

Motu Note 47

How persistent are issues with access to affordable childcare?

Motu economic & public policy research

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September 2022



Document information

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Acknowledgements

This research was funded by Manatū Wāhine Ministry for Women and the National Advisory Council on the Employment of Women (NACEW). The author thanks Deb Potter (Manatū Wāhine Ministry for Women), Riripeti Reedy (Manatū Wāhine Ministry for Women), Maanaima Soa, and seminar participants at Manatū Wāhine Ministry for Women for helpful feedback and discussion.

Disclaimer

This report uses Growing Up in New Zealand (GUiNZ) data collected by the University of Auckland. The data have been accessed and used in accordance with the GUiNZ Data Access Protocol. The views and interpretations in this report are those of the researchers and are not the official position of Manatū Wāhine Ministry for Women or NACEW.

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Abstract

This is the second in a series of five reports that together use the Growing Up in New Zealand longitudinal survey data to explore how the inability to access affordable childcare