt affected her mental health and participants who had ongoing debt described it as stressful. The stress of being in debt and finding it difficult to pay back impacts peoples relationships.

## 5.3 Relationships

Participants in this study talked about their relationships, with their partners, their parents, their children, their grandchildren, their friends, and with professionals. The quality of relationships with others was mixed with some being a source of financial and emotional support while others were clearly a source of tension and stress.

### 5.3.1 Families/Whānau

For some participants, their family/whānau was important and a source of strength and help. A British study about poverty found that family support was crucial to people surviving in poverty (Chase & Walker, 2015). However, for participants in this study, relationships with families/whānau were sometimes difficult, and for some participants, their family members/whānau were abusive (intimate partner violence is discussed in Chapter Seven). In this chapter, the influence of families/whānau in terms of how they mediated or contributed to participants' experience of poverty is outlined.

Rawiri, while identified as being poor by the professional who referred him to the study, did not self-identify as experiencing poverty. Rawiri was living with whānau and this protected him from hardship.

**Rawiri:** *I just thank God I'm here with my daughter, looking after her. She just bought this house here and parked up.*

**Lesley:** *So you and your daughter both live here?*

**Rawiri:** *Yeah, and my son-in-law. Well it's good for her if I look after the little ones while I'm home. Otherwise I'm [snores] lazing in that seat.*

**Lesley:** *And do you think that Super [annuation] is enough for people to live off, or...*

**Rawiri:** *For me, it is. For others, I don't know. But I'm glad to be here with my daughter. That's why I say, I don't need anything really. I'm happy.*

Through working together this whānau were able to protect their eldest member from the effects of poverty, which he may have experienced if he lived alone. Rawiri was able to contribute to the functioning of the whānau through his care of his mokopuna (grandchildren). By using a collective approach and sharing their resources, Rawiri's needs were met as were the needs of other members of his whānau.

In a Māori world view whānau is a key component of a person's wellbeing (Roberts, 2016). Hine was another participant who identified as Māori and wanted to have the support of her whānau. However, this was difficult due to tensions between her whānau and her non-Māori husband. Hine reported that her mother did not provide as much help as she might have as she did not like her husband. Hine's first child had significant health issues, which had made parenting difficult, particularly without the presence of whānau. Hine also had this to say about her second pregnancy:

**Hine:** *When I got pregnant with her I was so upset. I was so upset because I didn't wanna have to go through it again, and that's when I got referred to mental health, because of all of that stress. Right up until I was about eight months' pregnant was when I actually decided to keep her. I had every intention of giving her away to an auntie of mine. My partner was, no, no, I don't give away my children, and I said, 'well are you gonna stay home and look after her'?*

Hine's experience was mired in colonisation, her husband's world view is western whereas Hine's view of the world is based around her identity as Māori. Hine was seeking support of a collective and wanted more connection with her whānau while her husband was focused on their nuclear family. For Hine, the conflict between her husband and her whānau meant she went without their assistance.

Poverty for Māori needs to be considered in relation to the impact of colonisation. The need for employment may mean people leave their ancestral land, their turangawaewae (place a person identifies as belonging to), and therefore may lose the support of whānau (Cheyne, O'Brien & Belgrave, 2008). Aroha is from the far North of Aotearoa New Zealand but was living in the Stratford district as this was where her partner was employed.

***Aroha:** He's really wanting to go back North. We're actually from Northland and we miss the beach up there, but I don't think the schooling's that great up there and that's the main reason why I've put my foot down and said no, I love the small community here. But also the boys' [Aroha's children from a previous relationship] Dad has put in a Court Order saying we can't uproot the boys [Aroha's sons] anyway. That's a bit unfair but that's his nature. He still thinks he can control something. We can't go up there, cos there's no work. There's no work for my partner. If there was, we'd probably be up there, but he was almost gonna sacrifice that [employment]. I said to him, you can't, because we'd be way worse off than this. I just fear that we'd get up there and the little work that there is there would just fizzle out and then we'd have nothing.*

Aroha had to remain in the Stratford district because of a Family Court order, but she also saw Stratford district as providing better educational and employment options than Northland. There were two other participants in the study who had court orders to live in the Stratford district.

Poverty was not just experienced by participants but also by their wider family/whānau. In the following excerpt, the youngest participant in this study, Emily, talked about poverty within her family. In Emily's situation, poverty does not just impact herself and her son, but is generational—both her mother and father are sole parents surviving on benefits.

*Emily: I pay \$20 every time I stay at my Mum's, for food, for me and Lucas [son], and then she's got just that little bit extra to get her through to her pay day, because her partner's just gone to jail this year . . . Mum's also on a benefit. She's on the solo parent one.*

*Lesley: Right. So your Dad is?*

*Emily: Yeah, my Dad. Both my parents are on benefits. Wow, that sounds really great.*

Emily's family found ways of coping with poverty by working together. Help from family members was often the difference between making ends meet and not coping. Help from family/whānau can be crucial for people parenting in poverty (Russel, Harris & Gockel, 2008). Emily was too young to qualify for a benefit (Ministry of Social Development, n.d.b) when she had her son (when he was born she was 15) and so she and her son relied on financial contributions made by her father. While Emily had coped with the assistance of her father, she expressed anger towards the state because she received no financial assistance when she needed it.

**Emily:** *From October till end of March, start of April [was not eligible for a benefit from WINZ]. My Dad just brought nappies and wipes for me and would give me 20 bucks a week that I'd save, just to get essentials. I got all the clothes given to me. Because I've got a couple of older brothers that also have kids. I'm still living with my Dad, because I'm only getting \$140 per week. Who can rent a house and buy food and pay power with \$140?*

Emily continued to live with her father and two younger brothers which enabled Emily to manage financially, however, she found it difficult to share a room with her son and wanted to move into a home with her boyfriend, something they were unable to afford. The extract below shows how Emily and her father worked as a team and shared going without in order that the younger members of the family did not suffer.

**Emily:** *And he'll go without tea one night and I'm, 'let's go halves; I'm not hungry tonight anyway,' and it'll be like sausages and mash and I'll have one sausage and half the potatoes and he'll go have the other half and we'll be like 'sweet'.*

**Lesley:** *So you're sensitive to that.*

**Emily:** *Yeah, and if there's not enough food in the house for everyone to eat, me and Dad always go without.*

Help from others is important for those living in poverty and it is a protective factor against hardship (Egan-Bitran, 2010). Kayla talked about the assistance she had from her own family and the family of her ex-partner. She boarded with her ex-partner's family which enabled her to manage.

**Kayla:** *When me and Mia's [daughter] Dad were together we were planning on coming back here [Stratford], cos he was gonna go to WITT [local polytechnic] and do the truck driving course. And then we split. The people I live with is his biological Mum and stepdad. And we were gonna move in with them, anyway, and it was two weeks before we moved that he decided that he wasn't coming and I thought, God, I can't find a house in two weeks, and they offered for me and Mia to still come here until we're ready to move on. So it's been really good cos I've got a lot of bills that I'm trying to pay and I don't think I'd be able to pay them if I were renting on my own. It does help financially. I'm still not left with much at the end of the week to play with, but my Dad is kind enough to supply my nappies for me, cos he lives up in [town in another province], and they've got a special nappy shop up there and they're only \$20 for a bag of 90-something nappies. He buys me five bags at a time and just couriers them to me, so I don't have to worry about it.*

Practical support from family/whānau was significant in helping people manage. A number of participants talked about financial assistance from families/whānau for children's birthday parties and presents which was a cost above and beyond daily living expenses. Help of this nature was the buffer provided by families/whānau to participants which protected them from the corrosive nature of poverty. Hine talked about her mother making a financial contribution to her daughter's birthday:

**Hine:** *It [washing machine] cost us \$250 and the guy actually came in every day for a week before he actually fixed it. So we had one week and it was right in the middle of her first birthday and my Mum, up in Auckland, they run raffles all the time where my Mum works. They do Lotto bonuses where you buy one ticket for \$20 and you could win either \$50 for the first six dropped numbers, dropped in the Lotto and win \$200*

*for the bonus. Because my Mum does three raffles, we were able to afford her birthday and that's what I was glad about because I make a big fuss about the first birthdays, the fifth birthdays, 10th birthdays, 16th, 21st. The rest they do themselves.*

Families/whānau were also a source of tension for some participants. In some instances, they contributed to hardship. Poverty within family/whānau systems can also result in strained relationships. In the following extract, Sally shares a story about a laptop owned by her father who had recently died. At the time of the interview, Sally was living between her mother's and her friend's home with her pre-school aged son.

**Sally:** *This morning we [Sally and her mother] had a huge-as argument, because when my dad died, he left a laptop, and the laptop was passworded. You can't get a password off a dead man. So I had it looked at by the IT guy at course, and he couldn't get into it. I said to my Mum, oh well, I guess I'll just have to sell it up for my bond – I was joking. Anyway, she looked at it and fixed it and got on it and she text me this morning and said, 'I'll give you \$100 for your laptop.' Well she goes out and spends \$100 on a paysafe, which is a Ukash, for online pokies and she knows I'm struggling. She offers me \$100 for something... It's a new laptop. And she offers me pretty much nothing – well, it's nothing for her, cos she does have money, but she wastes it. Then she was trying to make me feel bad: 'You're saying I shouldn't waste my money.' And I said, 'I didn't say you shouldn't waste your money – I said, you are wasting your money.' She said, 'You pretty much said I have to give it to you.' I said, 'No you're trying to sell off my own laptop when I haven't even thought of doing that, for pretty much nothing, when I'm struggling'. If I were to sell it, I would sell it for a decent price so I could get a bond.*

For some participants, the strain within the family system/whanāu was added to when the participant took responsibility for a family member's debt. In a study carried out in Auckland it was noted that participants, particularly women, were paying back debt for other family members (Garden et al, 2014). Michelle's extract earlier in the chapter demonstrated how she was being forced to pay back debt which should have been shared with her ex-partner. Other women in this study took on responsibility for the debt of other family members. These situations reflected a patriarchal social system where poverty and gender intersect (Brooks & Hesse-Biber, 2007; Crenshaw, 1997; hooks, 1982; Lister, 2004). Pat lived with her husband and was a mother and grandmother. Her limited finances were strained when a family member used her credit card fraudulently. Pat and her husband chose not to report the incident to the police in order to protect their relative, which meant they were left with a significant debt.

*Pat: And we also had a little incident where a family member – we've got a Warehouse card and Phil [husband] got one as well but he's never used it. And when they changed it to the chip on it he never signed his or got a password, because he never used it. And we didn't actually know where it was. It was put away in a safe place, and a family member found it and went on a spending spree. We had \$800 credit on it – it's got a \$3,000 limit on it. We had \$800 credit on it – because I got the bill. He'd not only spent the credit, he'd contacted them and added to it. Because my head was in the wrong place, otherwise I would have got a bit more proactive, I rang Westpac and said, did they allow people to spend well over the limit? [Because you'd think it would decline.] Well that's what happened. It declined and they added to it. He rang up and they increased it. [Cos that should have been flagged, shouldn't it – to them?] Yeah, but he gave the right name. And he said to me he'd go into my account*

*and check. He says, 'What's your password?' I said, 'I've got no idea. I haven't used it for goodness knows how many years. I don't know what my password is'. So he told me – over the phone, he told me. I could have been anybody. Anyway, he said, by the time they put their fees on it and all that, the only way that I could recoup that money was if I rang the Police and had him charged and I said, 'I can't do that. He's trying to get his life together,' They had a young baby. I said, 'I can't do that to him.' So that was another bill.*

Pressure from family/whānau can contribute to the stress of poverty, as Jennifer discussed:

**Jennifer:** *Sometimes it feels like I'm going nuts. Sometimes I'm just like, oh, I just have to shut everyone away. I just have to shut the house up. We'll all stay in the house, the kids will go and play and I'll just go and sit down, because I just can't deal with everyone. My family are like, 'why don't you just get a job', 'why don't you do this', 'why don't you do that'. 'Oh you can go do that', and I say well we've tried everything. We are doing everything we possibly can. There's nothing I can change, apart from getting a job, and to do that I either have to train in another area, go and volunteer somewhere and still get no money to be in the same boat. Like our families are both like it. They're like, 'oh just go get a job. Get off your arse and get a job.' And I say, 'well we are. He's working pretty much 12 hours a day.' We're doing what we can and there's just nothing. We got to the point where they'd tell us that every time they seen us and so we said, don't contact us for a bit. Just leave us. So we cut out our families for a little bit, just so that they would stop hounding us. None of them will offer help. They're all just like, 'get a job', 'do this, do that' and it's like, well, it's not helping.*

For Jennifer family support was conditional on her obtaining employment and contributed to her sense of despair.

Poverty had an impact on intimate relationships, a result of the stress of being poor. The link between poverty and stress is noted in the literature (ATD Fourth World UK, 2019; Gibson et al, 2017; Lister, 2004; Russell et al, 2008). Stress and relationship conflict over money was discussed by participants, including Steph, who talked about the stress of poverty and the impact that had on her relationship with her husband.

**Steph:** *It wasn't stressful [before falling into poverty]. The most stress you had was, oh I can't buy that \$20 million singlet, but now it's like, I don't know if I can pay the power bill, or I don't know if we can make our mortgage payment and that kind of stress, which puts extra stress on your relationship because of his [husband] lack of understanding of where we're at, because he's not dealing with the financial stuff all the time, so we butt heads on it all the time. I used to do the bookwork for the business when we had the business. It's just naturally progressed to just doing this stuff, and cos I'm the one at home it's just naturally fallen on my shoulders to pay the bills and stuff like that. He gets the money in and I pull it out. He then questions why I'm spending it all. I can off load that worry onto my husband, but not on the same level as in my head. In my head I'm going, right next week we still need the extra \$200 to make those payments that are coming next week, but in his head he's going oh we've got \$200 spare. It's quite hard, when they're not dealing with it all the time, to get them to understand that that extra \$200 is actually already reserved for next week or it's gone again.*

Participants discussed pressure over finances contributing to tension within intimate relationships. The partner who managed the finances seemed to be challenged in some instances by the partner who did not, particularly when this person was employed, as in Steph's case. This can be exacerbated in blended families as noted below.

***Aroha:** Because the girls are to another Dad and he hasn't paid child support for almost a year, so he's not paying anything. I'd like to say that I'm paying school fees, but I don't get an income and Simon [partner] helps out enough that I don't wanna say to him, pay it. But we're going through a bit of hard things. It's definitely something that doesn't help and we argue over a lot. Everyone argues over money, but then in saying that, when I've got issues of my teeth or anything that's to do with me personally, I don't tell him, because I don't want him to know that there's something else we need to pay for that's just me, and I'll leave it until I really, really, really have to have it for an emergency or something. I know that's bad but...*

Aroha goes without dental care in order that there will be money available for other members of her family, particularly her children, and to avoid added tension in her relationship with her partner.

### 5.3.2 Being Poor, Parenting and Being a Grandparent

Being a parent was important to participants and they talked about it at length. However, parenting in poverty was challenging. Nineteen participants in this study had children under 18 and one participant had grandchildren and a nephew, both under 18, in her care. Six participants identified that they were grandparents. Participants in this study found ways to deal with the challenge of parenting while poor and living rurally, making sure their children got what they needed. Raising children who are healthy and happy while living in poverty has been described by Canvin et al (2009)

as resilient parenting. The focus of resilient parents, in the study carried out by Canvin et al (2009), was on love, fun, respect and health rather than material possessions. Michelle, a participant in this research, could be described as a resilient parent, and she identified that her children had learnt to be humble as a result of growing up in poverty.

**Michelle:** *But they're so humble now. The kids understand if we only have eggs tonight. If they had a higher living, they'd push for that. Because if they went backwards they'd be like, 'Oh no'. They're good kids.*

Not only had Michelle parented her children in poverty, she had parented while experiencing intimate partner violence and living in a geographically isolated location, so she epitomised resilient parenting.

Some participants limited the contact they had with their children due to poverty. In a United Kingdom study about parenting in poverty, it was found that some parents relinquished care of their children due to poverty (Russell et al, 2008). Similarly, Aroha made the difficult decision not to have her daughter return to her care due to cost and the lack of space in their home.

**Aroha:** *The sad thing is that my oldest daughter, she's turning 13 next month and I get upset, but she's asked to come down here for high school and we can't afford for her to come. I don't wanna have to say that to her. But I'd love for her - but being a three bedroom, the baby doesn't sleep when she's in the room with us, so two girls are in there, two boys in there.*

The stress of poverty affected participants' children. Children who grow up in poverty are more likely than other children to experience bullying and discrimination (Gibson et al, 2017; Office

of the Children's Commissioner & Oranga Tamariki, 2019). Nicole was aware of the potential effect poverty could have on her children:

***Nicole:** As soon as you're depressed, you're sitting in bed or you're not up cleaning, and as soon as the cleaning goes, everything else goes with it and you just become dead inside with your kids. Then the kids have to see it; that's why I always try to stay on the positive as much as I can.*

Assuming that poor parents, especially beneficiaries, do not provide adequately for their children is promulgated in mainstream media (Beddoe, & Keddell, 2016; Gray, 2016). However, the notion that parents who are poor do not care for their children is not supported by the experiences of parents spoken to in this research. Poverty can be mistaken for neglect, which was the case for one participant in this study. She was investigated by Oranga Tamariki for child neglect as it was alleged her child had no lunch at school.

Participants with younger children discussed nappies and milk formula as being particularly difficult to pay for:

***Hannah:** Well his nappies - sometimes I can get them on a good week, and then sometimes I don't get them on a good week. Sometimes it can cost me \$15 for a packet of nappies and sometimes I have to get a couple of packets. And then I've gotta get his wipes. I have to get three packets of wipes a week, which they're \$2.50 a packet. And then I have to get his baby food, which is \$1 a can. And then his formula's \$20 a formula - he can go through two formulas. It's real expensive.*

Hannah's experience was evidence of the gendered nature of poverty; it has been noted internationally that single mothers were the poorest of the poor despite being primarily responsible for parenting children (Russell et al, 2008).

Poverty effects children and young people's physical and mental health, their relationships with others, and their education (Boston & Chapple, 2014; Egan-Bitran, 2010; Gibson et al, 2017). Despite going without to ensure their children's needs were met, there were times participants were not able to provide for their children in a way they would have wanted to. Parents internalising a sense of inadequacy and failure was noted by Russell et al (2008) who carried out a longitudinal study in Canada. Russell argued that self-blame contributed to social isolation and depression among parents who were poor. Megan talked about not being in a position to provide what she wanted to for her children and the emotional toll this had on her.

***Megan:** I can't do shit with my kids at the moment, at all. They get seconds, which doesn't bother me – it teaches them humility and stuff, rather than having to have everything new, but as a Mum I feel like I've let them down that I can't even buy them a new pair of shoes. I can't even go out and get them a new pair of pants or whatever that my toddlers need, because they grow very, very quickly. I'm relying on everybody else for donations and it makes me feel stink.*

Even though it was difficult, participants found creative ways to give their children treats. Resourcefulness among poor communities has been noted in the international literature (Neiderer & Winter, 2010; Russell et al, 2008). Jennifer, a participant in this research, epitomised resourcefulness where she talked about how she treated her children without spending extra money:

**Jennifer:** *We make it a thing - on the weekend I'll do baking so that they have some cake or something, so that they don't feel so left out. Because everyone always has the muesli bars, chips, yoghurt, everything they used to have. So now we've gotta make special treats within the budget. So that involves making a big cake and then putting icing on it and each one I'll pipe a little message on them, or do a picture for them so they feel special.*

As Jennifer did, participants who were parenting put a lot of energy into meeting the needs of their children.

Participants who were grandparents discussed the importance to them of supporting their children and grandchildren. Maintaining relationships came at a cost, but participants in this research seemed determined to share what they had with their family/whānau. Pat talked about going without in order to pay for presents for her grandchildren and Karen discussed the impact of providing assistance to her family:

**Karen:** *At the moment I have two extras, something's got to give and something will give at the end of it. There's the showers, the power, the extra meals. I would do it again in a heartbeat and I would do it for six years if I had too. I love my family and I have another two family members that I would love to have over for meals on regular occasions because I'm a Nana and I want to see my grandbabies but I have to regulate how often they come, and that's the saddest thing. I just can't afford to feed extras. I don't have any plan B. That breaks my heart. If they all come for a meal then I will be eating baked beans for a week but I will do that. These are the things you have to do all of the time.*

### 5.3.3 The Impact of Poverty on Friendships

The impact of poverty on friendships was discussed by participants who talked about not doing things with friends as they were unable to afford it. Loneliness has been identified as one of the consequences of poverty (Presbyterian Support Otago, 2008). Social isolation can occur as people's ability to create and maintain social support is affected by their financial position (Graham, 2019; Stewart et al, 2009). People may distance themselves from friends and social networks due to embarrassment and shame and this may result in self-isolation (Pierson, 2016; Jackson & Graham, 2017). Alongside self-isolation, low incomes can limit people's participation in social activities and sense of belonging to the community (ATD Fourth World UK, 2019; Chase & Walker, 2015; Gupta, 2015). Hine talked about withdrawing from social activities with friends.

***Hine:** I used to go to a café once a week with a friend and have - cos I don't drink coffee - a hot chocolate, but I haven't even been able to meet friends for coffee or anything like that in nearly three years.*

Steph took a different approach and resisted social isolation but it was difficult:

***Steph:** It's like that whole thing, everyone's going to a restaurant isn't it, and you can only afford to buy a basket of chips for you and the kids, instead of buying a main for each of you, but you still wanna go out cos you still want to participate and you don't want to be seen as the poor person. Or even for that matter, for us we don't wanna be seen as the ones that are always going on about money and poor us, we've got no money. We'd rather be involved and do something and have something while we're there, but it's a struggle.*

Poverty was a barrier to maintaining friendships; however the friends of participants were often aware of their struggle and some would help. Kayla was aware of her friend's generosity in assisting with her daughter's birthday party.

***Kayla:** I've had to rely on one of my friends. I ran out of money to buy everything for the food I needed for Mia's [daughter] birthday party tomorrow and she was like, oh well I'll give you some money, and I was like, 'oh well I'll pay you back when I can,' and she said, no, she's just as much part of my family as what she is yours, I'll pay for it. And I was like, oh well, I feel real bad about that too - she's not even family and she's stepping up to help me pay for things.*

Participants talked about their sense that other people were giving them things to help, such as Lisa's work mate who gave her meat "for her dog." As the meat was of reasonable quality, Lisa thought it was intended for herself. This was a way Lisa's workmate managed to help Lisa maintain her dignity and avoid the shame of poverty (Burke, 2006; Goffman, 1963).

***Lisa:** That woman I was telling you about at work, she says it's for my dog, but I know she's doing it for me. She's a farmer and she says, 'Oh, I went through my freezer and found some meat' and she thinks that maybe I'm too proud to take it or something. But she says, 'Here's some meat for your dog' and brings me six packs of stewing steak, chuck steak.*

Being aware of other people's pity left participants feeling ashamed. A sense of shame can be experienced when people recognise that they are outside what was considered normal (Abel & Fitzgerald, 2010; Gupta, 2015; Jackson & Graham, 2017). Aroha wondered if her friends were giving her items because they felt sorry for her:

***Aroha:** I have a lot of friends here that are nice and give me clothes, but I do wonder whether or not it's cos they know that we're doing it hard. And I've had a lot of offers lately that I wonder, what are my kids saying that make them think they need that kind of help?*

Participants seemed to be more comfortable with people who had similar experiences to themselves, as with these friendships there was less risk of judgement and no need to keep up financially. Where people were in a similar financial situation and had similar life experiences, it was easier to maintain friendships and establish a sense of solidarity, as noted by Kelly:

***Kelly:** I think I have friends that have been through that too and we support each other. I've got one of my best friends here I met in rehab down in Wellington and she's got bipolar. So me and her get along really well. She helped me with my son, to understand him, and she has stopped drinking but she had a really bad childhood too. I think I still associate with people like that because they understand who I am.*

Friendships were important for coping with poverty and were valued for the sharing and kindness that was reciprocated.

#### 5.3.4 Reciprocity

Reciprocity was important to participants in this study. They valued reciprocity in their relationships and talked about the support they provided family members which was important to the survival of their family systems/whānau. Where participants were not employed, they made themselves available to provide non-financial forms of help. Ashley's family helped her when she and her partner needed financial assistance and she reciprocated by care giving while other family members were working.

**Ashley:** *He's [Ashley's father] just gonna get very bored. He's broken two bones in his leg. He's broken a bone in there and then he's done a spiral break that goes around like that. He's had it operated yesterday to get a rod thing put in from his knee to his ankle. So he's gonna be off work for about three months. He's meant to be in hospital for another couple of days yet, but I know him, he'll probably go home with us when we go up to see him today. He'll probably discharge himself. If I can get up there I'm gonna go look after him cos my Mum works during the day and my little brother will be at school and my brother works and my brother's girlfriend works, so I'm the only one who doesn't work as much.*

Relying on informal networks rather than social services or the state was common among participants of this study. Hannah and Sally, who were friends, shared resources in order to cope with poverty.

**Hannah:** *But if Braden [friend's pre-school son] needed snacks and I knew he was coming to my house, then I'd buy him snacks. It's just like that, because we're friends – I don't know; that's just how we work, us two.*

Hannah had accommodation she shared with Sally. Likewise, Sally had a car and provided transport to Hannah. Nancy also talked about reciprocity in her interview. She had a reciprocal arrangement with a member of her community around firewood.

**Nancy:** *He's coming to mow it [lawn around her home]. He's either coming back on Tuesday or he's coming over during the weekend. I don't know. I haven't heard anything yet. He's a chap who's hard up, and he works for his money. He works hard and he's finding it hard. He's got all the firewood there. He said, 'Oh, this will keep me*

*going all winter'. I said, 'Well, I hope so'. But I said, 'It's all yours for your labour'. So, I'm doing a bit of swapping. He's cutting the trees and he's got the timber for labour. I'll give him some money for doing what he's done.*

Other participants gave to others in different ways. For example, Amy completed a budget for her uncle and he helped her in return with firewood and lawn mowing.

**Amy:** *With my firewood and stuff, my uncle and my dad do that, so I'm pretty lucky there, because my uncle's deaf, so I do all his budgeting. He'll go out and cut my wood and he'll bring that in for me and mow my lawns so I don't have to worry about those.*

It was common during participant interviews to hear stories of giving to others or giving back to agencies who had provided help. A few participants who had assistance from a family support agency talked about donating clothes their children had grown out of back to the agency. It was clear that participants wanted to give support, not just receive it. Hine, during her interview, expressed her sadness that poverty meant she was no longer able to donate to a charity for the poor. Giving to others was a way in which participants pushed back against the shame and stigma of poverty and strove to maintain their dignity.

### 5.3.5 Companion Animals

For some participants their relationships with companion animals were important. During Nancy's interview, she talked about a dog she had who had since died. It appeared that she missed his company and discussed how she would take him with her on trips to visit her family and the conversations she had with him when they travelled together. Four other participants talked about having a dog for companionship and of those, two talked about having a dog to protect their children.

The participants who talked about companion animals during interviews indicated that they saw them as part of their family/whānau. Companion animals are part of “the social environment” (Walker, Aimers & Perry, 2015, p. 34) and relationships with animals can be significant for humans (Ryan, 2011; Taylor, 2013). The importance of companion animals was acknowledged in the 2019 ANZASW code of ethics, which recognised “the sentience of animals” (p. 11) and the protection of them in social work practice. Emily talked about the importance of her dogs and the role they had in the family of protecting her son, Lucas.

**Emily:** *I’ve got two dogs. I’ve got two pitties x huntaways.*

**Lesley:** *Oh, so you’ve got big dogs?*

**Emily:** *Yeah, I like my big dogs. They’re so cool. They’re really protective over Lucas.*

*Lucas can go outside and I can go inside and if someone turns up they will sit on either side of him until they know who it is. And even if the cows get too close to him they bark.*

**Lesley:** *And they’re like no-one’s gonna come near him. Wow, that’s cool eh?*

**Emily:** *Yeah, and everyone’s like, ‘pittie’s are really vicious,’ and it’s like, ‘no they’re not’. They’re so nice.*

Participants also commented that they would prioritise feeding their companion animals over their own needs. Megan said this about the puppy she had which I patted and talked to during our interview:

**Megan:** *My kids also include my animals, so they always get fed before I do.*

**Lesley:** *[To puppy:] Oh yes, but you wouldn’t eat that much would you? Not yet.*

**Megan:** *Oh no, she's only going to get about this big too, so she won't eat a lot either. But I got her mainly to grow up with the kids and for security. Being a solo mum, I want something – I want an animal. Because my kids will just go, 'Hi' and they'll let some stranger in my house, so I'd want a dog to at least bark and growl and go, who are you, why are you at my mum's house, kind of thing. I got her just so she can help protect me and the kids.*

Alongside feeding companion animals the cost of veterinary treatment was a concern to some participants. Megan saved money when she could to pay for veterinary treatments including vaccinations. She was aware of which veterinary service was cheapest in the district. Ashley, who had birds as well as a dog, also talked about the cost of feeding companion animals and she was keen for her partner to get a job to help pay for pet food. Like Emily, Ashley wanted to have a large dog for security after her rented flat was burgled.

**Ashley:** *A course or something to help him get a job cos we've got a dog and two birds as well.*

**Lesley:** *They all cost though, don't they?*

**Ashley:** *The birds aren't too bad though, cos your seed costs \$2.80 or something like that and it does them for two weeks. The dog's the expensive one.*

**Lesley:** *Have you got a big dog?*

**Ashley:** *She's a Rottweiler cross Huntaway. We got her for security, because we were living in flats and they were just a bad place to be living and we got her for security because we got broken into.*



Figure 5.3: A huntaway dog. Both Ashley and Emily had dogs which were huntaways crossed with another breed. (Simon, 2016 – 2019).

Dogs can provide a sense of security and protection which was valued when living in areas where there is a heightened risk of being a victim of crime as well as preventing loneliness.

#### 5.3.6 Relationships with Social Services and Professionals

Sometimes help to make ends meet came from professionals and this was crucial for some participants. For some participants professional assistance was alongside family/whānau support, and for others it replaced family/whānau help. Generally, participants had positive comments to make about professionals, although some participants had negative experiences when engaging with WINZ which will be discussed in Chapter Seven. For one participant, Nicole, having swimming lessons paid for by a service provider, was crucial to her engagement with the agency.

***Nicole:** Once you get knocked back, like I say, negativity is the worst thing about being in this trap. Getting depressed is the worst. I think that's what I would tell a social*

*worker, is to make sure they have the funding. Find the funding - I don't know how or why, just, if you have funding already available...Because I was sometimes thinking, 'What's the point of [social service] coming here?' Because I have [social service] come here every week. And I was thinking, what's the point? I'm wasting my fucking time. But as soon as they got them [children] into swimming, I have more patience for them. Because obviously I need help with Ella [daughter]. But why would I wanna help someone who can't help me in other areas? Why would I wanna work with somebody like that?*

Hine also discussed the benefit of practical help from a social service:

**Hine:** *I've been looking for work as well. I don't have any job interviews yet, but I've got clothing for it as well through Dress for Success. They're amazing. We went there yesterday and they gave me two brand new outfits. I got two pairs of shoes; I got a dress, a top and some leggings. I got a brand-new bag plus a couple sets of earrings as well as a necklace. They just really make you feel awesome about yourself, and I've never had that before. It was a very great experience and it was free.*

Since her interview, Hine has obtained employment and this may improve the financial situation of her family/whānau. One social service accessed by a number of participants was a food distribution service. In Michelle's instance, where poverty was compounded by intimate partner violence and geographical isolation, the help from the food distribution service was vital to the survival of herself and her children.

**Michelle:** *We lived out the back of nowhere, cos at that time in the middle of nowhere I had no friends, I wasn't allowed to talk to friends. He had control of the money and*

*he wasn't giving us nothing. He was taking all my money, his money and spending it all on drugs and I'd have like \$50 for food – and we'd have to get dog roll with that as well. So I was lying to the [food distribution service] just to get food. I became amazing at making stuff out of nothing eh? So I was having to steal toilet paper, not having tampons when I needed it. Thank God, the [food distribution service] were really great – I'm grateful for how much they gave me, but I think she had an idea what was going on.*

However, help from social services could be a fraught experience. Two participants described negative experiences with food distribution services and felt judged when they visited the service. One participant felt so shamed by her experience she would not return. Garthwaite (2016), in her ethnographic study about urban foodbank use in the United Kingdom, commented that the experience of obtaining food from a food bank can be stigmatising.

Participants who were young (aged between 16 and 19) and on a benefit had access to Youth Services. Engagement with a Youth Service was a requirement for receiving financial assistance from WINZ and these participants were obligated to work with a Youth Service social worker on their plans for training or work and with budgeting (Ministry of Social Development, n.d.b). The Young Parent Payment (YPP) has been criticised as being stigmatising and manipulating the young parents (Ware, Breheny & Forster, 2017), however participants in this study found the Youth Service social workers helpful as they acted as advocates for them with WINZ. This enabled them to navigate the benefit system, as Hannah described:

**Hannah:** *I'm with Youth Service so it's a lot easier than WINZ. My Youth Service lady, they come to me and they come to my house and talk to me. And then I just fill out*

*paperwork and then they do it all for me, pretty much. So I find it a lot easier. She's [youth services social worker] really helpful – I love her. I don't love her, I just like her. She's real easy and I can just tell her anything. She's just easy to deal with. If I need things for Jack [son], then she'll apply for it. Cos Jack needed a car seat, and I had to go to the Warehouse and get a quote for it. I got the quote and I gave her the quote and then signed papers and then I got approved of that, because she'd done it all for me. It was pretty easy. Everything's easy with them.*

I also asked participants what advice they would give social workers about working effectively with the poor. Some participants talked about their experience of the delivery of social work services. As mentioned above, Jennifer had been investigated by Oranga Tamariki when her daughter appeared to have no lunch at school. While being investigated for child neglect was traumatic, Jennifer found the social worker helpful and appreciated her reassurance.

***Jennifer:*** *It's just having someone to talk to you and try and help where they can. The lady that came to see us when we were getting investigated about the lunches and stuff, she was pretty good. She talked to us - she said that we weren't doing anything wrong. Just the reassurance that we're doing fine was the best thing we had. We were freaking out, and having the reassurance that we're not doing anything wrong. It was just being able to have a conversation and the reassurance was pretty good to us.*

Jennifer found the affirmation from a social worker useful and a number of participants said that they would like social workers to treat them with respect and compassion. Brittany said she wanted social service workers to know how “how hard it is and how it makes you feel” to be poor. Steph had the following to say about how she thought workers in social services should treat people:

**Steph:** *I think it's just giving a more emotional approach and more respect for the situation people are in. There are different circumstances and there are different ways of dealing with things. Although I know the pressures of having to reach targets and all that kind of stuff, and I completely understand it, I think if services like that put more emphasis on dealing with people rather than paper, it would be a lot easier.*

Megan talked about the importance of social workers being compassionate in her interview:

**Megan:** *I think one of the biggest things is that people are afraid of being judged. It's like, 'well, you buy alcohol' or 'you buy smokes', 'that shit could go on this that and everything else.' It's like, yeah, I can understand that, but look at the bigger picture. Don't judge someone just because they enjoy a beer or a wine a night or every couple of nights. There might be a reason behind why they're doing that.*

Being compassionate and accepting also involves being witness to the experience of poverty and the structural violence experienced by those living in poverty as discussed in international literature (Blumhardt & Gupta, 2017; Hosken, 2016; Krumer-Nevo, 2017). Having their daily struggle heard was important to participants and one participant stated she wanted to have a voice. Two participants talked about wanting social workers to advocate on their behalf as individuals, and about poverty in a wider way.

Some participants responded to this request for advice for social workers by talking about WINZ. They talked about a system that was exhausting to navigate whereby they would be required to provide large amounts of information which could be difficult for participants to access. Steph discussed this in relation to applying for a child-care subsidy.

**Steph:** *I think there's a lot of people that purely don't go in there because you don't wanna do all the paperwork and you don't want to prove this and that and gather everything for them. It's like us with the nine-hour subsidy for our youngest for childcare. I just can't fathom in my head how I get all of that stuff together when we've just closed a business off and this is really our first financial year where we're not dealing with GST and all that stuff and it doesn't look like I'm earning millions when I'm not. It's hard to get to grips with that side of things too when you're just a normal person. If you walk in there and you reach someone that's right, I've got 10 bits of paper that I need to fill out today. When you have that kind of feeling, it's really hard to even want to be in there.*

Some participants in this study did not apply for benefit entitlements and/or subsidies because the application process was overwhelming. Working alongside people as they navigate the benefit application procedure is something social workers can assist with. The Auckland Action Against Poverty group provide a model of this process and have published information about benefits which is useful for beneficiaries and social workers, the 'Beneficiaries Rights Booklet', which can be accessed on their website (Auckland Action Against Poverty, n.d.a).

## 5.4 Conclusion

This chapter has focused on daily life as experienced by the study participants. For participants in this research, life was stressful and included daily struggles to make ends meet. On limited incomes, participants managed to survive by going without, being creative in managing and sharing resources, using careful budgeting, and approaching problem solving with tenacity. The tentacles of poverty

reached into all aspects of the participants' lives and affected their relationships and ability to parent. Key aspects of participant daily living impacted by poverty is summarised in Figure 5.4 below.

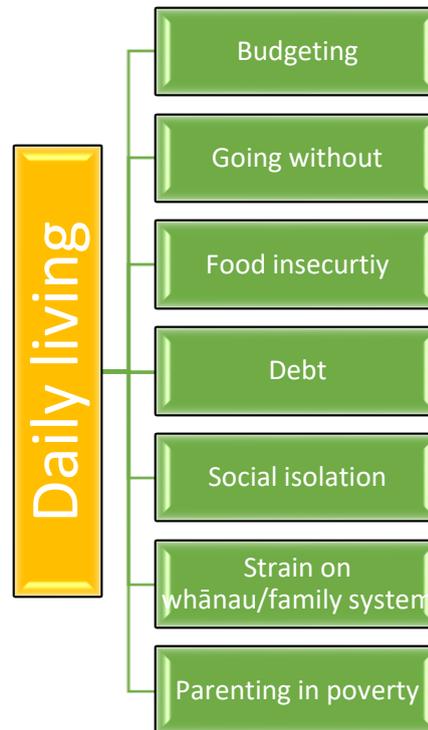


Figure 5.4: Aspects of daily life affected by poverty for the participants of this study

As a consequence of poverty, participants budgeted carefully and went without food, recreation, a social life, and clothes—often doing so to ensure their children and companion animals were not disadvantaged. However, going without put a strain on their relationships and their families/whānau. Poverty resulted in social isolation and made parenting difficult. Some participants felt trapped by poverty and resorted to going into debt in order to pay for living costs. However, participants in this study were financially aware and would avoid debt if at all possible. Participants identified that effective social work practice with people experiencing poverty would be characterised by compassion, acceptance and preparedness to advocate on their behalf.

## Chapter Six: Being Poor and Rural: How Poverty and Rurality Intersect

The following chapter reports on the findings related to the lives of participants within their geographical context. Where a person lives impacts their access to employment opportunities, education and housing (Hankivsky & Cormier, 2011; Howard et al, 2016; Saunders, 2011). Additionally, the availability of social services and health care is determined by where people live. For participants in this research, poverty and living in a small town or rural location intersected to affect their wellbeing and limit their opportunities, and negatively affected their life course trajectory. This chapter begins with reporting findings regarding the participants' experiences of living in the Stratford region, noting in particular the impact of isolation. Next, findings related to transport issues are discussed along with participant access, or lack of access, to services. Following this, the participants experience of employment, education, health and housing is explained. Finally, I present a discussion of the impact of disability on the lives of some participants and consider the relevance of intersectionality as it pertains to experiencing poverty in a rural context.

### 6.1 Living in Stratford

Some participants had an attachment to the area in which they lived. These participants could trace their family history back through generations, all living in the Stratford region, and a number of them talked about having moved away but being "drawn back" to live in the area. Some participants described this as the pull of the mountain (Mount Taranaki) which had significance for them, and the mountain provided a touch stone or sense of being tied to something bigger than themselves.

In these instances participants were using the notion of place (discussed in Chapter One) when they connected themselves to the mountain; their identity was tied to the land in which they lived or where they had grown up (Maidment & Bay, 2012; Pugh & Cheers, 2010). For tangata

whenua, the maunga or mountain is a crucial aspect of their identity alongside the awa or river they identify as being affiliated to, and the waka or canoe their ancestors migrated to Aotearoa New Zealand on (Taonui, 2017). Figure 6.1 is a photograph of Mount Taranaki as viewed from Midhirst, Stratford district.



Figure 6.1: Mount Taranaki as viewed from Midhirst, to the north of Stratford (Photograph: Lesley Pitt)

The group of participants who talked about attachment to Mount Taranaki also indicated that family support and a sense of connectedness to the district was an incentive for staying in the area. The loyalty of rural New Zealanders alongside their knowledge of each other, including family histories and awareness of each other's abilities and weaknesses, has been identified by Hollis-English and Selby (2015) as peculiar to rural people in Aotearoa New Zealand. For some participants, living in a community where others know a lot about you was helpful, as was the case for Ashley who found support and comfort in her relationships in the community.

**Ashley:** *Neither of us [Ashley lived with her partner] really know anything different and it scares me to go out in the big wide world. I'm already here, technically in the big wide world, but I'm comfortable in Stratford. I've got my friends. I've got my family. I don't want to go away from my family. I've always wanted to be near my family. I'll probably stay in Stratford or at least in Taranaki anyway.*

However, not all participants lived in Stratford by choice. Three participants, Megan, Nicole and Aroha had court orders that required them to live in the area. Aroha was happy to remain in the area, but for Megan and Nicole, the issues of living in a rural area were exacerbated by a lack of choice.

**Megan:** *I'm wanting to move up to New Plymouth, cos I'm qualified in hospitality. I wanna move up to New Plymouth and get a job there, cos at least there's transportation up there, there's things for me and my kids to do and it's easier to get a job. It's just getting permission, which has been denied by the father of my son, but now hopefully it's gonna go through Court and the Court will have some sense to let me actually move up there with my children.*

Megan and Nicole talked about feeling trapped in Stratford and Nicole also talked about her perception that people living in Stratford normalise and accept poverty. Hegemony, as discussed in Chapter Three, relates to the idea that people accept the dominant discourse regarding their plight as normal while believing they are powerless to change their situation (Brookfield, 2005; Chase & Bantebya-Kyomuhendo, 2015; Madison, 2012). In the transcript below, Nicole resists internalising oppression (accepting oppression as a normal state).

**Nicole:** *But a lot of Stratford people have done it, so I reckon it's the norm. It's sad, but that's the norm to me – struggling. I know that it doesn't have to be that way. I wanted to get out of Taranaki. There's just so many of us, and of course we're friends: we share the same interests, but we also can hold each other back because we don't aim, we just become okay with sitting around talking about our problems and never actually getting anywhere.*

As Nicole described, having a sense of social connectedness can be helpful, but not always. Nicole's experience of being 'held back' by her friend group may be part of the daily struggle of living in poverty where people can "feel embattled and caught in a spiral of events beyond their control or making" (Presbyterian Support Otago, 2008, p. 11). The concept of "communal poverty" (Wynd, 2014b, p. 82) was demonstrated by Nicole's peer group who struggled to see a way out of their situation. The struggle experienced by participants was sometimes exacerbated by their isolation.

## 6.2 Isolation

Participants talked about feelings of isolation, and for some, the isolation they experienced was a consequence of living in poverty. International research highlights the link between poverty and isolation (Chase & Bantebya-Kyomuhendo, 2015; Stewart et al, 2009), although Lister (2004) warns that the link varies between countries. In this study, remote geography was an additional factor. For example, Nancy, who is in her 70s, had moved with her husband from Auckland (where her adult children live) to Stratford. Nancy's husband then died leaving Nancy isolated without family in Stratford.

**Nancy:** *I would like to meet somebody that would be there and look after me, but, no, I'm okay. I would say that the children don't really care as much as I thought they*

*would do. You look after them, bring them up and you think, oh, well, in the future they'll be able to retaliate and look after you, but they don't do that. I'm just stuck in the woods here.*

Another participant who discussed geographic isolation was Michelle. In talking about living in a remote community, she said:

**Michelle:** *We were on the dole out there. It was hiding from society. He [ex-partner] got worse and he treated us worse and it was his way of still being able to do it without anyone knowing – cos he'd go into town without me. Out in the country, you can't just go down every day and get food so you don't screw up, out there. Out there it was an hour and a half to town.*

Michelle experienced social isolation due to the remoteness of where she was living, poverty and a lack of transport.

Not all participants indicated they were socially isolated, particularly if they had been raised in the Stratford district. However, those who had moved into the area, like Nancy, were more likely to discuss their lack of social connectedness. Megan also talked about a lack of support. She had to move to Stratford, as explained above, as a result of a court order. Poverty contributed to her isolation as Megan had no transport, which precluded her from visiting her friends in another town.

**Megan:** *There's no-one I really know here. My mum's quite sick, so I can't exactly go over there and, 'Hey can you look after my kids for a couple of hours and give me a break?' Down in [name of town] I had a couple of really close friends who would come over, keep me entertained – not necessarily leave the house, but keep me entertained and help out with my children because I'm a solo mum. I can't do that here. I've got*

*nothing here. I can't get out of the house with my children to give us all a breather, and I fuckin' hate it, I really hate it. It's expensive. It's really, really lonely.*

Megan's isolation was both geographic and a consequence of poverty, and was also exacerbated by difficulties accessing transport.

### 6.3 Transport

Problems with transport contributed to isolation for most participants in the study, a finding consistent with other research about rural living in Aotearoa New Zealand (Carmichael & Kennard, 1999; Hollis-English & Selby, 2015; Ngaruahine Iwi Health Service, 2016), and with the international literature (Blakely & Locke, 2005; Howard et al, 2016; Pugh & Cheers, 2010). Some participants owned vehicles and were therefore able to get places, although the cost of petrol was a barrier. Participants who owned vehicles talked about the costs incurred through vehicle ownership which they found difficult to pay; such costs included: petrol, vehicle maintenance, warrant of fitness testing and vehicle registration. These costs resulted in hardship and in some instances, fines, particularly when vehicles had not been registered. For those who did not have access to a vehicle the dearth of public transport in the Stratford district contributed to their isolation. There was a bus service from Stratford to New Plymouth, but no public transport exists within Stratford or the surrounding area.

Vehicle costs, including registration of motor vehicles, was noted in earlier research focused on urban poverty in Aotearoa New Zealand (Hodgetts et al, 2013). For the rural poor, this issue is compounded by their need to have private transport, and as such, they are often unwilling vehicle owners and spend a higher proportion of their income on transportation costs than urban

counterparts (Pugh & Cheers, 2010). For some participants buying a car and keeping it going generated debt:

**Crystal:** *I got an upgrade of my car and then the local car yard gave me a dud car and I had to pay \$1700 to get it fixed. Work and Income paid for all that and covered it all, but I still owe them \$1700 and my car, which I need to get rid of, I'll probably only get \$2000 for, so I've lost out on my whole car in the beginning that I had, which someone paid \$5000 cash for. So even if I sell this car, I've still got to pay WINZ.*

In the following excerpt, Nicole talks about the difficulties of using public transport and the fines accrued from running an unregistered vehicle:

**Nicole:** *They don't even pay for you to go up to WINZ. Yes, you could jump on a bus – but what, the bus would leave at, say, 7 o'clock in the morning. How am I gonna do that - Aiden [son] goes to school. I can put him in Oscar [Out of school care and recreation], I've heard that they do run programmes, but that's more money and the funding won't be there, because I'm actually just going on a bus to go to training. Would they pay for that? I don't even know, and I worry to ask, cos they're like, 'Oh you must be doing sweet'. It's just not that way. I've got \$800 worth of fines, and I'm gonna have more, because I didn't have a rego [vehicle registration] on my car.*

Ashley identified the lack of transport as the biggest issue for herself and her partner. Getting a driver's license and owning a vehicle was unaffordable, but not having a vehicle affected her partner's ability to obtain employment:

**Ashley:** *If we had transport, he [partner] would have had a job by now because so many people from New Plymouth and Hawera have wanted him to come work for*

*them and he's like, 'Oh well, is there anyone I can carpool with in Stratford?' And they're like, "No." And he goes, "Well." Hopefully he will get his restricted license and it should help him out a lot. That's our biggest problem, is the whole transport thing. Even if he does get his restricted, where's our car?*

The issue with transport was reinforced when I asked Ashley if she would like a ride home after her interview (which was carried out in a café). She asked if I could take her to the supermarket, which was further away than her home, as she wanted to spend her grocery voucher, the incentive for the interview. As implied in the quotation above, purchasing a car would be a significant additional cost for Ashley and her partner. There was a further cost for those participants who drove without a license, and not having a license or a registered and warranted vehicle resulted in fines for participants, as was the case for Nicole and Kayla:

**Kayla:** *I rely on my father a lot. Like I said, he buys my nappies. He just paid for me to get my restricted [driver's license] a couple of weeks ago, because I've been on my learner's [driver's license] for 10 years and I was getting fine after fine after fine, and he said enough is enough. 'You need to get your restricted,' and he paid for it. And I've gotta go up for my sister's wedding next month and I can't afford that. He's paying for my gas. If I need anything, he's happy to help me out. But I feel, I'm 25 years old, I shouldn't be relying on my parents.*

A few participants raised the cost of transporting children between households when parents were not living together. Parenting across two households added to the stress of living in poverty. This was something participants in this research had little control over. In Jennifer's situation, the family were spending money and using their time to meet the needs of her partner's children.

***Jennifer:** This week we're having to stop payments because we've got to go and pick up the children from [town four hours drive away]. We have to do the drop off and pickup because the mother doesn't do long-distance driving. And we priced the bus ticket and we priced the fuel and it's the same price, so we were like, well we might as well just go for the drive. But that's \$187 fuel, there and back, and we did that last weekend and we've got to do it again this weekend and we've gotta stop all payments that we possibly can.*

A few participants talked about not seeing their children due to the cost of transport. Participants also discussed the costs of travel to child-care centres, schools, or a tertiary education provider. Michelle discussed the expense and time involved in transporting her children to primary school while she was living in an isolated community. Her partner had conflict with staff at the local school their children attended and consequently the children attended a school which was further away.

***Michelle:** Because no-one liked him [partner]. So we went to [name of another school]. We had to spend a lot of petrol going over the Saddle morning and night. It was a 40-minute drive for them [the children] so they were whacked when they got home.*

Participants discussed not being able to visit places with their children, including places which were free, due to the price of petrol. For example, Aroha shared that she had not taken her children to the library and other participants spoke about not going to the beach. While participants accepted that they could not involve their children in paid activities, several expressed frustration about not being able to afford free activities due to travel cost.

**Aroha:** *I'd love to do things like take the kids into the library and stuff and you just can't afford to, cos it costs too much. Even activities in New Plymouth that are cheap, it still costs \$20 gas to get there and back, kind of thing.*

Emily was working towards her driver's license through an education provider, but at the time of interview she was dependent on others to go places:

**Lesley:** *I take it you haven't got a car then?*

**Emily:** *No, I don't. It bugs me, because it's, I wanna go here but youse can't take me there because it's out of the way where youse don't go. I really don't like being dependent, reliant on other people. I know one person [father's ex-partner] but I can't really go see her, cos she's in Hawera and I don't actually have a way to get to Hawera.*

For Emily, a lack of transport has had an impact on her relationships with others. Even though the distance to visit her father's ex-partner was only 30 kilometres, she had no way of getting there. Emily was able to get to her education provider as transport was provided. The provision of transport for pupils is an example of providing an accessible service; without this transport option, Emily would not have continued her education.

Unlike Emily, Robert and Carol, who were retired, had a car which they needed to attend medical appointments, but they limited the amount they used it:

**Robert:** *Once upon a time we'd just hop in the car and go wherever we were going. But now we have to consider it, we have to put the minimum amount of petrol in and things like that. It's one of the reasons we bought this little car, because we used to go*

*to specialists in New Plymouth. I go to a specialist, Carol goes to specialists occasionally and other things. And we have to travel to do anything, whether it's the doctor or whatever. Yes, we have to just consider where we're running to. That's why we very rarely go out of Stratford really.*

Like Emily, the cost of transport contributed to the isolation experienced by Robert and Carol and placed a strain on their finances. Transport issues added complexity to living in poverty, with the lack of transport impacting participants ability to access services.

#### 6.4 Access to Services

Research in the United States identified how rural poor were disadvantaged due to a lack of support services (Blakely & Locke, 2005). A more recent study carried out in Taranaki by Ngaruahine Iwi Health Service (2016) also found disadvantages for members of their Iwi in accessing services. Participants in that study lived closer to Hawera. This study, which has more participants, supports their findings, as most services are centralised in New Plymouth or Hawera. Participants in the study talked about having limited or no choices in relation to services. Pat talked about her husband going to a general practitioner in New Plymouth as he was having ongoing treatment for skin cancer:

***Pat:** We were going up there – and [husband] kept on going with his doctor because his doctor was a GP but he was also a skin cancer specialist – he wasn't a specialist but that was his speciality. He had a skin cancer clinic.*

Lisa provided an example of the limited availability of health care services in the Stratford district as well as her experience of stigma and a lack of anonymity when living in a rural community. Lisa is on an opioid substitution programme and gets her methadone from a chemist in Stratford, her

only option other than travelling to another town to obtain it. Having no choice about where she obtained this service exacerbated the pressure of on an already stressful and stigmatising situation:

***Lisa:** I'm one of the lucky ones here, but it's only because of the way I treat people. I try to be nice to everyone. The guy that I was talking about, he got kicked out of the chemist [while obtaining methadone] for being an asshole and he has to travel to outside the area. But I go in there and be polite and wait my turn. It's ridiculous how some of the people are in there. Society already looks at you as scum for being on the methadone, and you're just saying, 'Yeah, yeah, we are', with your behaviour. They go in unbathed, unwashed and just look like ughhh. They mix all these other drugs and then they have fights in there, and this person hates that person and they're abusing each other – and there's other customers standing around. I just walk out when that happens. I don't want to be associated with these people. That may sound snobbish or 'I think I'm better than you' but I don't care. I don't want to be one of them.*

Jennifer wanted to obtain employment, but the cost and availability of childcare meant that her family would not be in a better financial position if she worked:

***Jennifer:** Just more things available for two working parents, like cheaper after-school care or more funding available, or just anything really. Being able to get help if there's nowhere – like WINZ, we can't go and ask for food grants - we just have to make do. So having somewhere where you can go, when you've got nothing.*

Like access to services, employment was an aspect of participants' lives restricted due to location.

## 6.5 Employment

A National-led coalition government, in power at the time of the interviews, advocated for work as a way out of poverty, including for parents (Cotterell, St. John, Dale & So, 2017). For some participants, particularly for those parenting on their own, paid work was not a viable option. Kayla talked about the dilemma of obtaining work while being a sole parent of a two-year-old with health issues:

***Kayla:** And I thought, I didn't wanna send her to anywhere while it was still in the cold weather, because I don't wanna have her start, a week later she's down with something and I have to pull her out. I thought I'd wait till the warmer weather, where there's not so many bugs around where I know she's gonna be okay. And with her not walking yet, cos she's got splints on to try and keep her ankles bent and her feet flat, I just think it's a bit too much for her at the moment to be thrown into that, plus being taken away from me for a full day with no-one she knows.*

Working was sometimes not financially realistic for parents due to the costs associated with both child-care and transport. Amy had a trade that enabled her to remain engaged in her profession, maintain skills, and provided stimulation. However, it did not result in any extra income for her family due to the costs of working:

***Amy:** I'm working two days a week up in New Plymouth, but that's more to get me out of the house, but it's actually costing us more for me to work up there than what I actually get out of it, so that's hard. Childcare's \$145 a week and petrol's \$40, so \$20 a day, and I get paid \$145 for working two days. So it just pays the childcare, but the kids love it, so that's the main thing. It's for my sanity – otherwise I'd just go crazy being in the house.*

For Sally, the end of her relationship affected her paid employment on a farm. Even so, Sally continued to feed the calves on the farm after the relationship had ended. Feeding calves is often work carried out by women on farms. Women's role in farming has traditionally been based on patriarchal principles where women are an invisible, unpaid workforce (Keating & Little, 1991; Pitt, 2010; Wendt, & Zannettino, 2014), as was the case for Sally. Her employment in farming was precarious as it was tied to her ex-partner's position:

*Sally: I just came off [working on a farm]. My partner was managing the farm. So when we split, that's when I stopped; came off. Cos we were already rocky, right from the start, we only put him on the contract for managing. I still reared his calves after that.*

Changes in the economy and the farming industry have been raised in the media (Newman, 2019; St Clair, 2014) by farming organisations who represent the farming sector, such as Federated Farmers of New Zealand (Federated Farmers of New Zealand, n.d.). Farmers, unlike participants in this study, have a voice through organisations such as Federated Farmers who advocate on their behalf and express concern if changes in the global economy affect the prosperity of their members (Miller, 2017). Those who work on farms or in industries which support farmers are significantly impacted by global economic downturns. Daniel's employment on a farm ended due to a fall in the price of milk fat in the global market (Livestock Improvement Corporation & DairyNZ, 2015). As Daniel and his partner's home was included in their employment package, they were required to move off the farm. Brittany talked about the loss of her employment on a farm also being due to an economic downturn:

**Brittany:** *There used to be an egg farm here. I was there for about six years, but they made me redundant cos they were closing down. That sucked, cos I loved that job.*

Participants discussed in some depth the limited employment opportunities in the Stratford district.

Jason, who has experience and qualifications in horticulture, discussed the difficulty of looking for work:

**Jason:** *I guess it's just difficult to get a job in a small town like Stratford. There's very limited work in Stratford. I've applied for jobs around here and that, but just because of what I'm going through at the moment [on bail for a violent offense] – it's self-inflicted, what I'm going through, but it's just making it more difficult. There's so many people and options for employers. It's not like before: they can take someone on and just wing it. They've got a lot of options for people to take. They can't just take a stab in the dark with somebody like myself. A lot of people haven't got the chance to prove themselves these days. It's not like it used to be.*

Jason's story, when analysed using critical theory, highlights the power held by employers who can use the lack of employment opportunities to obtain the cheapest labour. Jason's experience is an example of the failure of neo-liberal capitalism for workers, that is, wealth has not trickled down to the workers (Brookfield, 2005; Farmer, 2003; Giroux, 2008) and work available has become insecure. This may be exacerbated by the economic impact of COVID-19 where early indicators suggest a detrimental effect on employment (Ministry of Business, Innovation and Employment, 2020a).

A number of participants had experience working in the dairy industry, which was an important source of employment in the Stratford district (Stratford District Council, 2014). While

participants said they enjoyed the work, they often described the conditions and hours as difficult. In 2015, Helen Kelly from the New Zealand Council for Trade Unions commented on the lack of accountability in the dairy industry particularly in relation to pay and conditions, including long working hours and inadequate time off work (Meadows & Cronshaw, 2015). When I asked Daniel if he had enjoyed working on a dairy-farm, he had this to say:

***Daniel:** I loved it, but when it came to the bosses, if the boss is stressed out, they take it out on you. That's the main thing I realised in dairy farming. He used to get us to mow his lawns and do all sorts: dig big drains and all that stuff. You get more as a relief milker [employed for individual milkings]. I've been doing some relief milking, that's good.*

Daniel said he would earn more as a relief milker, but this work is insecure and seasonal. While there has been a reduction in employment in the Stratford District in relation to dairy farming, the opening of a new supermarket provided employment opportunities (Groenestein, 2015).

Ashley was one of 90 people who were employed when the supermarket opened in 2015. While Ashley enjoyed the work and wants to remain in this job, her employment was insecure, she did not know from one week to the next how many hours she would be employed for. Insecure work has been on the rise in Aotearoa New Zealand as a consequence of neo-liberal labour deregulation, which have undermined unions and legislation has been introduced which advantages employers (Stanley-Clarke, 2016; St John & So, 2017). Insecure employment conditions include casual, agency-based fixed term or seasonal employment (Cochrane, Stubbs, Rua & Hodgetts, 2017).

***Ashley:** It opened in late June [new supermarket]. We got trained up, so we knew what we were doing by the time we started. We just car-pooled. And who had the car*

*and stuff, they got paid gas from them. So we trained up there for about a month I think before [new supermarket] opened. So I've been there from the get go. It opened up a lot of jobs.*

While employment has been viewed as the route out of poverty, in Ashley's situation, it kept her in the same financial situation she was in before being employed. She and her partner continued to rely on WINZ to make ends meet. Her partner tried to get work at the supermarket but was unsuccessful. Ashley was employed as she had earlier completed food safety unit standards of the National Qualifications Authority.

## 6.6 Education

Like employment, gaining additional education is promoted as a way out of poverty (Child Poverty Action Group, 2017; Egan-Bitran, 2010). However, the costs of education for participants and their children was a burden. While the Education Act 1989 allows for free schooling, the reality was that schools regularly asked parents to contribute to the cost of their children's education, through donations or by paying for equipment or educational trips. These requests were frequently beyond the budget of participants, and they felt stressed and stigmatized when they were unable to pay fees and other related costs. Households in Aotearoa New Zealand pay a proportionately large amount of the education costs for their children when compared to households from other OECD countries, with poor families paying disproportionately more of their income on education than wealthier families (Child Poverty Action Group, 2017). Due to the 2019 "Wellbeing Budget" and starting in 2020, education costs have subsequently been reduced somewhat, as decile 1 - 7 schools now receive an equivalent state donation of \$150- per pupil, per year, if they agreed not to send donation requests to parents (New Zealand Government, 2019). When participants talked about not being

able to meet the financial expectations of the schools their children attended, they expressed feelings of frustration and shame. There was also variation between schools in what families were expected to contribute financially.

***Michelle:** Then school – I honestly have not paid anything for school's... I don't know why they haven't taken me to Court or anything over stuff. Not even frickin' tissue paper, all that stuff. I said no to donations and I had been paying it, but it got too much. Especially when he [son] got to second-last year of high school - oh my God: \$40 for this book, \$200 for this trip. School has been the worst. In the country it was awesome, out there if there was a sports day, all the families would come, you'd just bring out the sausages, a dollar a sausage and they'd get enough money. You didn't have to pay for anything but \$10 a year for stationery. Nothing else. Here \$2 to bring your artwork home, well what? \$2 a term for tissues. What, can't you give them out for free? And now this stupid thing where they have to buy their own whiteboard markers and Vivids' [felt pens] and stuff for school - that's ridiculous. Can't you just have them sitting there to use? When I was a kid we used everything at school.*

A factor which added to parental stress was the decile rating of the school attended. The way decile ratings were calculated is discussed in Chapter One. The participants whose children attended schools in more affluent areas appeared to be under more financial pressure with a resulting sense of shame at not contributing as much as other families at the school. Literature from both Aotearoa New Zealand and overseas notes the dynamic of people being judged by those in positions of power, such as school principals and teachers (Chase & Walker, 2015; Egan-Bitran, 2010). Schools are an environment where children may feel they have been judged, where they were compared to other pupils, and treated unfairly (Chase & Walker, 2015). For children in Aotearoa New Zealand, the

school environment is one where children are confronted with what they lack in comparison to others (Egan-Bitran, 2010; Expert Advisory Group on Solutions to Child Poverty, 2012). As discussed in Chapter Two, these comparisons were more likely and more noticeable at a higher decile school, a matter raised by Kelly:

**Kelly:** *I can see him looking and he stares at them [at school]. Like they had dress-up day the other day and all the other kids had these big, elaborate costumes on. I just had a little Angry Birds t-shirt and his Angry Birds hat and he didn't feel as good as the others. And then we had to give them a dollar and that went to the KidsCan for the poorer schools [son attends a decile 6 school].*

Parents in the study aspired for better things for their children and placed importance on education even if they had had poor school experiences themselves. The participants in this study valued education and wanted their children to have good educational opportunities as Nicole comments:

**Nicole:** *I use every possible resource I can: we're in [social service agency], and they paid for his swimming lessons. He has free guitar lessons: I stretch my budget so I can put him into [name of school], because, I don't know, the quality, and the quality of people, I believe, is higher. I think the lower your income, the different ways of your mind thinking is a lot different – without trying to be rude to people – and I don't want my son to be trapped into that sort of thinking.*

Participants talked about wanting to further their own education to increase their chances of employment. However, this was not always possible because of the where they lived. Sally wanted to

be a paramedic and was considering moving to the Wellington area to pursue study, while Brittany had this to say about the barriers to her enrolling in tertiary education:

**Brittany:** *That's the thing I'm having at the moment because WITT's in New Plymouth and I know you can get like travelling stuff in vans and stuff like that, but that doesn't leave a lot of time for her [pre-school aged daughter].*

Brittany could go to WITT, the nearest polytechnic on a free bus but she would have to leave early in the morning and return late at night, which would be difficult for her as a parent.

Furthermore, gaining a tertiary qualification in an attempt to obtain employment was not always successful. A number of participants had qualifications, such as in horticulture, farming and cooking, but were still unable to find work. Tertiary education did not guarantee employment and often left participants with debt via a student loan. Daniel talked about having a \$10,000 debt from training to work in the dairy industry, and Ashley was also unable to find employment on completion of a tertiary level programme:

**Ashley:** *I left school at the end of 2011 and then in 2012 I did an early childhood course and I tried getting a job in there, but because I was only about 17, people must have thought I was too young or something so I didn't really get far. The year 2012 was when I moved in with Chase [partner] and he had his full-time job then and he actually held us up, cos I was too young to go on the benefit. I was only 17.*

For some participants poor health created a barrier to being employed. They had chronic health issues which meant it was difficult or unrealistic for them to work.

## 6.7 Health

Poverty often equates with poor nutrition, poor housing conditions, increased risks of infection, and difficulty with personal hygiene (Shaw et al, 2014). The poor in Aotearoa New Zealand are more likely to have difficulties with their weight and to suffer from diseases from poor diet, such as Type 2 Diabetes (Beddoe & Maidment, 2014; Bywaters, 2014; Mullings & Schulz, 2006; Wynd, 2011). The connection between living in poverty and experiencing poor health was very evident in this research. In this study, participant health was affected by similar social factors to those that affect urban areas, such as poor housing and food insecurity. In addition, living in a rural location meant that accessing health services, particularly free or low-cost services, was more difficult as these tended to be situated in urban areas.

As discussed in the previous chapter, parents went without food and healthcare for their children. The cost of prescriptions was also a barrier to maintaining good health; participants in this study talked about not getting prescriptions filled or not collecting their medicine when they could not afford it. A recent qualitative study carried out in Otago, Aotearoa New Zealand, focused on poverty and prescription costs and found that participants prioritised medicines for their children over their own medication. It was also noted in that study that poor people made complex decisions about getting prescriptions filled, such as going without food to pay for medicine or choosing to get some medicines over others (Norris, Tordoff, McIntosh, Laxman, Chang & Te Karu, 2016). A participant in this study, Daniel, who was asthmatic, tried a different strategy to get inhalers:

***Daniel:** I'm an asthmatic and I hate going to the doctor, because we just can't afford the asthma inhalers ... so I try and find another way of getting asthma inhalers and because we've got a family that have got asthma, so they might have a spare puffer.*

Karen also discussed prescription charges and going without food to pay for health care:

***Karen:** The prescription charges are another one for me being on an Invalid's Benefit. They say they haven't put it up for years and it's only two dollars but I have a lot of scripts. It can cost an extra \$20- which doesn't sound like much but it is for me. So sometimes I have to get one script a week because I just paid the doctor. And then you've got your normal scripts for asthma which I have and then you've got your other scripts for pain medication so that's an extra maybe twenty dollars. For a person like me on an invalids benefit, that's a lot. I don't know what it's like for other people because I don't walk in their shoes but for me it's massive. You go without food to go to the doctor. You have to choose, am I going to buy groceries this week or am I going to go to the doctor.*

Parents in this study also prioritised their children's health over their own and did not seek health care for themselves due to the cost:

***Kelly:** Yeah well, it's like your healthcare stuff. You always take your kids to the doctor, but never yourself.*

Participants were aware of what they needed to do to be healthy, but poverty got in the way. For example, some participants talked about not getting cervical smear tests carried out or not paying for particular foods to meet the needs of an illness. The five participants in the current research who reported they had diabetes were all aware of what they should eat but could not always afford the food that would contribute to their wellness. Fresh fruit and vegetables were food groups participants commonly went without and this compromised their health. Income level has been identified as the strongest determinant for food security and the ability to obtain high nutrient food

(Carter et al, 2010; Jackson & Graham, 2017). Jennifer talked about her experience of having Type 2 Diabetes, food insecurity and not being able to afford prescription medication.

*Jennifer: Every time I get a sore it will get infected. There's this red medicine that I'm always on which heals infections. I'm pretty much always on that, cos if there's any bugs going around, I get it. Before I used to be on all these different vitamins and stuff, back when I had money and I was eating proper, and so I didn't get sick. Since coming here and losing most of our money, I'm sick all the time. I've been in hospital three times so far and that's only in the last three months. I've just about been hospitalised a whole heap more than that, but it gets to the point where I just get so sick, that I just refuse to go in, because you go in, they give you prescriptions and then I can't even afford to get them. Then I just come home, which I would have done before I even went to the doctor's. I just stay home and wait it out now because they give you the same prescription. And half of them are still sitting at the chemist.*

Jason, who also had diabetes, taught himself about nutrition and went to a lot of effort to stay healthy. His story is counter to what other participants said about access to fresh fruit and vegetables:

*Jason: I'd like to have the means to have good stuff to cook with and blenders and stuff and make good nutritional food. A little bit goes a long way. Berries and stuff, they're quite expensive, but you only need a little handful to chuck them in with your fruit. If you have a little bit of everything, then it's not so expensive. But yeah, if you eat all your bananas in one go. Like a little can of tuna will go a long way, if you just have it with some crackers and a little bit of cheese and tomato it goes a long way.*

*Just getting bumped out of my routine, I'm sure I've lost 4kgs since I've been here, just from not eating right. It's like a snowball effect with your health. If you stop eating, you just get used to it and then you don't realise how much food affects your whole wellbeing. I think they're [fresh fruit and vegetables] not expensive. I think more packaged and processed foods are more expensive. And it doesn't stay in your system long enough. So you tend to eat more, but if you have your low GI foods and vegetables and fibre and all that... just to keep your brain healthy and stuff. They reckon that your guts is your second brain. If you're not eating right, then it can lead to your mental health and that.*

Not accessing health care had ramifications for the health of participants in the long term. In some instances, not accessing health care was due to the cost of an appointment with their General Practitioner while others also talked about not being able to afford other forms of treatment or equipment, as discussed by Pat:

**Pat:** *I've got a pulled tendon in my wrist and it's been like it for six months. And this is how the conversation came up about you [with the practice nurse who referred her to the study]. A friend had got one, she'd had a problem with her wrist and she got a brace and it cost her \$30 or \$35 or something. I couldn't justify spending that.*

The stress of poverty contributed to participants health problems. Physical and mental health affect each other and people who are poor are more at risk of damage to both (Dale, 2017; Gibson et al, 2017; Platt, Stace & Morrissey, 2017). Jennifer talked about this in relation to her husband.

*Jennifer: I don't know what causes it, but it's like a massive eczema all over the body and dairy products inflame it and just everything inflames it pretty much. And then because of the stress on top of everything, it's just he's constantly flared up, like his whole body. You can barely see his actual skin.*

As stated, there is a link between poverty and poor mental health, particularly an increased likelihood of suicide (Garden et al, 2014; Gibson et al, 2017; Platt et al, 2017). A few participants in this study talked about despair and isolation. Some participants—particularly those with family/whānau connections to the place, the Stratford area—discussed working with others, mostly family/whānau, but also friends and social services, to combat the stress of poverty and reduce despair.

In order to obtain health care, some participants asked case managers at WINZ if they could access special needs grants and financial assistance additional to their benefit, which meant they had to justify why the health care was required. For some participants, these disclosures were a form of structural violence (discussed in the next chapter) where interactions with government agencies were dehumanising. Kayla experienced Post Traumatic Stress Disorder after the birth of her child and needed to access psychological support. A WINZ worker challenged her need for professional assistance:

*Kayla: I was having nightmares and I had to go to the doctor and the session that they wanted to do with me cost \$150 and WINZ had to pay for it and they were trying to say, well do you really need it? And I thought, well yeah I do. I can't keep living like this. It helped a bit. I'm not as bad now when it comes to sanitizer in hospitals and*

*that. I still get a little bit panicky, but it's not as bad and my nightmares stopped for a long time. I've just started getting them back now, but I think that's just stress.*

Some participants also experienced judgement from health care professionals. Michelle talked about her experience of being misdiagnosed. In Michelle's instance, because she had head injuries as a result of intimate partner violence, health professionals did not listen to her concerns:

**Michelle:** *That's why I had an operation, gallstones, is from being starved. I had ones this big. They were huge and they actually ripped open my gallbladder. Doctors not listening to me again. A year and a half I was ill, like sweating and felt like I was dying and they kept telling me it was irritable bowel syndrome and your brain's playing up, because I was passing out all the time. I had a rotten gallbladder in me for a year, I was toxic. I ended up lying in the hospital. I lied and said it felt like labour pains and they put an ultrasound straight on, because I knew it was really bad but no-one was listening because oh, you've just got brain damage. It did feel like labour pains. I don't like A and E [Accident and Emergency] and I won't go to the doctor's until it's really bad because a little bit of pain is my life, so I just thought it was my brain and they said I had IBS [irritable bowel syndrome], so I was eating the wrong food. But I was going, okay, this is the rest of my life – this is going to be dumb, because I couldn't even enjoy hanging out with my mates. So I was really excited it was something that could be fixed. Fucking doctors – pardon my language. So that was them judging me again. It's just been like that the whole time.*

Lack of dental care was common among participants. As dental fees were outside their budgets, many participants tolerated poor dental health. This study reflects the findings of an

Auckland study which found that the poor could not afford dental fees and that some of their research participants had pulled out their own teeth (Garden et al, 2014). While dental care is free from birth to 17 in Aotearoa New Zealand, adults have to access private dental care (Ministry of Health, 2017). Kelly talked about going without dental care.

***Kelly:** I always go without. Like my teeth are rotten at the moment. I've got some teeth taken out, but I need the rest of them taken out and I need false teeth. But I can't afford to do that. I just have to put up with it - things like that.*

Like Kelly, Lisa also talked about not being able to afford dental care she needed. As well as cost, access to health care could be difficult in the study area. Research conducted by Ngaruahine Iwi Health Service (2016) in rural Taranaki identified limited access to general practitioner services. Participants described having to travel New Plymouth and outside the province to access health services. Hine talked about their struggle when they had to go to Starship Hospital in Auckland for specialised paediatric care for her sick baby:

***Hine:** We were in and out of Base Hospital [in New Plymouth] for five months, for the first five months of her life, because they didn't know what was wrong with her and she was four pounds when she was six months old. So it's like, well everything youse have tried is not working. My cousin who's a Paediatric Registrar, I spoke with her and she rang the hospital here and said you need to sort it out and send her to Starship. So we got sent to Starship. Within three days they knew what was wrong with her. And just in those weeks - cos we spent a week there – and it was very hard because WINZ wouldn't come to the party. Because we had to leave: they rung us, can you go the following day? And we said oh okay. We didn't know the facilities that Ronald*

*McDonald House had. The social worker at the hospital set up the Ronald McDonald as well as petrol vouchers for us to get there and back, so we got that, but food-wise, we had to provide our own food. WINZ didn't come to the party and wouldn't even give us a food grant. They expected us to take all our food from home and travel it to Auckland, which we wouldn't have found a problem but we didn't know what facilities were available. Well you would think they would help you, but no, they were never forthcoming in helping food-wise. Eligibility for petrol, you had to live like 25 kilometres out of New Plymouth to get help with petrol to the hospitals, and of course we were going to hospital three or four times a week, and then sometimes we'd have to stay there. And we're travelling from [another small Taranaki town]; my partner wasn't working at the time - so he was actually bringing food in from home to bring in to me. And WINZ wouldn't come to the party for that either.*

While there was some support, paying for food was an issue for this family during the time that their baby was in hospital. Hine commented that during her time staying with her daughter in hospital she became aware that people were begging for food on social media while in hospital with their children.

Heating is a significant issue for the poor, with approximately 25 percent of New Zealand households experiencing fuel poverty, a consequence of the high cost of electricity and poor quality housing (O'Sullivan, Howden-Chapman & Fougere, 2015). O'Sullivan et al (2017) defined fuel poverty as being "unable to achieve sufficient energy to meet accepted standards of living" (p. 66). People do not choose to live in cold houses, rather their disposable income gets used for other necessities (Howden-Chapman et al, 2012). Adequate heating in winter was an issue for participants.

*Kelly: I live from day-to-day. I really don't eat meat. I can't afford healthcare for myself. We live in these two rooms, because of the heating. I put a sheet up there at night. We don't go up the other end of the house, because it's got no pink batts.<sup>18</sup>*

As stated above, fuel poverty is related to housing which is uninsulated, damp or substandard. Some participants, such as Karen, experienced health issues and had a disability.

## 6.8 Disability

Karen discussed the difference between the support she received from the state under the Accident Compensation Corporation (ACC) and the support she received via the health system.<sup>19</sup> During the interview Karen referred to her daughter who was receiving support for an injury through ACC, whereas she had a disability due to a chronic illness:

*Karen: There's lots of things which aren't covered [by WINZ]. Like my health things because they are one offs, like my wheelchair, you know the medic alert bracelets, I really need to be wearing one, I can't find the \$75-. WINZ says that because it's a one off. There's all these costs like ramps to the door, ramps to the other side of the door. For eighteen months I was trapped in my house, I couldn't get out. And it was only because people in my church actually stepped up and helped me and it was brilliant.*

One couple participating in the study also referred to ACC during their interview. Carol and Robert talked about the medical treatment Robert had received for a back injury. As his injury was a result of an accident, it was covered by ACC, unlike Karen's disability.

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<sup>18</sup> Pink batts are a common form of insulation in Aotearoa New Zealand.

<sup>19</sup> ACC is the Accident Compensation Corporation, a state-owned agency which supports people post-injury.

**Carol:** Robert fell off scaffolding and he cracked every rib and had compacting of the...

**Robert:** Spinal column. Well it was [painful], I can usually get on with pain: I've got two artificial knees; and I've just had the shoulder done last year, ACC paid for it of course, because we couldn't.

A study in Aotearoa New Zealand looking at socioeconomic outcomes for people with spinal cord damage, either as a result of injury or disease, found that those who were eligible for ACC payments due to injury were better off financially in the long term (Paul, Derrett, Mcallister, Herbison, Beaver & Sullivan, 2013). Important to note is the ongoing grievance in the disability community between those who are supported by ACC and those who are not, with those supported by ACC being consistently better off financially (Duncan, 2019). Pat raised in her interview difficulties getting support for her disability as a result of a health issue, as opposed to an accident:

**Pat:** They put on it, that they classed me as semi-urgent [for a back complaint] and it would be about four months before they could see me. So I rang them up to see why they were sending that letter, and she said the doctor had referred me because of my problems that I wouldn't need aid, but it's not urgent. And I said, 'Well, I can wait three or four months for anything else but I need to have something to raise the toilet seat, because at that stage I could barely put any weight on my right leg. So I'd manage to get myself to the toilet, I'd stand on my left leg, put my hands behind me to feel where the toilet seat was and fall onto it. She was here the next day: walking frame, toilet seat, she brought some other bits and pieces that I didn't need.

For Pat, her communication was successful in part as she got household aids to help her manage her disability, although it did not help her get a specialist medical appointment within a reasonable time

frame.

Participants talked about having children with disabilities and how this added financial pressure. What participants shared aligns with the findings of Wynd (2015) and Neuwelt-Kearns, Sam Murray, Russell and Lee (2020): that most families with a child with a disability face financial strain due to the extra costs of providing for their child. These costs will include the need for one parent to be available and not in employment, transport costs to appointments, and the cost of specialised services where mainstream services were not appropriate (such as after school care), and ongoing medical costs. While there is a disability allowance available from WINZ, it is capped at a weekly rate (Wynd, 2015). Michelle talked about costs for her child who is on the Autism spectrum:

***Michelle:** Davin's [son] really expensive because he's got autism and I have to have money for him, just to stimulate him and get him through the week. Because he has to collect things like Kinder Surprises – if you look he's got 27 in the last... He'll do anything to get another one. He likes pocket money. He has a ritual: you've gotta do everything the right way or you've got hell to pay later. If he doesn't have that milo at four o'clock or something... He doesn't understand why Mummy doesn't have milo. He hasn't got the intelligence to think of money and stuff like the other kids, so he gets angry.*

Kelly raised issues that she has had with her son during her interview. He is now an adult, but she continues to provide him with emotional support. For Kelly, her son's disability engaged the state in her life in the form of child protective services. As a young parent struggling with her own health issues, the response of services to her son's disabilities added to her issues.

*Kelly: He [son] doesn't really have a lot of contact with his Dad, but his Dad's got psychological issues too. I've tried to help his father over the years, many times, but it just hasn't worked out because he's got compulsive-obsessive behaviour, my son's Dad, and my son's got that too. He's got Asperger's. He had Asperger's, ADHD when he was little and when he grew up he was diagnosed with bipolar when he was 15. In and out of CYPS [now Oranga Tamariki] involvement all the way through, right from when he was at kindergarten and he used to fall off things - so he had dyspraxia as well, on top, when he was little. I didn't know. I was a young Mum, I was 16 when I had him. He used to sit there and scream and smash things and he used to do things like try to set the cat on fire. He loves animals, and I said to him, what did you do that for, and he said he couldn't explain to me why he did it. He's always been in and out of trouble his whole life, but he's trying to get a job. He's trying to function in normal society, but I have to keep an eye on him. I have to ring up every now and again to see if he's okay. Every two weeks I ring up just to make sure he's okay with his partner and she always informs me what's going on.*

Michelle and Kelly's stories about their sons demonstrate intersectionality. Michelle and Kelly lived with poverty long term, had disabilities themselves, and had to navigate obtaining services while living in a rural location.

## 6.9 Housing

As Kelly discussed, fuel poverty, poor health and poor housing are connected (Beddoe & Maidment, 2014; O'Sullivan et al, 2017; Shaw et al, 2014). Turner and Asher (2014) estimate that in Aotearoa New Zealand about 300,000 homes are "un-insulated, damp and cold" (p. 15). Poor insulation added to the cost of heating for Kelly. Participants' poor housing conditions were evident during interviews.

For example, I recorded in my fieldwork journal on 29 July 2015 that during Susan's interview she showed me curtains which were falling down and mouldy as well as a hole in her sliding door which was covered by the back of a chair. Susan, who was a home-owner, said she was unable to afford repairs. Hine also talked about the cost of heating her uninsulated house. Her experience is shared with others:

***Hine:** At the moment because our power's been ranging between the \$250 to \$300 mark during winter, our land agent, we talked to her about that, and she actually went to WISE Homes and they came in to have a look. There's no insulation whatsoever in this house, and we only have panel heaters to heat the rooms, so that's gonna hopefully cut down costs as well. So I just try and cut down costs wherever I can. My partner had to go, in the last month, to the doctors three times, which is \$40 a pop so I pay that off.*

The quality of rental housing in Aotearoa New Zealand has been noted as lower than owner occupied homes and that, as a result of inadequate standards for rental properties, people are more likely to get sick (Johnson, 2014; Turner & Asher, 2014<sup>20</sup>). Michelle identified the health impact of her family living in an inadequate state house, and that as a consequence, she decided to move to a private rental property seeking a better standard of housing. However, this proved to be expensive:

***Michelle:** It's taken me now to eight years to get a bit better house. The Housing New Zealand house made us sick all the time. They don't give you curtains, carpet. The wind flew through the house. We'd get black mould. We were just sick all the time.*

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<sup>20</sup> Following data collection legislation was introduced in 2019 requiring landlords to meet minimum standards for insulation and heating in rental properties (Ministry of Business, Innovation and Employment, 2020b).

Poor children are more likely to be admitted to hospital for lung diseases, which can have a long-term impact on their health (Simpson et al, 2015; Turner & Asher, 2014). This was the case for Kelly's daughter. Kelly talked about her daughter's illness in relation to their housing situation:

***Kelly:** My daughter contracted bacterial tuberculosis and I'm thinking it was to do with the house because it was quite filthy when I moved in, but I cleaned it all up. But I think there was still something there and of course she ended up in hospital and she's got a bit of scarring now [on her lung].*

For the ten participants who owned their own homes, there was an ongoing stress of paying for their mortgage and the upkeep of their property. Aroha discussed the stress she and her husband experienced about the upkeep of their home:

***Aroha:** I was actually told that this was an old mining shack. It was actually only one bedroom, which makes sense because as we've had to renovate to accommodate for extra children that surprisingly turned up, we've uncovered really shoddy joinery. We've actually pulled things off and it was like they just cut a bit of 4x2 [wood cut 4 inches by 2 inches], stuck it in there. I don't understand how this didn't fall down on us, because it wasn't even a structural wall when it should have been – just a mix-matched bit of wood. The dumb thing is that we renovated and it cost us so much more just because of that - even though we did try and take shortcuts and get the cheapest products and stuff, because we couldn't afford it. But we've had to get loan on top of loan. We had to – what's the word when you put all your loans together? We've still got no equity in the house. We'd love to go to a bigger property, but we just can't afford to.*

Sole parent families can struggle with the cost of housing. Several participants dealt with this by living with family members, although this was not usually sustainable. While Sally (mother of a pre-school son) spent part of her time at her mother's home but due to their difficult relationship she drifted between her mother's home and her friend's house. According to Statistics New Zealand (2009), Sally would be considered homeless as she was "sharing someone else's private dwelling" (p.6) in a way which was temporary. Sally had found a private rental to move into and in the excerpt below she shares her experiences in relation to the barriers to securing a tenancy:

***Sally:** At the moment, well I've got a house. I've never had one through an agency and I can't afford bond and WINZ won't pay for my bond, cos I'm \$23 below budget at the end of each week if they do, because of my phone. I have nowhere to live. Where if WINZ just paid it, I would have a house. I can't get my house and I haven't even been to the real estate yet and told her that, so I might lose the house altogether. I know there's a leak in the roof so I was planning on going in this morning and say, "Hey, do I move in before the leak in the roof gets fixed?" Because the landlord lives out of town and hopefully she says, "Yeah, you do actually". If they [WINZ] gave me the bond, I'd have a house, I'd be able to get on track. But because of that, I can't. That's the only thing I need to get me on track. And instead I have to sofa surf for two months probably so I have enough money for a bond. And that's not good fun.*

The control the state was exerting on Sally was evident in her story. The assumption was made by the government agency that she could live with her mother and her mother's partner— notwithstanding Sally being a parent, the difficulties in her relationship with her mother, and Sally's desire to be independent.

## 6.10 Intersectionality in a Rural Context

Intersectionality was evident in the participants' lives, as shown above in Michelle and Kelly's stories. For Michelle and Kelly, their social positioning as women, as sole parents, of having a disability and parenting children with disabilities, living in poverty, and being in a rural place, intersected. The consequence of this intersection is that each factor is exacerbated by the other. For example, being poor and living rurally meant it was more difficult to access services for their children than it would be if living in an urban setting. Having multiple systemic issues to deal with generates significant life challenges compared with each issue on its own, thereby contributing to day-to-day stressors for Michelle and Kelly, and the complexity of their daily lives. The "multiple dimensions of inequality" (Weber, 2006, p.31) in terms of where they live with their gender, health status, dis-ability, age and poverty are illustrated in Figure 6.2 below.

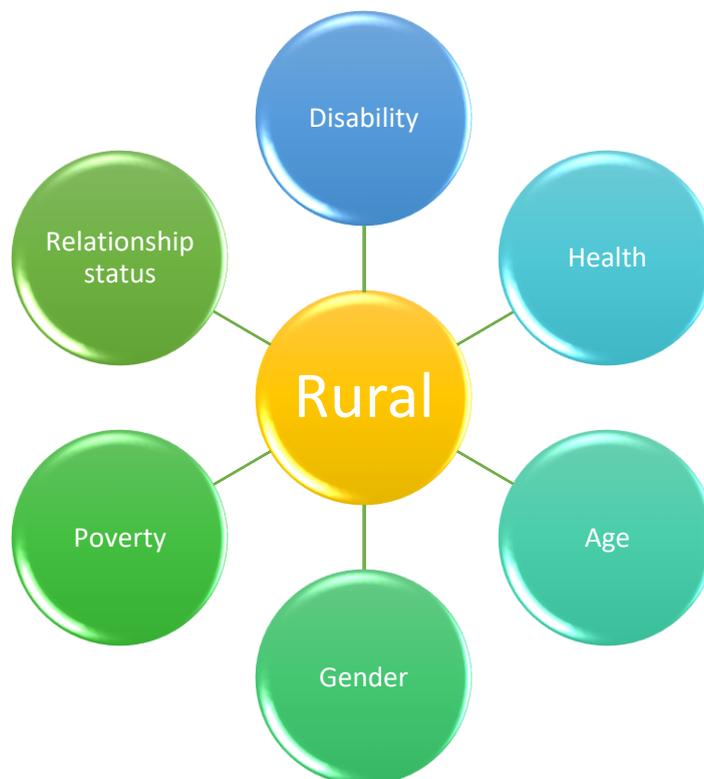


Figure 6.2: The intersections of rurality with other social positions

The intersection of inequalities with their rural location, as depicted in Figure 6.2, had an impact on participants in this research. It was not the rural location alone that impacted on their daily lives, but geographic location combined with other factors, such as their gender or health status, added to the difficulty of participants' lives.

Each participant was shaped by different forms of oppression and the intersection of different determinants altered their lives and contributed to their marginalisation. The intersection of social positioning, rather than any one position, influenced the degree of agency participants could generate to create change in their lives for themselves and their children. For example, three participants interviewed were under 20, women, sole parents and poor as well as living in a rural location. The intersection of age, gender, relationship status, poverty and rurality influenced their lack of access to power and opportunity to improve their social positioning. If they had not been poor or if they had lived in an urban area, they may have had more options for education, childcare, housing and employment, which could have improved their lives. Acknowledging the integration of the oppressions experienced by participants is an example of Choo and Marx Ferree's (2010) second aspect of intersectionality (discussed in Chapter Three)—analytic interaction—which is that oppression is integrated. Choo and Marx Ferree's (2010) third aspect of intersectionality, institutional primacy, which takes a wider scope when considering oppression, is also useful in considering the intersectionality demonstrated through participant experiences discussed in this chapter as it encourages consideration of multiple sites of oppression.

### 6.11 Conclusion

For most participants in this study, living in Stratford district was isolating and reduced the number of services they could access. Difficulties with transport exacerbated this isolation. For participants

with a vehicle, it was a struggle to keep their vehicle fuelled, serviced and registered. The participants who did not have a vehicle relied on others to get them places or used limited public transport services. Accessing transportation was a critical consideration for some participants in relation to securing employment and furthering their education. Lack of access to reliable and affordable transport significantly restricted opportunities to improve their financial state.

The cost of housing was also a substantial financial burden for participants in this study and the quality of the housing some participants lived in negatively impacted their health and the health of their families/whānau. Some participants did not access health care or obtain medicine prescribed for them due to the cost, and others did not obtain equipment required for their health and disability needs. Living in a rural location intersected with other factors in participants lives to make every-day life challenging. The following chapter will explore further the notion of intersectionality and the participants' experiences of oppression.

## Chapter Seven: Violence and Oppression: Internalised, Interpersonal, and Intersectional

Participants in this research experienced violence and oppression which intersected with their experience of poverty. The findings related to these dimensions will be explored in the following chapter. The chapter starts with a consideration of intimate partner violence. It was not my intent at the beginning of the research to explore intimate partner violence, however, several participants raised the topic during the interviews by referring to their own experiences of intimate partner violence either as a victim or perpetrator of the violence. Other participants commented on intimate partner violence within their family/whānau systems. Patriarchy, the systemic dominance of women by men, is then examined in the chapter. The internalisation of oppression by participants is also discussed, with particular reference to experiences of shame and stigma related to poverty and contact with WINZ and other social services. The chapter concludes with an exploration of structural violence and intersectionality.

### 7.1 Intimate Partner Violence

Research into intimate partner violence has predominantly focused on urban areas, although more research into intimate partner violence in rural communities has taken place over the past twenty years (Hall-Sanchez, 2016; Mason, 2012; Rennison & DeKeseredy, 2017; Wendt, Chung, Elder, Hendrick & Hartwig, 2017). Studies in the United States found that the rates of intimate partner violence were similar between rural and urban areas (Hall-Sanchez, 2016; Rennison & DeKeseredy, 2017). Recent research in Australia found that rates of violence were higher in remote regions (Little, 2017).

Intimate partner violence in rural areas bears some differences to partner violence experienced by urban women (Wendt & Zannettino, 2014). Violence in rural localities can be exacerbated by geographical isolation, the presence of and easy access to firearms, and a patriarchal culture with more clearly demarcated gender roles than those found in urban areas and where women feel pressured to keep private what goes on within their homes (Little, 2017; Mason, 2012; Wendt et al, 2017). Pressure to keep secrets may be more pronounced in rural communities where people are interconnected through family relationships and social activities, leading to vigilant guarding of privacy in abusive relationships (Little, 2017). Accessing help can be difficult due to a lack of rural social services or poorly funded and understaffed services, slow response times of emergency services due to geographical distance and low staffing numbers in rural locations, as well as a lack of transport and limited access to legal advice (Edwards, Mattingly, Dixon & Banyard, 2014; Mason, 2012; Wendt et al, 2017; Wendt, 2009). In this study, patriarchal notions of masculinity contributed to the participants' experience of intimate partner violence, and for one participant, as a perpetrator of violence.

Intimate partner violence was discussed by some study participants. I chose to use the term intimate partner violence for this research as it accurately describes violence which takes place when people are in a relationship of an intimate nature. There are other terms used in literature and within social services such as domestic violence, family harm or family violence. However, these terms include more than violence within an intimate relationship. Domestic violence has been used to describe violence between intimate partners, however the word domestic indicates something wider than intimate relationships.

Family violence is also a term commonly used in social policy and in social services, but like the term domestic violence, this particular nomenclature includes a range of people considered to be

within a family system. The term refers to various forms of violence such as child abuse and neglect, elder abuse, violence between intimate adults, violence between siblings, and adolescent violence towards parents of caregivers (Ministry of Social Development, 2002). Family harm is a term also used but is broader than violence in an intimate relationship. The New Zealand Police (2020) states that the use of family harm as a term results in a holistic approach and recognises the impact of violence within family systems. Within the Family Violence Act 2019, family violence is identified as physical, sexual or psychological abuse directed at a person or those within their family. It can include acts to control or coercion, can be dowry related, and recognises violence which causes cumulative harm. Intimate partner violence, while gender neutral, is more accurate in describing violence by an intimate male partner towards a woman (Crichton-Hill & Taylor, 2013).

An area where different definitions of intimate partner violence create confusion is with the gathering of statistics (Crichton-Hill & Taylor, 2013). Women's Refuge reported that nationally 1,059 women and children living in "isolated rural areas" (Women's Refuge, 2015, p. 24) received assistance from their services. It is noted that following 2015 Women's Refuge no longer recorded statistics for work in rural areas in their annual reports. Police statistics for the study area were collected for family violence, not intimate partner violence. Stratford district falls into the Central District policing area which covers Taranaki, Whanganui-Ruapehu and Manawatu provinces. In 2016, there were 11,788 family violence investigations carried out by the police in the Central District area (New Zealand Family Violence Clearinghouse, 2017). Statistics are not available for the Stratford area specifically, a Police official estimated that during 2017 2,500 police call outs related to family violence were made in the rural Taranaki police area, which includes the Stratford district and South Taranaki (S. Howard, Police Projects Leader, personal communication, 27 April, 2018). These

statistics give a general indication about the rate of intimate partner violence in the district, but they are not specifically defined as intimate partner violence.

In rural areas geographic isolation can be used as a strategy to control a partner as highlighted in South Australian research into rural and remote women's help seeking when experiencing intimate partner violence (Wendt et al, 2017). Women in this South Australian study, who lived on remote properties, described sustained physical isolation as being part of the pattern of abuse they experienced. Like the South Australian study, some participants in this research described instances of intimate partner violence where geographical isolation was used as a form of entrapment by the perpetrator of the violence. By removing their partner from support and isolating them, the abusers were able to have more control. The women in both the Australian study and this research described being deterred from leaving their relationships due to the distance needed to travel to seek help.

In this study, Michelle's ex-partner, Murray (who was related to Kelly, another participant in this study), used geographic isolation as a strategy to maintain domination and control of her. Physical distance and lack of access to transport, other than access to Murray's vehicle, made it difficult for Michelle to leave the relationship. She talked about her experience of intimate partner violence from when she met Murray as a teenager until she left him when she was 32:

***Michelle:** Before we went to live out the back we lived closer to Stratford. We were on the dole [an income support benefit], Murray was 25 and I was 15. Murray was hiding from society. He got worse and he treated us worse, it was his way of still being able to do it [be violent] without anyone knowing; he'd go into town without me. Not only that, he put that much fear in me. He said he was going to kill my kids [also Murray's*

children], so you just think – you can't, because you've already tried [to leave the relationship]. He said he'd kill me, all of us, next time. You're too scared to try – that was until I was starving – when it got that bad and there was no food. There was no way I was gonna eat any food, because my kids needed it, so yeah, I took off - I hadn't eaten for five months. As long as I was drinking coffee and the coffee, because I didn't have time for the coffee – I still do it – I sip coffee. I would spend four hours on a coffee, just sip it all day. I had no time for myself. He was just bellowing orders. It was a nightmare, no break. There was one hour a night, because he was addicted to morphine too, so he didn't sleep well at night. It was a fucken nightmare. We had no water out there, so shit, I'd have to go down and get water from the [a public source]. I don't know if I was allowed to – I just did.

**Lesley:** Did you take down water bottles and fill them up?

**Michelle:** Two, two litres and that would only fill one flush of the toilet, so I'd be doing that all the time. We were not far from the tap. I was just trying to make anything out of nothing. My kids do not love Sizzlers [brand of sausage]! The Food Bank would give you flour and stuff, so I'd make cakes and whatever was in there I'd make use of. We had a lot of eggs on toast and Sizzlers. He'd get four ice-creams and we weren't allowed to touch them. He'd always threatened me. I'd come straight out of my mum's womb pretty much to him and he brainwashed me. ... and this is how life is – no-one cares about you. I had to plan for years how to get out, escape, doing it properly. I had a bag hidden with survival stuff and my kids' photos, because he never left me – he locked the kids in the room. People don't realise that there's so many people stuck out in the middle of nowhere and you're not allowed a TV and you're

*were 15 and now you're 32 and you've never been allowed to talk to anyone – how are you meant to think in your head what to do. The fact that I could have got out a long time ago and my son wouldn't have been damaged so bad – my kids wouldn't have been damaged so bad if I had seen a second on TV or a second in the hospital... Like something telling me that I could get out and there's a way.*

Michelle's story highlights the intersection between her age (15 when she met her partner), with her gender, and her geographic isolation—all aspects of her experience of violence that together created a position of powerlessness. Michelle worked hard to care for her four children which included providing water as they had no running water in their home, threats and constant stress. Michelle overcame her powerlessness and left Murray by walking over paddocks at night-time, until she could summon help. The violence has had long term consequences for Michelle and her children. Michelle endures the effects of a head injury, which was evident in the interview. I noted in my fieldwork journal on 26 June 2015 that Michelle would forget what she was talking about at times during the interview. Her eldest son suffered from depression as a result of being targeted by his father, as a child, for abuse and ridicule. Michelle's son was challenged based on his gender, for not being hyper masculine like his father, which can be described as evidence of hegemonic masculinity. For example, within their relationship, Michelle's ex-partner took the idea of the man as head of the family to the extreme by using male privilege and not allowing Michelle to speak and taking complete control of his family system, echoing how Millett (1971) describes patriarchy as the man as the head of the family (discussed in Chapter Three). Michelle's ex-partner used violence and threats of violence in order to assert his power and dominance over her and their children.

Kelly, who grew up in a family with Murray, Michelle's ex-partner, described why she did not recognise Michelle's relationship as abusive and how she had lived in relationships where there was also intimate partner violence.

*Kelly: I didn't know what was going on. I used to go out there every now and again and on the surface everything looked okay. I didn't recognise it, cos I've grown up with it. My Dad was quite abusive and my grandfather was. To me that was normal and I got in those relationships too. I haven't been in one of those for quite a long time; breaking that cycle. I think I just always met up with men that were like Murray and my father - those type of men - because that's what I was used to, I think, growing up. They seemed like real men and nice guys seemed like... People were scared of them and they had a reputation. Even my brother struggles with that reputation of - he's a family man and he's got kids but people still see him as 'the man'. So he's got the soft side of Mum, but he's still trying to hold that reputation of being a bit of a hard guy. It's a bit conflictual with him at times. But with me I'm just, nah, I'm stopping this now. We've broken that cycle of violence and child abuse within my generation.*

Kelly and her brother, like Michelle, were trying to break the cycle of intimate partner violence where violence takes place across generations within a family system/whānau. Jason was another participant who talked about intimate partner violence and was trying to prevent it. Jason, when interviewed, was on bail and one of his bail conditions was to live at his sister's home, as a result of legal action taken by the police following an assault on his partner. Jason was keen to talk about his relationship with his partner during the interview and said he found it helpful to talk about what had happened. Jason had attempted to access professional support in relation to his violence

but was not able to find a suitable service. Lack of access to services meant Jason was not able to talk through the changes he wanted to make to prevent future violence:

*Jason: I know I've done wrong, but I really wish the system wouldn't just separate us – like I wish they'd work with us together and try and find the core problem. At the moment they just don't want us to be together and it's just not an option for either of us. We're gonna get through it. Yesterday I was looking up the family violence on the internet and sending some emails off to tell them my situation and I just wanna know if there's any other kind of help we can have, so that we can be together and see each other, and just acknowledge that this was an issue that didn't have to happen. But you can't take away people's freedom of choice. We did choose to drink that night; I've acknowledged I've had an alcohol problem a long time ago. I could have just not drunk, but I guess your cravings can override your common sense. I can't believe all this string of events has happened. It's like we're old enough to know, for this stuff not to happen, but it still happened. I just don't want it to snowball out of control; I need it to stop. But when we drink, it's...She'll think about it days later and think oh yeah, you're alright. She'd always chuck me in the category of being a male, a typical male, and I'm just not... Maybe some aspects of me are, because I am a male, but I've tried to put on the table, you actually hate males, because of what's happened in the past and what's happened. But we just haven't been having much help from anybody.*

For Jason, while having limited access to resources and being unemployed and poor all of which reduced his sense of autonomy, his gender meant he was able to use force against his partner, which was a demonstration of patriarchy. However, Jason wanted to stop using violence in his relationship with his partner and found it frustrating that he was unable to access services in the Stratford district to address his issues. Jason also felt his partner saw him as being the same as other men she had been in relationships with who had abused her. He did not want to be seen in that way and wanted to live violence free.

Jason's story evidenced a criminal justice approach to intimate partner violence where it is assumed that the best course of action is to separate a couple (Crichton-Hill & Taylor, 2013). Separation was not the course of action Jason wanted to take; his preference was to remain as a couple with his partner and for them both to receive professional support. A traditional feminist approach considers that women are safe away from abusive men. However, this approach has now been questioned for having an ethnocentric bias; therefore anti-oppressive ways of addressing intimate partner violence have been suggested to deal with the uniqueness of each person's situation (Crichton- Hill, 2010). Unlike Michelle's partner, Jason did not identify that he was using violence in order to control his partner, instead, that the violence was a response to being drunk and feeling frustrated. Jason's story supports an approach to intimate partner violence which recognises there are multiple risk factors for men being violent, and preventing future violence needs to reflect the complexities of people's lives and cultural backgrounds (Crichton-Hill, 2010; Crichton-Hill & Taylor, 2013; Family Violence Death Review Committee, 2020).

Intimate partner violence has a ripple affect which impacts the wider family and social networks of the perpetrator and victim. The complex nature of intimate partner violence was evidenced by a violent attack in Inglewood, 21 kilometres north of the study area, reported in the

Taranaki Daily News on 30 May 2018. A 64-year-old man was assaulted, run over by a utility vehicle towing a horse float and threatened he would be shot by his daughter's ex-partner. The victim had gone to the former home of his daughter to collect her property following the separation of his daughter and her partner after a three-year relationship (Shaskey, 2018). This incident demonstrates the impact intimate partner violence has in wider family systems/whānau—in this instance the direct victimisation of family members of the woman who had been a victim of intimate partner violence. The assault of this man is an example of the complexity of patriarchal systems of power, with one man exerting power over another demonstrating what has been described as the “labyrinths of power in patriarchal systems” (Hunnicut, 2009, p. 555). Power is not always linear but fluid and diffuse (Foucault, 1980). At different points in time, people may have access to power but at other times they may not.

Substance abuse, as well as poverty, were risk factors for intimate partner violence (Crichton-Hill & Taylor, 2013; Edwards et al, 2014). The link between substance abuse and intimate partner violence has been identified in international literature (Faber & Miller-Cribbs, 2014; Mason, 2012). As shown in Jason's story and the Inglewood assault, intimate partner violence is complex. Lisa also described the complex nature of her relationship where violence and control were prevailing factors played out in daily life. As with Michelle's story, drug taking was a feature of the relationship Lisa had with her partner. Drugs were used by him to maintain control over her. Substance abuse was part of the complex nature of intimate partner violence for Lisa, Jason and Michelle, where addictions and oppression intersected.

*Lisa: He's very loyal like that. He would never ever cheat on me. When he's being nice, he's the most wonderful person ever. He's the perfect man; talks about me like I'm his everything. But then it's like a switch from Jekyll to Hyde. He's the most beautiful, loving*

*man I've ever met, and then he's the most hateful, spiteful, disgusting man I've ever met as well, and it's hard to say that about the same person. I don't get it. I just don't get how someone could be like that. I understand everyone has a bad day sometimes and can be in a shit, but not to that extreme. I don't know which one's real – that's another thing, I don't know which one is real. It's usually when he's got no pot. He's into other drugs as well, but he's usually alright without other drugs. But when he's got no pot – pot is the big thing and it's ridiculous. I know there are thousands of people that do – over pot. Probably the worst thing that's happened to my life is getting hooked on that shit. I used to dabble with drugs and just be a social drug taker, but I always swore I would never ever try heroin because I'd be scared I'd like it too much and I've seen all the movies with heroin addicts. And then when I met him, I knew he was into his drugs, but he offered and I tried it and liked it; and he kept offering the next day and the next day and I finally said to him, 'What is this stuff?' and he said, 'Oh, it's synthetic heroin', and I was hooked. To this day I think, if you loved someone as much as you say you do, why would you give them something that's so horribly addictive. That's the last thing I'd give someone that I claimed to love.*

Embedded within all the above excerpts relating to intimate partner violence was the role of patriarchy and the acceptance of hegemonic masculinity in which violence towards women and children and other men was a part.

## 7.2 Hegemonic Masculinity

A link between hegemonic masculinity and violence towards women has been identified in literature (Pease, 2016). Hegemonic masculinity is normative in that it is a socially constructed ideal of masculinity and what is, within that society, considered to be an ideal man (Connell &

Messerschmitt, 2005; Paris, Worth & Allen, 2002). Hegemonic masculinity is the dominant construction of masculinity, the version which is considered natural at a particular place and point in time (Campbell, Bell & Finney, 2006; Connell, 2002). In relation to rural communities, who is considered to be masculine may be different from what an ideal man is considered to be in a highly urban community. Masculinity intersects with other aspects of social life (Campbell, 2006). Jason alluded to this when he said he was more than just a violent man and Kelly talked about “real men”, referring to hyper-masculinity and violence as being aspects of the social construction of rural manhood. Kelly identified in her interview the roles of men in rural communities as providers and protectors. For rural men, masculinity can be enacted through work and recreation, including in sport.



Figure 7.1: Whangamomona Domain, with rugby field (Photograph: Lesley Pitt).

Above is a photograph of the Whangamomona rugby field. In the study area, the construct of an ideal man was shaped by the workplace and rugby. ‘Real’ men were perceived as hard working, tough, aggressive, competitive, dominating and risk-takers (Jackson, Gee & Scherer, 2009). Masculinity can be precarious in that being seen as masculine can change if a person acts in ways

that are not considered acceptably manly. This encourages public displays of manliness, such as playing rugby union, which can be used to reassert or defend manhood (Vandello, Bosson, Cohen, Burnaford, & Weaver, 2008). For men like Jason, these ideas of rural masculinity can overtake “other more gentle ways of being male” (Pringle, 2002, p. 61).

### 7.3 Patriarchy

The presence of patriarchy within some family systems/whānau was apparent in the stories told by participants. Patriarchy (discussed in Chapter Three) is a system of gender oppression in which men dominate women (Dominelli & McLeod, 1989 & hooks, 1982) and where men are also dominated by other men (Averett, 2009; Millett, 1971; Pease, 2016). Patriarchal social systems, therefore, do not serve the interests of some men as evidenced by the men in this research who were negatively impacted by patriarchy.

Participants talked in interviews about how gender shaped their lives in both the private sphere of home and family and the public world of work. For some of the women, gender influenced their experiences in the workplace. As Sally discussed in the previous chapter, her employment on a farm ended when she separated from her partner. Patriarchy was also evident in the private sphere for Sally when she talked about the control her ex-partner, Liam, exerted on her both during their relationship and when the relationship ended:

***Sally:** That’s pretty much why we split up, because after a year, I figured there was no trust at all. There was just rules, controlling. And then [after they separated] he made me feel bad for not going to his job and not doing his calves [feeding]. But it’s hard, because my mum and her boyfriend, they love Liam [ex-partner]. They still go fishing with Liam and go to golf with him. When I did leave, I got the, ‘I need your help,’ ‘I’m*

*going to kill myself,' 'I feel like I can't do this without you,' 'I can't do this by myself.'*  
*So I'd go back. Then I went out to a party and asked Liam to pick me up. He was at home watching Braden [son] and he picks me up ten times drunker than I was and was being an idiot with his car. I left him again, cos I'm more grown up than that.*

Sally, in the excerpt above, provides an example of how hegemonic masculinity is enacted, via the normalisation of heavy drinking behaviour. Patriarchy was evidenced as her ex-partner, Liam, had access to more power than Sally through his employment and his relationship with her family members. Liam was also better off financially than Sally post-separation as he maintained his employment on a farm, and he was able to garner support from Sally's family despite his abusive behaviour towards her.

One of the key features of patriarchy has been identified as control (Hunnicuttt, 2009; Lopes, 2019). Like Sally, Lisa talked about the power her partner exerted over her and the way he controlled her with threats of violence. In Lisa's case, her partner used his male privilege, his power as a man to dominate her:

***Lisa:** Once I was back there [with her partner], that was something he had over me. It was like 'This is my house now, and you're here because I said you could come back'. In all the arguments he was like, 'Pack your bags and fuck off.' 'I'll chop you up and throw you down the driveway,' and all this horrible stuff.*

Sally and Lisa talked about their experiences of being in relationships where their partners exerted male privilege—the assumption of entitlement by men. Male privilege has also been identified as a factor in South Australian research about rurality and intimate partner violence (Wendt & Zannettino, 2015).

Megan described how the wider social system, in particular the Family Court, can support male power. Megan did not want to live in the Stratford district but was ordered to stay in the area by a Family Court judge.

***Megan:** Him [father of her child] and his partner bought a house in Stratford about nine months ago, I think it was, and the Judge thought... To me I didn't feel like I had any choice, because it felt like the Judge was actually ruling in my ex's favour and the stupid thing was they brought in an outside Judge. They brought in a Nelson judge who obviously didn't know Taranaki and the area at all. Even me trying to explain that my ex worked in [name of town], so it's not like he was going out of his way to pick up his son on the weekly routine that we had. The Judge put it down to, oh my lack of transport, something else, something else and something else and he goes, 'Oh I suggest you guys work this out between you.' He wasn't actually in my favour at all. It was all to do with Luke [ex-partner]. I found it sexist, because he was a male Judge and he was looking at Luke like he was God's gift to man and quite frankly, he's a fuckwit. But I won't say anything like that to my son because that's just rude and mean and he doesn't need to know that – he can make his own choices when he's older.*

For Megan the ruling in favour of her ex-partner left her in a powerless position, particularly as she wanted to move to New Plymouth to obtain work.

Research carried out with indigenous women in New Caledonia found that women in the study were conditioned to consider the unequal power relations between men and women as normal and the women did not think about challenging this dynamic (Horowitz, 2017). Likewise, in

an ethnographic study of masculinity in small town New Zealand, the patriarchal power of men was accepted as normal and it was observed that young men were legitimated in the community, however young women were not and therefore likely to move away (Campbell, 2006). Participants in this research talked about supporting their partners in their role as patriarch and it appeared this was accepted as a natural state of affairs. It was evident that women participants sacrificed their health and well-being needs for their children and partners. In my fieldwork journal dated 15 October 2015, I wrote “I wonder about Hine sacrificing for her husband – seems to be a theme”. While Hine was in hospital with her baby, the hospital provided her with meals as she was a breast-feeding mother. Hine described what she did with the food in the following excerpt:

***Hine:** Dry cornflakes. They didn't give me no jam, no butter for the toast. It was just a dry piece of toast. And I was like... And I said to the nurse when she come, 'would you eat this?' And she's like, 'is that what they gave you?' And I said 'yes'. And she said, oh my God, that's horrible. So she went away and she got something else, like a couple of sandwiches, healthier sandwiches. But me and my partner - they were feeding me and I was giving him most of my food to him. So that's how we were eating.*

Ironically the notion of patriarchy could be enacted to protect women and children who were seen as vulnerable. Kelly talked about this in relation to Michelle's safety from her ex-partner. What Kelly described was her brother taking on the role as head of the family and protector:

***Kelly:** I got my brother involved, and because my brother is the next biggest person in line in the family, he told Michelle that he would assure her that if any major repercussions happened to her that he'd protect her - and that we were doing the right thing. He's quite a bit younger than me. He's seven years younger than me, so he*

*didn't see a lot [of family violence], but he's over six foot four. He's played high grade rugby league, he's a big guy and he sees himself as the protector of the family, I suppose you'd say - even though he's my little brother.*

In Kelly's excerpt, she mentions that her brother had played professional rugby league which meant that he fitted a masculine ideal of being physically able, tough and successful. Kelly's brother acted in a traditional patriarch role as the leader of a family system and was a controlling figure in the extended family. As revealed in Kelly's story and Hine's description of giving her food to her partner, patriarchy was internalised and enacted by women even when it worked against them, such as in Hine's case, or against other women in their family, exposed in Sally's story above.

#### 7.4 Internalised Oppression

Throughout the interview process participants internalised their oppression. This acceptance of oppression as normal was at a personal level, in relationships with partners and also at a political level, in relation to the state. As with Foucault's (1970) panopticon (discussed in Chapter Two), there was acceptance by participants of the power of, and surveillance by, the state and the intrusion of the state in their lives. This was commonly, but not exclusively, evidenced by participants' contact with WINZ.

Participants accepted their life circumstances and regarded poverty as normal although there were a few exceptions to this. Steph was one exception. She had become poor as a result of her partner being in an accident and viewed her current situation as temporary. Another exception was Emily, the youngest participant in the study, who expressed anger at the way she had been treated by WINZ when she became a parent, aged 14. Following the birth of her son when she was 15, Emily

had no income and no way of buying things for her son as she was not eligible for a benefit, a situation which angered her.

For Steph going to WINZ was a demeaning experience, however she demonstrated internalised oppression in the following excerpt about her experience of visiting WINZ when she talked about not wanting “to be those people”:

***Steph:** I just feel really embarrassed and demeaned. It was that whole perception in the community too, that people that go to WINZ are like the dole bludgers and the ones that pop out babies all the time, and we didn't want to be those people, because we had earned our own money and we'd worked really hard to get to where we were and then all of a sudden we were in the WINZ office. And you get looked at in there like you are just another one of them, so it's embarrassing.*

Steph's way of coping with her experience of dealing with WINZ was to separate herself from others she viewed as unbecoming. In a British study about shame among the poor, the authors commented that their research participants tried to separate themselves from others seen as less deserving (Chase & Walker, 2015). This same process, of beneficiaries separating themselves from those viewed as less deserving was also evidenced in a recent Aotearoa New Zealand study (Gray, 2017a). By trying to separate from others who were seen as undeserving, people tried to reduce their own sense of shame. For Steph, the separating out from others who use WINZ was a way of dealing with her feeling of embarrassment.

The concept of hegemony (Gramsci, 1973), that is, as stated earlier, the idea that people believe they are personally responsible for their own poverty, can help explain the shame Steph expressed. The shame Steph experienced is a good illustration of Gramsci's (1973) concept of

hegemony. Another example of hegemony in this research is the humility that was expressed by participants; they were grateful for what they got and did not have a sense of entitlement. Jason, when asked about WINZ, said he had heard it referred to as Aunty WINZ and went on to say:

***Jason:** I haven't considered it to be a bad experience. I always go there... Like geez, if you can go to WINZ just for an hour and get two or three hundred dollars, that's like an hour's worth of – it's nothing is it? You've got rights and you can go there and claim for stuff. Yeah, what's there, it's fine. But I guess they give you just enough, but then they don't want to give you too much, because there are people who do smoke and drink and they don't know how to manage their money.*

Jason's statement "they give you just enough" showed his awareness that benefit levels were low, however he accepted that. The acceptance of "just enough" was an example of how stigmatising ideas about beneficiaries were internalised by beneficiaries themselves.

As well as internalising the power of the state, participants also acted on behalf of the state (although not intentionally) through their surveillance of others, a reflection of Foucault's (1970) notion of panoptic power. A number of participants who were beneficiaries spoke disparagingly of other beneficiaries, judging their lifestyles as unacceptable. Participants expressed concern that they may be sanctioned or miss out on much needed state support as a result of other people's inappropriate behaviour:

***Megan:** Just because there are some people that are alcoholics and gamblers and whatever and some unfortunate children that are in some unfortunate situations where the parents think of themselves before their kids doesn't necessarily mean we're all like that and we shouldn't be entitled to any less.*

Megan was aware of the negative societal perceptions of beneficiaries as was Jason when he said that if benefits were higher people would use the extra money to buy cigarettes and alcohol. The idea that beneficiaries will spend extra money they may get on tobacco and alcohol is not born out by research findings but is part of a wider stigmatising discourse (Beddoe & Keddell, 2016; Gray, 2017a).

## 7.5 Stigma

Poverty within Aotearoa New Zealand has been hard to make visible due to the stigma surrounding it and the judgements made about those living in poverty (Beddoe & Keddell, 2016; McNeill, 2017). Shame about being poor and a sense of failure can drive people to conceal their everyday experiences from public view and hide their poverty from others. A New Zealand study found that the poor used a range of strategies, including isolation and trying to pass as more affluent, to distance themselves from judgements and the stigma of being poor (Graham et al, 2018). While some participants in this research felt shame due to stigma other groups of people embrace their stigma and express pride in their stigmatised position, such as gay pride groups (Coleman, 2006).

Stigma was experienced differently for each participant depending on their life experiences and subject position. For some participants, the experience of stigma and gender intersected. For the three participants who were under 20, stigma was particularly noticeable and they experienced judgements other participants did not. These judgements related to their subject position as young women with children. Emily, the youngest participant in the study, had this to say about being stigmatised:

*Emily: I have been judged quite a bit. And it's like, just because you couldn't have kids this young, get the fuck over it. I'm a really nasty person when people judge me.*

Emily was part of the Young Parent Payment scheme (mentioned in Chapter Five) started in 2012 to target young parents as they were seen as being at risk of welfare dependence. The obligations associated with the scheme included compulsory parent education and budget advice which focused on the behaviour of young parents without addressing structural issues. As such, the scheme reinforced stigma (Ware et al, 2017). Income support benefits for young people are conditional, that is, recipients have to comply with the mandated activities or they will be sanctioned.

Sally, who was also under 20, talked about the way her ex-partner talked about her being on a benefit, while caring for their son:

***Sally:** Liam (ex partner) was one of them. 'Oh, you just sit there on a benefit.' In the end he gave me so much shit, I said, 'Shut up, Liam. You were brought up on the benefit. Your Mum's been on the benefit her whole life. If I wanna be on the benefit for a couple of years, then let me'. Liam said 'Oh bitches get our hard-working tax money, blah blah blah.'*

For Sally, stigma was generated by her partner's practice of discrediting her, reinforcing that something was wrong with her being a beneficiary. A United Kingdom study carried out with beneficiaries found that their participants felt a sense of shame about their situation on a daily basis, and in particular felt judged and degraded by people in authority (Chase & Walker, 2015).

Michelle talked about her experience of stigmatisation by people in positions of authority. After years of intimate partner violence and having had little to eat, she was thin.

***Michelle:** 'Eat, you junkie!' And I'm like, 'I'm not a junkie.' I was like this thin. I got out [of abusive relationship] because I was dying. My skin was peeling off. I was just*

*bones. My face – you saw a skeleton in the skin. Yeah, judgemental people, and because I didn't get him [abusive ex-partner] arrested, that's what the safe house thought, it's what WINZ thought. Society just thought I was a junkie and that's why I had nothing and it was my fault.*

Michelle talked about the stigma she experienced at WINZ and another social service. Academic literature has highlighted how the use of sanctions and strict criteria for benefit eligibility contributes to stigma; the punishing of people applying for a benefit has been described as “penal welfare” (Hodgetts et al, 2017, p. 72). In Michelle's excerpt above, she says she experienced blame while in a safe house.

Karen similarly discussed a stigmatizing encounter at a foodbank:

***Karen:*** *Begging, begging for food. I had a week where I had half an onion in my cupboard and that is all I had that week and I refused to go begging for food because it's so humiliating. Once I did it because I was so desperate, and I got told by a worker 'that will be a good weight loss programme won't it'. I never went back again and I was weighing in at 42 kilo at the time because I was sick.*

Karen talked about begging and the humiliation she felt at having to ask for food. I noted in my fieldwork journal on the 19 November 2015 that participants wanted to justify to me what they would spend the grocery voucher on that they were given—despite my assurances that it was theirs to purchase whatever they wanted to. Karen told me at the end of our interview that she would be using it to pay for her groceries for the next two weeks although this was also potentially a way of showing appreciation for the voucher.

Karen also found going to WINZ a stigmatising experience.

*Karen: WINZ, very harsh, depends on the worker you get, but if you've been on a benefit long term, it can be very harsh. My daughter was treated really different, she was a single parent on a benefit but short term, so she was treated really different because she was working towards something, so she was treated very different to me who had the physical illness and the doctor saying she's not going to work, period, and you actually get treated really bad. It's like someone saying you're society's throwaway, you're no longer of value.*

Karen was one of the few participants who had been on a benefit for a long time who did not accept the way that she was treated as normal. Other participants who had been on a benefit over a long period of time seemed less inclined to comment on their experiences with WINZ. This may be because they were used to being treated in a stigmatising way and had internalised the view that their situation was personal rather than political.

## 7.6 Structural Violence

Structural violence has been described as the subtle way in which social structures, through their practices, harm certain people (Family Violence Death Review Committee, 2020; Hodgetts et al, 2013). The application of power towards the poor in ways which cause harm, such as denial of food or clothing grants, are a demonstration of structural violence. The acceptance of the behaviour of the state towards its citizens, including breaching human rights, have come to be considered normal in society and “taken-for-granted” (Hodgetts et al, 2013, p. 3). Structural violence, as with critical theory and feminism, includes an analysis of power differences and inequality (Farmer, 2003).

In this research, power differences were talked about by participants in relation to their experiences with those in positions of authority and social systems, particularly the welfare system.

Jennifer experienced the application of power by those in authority when an assumption was made by a school principal that her child's lack of lunch was neglect. She was subsequently investigated by Oranga Tamariki. The allegation was shown to have no substance as her daughter was throwing out the lunch her mother provided in order to obtain a free lunch supplied at the school by a mobile service supplying lunches for children in schools identified as needing free food. The principal failed to ask Jennifer why her child was not provided with school lunches before they contacted Oranga Tamariki.

WINZ was the most common state agency participants had contact with while trying to access financial support. Participants contributed a wide range of observations about different experiences with workers at various WINZ offices. The experiences varied depending who the WINZ case manager was, and in the participants' experience, the same WINZ worker had treated different participants differently, depending on the relationship she had with them. Overall, the theme from participant encounters with WINZ was one of inconsistency. As participants were accessing WINZ services from a rurally based WINZ office where there were a limited number of case managers, the likelihood participants would see the same case manager each time was higher than if the office was in an urban centre. Participants mentioned one case manager by name and some participants felt they had a good experience with the worker, while others had found the worker to be abusive. Steph talked at length about her experiences with WINZ:

**Steph:** *The one particular one [case manager] that we struck the first time was awful. It was almost like she had a target to make and that was it. They weren't really interested in our personal situation, what our emotions or feelings or anything like that. They were just, 'fill in this paperwork, come back with the rest of the paperwork' and ra-de-ra. But the next one that we got was more thorough and understanding.*

*The first time we felt like we almost needed someone else who'd been through it to sit with us, so that we weren't gonna miss anything, cos it was just in and out. You're laying everything out on the table. Your whole financial life's on the table for everyone to see. You're sitting in this wide, big office with everyone else who's asking for money and you've got all your bank statements and everything and you're talking to them about your finances, which is not something that we're open about normally. You also feel a little bit irresponsible too, because you have things on your bank statement: like that time that you went down to the dairy and bought ice-cream or the time you went to McDonald's and KFC and you're in there asking for money when they're probably looking and going, well you spent \$50 on KFC, why haven't you got money?*

Steph articulated a number of issues raised by other participants, including shame at having to ask for help, having to expose personal financial history to strangers in order to get assistance, the sense that case managers were instructed not to approve requests, the demands to provide large amounts of paper-work to substantiate income and expenditure, and the unpredictability of visits due to the consulting case manager and the relationship the participant had with them. The priority in systems based on the penal welfare approach is to restrict access to benefits and to make access to entitlements difficult. Surveillance of beneficiaries' lives is common (Gray, 2017b; Hodgetts et al, 2013), echoing what Steph experienced when she was required to present her bank statements for her budget to be scrutinised.

Jennifer similarly talked about having difficulty accessing a supplementary benefit that she and her husband were entitled to but that they gave up, despite the fact that this meant they were \$93 per week worse off. Not applying for benefit entitlements as a result of stigma and the difficult nature of the application process has been noted by Gray (2016) in her study of sole mothers'

experiences as welfare recipients in Aotearoa New Zealand. Jennifer described how she felt after visiting WINZ and their decision to withhold her child support payments to pay off a debt with them:

*Jennifer: Because you go in [to WINZ office] and you'll be like, 'oh I've got nothing'. And they'll be like, 'well, if you look at it, you've actually got this, you've got that. Go and sell this, go and do that.' And it's like, well, if that was an option we would do it - but it's not an option, so we can't do it. Or they'll be like, 'oh no we can't help you with food because you owe us.' And it's like well, I wouldn't owe you anything if I didn't need it. They've [WINZ] been keeping my child support money. I haven't been on the benefit for like nearly three months and they've been keeping my child support money to pay off my debt. And I'm like, 'well how do youse have the right to take my money that's coming from the children's father? I need that money for the children.' As it is, I'm only meant to get \$89 or something for a month worth of child support, but yet I'm not even getting that. They're still taking it. That would make a great difference when I get it. That will take us to at least \$170 for food, so the day I get that is the day our life will be a little bit easier.*

What Jennifer experienced was similar to that described by participants in a New Zealand-based urban study of the poor, discussed previously, which found that the penal welfare system contributed to hardship, deprived people of food and shelter, and contributed to a sense of shame (Hodgetts et al, 2017).

Kelly stated in her interview how she felt about going to WINZ. Comments like this were common from participants in this study:

**Kelly:** *Terrible, they treat you like you're a second-class citizen. Sometimes you just don't feel like going even if you need something because of the way they treat you.*

What is concerning about what Kelly says, other than the shame she experienced, was that stigma stopped her from going to WINZ when she and her children were in need. What Kelly experienced is similar to the findings of Gray's (2017a) study where her participants found their dealings with WINZ intrusive and degrading, and the decisions made by WINZ staff confusing and inconsistent. For Kyle, the experience of penal welfare was obvious as he was trespassed from WINZ for not behaving in an acceptable manner.

**Kyle:** *I've been trespassed from WINZ. I had my two daughters in my care, I'd only just got them into my care, and I didn't have an income for them and I was finding it quite hard. I rang up WINZ and I asked them for a food grant, and they were like, 'Oh yeah sure, come down to the WINZ building. So I went down there, and the lady's like, 'Nah, I'm not giving you nothing.' And I was like, 'But you guys told me that you've granted a food grant. I've got no income for my kids,' rah rah rah and I swore when I was saying it and they told me to leave the building and then the Police came and trespassed me from every WINZ office in New Zealand. Even the South Island. I can't just walk in there – I have to have an agent go in on my behalf and they have to do everything for me. I've been trespassed twice from them in the last two years. I can't go in and update anything. I have to do it all via the phone. I was meant to have an appointment about three months ago to get my accommodation supplement sorted out, because I'm not getting that on top of my benefit, but I haven't got an agent, so I can't do it.*

Kyle was penalised for swearing which is an example of the way behavioural approaches have been used in penal welfare states to ensure compliance of beneficiaries through discipline, the use of

power against citizens, as a form of structural violence. Each WINZ office had security guards to check people as they enter as a response to a shooting incident on 1 September 2014 at the Ashburton WINZ office where a client shot and killed two workers and injured another (Clarkson & van Beyen, 2016).

As stated above, there were a range of experiences with WINZ encounters shared in interviews. Not all participants found dealing with WINZ difficult. Ashley had the following to say about her experience:

***Ashley:** They're [WINZ] pretty good. Obviously, it's not where I want to be but they definitely help out a lot in any way they can. I had a job at [fast food outlet] before I was at [supermarket] and because of my feet and ankle problems I was coming home in tears, every night, cos my feet were so sore. They bought me proper orthopaedic shoes with orthopaedic insoles just to make life a little bit easier. My shoes are amazing. I love them. Even the little things like that, that they don't have to help me out on - but things that will make me a little bit more comfortable with what I'm doing, they'll do it if they can, which is really awesome. The case manager I've got, most people would say no, I hate her, but for some reason she loves us [Ashley and her partner]. I don't know why. She has never ever been not nice to us like she has been to some other people. Same with the case manager we had before her, she loved us. Same with the case manager before her, she loved us. I don't know, I think there's just something about us.*

As Ashley commented, she and her partner had a good relationship with their case manager. A difference between Ashley and other participants who were dealing with WINZ was Ashley's

employment status. As the state was advocating for people to obtain employment and not be dependent (Gray, 2016; Hodgetts et al, 2017; Ware et al, 2017), Ashley's employed status may have influenced how she was treated.

For others who were not employed, their experiences with the apparatus of the state were generally negative and they battled to not succumb to wider, stigmatising discourses about beneficiaries. Within Megan's story was a determination to survive and a tenacity and resilience in her refusal to 'be a victim' which was shared by a few of the other participants:

***Megan:** I know this is gonna be a really bad thing [poverty], but it's like rape. You've got no choice over the matter, but somebody's doing something to you, but you can't do anything about it. When you come out the other end, you've felt like you're just completely violated and you've got no rights. It's hard, it's really fucking hard to survive and not to become a victim of it. And a lot of women and some men just don't see the positive side of it. I'm just one of these people that refuse to be a victim. I refuse to see the negative in anything. But I know there's a lot of negativity here [Stratford district] and it's draining.*

Critical theorists encourage resistance to oppression (Denzin & Lincoln, 2008; Gupta, 2015) and Foucault (1980) argued for resistance to the state apparatus of discipline in particular. Megan and a few other participants continued to resist the oppression of the state, but it was an ongoing struggle. For Megan, the intersectionality between the multiple factors of being poor, living rurally and being a woman contributed to her oppression.

## 7.7 Intersectionality

No one aspect of participant identity in this research provided an explanation for their hardship. Rather it was the way their subject positions intersected which was significant as discussed by Crenshaw (1989; 1991), the intersection of subject positions caused the participants disempowerment. For example, gender alone did not explain the structural violence participants experienced, but for some participants, the connection between their gender, rural location, poverty and health status offered an explanation for their experience of oppression. Figure 7.2 below shows the overlapping nature of intersectionality.

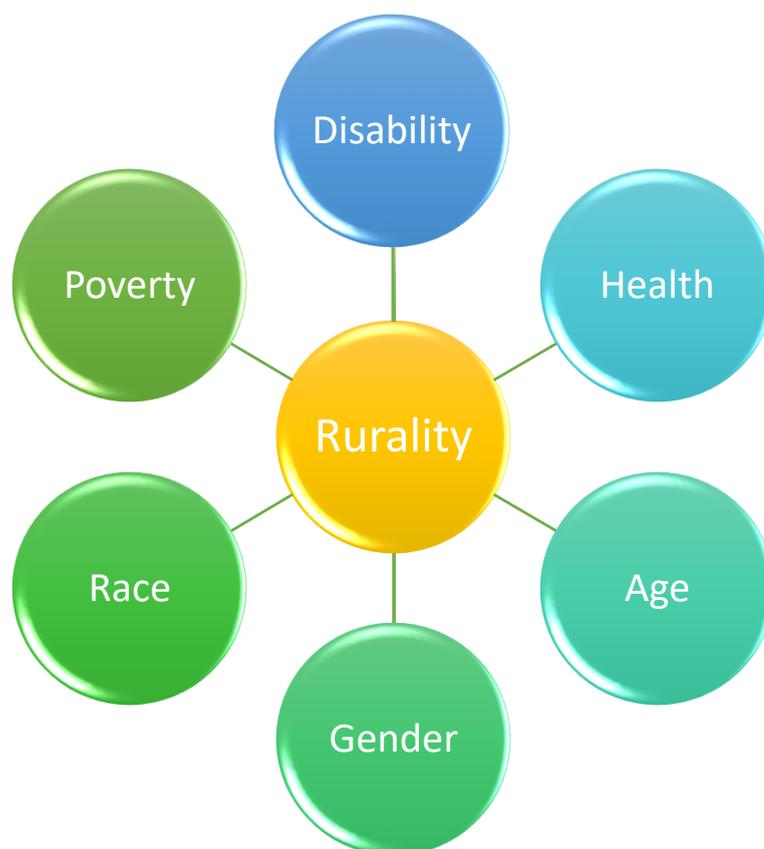


Figure 7.2: Intersectionality in relation to this research.

One aspect not identified by participants in their interviews directly was race, despite literature about poverty in Aotearoa New Zealand identifying that Māori and Pasifika disproportionately experience poverty compared with the rest of the population (Dale, 2017; O'Brien, 2014; Rashbrooke, 2013). Participants may not have discussed racism in their interviews as I am Pākehā and they may have felt uncomfortable raising their experiences of racism with me. However, this does not mean that it was not part of their lived experience. One participant, Hine, did describe in her interview the cultural differences that existed between herself and her husband in relation to the care of their second child. Hine considered asking whānau to raise her second child after their first child had significant health difficulties as a baby. Having a child raised by other whānau members was part of Hine's cultural paradigm but not her husband's, who believed that children belonged with their parents (Metge, 2014). Hine was concerned about her own mental health, and considered having another child would add stress to her life, however her Pākehā husband wanted to raise their child themselves.

The way aspects of a person's identity and their relative subject positions intersected determined their access to resources, employment, education and services. In this research, participants' experiences and access to power was complex and shaped by a variety of overlapping dimensions. Factors that impacted on participants, and the way the political affected the personal, intersected in ways that were cumulative (Collins, 2008; Corus et al, 2016; Mullings & Schulz, 2006). The cumulative impact of intersecting axes was evident in Megan's story outlined above. Through an intersectional analysis of Megan's story, two or more axes of subjugation makes clear the limited access to power she had. For example, Megan was poor, lives rurally, is a woman and a sole parent with her only income being a benefit. For Kyle, who was trespassed from WINZ, the intersection of

his status as a beneficiary and identity as an ex-inmate resulted in the application of power by the state against him.

Other participants shared stories of how power was exerted against them based on their intersecting subject positions and, as with Kyle, this was often about their engagement with WINZ. Karen's story (below) demonstrates the intersectional impact of living rurally, being a woman in her 50s, being on a benefit and having a disability:

***Karen:** There's nowhere for people to turn and ask for help other than WINZ. WINZ is a cold environment, I'd rather spend the day in a freezer, it'd be warmer. And it would be more accepting. I had trouble getting some paper work in [to WINZ] once and I said to the lady look I'm sorry I'm stuck at home, I'm in a wheelchair, I have no way to get out of my house and I didn't have the right chair at the time so I couldn't drive cos I had no feet and she said well, either you get it here or you miss out. Well I went to great lengths to get someone out from town, from New Plymouth, from another town, to come out and just pick up this form and take it down cos it had to be there that day. I'd been actually quite sick, but I had to get someone to come, to drive forty kilometres actually, to take a form in because they couldn't do anything on the phone and they couldn't delay it a day. The stress behind that, because you're going to lose your money and you don't have anything in the bank, it's actually brutal.*

The degree of structural coercion imposed on Karen caused stress and worry about how she would survive which she described as "brutal". Having a disability meant it was difficult for her to meet the demands of the WINZ staff in the timeframes they set. Being a woman in her 50s limited her chances of further education and employment and living rurally created a layer of complexity for

Karen which added to her difficulty. The intersection of these axes, rurality, poverty, gender, age and disability resulted in Karen’s sense of oppression and powerlessness in the face of the state.

### 7.8 Conclusion

The theme running through this chapter is the exercise of power, which can be understood in relation to participants’ intersecting subject positions. Participants’ told stories of powerlessness in intimate partner relationships and when dealing with wider social systems, particularly the state. One of the significant consequences of the application of power is shame, which was experienced by participants’ when dealing with state agencies and with other services in their communities.

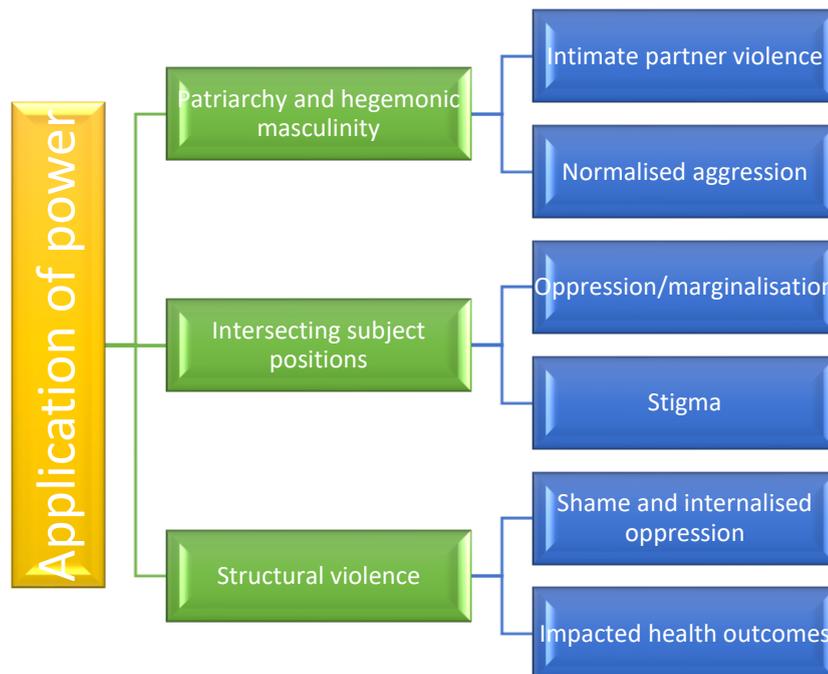


Figure 7.3: Application of power

Figure 7.3 above shows the ways in which power was applied in participants’ lives, from the very direct use of power in intimate partner violence through to the more indirect power of the state.

While some participants talked about resisting the imposition of power, particularly younger participants, it was noticeable that the majority of participants accepted the status quo and took personal responsibility for their plight rather than seeing the link between their personal situation and the socio-political influence. It was evident that Freire's (1993) conscientisation would be helpful in lifting the shame of individual failure for the rural poor and encouraging resistance and social change, which will be discussed further in the next chapter.

## Chapter Eight: Discussion and Conclusion: Rural Poverty and Social Work Practice

Poverty is an issue of concern to social workers in urban and rural environments in Aotearoa New Zealand. This study has focused on the ways in which poverty has affected those living in one rural community. The poverty experienced by participants in this study had some similarities to urban poverty in Aotearoa New Zealand however there were also some significant and salient differences. The following chapter addresses some of those differences and provides a summary of responses to the research questions identified in Chapter One. The chapter also discusses the implication of the current research for future social work practice and inquiry.

This chapter begins with a discussion about social work practice with the rural poor. Aspects of practice include being cognisant with the notion of place, exploring practical considerations for work with clients such as access to transport and other services, and recognising issues related to health, education and employment. Following on from this discussion is the application of critical theory and feminism to social work practice with the rural poor. This study's findings and implications for social work education in Aotearoa are considered as I outline the Poverty-Informed Social Work Practice Framework for Aotearoa New Zealand. The chapter ends with a discussion of the study's implications for social work education in Aotearoa New Zealand and recommendations for further research about poverty and rural social work.

### 8.1 Responses to the Research Questions

The first question asked in this research was: *What is the experience of poverty like for those who live in rural communities?* Poverty permeated all aspects of daily life for the 28 participants in this study

and affected their relationships with family members/whānau, friends and professionals. Poverty was experienced as going without, in particular going without access to health care, not going on social outings, foregoing buying things, and not eating. The all-pervasive nature of poverty impacted every aspect of participants' lives and presented as a key driver in household decision making.

The second research question was: *What impact does poverty have on daily life in a rural community?* Poverty affected the participants' material well-being, including their housing choices (or lack of) while also reducing their educational and employment choices. These choices were further limited by their rural location and the need for, and cost of, transport. This pointed to a lack of public transport and the limited availability of a range of services, education and employment opportunities. For participants in this study, poverty was stigmatising, and some participants internalised this stigma. Structural violence was experienced by some participants, particularly in their dealings with WINZ.

The third research question was: *How do people cope with financial hardship in a rural environment?* Alongside going without goods and services participants in this study used a range of strategies to make ends meet including cooking creatively with the food they had, seeking assistance from social service providers and getting practical help and financial support from family/whānau. Some participants accrued debt in order to manage and they budgeted carefully to make the most of the income they had.

The fourth research question was: *What are the implications for social workers working with people in poverty in rural communities?* Participants talked about positive relationships with social workers who showed compassion and provided affirmation for how they were managing, as well as providing material resources. This study suggests a need for social workers engaging with the rural

poor to be poverty-informed and to have a knowledge of intersectionality and the ways in which rurality and poverty intersect with other identity positions to marginalise people and limit their options. Alongside this, understanding the notion of place and the way in which geography impacts the poor is important for social work practice and can contribute to social work assessments.

The final research question was: *How can social workers practise with the rural poor effectively in empowering and socially just ways?* This question will be addressed in the next section of this chapter, however I believe that effective social work with the rural poor takes into account the place where people live and the way in which geography and poverty intersect. A Poverty-Informed Social Work Practice Framework for Aotearoa New Zealand is presented below and suggestions for social work education and practice follow. I argue that the social work curriculum needs to include rural content and ensure graduates are poverty aware.

## 8.2 Social Work Practice with the Rural Poor

Findings from this research align to some degree with studies with the urban poor in Aotearoa New Zealand as participants endured food insecurity, stigma and shame, structural violence, debt, negative social determinants of health, social isolation, and inadequate housing (Garden et al, 2014; Gray, 2017a; Hodgetts et al, 2013; Jackson & Graham, 2017). However, social workers working with the rural poor also need to consider context specific difficulties, such as issues accessing transport, a lack of services, geographic isolation and a significant lack of opportunities for education and employment. The lives of poor clients reflect the intersection of “both people and place” (Tickmayer, Sheman & Warlick, 2017, p. 445), as the place where the participants in this study lived impacted their daily life and the ways in which they dealt with poverty.

### 8.2.1 Place

Participants in this study expressed diverse relationships with place. Social workers working in rural communities therefore need knowledge about the subtleties of place in terms of the relationship their clients may have to the location where they live. The interaction between people and the environment is an important consideration for social workers based in rural communities (Creswell, 2008; Howard et al, 2016; Jack, 2010). This consideration reflects deeply engaging with the notion of place drawn from human geography (Maidment & Bay, 2012) and was discussed in Chapter One.

Symbols and signs connected to a place are also important as they can communicate group identity (Cresswell, 2004; Manzo, 2005; Saar & Palang, 2009). For example, the Republic sign (Figure 8.1 below) welcomes visitors to Whangamomona in the far east of the study area. Located in a paddock, it represents the uniqueness of the Whangamomona community and their protest of district council boundary changes in 1989. I have used photographs throughout this thesis to convey a sense of place when relevant to the discussion. For social workers practicing in rural communities, understanding place and the identification with place is important in order to engage with their client group.

The current research area also had a pronounced culture of masculinity where being a 'hard man' was celebrated. The culture of 'hard man' masculinity was evident at the biennial Republic Day held in Whangamomona on the 19 January 2019 which I attended. The focus of the day was on masculine activities such as wood chopping, a sheep race, a 'guess the number of eels in a bath' competition, pie eating and beer drinking races, chainsaw carving, possum skinning and shearing. Only men stood for president of the Republic. Figure 8.2 below shows a contestant during the 'shear a sheep, chop a log, eat a pie and drink a beer' competition held on the Republic day.



Figure 8.1 Whangamomona sign (Photograph: Lesley Pitt)



Figure 8.2: Shearer waiting to start, Whangamomona Republic Day on the 19 January 2019 (Photograph: Lesley Pitt, shared with permission)

The nature of activities during Republic day support ideas about men as hard working and physically strong. The day is run by the proprietors of the Whangamomona Hotel and heavy alcohol consumption is also an accepted part of the celebrations. Social workers in rural communities require

an understanding of how gender is constructed in that area, particularly when behaviours such as intimate partner violence and alcohol abuse might be a consequence of hegemonic masculinity.

The residents of Whangamomona also celebrate living in isolation and working physically hard on the land. For some participants in this study, the meaning of place, Stratford district, was significant and they had no desire to leave the area. Seventeen participants grew up in the Stratford district and they expressed more place attachment than the participants who had moved into the district. Place attachment is more likely to exist when people have grown up in an area and lived in that place over a long period of time. Physical location becomes part of a person's identity (Jack, 2010) and this attachment, or lack of, is important to consider in social work assessments.

Place is an important consideration in social work with the rural poor as poverty and access to services intersect. Participants' experience of place was impacted by poverty as participants shopped in certain places and only accessed services which were free or low cost, while affluent members of the community shopped in different places, accessed different services, and were more likely to go out of the district to do so. Conversations about moving to an urban centre to be closer to services, employment and education opportunities need to be conducted with sensitivity and consider their client's potential attachment to place.

### 8.2.2 Mythology

The ways rural places are portrayed in mainstream media were not how participants in this research experienced place. Colonial myths of rural life based on the ideal of a family working together on the land were not reflected in participants' lives. The participants who had access to land talked about not being able to afford to grow food and only one participant had livestock (a pig). The popular longest running television programme in New Zealand is Hyundai Country Calendar which advertises

itself as being about “iconic kiwi life” (TVNZ, 2019, n.p.), where people live fulfilling and satisfying lives based on the land in rural Aotearoa New Zealand. The depiction of rural living on Country Calendar does not reflect the experiences of participants in this study. Rather, Country Calendar shows a rural Aotearoa New Zealand from which study participants were excluded due to its focus on land and rural business owners.

The Taranaki Pioneer Village is located within the study area. It has displays of the past which perpetuate the mythology of an ideal rural way of life based on rural conformity and a traditional division of labour (Bell, 1997). Below is a photograph of a nurse in a sluice room in the Stratford Hospital display at Pioneer Village demonstrating the traditional role of women in the workplace.



Figure 8.3: Sluice room at Pioneer village (Photograph: Lesley Pitt)

The Pioneer Village did not represent the diverse experiences of people in the district. Rather, it represented the settler, (Pākehā owner) farming community and their needs and interests. Within the mythology of rural Aotearoa New Zealand, the process of colonisation, racial tensions and class have been ignored. Instead, the mythology of a wholesome rural lifestyle has been pervasive in the minds of “both rural and urban imagination” (Bell, 1997, n.p.). This mythology tends to be gendered

and patriarchal, and politically conservative (Bell, 2007; Campbell et al, 2006). This study challenges the rural myth that people can live a self-reliant, stress free life in rural communities. Most participants were stressed as a result of their poverty and had no access to the resources needed to be self-reliant. Social workers have a role to raise awareness challenging the myths of rural life and to advocate for resources for their rural clients.

### 8.2.3 Transportation

One of the factors which separates out the experience of the rural poor from the urban poor is the issue of transportation, particularly the lack of public transportation (Howard et al, 2016). If participants in this study had a reliable vehicle, they could access services, employment, education and leisure activities (for example going to the beach) in New Plymouth or Hawera. However, over half (16) of the participants did not have a vehicle and those who did talked about the cost of fuel as a barrier.

Transport in rural areas is a matter of concern for social workers and policy makers. It reflects a major rural-urban equity divide and impacts on rural people exercising full citizenship. Transport issues can be a “multiplier of disadvantage” (Howard et al, 2016, p. 98). Equity is the avoidable absence of differences and inequality among groups of people (Chin, King, Jones, Jones, Ameratunga, Muramatsu & Derrett, 2018). In 2015, New Zealand Treasury wrote a background paper for the government about equity issues in Aotearoa New Zealand which identified equity as an issue of concern to New Zealand citizens. Equity was described in the background paper as being a principle “deeply ingrained in New Zealand society” (Johnson & Carter, 2015, p. 6). Social workers can work towards transport equity by advocating for changes in transport policy through making submissions for improvement of public transport networks to Regional Councils which are responsible for

developing regional transport plans. Regional councils are also responsible for managing public transport with policy advice from the Ministry of Transport (Ministry of Transport, 2017). Having a comprehensive and affordable public transport network is important to the rural poor who are less likely to own a vehicle than others in the community and social workers have a role in advocating for affordable transportation for rural communities and including transportation in social work assessments.

In 2018 petrol prices in Aotearoa New Zealand increased and reached on average \$2.55 per litre in October (GlobalPetrolPrices.com), although the price may drop following the global COVID-19 crisis in 2020 (Stockdale, 2020). Increases to petrol prices impact heavily on the poor who spend a greater proportion of their income on transport costs due to their income being lower. For the rural poor this is even more significant with greater distances to travel (Pugh & Cheers, 2010). For participants in this study to access a number of specialist health services based in New Plymouth in October 2018, they would have to incur the \$60.80 cost of travelling from Stratford to New Plymouth return by car using the Inland Revenue employee reimbursement rate (Inland Revenue, 2018). Being aware of the cost of travel when referring clients to services is important for social workers working in rural communities alongside making referrals to services which are close to where people live or if this is not possible, to advocate for financial assistance for travel.

It is also of note that money tagged for improvements to public transport in Taranaki by the Labour coalition government focused on the New Plymouth district rather than rural Taranaki (New Zealand Transport Agency, 2015). Findings from this research indicate a need for social workers to advocate for better public transport systems in rural communities to allow the rural poor access services, education and employment.

#### 8.2.4 Access to Services

A lack of services in rural communities means clients must travel out of district to obtain health and social services. In relation to services, there are two aspects to consider when working as a social worker in a rural community. The first is the limited number of services available and the second is the small number of staff working in each agency. As participants in this study found, if they did not have a positive relationship with a person in an agency they then had limited or no alternative choices to engage other workers and some participants put a lot of effort into maintaining a relationship with WINZ staff. Decisions made by these staff could have considerable impact on participants' budget and wellbeing, including their access to WINZ food and clothing grants.

While participants accessed some services locally—for example, the Stratford district has a foodbank—other services required travel and this was an issue for some participants. Needing to travel resulted in additional costs for participants or meant some services were not used. For the older participants (all except one participant over 65 had a car), it could be a tiring trip to visit a service. All the participants in this study who were over 65 reported that they at times had to travel to New Plymouth (a distance of 40 kilometres) or Hawera (a distance of 30 kilometres) to attend specialist health appointments.

Due to limited service availability, social work literature on rural communities has described rural social work as being generic in nature, and focused on meeting the needs of clients who cannot access specialist services (Ginsberg, 2014; Howard et al, 2016; Mendes & Binns, 2012). This has implications for workers as they need to develop a wide range of knowledge and skills, more than would be expected of urban social workers. The requirement in rural social work practice is for generalist rather than specialist practice will be discussed later in the chapter under Social Work

Education (Alston, 2000; 2007; Green, 2003; Howard et al, 2016; Maidment & Bay, 2012; Mason, 2006).

#### 8.2.5 Social Determinants of Health

All participants who had children in their care prioritised access to health care for their children. Like most other participants, they also often went without health care for themselves, put off or did not see their General Practitioner, did not get prescriptions for medicine filled due to cost, and went without dental care. Participants' health was also compromised by going without food or eating food with low nutritional value, by having inadequate heating, and by living in housing which was substandard. Living in a rural area made health care harder to obtain and, combined with poverty, was a demonstration of how the intersection of rurality and poverty was a contributing factor to the way the social determinants of health impacted participants' well-being.

The social determinants of health—how a person's wealth or poverty directly impacts on physical and mental health—was discussed in Chapter Two (see also Craig et al, 2013; Gibson et al, 2017; Rudnick, Montgomery, Coatsworth-Puspoky, Cohen, Forchuk, Lahey, Perry & Schofield, 2014; Topor, Ljungquist & Strandberg, 2016). For the seven participants who identified having a mental illness, being poor added to their experience of mental distress in a variety of ways. For example, being worried about money could affect mood, and not getting prescriptions filled meant not keeping up a regular medication regime. In a review of coroners' records from 2000 – 2015, a high-risk group for suicide were young, male farm labourers (Beautrais, 2018). Two participants in this study were from this population cohort. Social workers have a role to play as advocates with their employers and other professionals within the social policy space to address the impact of social determinants of health on the rural poor.

As well as being alert to the risk factors around rural suicide, social work practitioners working in rural areas need to be alert to the health needs of clients, and to specifically ask what they are going without. For example, they need to ask: are clients going without food, heating, dental care or not collecting prescription medicine from the chemist? If health care is not being accessed, options for clients to gain services for minimal or no cost can be explored. At a macro level, social workers can be involved in advocating for low-cost health services in rural areas such as general practitioner services and dental care facilities. Within the Stratford District there are no low-cost general practices or low-cost dental care services. The nearest affordable general practice service run by Tui Ora, a Kaupapa Māori health service provider, is in New Plymouth, 40 kilometres away.

#### 8.2.6 Education and Employment

Participants in this study were aware that living in a rural community restricted their options for employment and/or tertiary education. Added to this was a lack of accessible and affordable child-care that acted as a barrier to involvement in employment or tertiary education, a finding reflected in international literature (Howard et al, 2016; Reschke & Walker, 2006; Smith, 2017b). Participants talked about the cost of child-care as a barrier to employment. For example, Jennifer was keen to work and had a tertiary qualification, but the cost of childcare made working financially difficult. Working alongside others to advocate for affordable and flexible child-care in rural communities is a potential task for social workers.

In relation to education, for some participants the study option they wanted was not available where they lived. While studying at a distance may be a possibility for some, for others it was a difficult way to learn. Understanding the role education played in contributing to

families/whānau being financially independent, and the self-efficacy that people gain by being involved in education, is important in social work, as is working with clients to explore all possible education opportunities for those who are interested in furthering learning and employment prospects. This may mean investigating options such as finding support people for distance learners or advocating for increased free transport services to education providers outside the area.

The need for employment opportunities in rural communities in Aotearoa New Zealand has been recognised by the Labour-led coalition government. In 2018, this government committed \$3 billion over three years to regional development through a scheme called the Provincial Growth Fund (Ministry of Business, Innovation and Employment, 2018a). The intent of the scheme was economic development with the objective to foster growth in employment in the regions. Funding has been allocated for projects in Taranaki such as the H2 project for the development of hydrogen technologies (Ministry of Business, Innovation and Employment, 2018b). There is potential for employment growth as a result of this policy with increased opportunities for the rural poor, but these have yet to be realised. Within social work practice, understanding the connection between employment and positive self-identity, personal growth and forming social connections is an important knowledge component. There is also a role for social workers to advocate for better employment opportunities for rural clients, at a micro level in working alongside clients seeking work, and at a macro level in supporting initiatives which may increase employment options in rural communities.

### 8.2.7 Social Support

As discussed in Chapter Five, family/whānau support could be important and provided a “buffer against the effects of poverty” (Egan-Bitran, 2010, p. 21). Sometimes support was in the form of

resources, such as Kayla's father sending her nappies or Hine's mother helping her pay for her daughter's birthday party. For other participants, particularly where their family/whānau were also poor, support was focused on sharing what they had and working together to meet everyone's needs, particularly the needs of younger members of the family/whānau.

However, not all participants had supportive family systems/whānau and this exacerbated their struggle. Poverty put a strain on relationships, including those between intimate partners, and was an added burden to parenting. This study supports other research about parents living in poverty which has found parents sacrifice their own needs for those of their children, including going without food (Canvin et al, 2009; Graham et al, 2018; Jackson & Graham, 2017). Going without food, health care and material goods resulted in stress for participants and put pressure on their relationships with others. These findings point to the need for social workers to be sensitive to the impact poverty has on relationships and to be alert when people lack family/whānau support. Asking questions of parents about what they go without to provide for children can validate their experience of parenting in poverty and provide information for the social worker about what resources a family/whānau may need.

Notably, none of the Māori participants in this research were from local Iwi and this may have affected their level of support. The two participants who identified as Māori talked about the difficulties of visiting whānau. For one participant, returning to his marae on the East Coast of the North Island was a 13-hour journey. It has been noted by Hollis-English and Selby (2015) that Māori whānau who live in rural areas are able to draw on support from hapū. However, this was not the case for the participants in this study as they were physically distant from their rohe. Social workers in rural communities need to be aware that whānau who are living away from their Iwi rohe may need support from local kaupapa Māori services. Further research using a Kaupapa Māori approach

that looks at the differences for rural Māori of living within their Iwi rohe as opposed to those living outside their Iwi rohe, would be useful to build the knowledge about the rural Māori experience of poverty. A Kaupapa Māori approach to research is one that is controlled by Māori, connected to Māori philosophy, culture and language and focused on Māori empowerment (Tuhivai Smith, 2012). Added to this there is also a need for research about the experience of rural Māori and poverty. Urban based research has shown some differences in lived experience of poverty for Māori, alongside their experience of colonisation and land alienation, which could be further explored with rurally based Māori using a Kaupapa Māori research approach (Cram, 2011; Dale, 2017). For social workers, being aware of the mana whenua status of clients is important. If people are living outside their Iwi rohe, consideration needs to be made for what this means for the level of support as well as the logistics for visits to marae for significant events.

#### 8.2.8 Stigma

Stigma (discussed in Chapter Two) had a particular presentation in this study. Stigma was not just associated with the individual's identity but was linked to the families/whānau of participants. The experience of stigma was relational—participants felt judged based on what was known by others in the community about that person's grandparents, parents or partner. A few participants described being judged based on the violent or criminal activities of family members and this contributed to a sense of isolation. These participants felt they were treated with suspicion by other members of the community and “held at arms-length” (van Katwyk & O'leary, 2017, p. 78). An example of this was Kelly, whose family history of violence and offending resulted in her feeling judged on the basis of other family members behaviour, rather than her own.

The process of conscientisation can be used by social workers to engage with people about their experience of stigma. As part of this process, social workers can discuss with clients how the wider discourses and mythology of rural life impact on them and their experience of stigma. For clients who have internalised stigma, and whose self-talk focuses on their own failings, having conversations about stigma can be useful in order to challenge the negative beliefs they have about themselves.

### 8.2.9 Age

Age differences between participants resulted in different experiences of poverty. Participants over forty were more likely to own homes than younger participants, who in the current housing environment may never achieve home ownership. Six participants over 40 owned a home compared to three under 40, and those three were over 30 years of age. From the 1990s in Aotearoa New Zealand there has been a reduction in home ownership among the general population and a reliance on the private market for rental housing, rather than state housing provision (Johnson, 2017; Taylor & Giles, 2016). Participants who owned a home had an asset which was valuable, however they were often unable to afford the cost of upkeep.

Those participants who were over 65, and therefore receiving New Zealand Superannuation, were more likely to be better off than younger participants on a benefit. New Zealand Superannuation was indexed to average wages and prices, whereas other benefits were, until recently, based upon the consumer price index (St John & So, 2018). This has changed in 2020 when benefits have been indexed to wages (Robertson, 2019). New Zealand Superannuation is universal, therefore it is not granted on condition of meeting certain criteria or carrying out certain job-seeking tasks like other benefits (Baker & Davis, 2018).

However, participants over 65 talked more than younger participants about having health issues which had a cost attached, such as transport to appointments or prescription medication. When working with people over 65, particularly those over 80 in rural communities, social workers need knowledge about the increased need for transportation to services at a time when deteriorating health may impact on the ability or desire to drive long distances. There is potential to mobilise community support through the use of informal arrangements for transporting older people to essential appointments. Talking with clients about these issues is a way of raising consciousness about the way in which the personal life circumstances reflect the impacts of broader, political agendas, such as reducing and rationalising services in rural districts. Initiating these discussions with clients is indicative of applying a critical anti-oppressive approach to social work practice.

### 8.3 Critical Theory and Feminism in Social Work

As in this research, critical theory and feminism can provide a framework for social work with the rural poor. Using critical theory and feminism in social work results in practice which challenges the status quo. The individualism of neo-liberal capitalism is questioned by a critical theory approach, as is the belief that the provision of all goods and services should be left to the market (Hosken, 2016; Ife, 2012; Jones & Novak, 2014). Poverty, the housing crisis in Aotearoa New Zealand (Howden-Chapman, 2015), and the economic fallout of COVID-19 (Kenkel, 2020) is evidence that the market has failed to provide for the needs of citizens (Cochrane et al, 2017). Through market forces, participants in this study, when employed, did not earn enough to maintain their well-being. Participants on benefits struggled to make ends meet and all except one participant had an issue with housing, either in relation to the cost, the quality of their housing, or a lack of housing.

Being aware of the social determinants of health is important for social work practice underpinned by a critical theory and a feminist position. The deleterious impact of health conditions affected participants in this study in a variety of ways. It is important to acknowledge the impact of structural conditions on health, and then work towards ensuring that the poor have health equity with other citizens (Craig et al, 2013). A key aspect of health equity is access to health services. One area that participants in this study went without was dental care. None of the participants visited a dentist regularly for dental check-ups. Initiatives such as Smile New Zealand – Free Dental Days run by the New Zealand Dental Association and Southern Cross Health Trust (New Zealand Dental Association, 2018), which was stationed in Stratford for one day in September 2018, was an initiative social workers can support and advocate for. One day a year of low-cost dental provision in no way addresses the lack of dental care and attention needed.

Using critical theory and a feminist position in social work allows for an acknowledgement that a client/s personal experience is shaped by economic and social structures (Bricker-Jenkins, Barbera & Young, 2009; Briskman, 2017; Hosken & Goldingay, 2016). Helping someone to survive within an oppressive system condemns them to further oppression; social workers have a responsibility to work to change the systems that oppress (Ife, 2012; Jones & Novak, 2014; Parsons & East, 2013). The principle of Kotahitanga in the ANZASW code of ethics states that social workers “challenge injustice and oppression in all its forms” (ANZASW, 2019, p. 12), and poverty is one of those injustices. Examples in Aotearoa New Zealand of work to create change at a policy level includes the work of the Child Poverty Action Group (CPAG) to extend the Working for Families policy to include beneficiaries (Cartwright, 2018), the Auckland Action Against Poverty (AAAP) campaign to change the way relationship status is dealt with by WINZ and end the use of benefit sanctions (AAAP, n.d.b), and the work of the Salvation Army in advocating for food security during the COVID-19

epidemic (Salvation Army Social Policy & Parliamentary Unit, 2020). In rural communities, practitioners can work to achieve equity for service provision with urban centres by advocating that the same services be available to the rural poor as in urban areas. This may mean working to have outreach services located in rural communities, such as a visiting low-cost general practitioner service or advocating for free or government subsidised transport services to ensure the rural poor can attend appointments with social and health services.

Feminist scholarship acknowledges the role gender plays in social relations and considers the way in which gender coalesces with other aspects of a person's identity, thereby resulting in marginalisation (Dominelli & McLeod, 1989; Eyal-Lubling & Krumer-Nevo, 2016; Letherby, 2003). Poverty is more likely to be experienced by women, particularly if they are sole parents (Brooks & Hesse-Biber, 2007; Pearse, 1978; Phillips, 2009). From the most recent census, Stats NZ (2020) identifies sole parents as being more likely to report lower life satisfaction, with 18 percent stating that their income was too low to meet the costs of day-to-day life. Ten participants in this study were sole parents or caring for dependent children un-partnered, and four of the women interviewed for this study had male partners but the women took responsibility for managing the family/whānau budget. While there is an over representation of women and children in poverty statistics in Aotearoa New Zealand (O'Brien, 2017), men also experience poverty; however they may either have a partner who manages the finances for the household or they may be able to obtain the type of employment which would lift them out of poverty. For example, one of the male participants in this study was hopeful of obtaining employment in the oil and gas industry which is generally well-paying work and would lift him (and his partner and children) out of poverty.

Women in the study had fewer options for well-paid work available to them than the men in the study. Most employment opportunities women could access were low-wage, such as working in

the service industry, jobs which were likely impacted by a COVID-19 economic downturn (Kenkel, 2020; Salvation Army Social Policy & Parliamentary Unit, 2020). For the quarter of 2020 ending in June, the rate for female unemployment rose 4.4 percent (Carroll, 2020). Participating in pay equity campaigns is a way social workers can advocate for rural women as well as being part of local campaigns to encourage the development of rurally based industries which may offer new employment opportunities, such as the H2 Taranaki project mentioned earlier in the chapter, or the Taranaki Crossing tourist venture, a proposed tramping experience from Egmont National Park (Stratford area) to the Tasman Sea (Martin, 2018).

#### 8.4 Poverty-Informed Social Work Practice in Aotearoa New Zealand

As a result of this research, I propose a Poverty-Informed Social Work Practice approach for the Aotearoa New Zealand context. The framework outlined here for *poverty-informed social work practice* in Aotearoa New Zealand draws on the theoretical underpinnings and findings derived from this research. Poverty-informed social workers need an understanding of the insidious nature of poverty, recognising that poverty impacts on every part of daily life (Krumer-Nevo, 2016). The approach outlined draws on a commitment to human rights, recognising that poverty is a breach of human rights, not an individual failure (Ife, 2012). Drawing on the critical theory and feminist ideas of consciousness raising and linking the personal to political, social workers can work for social change alongside clients. This approach suggests a range of processes and ways of considering poverty in social work practice.

Each of the components outlined in Figure 8.4 (below) has a set of associated knowledge and skills. To demonstrate compassion, poverty-informed social workers need strong interpersonal and listening skills. Being able to critically reflect requires a social worker to have knowledge of critical

theory to develop a structural analysis and the skills to apply this understanding of power and intersectionality in ways that will influence everyday practice. Conscientisation necessitates social workers are skilled in communication, particularly in explaining complex ideas in a straightforward manner, and can adopt a range of advocacy strategies across micro, mezzo and macro practice contexts.



Figure 8.4: Components of poverty-informed social work practice

The following discussion provides an explanation of the components of this proposed approach to social work practice in Figure 8.4. The framework is a guide for practitioners in their

work with the poor and a tool for structuring supervision about work with poor clients. There is scope for organisations to incorporate the framework into their assessment processes and for inclusion of the approach in professional development programmes. The addition of the framework in social work education will be discussed later in the chapter.

The framework incorporates the micro, mezzo and macro dimensions of social work without a division between these systemic levels (Ife, 2012). Fluidity in practice between working with individuals or family/whānau and working at a community or societal level to create change means social workers will be less likely to judge or blame clients for being poor (O'Brien, 2016). Without considering the structural causes of poverty, social workers can slide into 'othering', or povertyism, thus seeing the poor as lesser citizens (Backwith, 2015). Social work, at its core, is about social justice, therefore working for social change to improve the lives of the poor is an important role for practitioners (International Federation of Social Workers, 2018a; Krumer-Nevo, 2016; O'Brien, 2016).

#### 8.4.1 Compassion

Feedback from participants in this study reinforced the notion that a trusting relationship is at the heart of the work of social workers, therefore relationships built on compassion and genuine empathy for the plight of the poor is a cornerstone of poverty-informed social work practice. Compassion is defined by Brown (2010) as being the acceptance of others and a recognition of shared humanity. When participants were asked what they wanted from social workers, demonstrating compassion was the most common response.

Carl Rogers' person-centred approach, which comes from his humanist perspective, is congruent with practicing social work with compassion. Rogers (1989a) discussed having a "deep empathic understanding" (p. 34) when working with people as well as resisting the impulse to solve

problems for them. The ability to grasp and understand the world of another person and being able to express that understanding, through empathy and unconditional positive regard, was identified as crucial (Rogers, 1989a; 1989b). In this study, the lives of participants and their families/whānau involved a daily struggle, making their experience of poverty demeaning and exhausting. The need, therefore, for care and acceptance from professionals and others they had contact with in the community was very evident. Participants indicated an awareness that their problems were complex and may not be easily solved, but they wanted to be understood and accepted without judgement. In keeping with findings from this research, a study carried out in Israel evaluating social work with clients who were poor found that there was value in social workers bearing witness to the struggle of poverty alongside the need to provide material assistance (Saar-Heiman et al, 2017).

The importance of bearing witness to the struggle of clients living in poverty was talked about by participants in this study. Enabling people to tell their story without interruption and with minimal questioning demonstrates a willingness to understand the world from the perspective of the other (Miller, 2014; Pranskey, & McMillen, 2009; Weld, 2017). Demonstrating compassion and listening carefully to the stories of clients is part of feminist social work practice (Dominelli, 2002; Gentlewarrior, Martin-Jearld, Skok & Sweetser, 2008). Being alert to the possibility that clients may feel too ashamed to ask for help is important. Hearing with compassion the experiences of the poor requires the management of self and critical reflection.

#### 8.4.2 Critical Reflection

Critical reflection is the analysis of practice which incorporates a critical theory and/or a feminist perspective (Brookfield, 2009; Fook & Gardner, 2007). The process of critical reflection entails an analysis of power differentials evident in practice and includes a critique of how power is navigated

in social work. An understanding of hegemony is important in critical reflection as assumptions accepted as common sense need to be interrogated (Brookfield, 2009). Alongside this analysis of power and consideration of hegemony, critical reflection requires social workers to understand dominant ideology and be able to consider alternatives to the status quo (Fook & Gardner, 2007). Poverty-informed social work practice is underpinned by an understanding of the power of the social work role and a critique of dominant ideas which maintain the oppression of the poor. For example, practitioners should challenge the use of assessment tools which focus on individual responsibility without incorporating a structural analysis.

By being critically reflective, social workers can guard against 'othering' and povertyism, ensuring their practice does not individualise the poverty of clients or blame them for their plight. Engaging in critical reflection is a way social workers can maintain their awareness that individual situations are not a result of personal ineptitude but represent a breach of economic human rights (Bricker-Jenkins et al, 2009; Ife, 2012; Krumer-Nevo, 2016; Morley, 2008). Being aware of the economic and political aspect of clients' lives helps maintain empathy for the poor and enables workers to resist neo-liberal discourses which normalise and individualise inequality and poverty (Beddoe & Keddell, 2016; Kenkel, 2018; Morley, 2008). Critical reflection grows the empathy of social workers (Morley, 2008) and includes thinking about intersectionality as it pertains to addressing practice issues (van Katwyk & O'Leary, 2017).

#### 8.4.3 Intersectionality

A consideration of intersectionality provides poverty-informed social workers with a structured way to consider the impact multiple oppressions can have on a person's lived experience. All the participants in this study shared being rural and poor, and these two factors came together to impact

daily life by making it difficult to access health care, education and employment. An understanding of intersectionality enables social workers to grasp the way identity positioning may affect the experience of clients and the access, or lack of access, they have to power. Intersectionality and feminism both encourage a nuanced understanding of the complexities of power (Collins & Bilge, 2016). In this study, participants talked about a lack of access to power within their intimate relationships and when dealing with state institutions. Participants expressed feelings of powerlessness and humiliation particularly in relation to transactions with WINZ. An analysis of client situations based upon intersectionality analysis encourages consideration of the complex and multiple disadvantages which together oppress and marginalise the poor (Hankivsky & Cormier, 2011).

Social workers have a role in effecting policy change which takes into account intersectionality. Without an understanding of the intersectional nature of poverty policy may be developed which has a homogenous view of the poor and which renders invisible their diversity. Intersectional analysis encourages a consideration of the way in which policy affects people differently due to their unique subject positions (Corus et al, 2016). This work includes engaging clients in the development of policy which takes into account their experience and advocates for policies which are inclusive of diverse subject positions. For example, the Welfare Expert Advisory Group (2019) sought out the voice of a wide range welfare recipients in their work and involved them in consultation meetings throughout the country.

#### 8.4.4 Conscientisation

By drawing on the process Freire (1993) referred to as conscientisation, social work clients can be supported to make links between their personal realities and the political aspect of them. In this

particular research, conscientisation involved discussing with participants the lack of regulation of rental properties contributing to their substandard housing and also noting how the low rate of benefits and the minimum wage was the reason for their poverty, not their personal inadequacy. For some social work clients, having a worker acknowledge benefit rates and wages are too low to live on may reduce the burden of blame felt for not being able to manage financially.

Social workers are witness to poverty and suffering as part of their work (Briskman, 2017). They are positioned to work with people to develop awareness of the injustices they experience as individuals/whānau and as part of a collective of people who live in rural communities and experience poverty. Social workers are bound by their code of ethics (ANZASW, 2019) and the IFSW (2018b) global definition of social work to challenge injustices and institutional oppression and work to change social structures. Activism and advocacy are part of being a critical social worker (Briskman, 2017).

#### 8.4.5 Advocacy

Advocacy with people springs from conscientisation. After people understand the oppression that they experience, the next step is to work towards changing the social structures which are disempowering them. Freire (1993) refers to action taken to change oppression as praxis. Here the link between knowledge and action is crucial; it is not enough to just know something, a social worker needs to act on what they know (Ife, 2012). Social workers have a role to play as allies while the poor advocate for fair systems which are liberating rather than oppressive.

Social workers, in collaboration with others, can speak out about poverty and its impact on clients, something O'Brien (2016) identifies as cause advocacy: working with and through social and political institutions to create change. Social workers are witness to failings of the social and

economic system and consequently have a responsibility to talk about the suffering they see and the stories they hear (Briskman, 2017; Jones & Novak, 2014; Pease & Nipperess, 2016). Forming alliances with other groups such as Auckland Action Against Poverty (AAAP), Living Wage NZ, and in the study area, the Bishop's Action Foundation, to advocate for the poor as a collective, is a more effective means of creating macro change than advocating as an individual.

O'Brien (2016) has called advocacy at the micro level "case advocacy". Case advocacy involves working with individuals or family/whānau to create change. For example, social workers could advocate for clients in relation to benefits with WINZ or engage with Kāinga Ora (previously known as Housing New Zealand) for social housing. Advocacy has been identified as a means of everyday resistance (Baker & Davis, 2018), and within critical theory resistance is identified as important no matter what level it is carried out at (Giroux, 2003; Pease & Nipperess, 2016). Social workers advocating for the rights of clients, such as ensuring they get services they are entitled to or supporting a client taking issues to the tenancy tribunal,<sup>21</sup> are forms of small-scale resistance and ways of challenging the power of the state and the private sector (such as landlords).

#### 8.4.6 Human Rights

Poverty is a human rights issue as not having enough resources to live off is a manifestation of injustice (ATD Fourth World, 2019; Ife, 2012; Krumer-Nevo, 2016). Poverty-informed social work draws on a human rights approach recognising that poverty is a breach of human rights and not an individual failure (Androff, 2015; Bricker-Jenkins et al, 2009; Ife, 2012; Reichert, 2007). The 1948

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<sup>21</sup> Tenancy Tribunal is part of the Ministry of Business, Innovation and Employment and provides a mediation service and hears disputes between tenants and landlords.

Universal Declaration of Human Rights adopted by the United Nations General Assembly, section 25 states that:

*everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control (United Nations, n.d., n.p.).*

Aotearoa New Zealand is a signatory to the United Nations (n.d.) declaration. Within the declaration, it is stated all people have a right to a reasonable standard of living. Social workers have a role in advocating for this right, for example, by being part of the Living Wage movement and advocating for an income high enough for all workers to be able to afford the necessities of life and be able to participate in society (Living Wage Aotearoa New Zealand, 2018), or by making submissions about benefit rates to the Minister for Social Development.

Poverty-informed social work practice necessitates empathy with the poor, and awareness of the shame the poor experience and their desire to be seen as competent and independent. Asking for assistance for money or food can be a shaming experience (Krumer-Nevo, 2016). This was how the participants in this study experienced being the recipients of charity. If a person is given charity, it positions them as being in need rather than a citizen who has a right to a service. Using a rights-based rather than a needs-based approach to welfare helps address feelings of shame. A right is able to be asserted whereas a need involves requesting help and undergoing an assessment process which determines whether one is deserving or not (Ife, 2012; O'Brien, 2016). Using a human rights

approach, where dignity is maintained (Hosken, 2016), focuses on clients' rights to access services and material resources (Ife, 2012; O'Brien, 2016).

### 8.5 Implications for Social Work Education

The implications for social work education from this study are shown in Figure 8.5 below. Overall, there are two areas to address: first, educating about poverty-informed social work, and second, teaching about rural social work. In relation to educating about poverty, participants in this study wanted social workers to hear, with compassion, what they had to say about poverty and their daily struggles. Hearing what clients say and incorporating this directly into social work education is a model used in the by ATD Fourth World United Kingdom (n.d.) who have developed a teaching module for social work education and practicing social workers (Gupta & Blewett, 2008). This module is delivered by ATD Fourth World members, those people who live in poverty who talk with social work students about their lives. The approach used by ATD Fourth World could be adapted to Aotearoa New Zealand and has been advocated for by Beddoe and Keddell (2016). Opportunities could be provided for clients who experience living in poverty to address social work students about their reality through alliances between social work educators and organisations who work with the poor using a rights-based approach, such as AAAP. In this way, clients can have a 'voice' and social work students would be able to develop knowledge about poverty and the crucial role empathy plays in practice.

Having a person-to-person approach is an extension of the work completed by the Auckland City Mission and the 100 families project which developed a poverty empathy tool (ThinkPlace & Auckland City Mission, 2014). The empathy tool is an infographic which provides a visual representation of what the experience of poverty is like for a person by using case studies.

Incorporating empathy tools as well as using complex case studies involving poverty helps students to know the 'other' and to grow a sense of solidarity with the poor (Beddoe & Keddell, 2016; Krumer-Nevo, 2016). I argued previously in this chapter that empathy is a core aspect of a humanist approach.

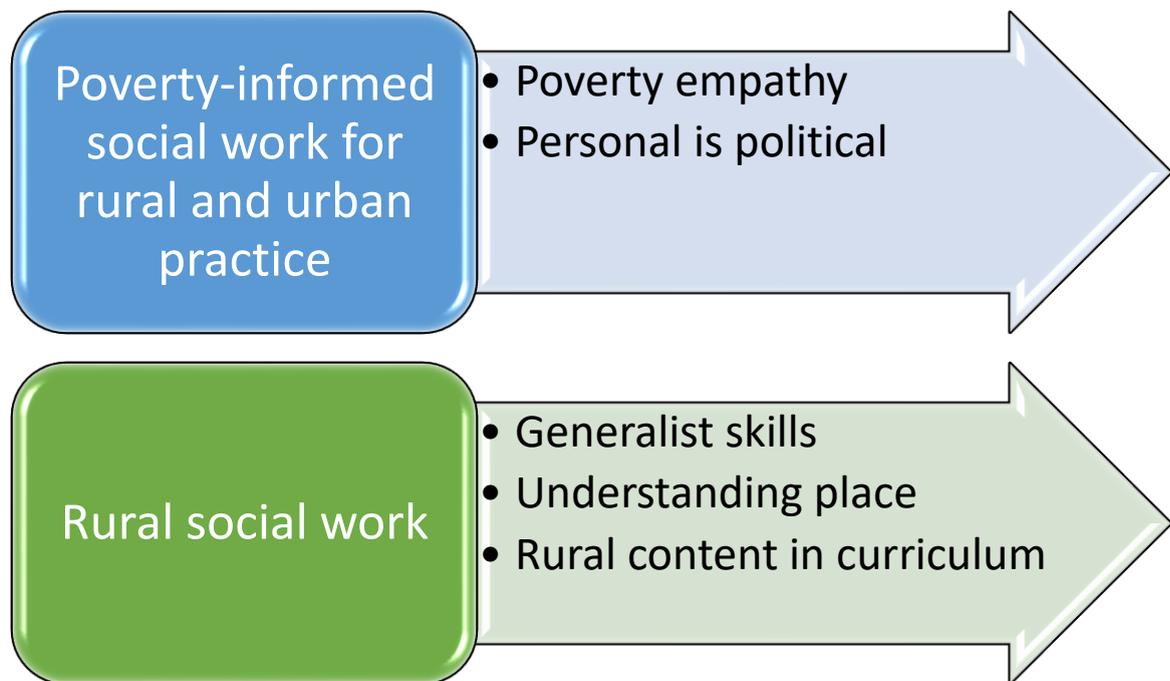


Figure 8.5: Addressing rural poverty: Implications for social work education

Framing poverty as a structural issue rather than individual failing encourages students to build collaborative relationships with clients, seeing them as partners in combatting poverty (Morley & Ablett, 2016; Saar-Heiman, Krumer-Nevo & Lavie-Ajayi 2018; Saar-Heiman et al, 2017). Where possible, fieldwork education can be carried out within organisations who deal directly with poverty, such as the AAAP, Lifewise, City Missions and the Kai Kitchen in the study area. Carrying out home visits with clients living in poverty during field work education allows students to see and experience in some small way the physical manifestations of the struggle of living in poverty, if it is not part of their lived experience (Saar-Heiman et al, 2018).

It is important that social work students understand the way in which shame and internalised stigma may be presented by clients so that it is not misinterpreted (Beddoe & Keddell, 2016). The shame and stigma experienced by the poor compounds the experience of oppression. Social work students need to develop knowledge about the impact of shame and stigma to empathise with the struggle of poverty and the resilience of the poor (Krumer-Nevo, 2017; Saar-Heiman et al, 2018).

Social work education informed by critical theory and feminism encourages students to make the link from the personal to the political, both in classroom learning and during fieldwork education. Conscientisation can be built into social work education, starting with students gaining awareness of their subject positions and privilege (or lack of), through critical reflection and exploring how to engage in consciousness raising conversations with clients, families/whānau or groups of clients about poverty, and other forms of oppression. Including within the curriculum the study of human rights and an understanding of poverty as a breach of human rights would be a demonstration of poverty-informed social work education.

Social work education has traditionally been urban-centric in its focus and not always attuned to issues impacting people who live in rural settings (Alston, 2007; Maidment & Bay, 2012). Educators need to be aware of this default position within social work education and consciously work to incorporate knowledge of rural social work and rural issues (Alston, 2007; Howard et al, 2016; Kropf, 2004). The lack of health and social services in rural communities means that rural social workers need generic skills and be able to provide a wide range of services, rather than have specialist skills (Howard et al, 2016; Lohmann, 2005). Schools of social work have a role in ensuring graduates are more informed about rural social work practice as well as having a range of generic social work skills to draw on in practice (Ginsberg, 2014; Howard et al, 2016; Lohmann, 2005).

As discussed earlier in the chapter, the notion of place is important for rural social workers. A consideration should be made in social work education for the inclusion of human geography. Acknowledging place in a geographical sense extends the concept of 'person in environment' to include an understanding of the importance of geography to people's lives, and recognises the connection between people and place (Jack, 2010; Maidment & Bay, 2012). Understanding place diversity is part of understanding intersectionality, in that where someone lives intersects with other factors to influence access to power and well-being (Bice-Widington & Morgan, 2018; Kearns, 1991). Including human geography as part of the social work education, particularly critical and feminist geography, which consider the way power presents in places, would be a very relevant inclusion in curriculum design and may benefit both rural and urban social work students.

Alongside understanding the importance of place, material covered in the curriculum should be interrogated for an urban-centric bias. The curriculum should include rural social work as a field of practice, using case studies and covering practice with the rural poor and other topics relevant to rural work. The kinds of issues raised early in this chapter should be topics for policy and practice discussions, including access to transportation, lack of services, limited opportunities for employment and education, understanding rural culture and challenging rural mythology, hegemonic masculinity, and patriarchy. There is a great deal of scope for social work education in Aotearoa New Zealand to engage with rural social work, development of rural practicums and conduct research projects related to rural issues.

## 8.6 Conclusion

This thesis has focused on the day-to-day lives of people who are poor and live in a rural community in central Taranaki. Participants in this study talked about a range of strategies used to manage being

poor including incurring debt, going without food and healthcare, getting help and support from others, careful budgeting, and withdrawing from friends. Social workers working with poor clients can use this knowledge to be alert to what people in poverty sacrifice, particularly adults going without for children, not seeking healthcare when needed, and withdrawing from social connections.

While poverty in rural and urban environments share similarities, there are particular aspects of rural poverty which manifest in additional pressures. These factors include living in geographic isolation, issues with accessing affordable and reliable transportation, difficulties accessing services or educational opportunities, and significantly reduced employment options. Social work practice in rural locations may involve individual (case) advocacy, supplying extra resources, generating community development initiatives, or joining political action groups (cause advocacy), such as seeking improvements in rural transport systems or promoting more rurally based services.

There are some potential areas for future research around both poverty and rural social work practice. The experience of stigma and shame was identified by participants in this study as a major problem and some groups are particularly vulnerable to this, such as ex-inmates and people experiencing poor mental health. Further research focusing on specific marginalised groups will enhance understanding of their experiences. While some Māori participated in this study, a consideration of rural poverty using a Kaupapa Māori research design would develop further knowledge as there are differences in how poverty is experienced and dealt with by Māori (Dale, 2017; Hollis-English & Selby, 2015). There is also considerable scope to research the nature of social work in rural communities and investigate practice frameworks for working rurally in Aotearoa New Zealand.

I also proposed a framework for social work with the poor in Aotearoa New Zealand as a conclusion to this research. The Poverty-Informed Social Work Framework incorporates practice at the micro level through to work at the macro level, and specifically includes agitating for social and economic change. The framework addresses the last two questions of this research: *What are the implications for social workers working with people in poverty in rural communities? And How can social workers practise with the rural poor effectively in empowering and socially just ways?* The implications for social workers include the need to be compassionate and hear the experiences of clients, to form alliances in solidarity with the poor, create meaningful individual and societal change by challenging stigma and structural violence, while also seeking to develop a welfare system which is rights-based.

Being cognisant of the different forms of violence experienced by people living rurally who are poor is crucial for developing effective practice in this setting. Understanding how both intimate partner violence and structural violence operate in the lives of clients is important for developing liberating social work practice. Being poor is often experienced as shaming, and internalised stigma can be a consequence of shame. Using strategies informed by critical theory and feminism, including linking the personal to the political through conscientisation, can help reduce this shame and stigma. To do this effectively, social work students and practitioners need an understanding of intersectionality, structural violence, and the way social work practice can be underpinned by a human rights discourse based on hope, compassion and incisive critical analysis (Androff, 2015; Ife, 2012). For social work education in Aotearoa New Zealand, to be inclusive and anti-oppressive, a shift of emphasis is needed to include content about both poverty and rurality. Rural poverty in Aotearoa New Zealand, while sharing similarities with urban poverty, entails significant differences as reflected in the daily lives of the participants in this study. These differences need to be addressed

by practitioners working in rural communities and by policy makers. Poverty is a deeply personal problem and is experienced at a personal level, but it is not the consequence of personal ineptitude. Poverty is a structural issue and requires political change. The solutions to poverty are complex and necessitate a multifaceted cross sector coordinated response. First there must be a collective political will and commitment to ensure that all New Zealanders have a reasonable standard of living to enable full participation in society. As we emerge from the COVID-19 pandemic and its impacts including the rise in unemployment, this work is both crucial and urgent.

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Appendices:

Appendix 1: Ethics approval from the University of Canterbury



HUMAN ETHICS COMMITTEE

Secretary, Lynda Griffioen  
Email: [human-ethics@canterbury.ac.nz](mailto:human-ethics@canterbury.ac.nz)

Ref: HEC 2015/19

26 March 2015

Lesley Pitt  
Western Institute of Technology at Taranaki  
UNIVERSITY OF CANTERBURY

Dear Lesley

The Human Ethics Committee advises that your research proposal "Forgotten World Highway", forgotten people: a narrative research project exploring the experiences of people living in poverty" has been considered and approved.

Please note that this approval is subject to the incorporation of the amendments you have provided in your email of 19 March 2015.

Best wishes for your project.

Yours sincerely

A handwritten signature in black ink, appearing to read 'L. MacDonald'.

Lindsey MacDonald  
*Chair*  
*University of Canterbury Human Ethics Committee*

## Appendix 2: Information and consent sheet



Department Of Human Services and Social Work

Telephone: +64 06 757 3100 extension 8867

Email: [lesley.pitt@pg.canterbury.ac.nz](mailto:lesley.pitt@pg.canterbury.ac.nz)

Date: 30 October 2014

**'Forgotten World Highway', forgotten people: A narrative research project exploring the experiences of people living in poverty.**

### Information Sheet

Thank you for considering being part of my study on what it's like to live in the country on a limited income.

This letter is to give you more information about the study and what it would involve from you. My name is Lesley Pitt and I am doing this study for my PHD at the University of Canterbury. I am a social work tutor at the Western Institute of Technology at Taranaki (WITT) and have worked as a social worker in Taranaki and

Horowhenua. I grew up in the Te Popo area and went to Stanley School (now closed) and Stratford High School.

The project is being carried out by myself under the supervision of Dr Jane Maidment, phone 03 364 2987 extension 7499 extension or email [jane.maidment@canterbury.ac.nz](mailto:jane.maidment@canterbury.ac.nz). You can contact her if you would like to know more about this study, myself or you have any concerns about participating in this project.

This project has been reviewed and approved by the University of Canterbury Human Ethics Committee, and if you have any complaints as a participant you can address them to The Chair, Human Ethics Committee, University of Canterbury, Private Bag 4800, Christchurch ([human-ethics@canterbury.ac.nz](mailto:human-ethics@canterbury.ac.nz)).

For this study I will be interviewing nineteen other people like yourself who live in this area. I am using an approach called story telling. This means I have some questions we could discuss but we can also talk about other things you think are relevant. An example of some questions I might ask are: What impact does your income have on your everyday life? How do you 'get by'?

The interview will take no longer than 90 minutes and will be digitally recorded. Some petrol or grocery vouchers will be left for you as a way of saying thanks for giving up your time and sharing your story, a form of compensation. If you are interested I can provide you with a copy of the research summary when my PHD is finished. A thesis is a public document and will be available through the University of Canterbury Library.

The results of the project may be published, but you can be assured of the complete confidentiality of the information gathered in this investigation: your identity and location will not be made public. To ensure anonymity and confidentiality, you can chose a name you would like to be known as in the study and anything which might identify you, including where you live, will be removed. The transcripts from the interviews will

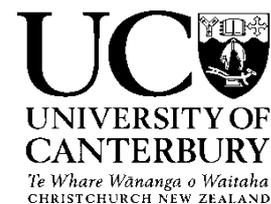
only be seen by myself, the typist who does the transcription and my PHD supervisors at the University of Canterbury. Prior to the typist beginning work they will sign a confidentiality contract. A written copy of our interview will be stored in a password protected computer and hard copy material will be stored in a locked cabinet. After a ten year period this copy of the interview will be destroyed.

I'm sure you would like to think this over and maybe talk to other people before you make a decision. If you do want to be involved would you please text, phone, email me or let your caseworker know you want to be part of this study. What is discussed in our interview will not be shared with your case worker. If you are interested in participating in this study please sign and date the attached consent form and return this to me. The other copy is for you to keep. I really appreciate you being interested in this.

I look forward to hearing from you.

Regards

Lesley Pitt



Department Of Human Services and Social Work

Telephone: +64 06 757 3100 extension 8867

Email: [lesley.pitt@pg.canterbury.ac.nz](mailto:lesley.pitt@pg.canterbury.ac.nz)

Date: 30 October 2014

**'Forgotten World Highway', forgotten people: A narrative research project  
exploring the experiences of people living in poverty.**

### **Consent form**

I have been given a full explanation of this project and had the opportunity to ask questions. I understand what is required of me if I agree to take part in the research.

I understand that participation is voluntary and I may withdraw at any time without penalty. Withdrawal of participation will also include the withdrawal of any information I have provided should this remain practically achievable.

I understand that any information or opinions I provide will be kept confidential to the researcher and the research supervisors from the University of Canterbury and that any published or reported results will not identify me or where I live. I understand that a thesis is a public document and will be available through the University of Canterbury Library.

I understand that all data collected for the study will be kept in locked and secure facilities and in password protected electronic form and will be destroyed after ten years. I understand the risks associated with taking part and how they will be managed. This study has been reviewed and approved by the University of Canterbury Ethics Committee.

Tick if you would like to would like a summary copy of research results. Please provide you contact address so this can be posted to you.

I understand that I can contact the researcher, Lesley Pitt, [l.pitt@witt.ac.nz](mailto:l.pitt@witt.ac.nz) or on 06 7573100 extension 8867, or 0278565159 or supervisor, Dr Jane Maidment, [jane.maidment@canterbury.ac.nz](mailto:jane.maidment@canterbury.ac.nz) or on 03 364 2987 extension 7499 for further information. If I have any complaints, I can contact the Chair of the University of Canterbury Human Ethics Committee, Private Bag 4800, Christchurch ([human-ethics@canterbury.ac.nz](mailto:human-ethics@canterbury.ac.nz))

By signing below, I agree to participate in this research project.

Name, signature and date above

**Appendix 3: Schedule of interview questions**

Possible interview questions:

What do you think is enough to live off?

What impact does having a limited income have on your every day life?

Do you or anyone in your family ever go without?

Does having a limited income affect your relationships or other people in your family eg  
children?

Does having a limited income affect your housing/health/education?

Would your life be different if you lived in town?

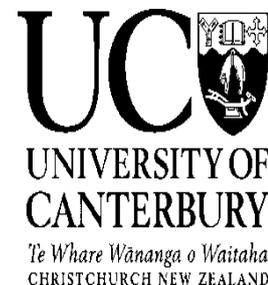
How do you 'get by'?

How would things be different in your life if you had more money?

What advice would you give social workers if they work with people who don't have a lot of  
money and live in the country?

## Appendix 4: Ethical approval from the University of Canterbury

### Māori Research Advisory Group



January 22<sup>nd</sup> 2015

Tēnā koe, Lesley

Re: 'Forgotten wold highway', forgotten people: A narrative research project exploring the experiences of people living in poverty.

This letter is written on behalf of the Māori Research Advisory Group (MRAG). It acknowledges that your proposal has been reviewed by MRAG. I am pleased to advise you that we are satisfied that you have given appropriate consideration to the cultural aspects of your research, and have thought about the potential impact and relevance of your research for Māori communities. One committee member took a particular interest in your project and commented that "*this is a worthwhile study and deserving of support*". This member also hoped that you would be able to consider the notion of "poverty" in rural communities as a complex experience that can't be defined strictly in terms of income. He further commented that "*the rural 'poor' may well eat well from home gardens and have lives rich in environmental treasures...*"

Thank you for engaging with the Māori consultation process. This will strengthen your research proposal and support the University's Strategy for Māori Development. It will also

increase the likelihood that the outcomes of your research will be of benefit to Māori communities. We wish you all the best with your current project and look forward to hearing about future research plans.

The MRAG committee would appreciate a summary of your findings on completion of the current project. Please feel free to contact me if you have any further questions. If you require a hard copy of this letter, please let me know.

Nāku noa, nā



Dr Tracy Rohan

**Research Consultant Māori**

**Research and Innovation**

Room 244, Level 2, Psychology Building

**ext 45520**

**Email: [tracy.rohan@canterbury.ac.nz](mailto:tracy.rohan@canterbury.ac.nz)**

## Appendix 5: Transcriber confidentiality agreement



Department of Human Services and Social Work

Telephone: +64 06 757 3100 extension 8867

Email: [lesley.pitt@pg.canterbury.ac.nz](mailto:lesley.pitt@pg.canterbury.ac.nz)

Date: 30 October 2014

**'Forgotten World Highway', forgotten people: A narrative research project  
exploring the experiences of people living in poverty.**

### **Transcriber Confidentiality Agreement**

This research is being undertaken by Lesley Pitt, PhD candidate in the Department of Human Services and Social Work, University of Canterbury. The purpose of this research is to explore poverty in a rural area.

As a transcriber of this research I understand that I will be hearing recordings of confidential interviews. The information on these recordings has been revealed by interviewees who agree to participate in this research on the condition that their interviews would remain strictly confidential. I understand that I have a responsibility to honour this confidentiality agreement.

I agree not to share any information on these recordings, about any party, with anyone except the researcher of this project. Any violation of this and the terms detailed below would constitute a serious breach of ethical standards and I confirm that I will adhere to the agreement in full.

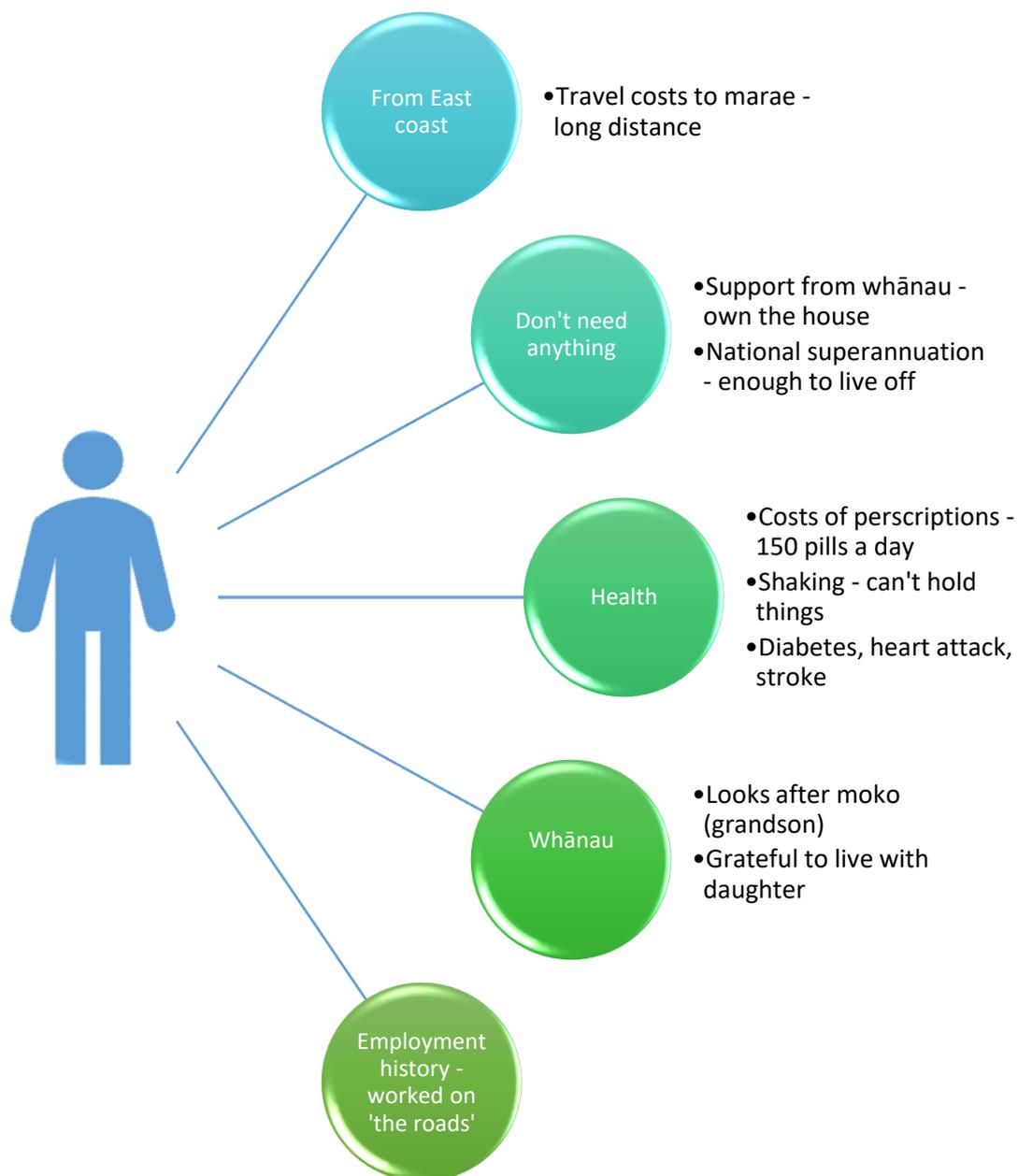
I \_\_\_\_\_ agree to:

1. Keep all the research information shared with me confidential by not discussing or sharing the content of the interviews in any form with anyone other than the researcher.
2. Keep all research information in any form secure while it is in my possession.
3. Return all research information in any form to the researcher when I have completed the transcription tasks.
4. After consulting with the researcher, erase or destroy all research information in any form regarding this research project that is not returnable to the researcher.

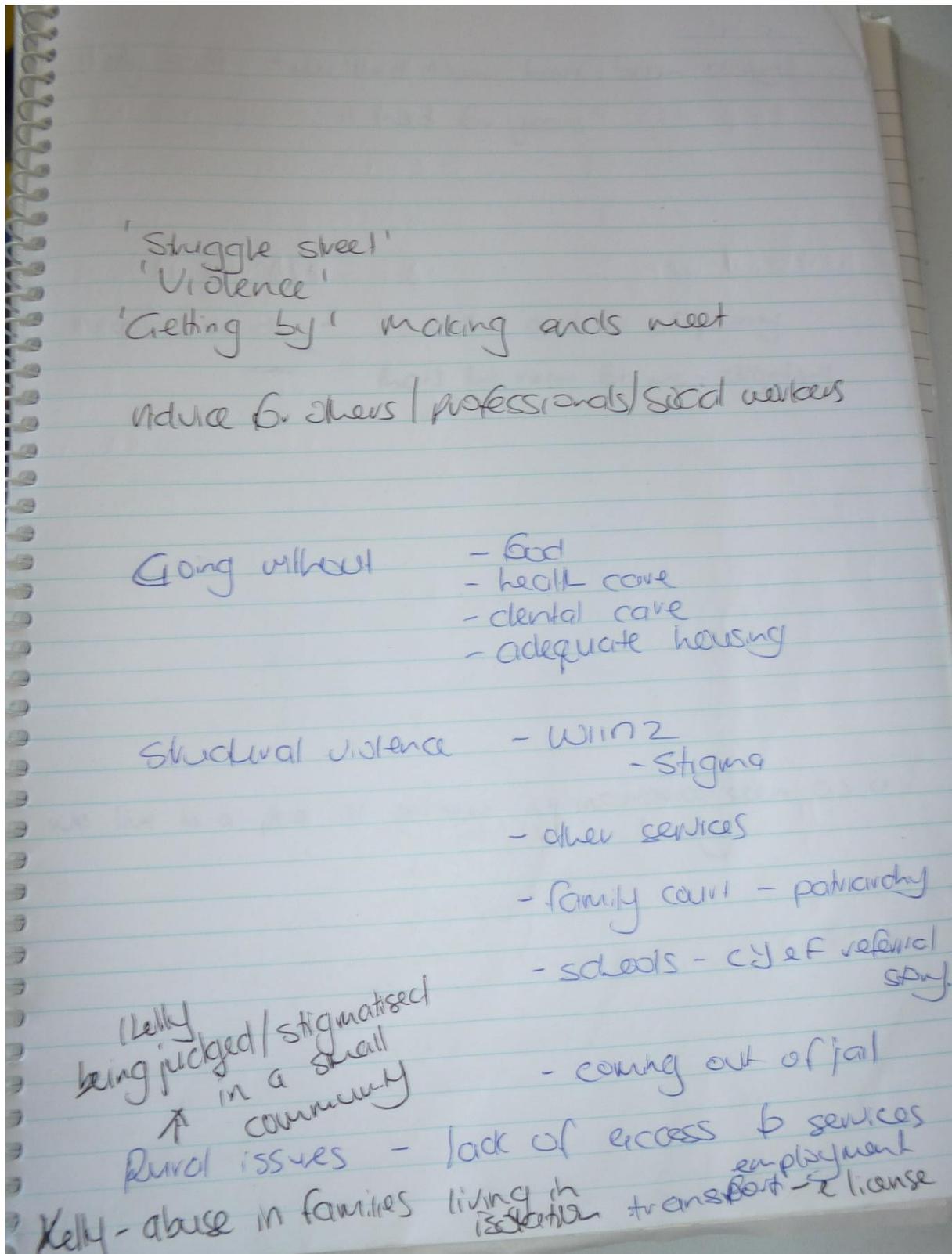
Transcriber, Signature and date: \_\_\_\_\_

Researcher, Signature and date: \_\_\_\_\_

## Appendix 6: Example of an interview mind map



## Appendix 7: Tentative codes drawn from mind maps



**Appendix 8: Example of page from code book****Code label: Teen parenting**

Short definition: Being a parent under the age of 20.

Long definition: Some participants had become parents as teenagers and still were parenting. This may have meant their education was interrupted and/or they accessed teen parent units for education. They also accessed Tui Ora Youth Services.

**Code label: Transport**

Short definition: Any means of getting around, from point A to point B.

Long definition: This could be private transport such as cars, access through other people such as family members or the use of public transport. It also includes the lack of transport.

**Code label: Unemployment**

Short definition: Not being in paid work but seeking employment.

Long definition: If people want to be working and are looking for work but cannot find it they are unemployed. This includes women with children at home or over 65's if they want to work and are looking for work.

**Code label: Unexpected costs**

Short definition: This includes costs which cannot be planned for because they happen spontaneously.

Long definition: Some costs can be planned for such as ongoing bills for power and phones.

Unexpected costs happen when something untoward happens or things happen 'out of the blue'. This code includes the break-down of things like vehicles or appliances. It may also be when people help out family members when they weren't expecting to.

## Appendix 9: Mind maps of codes

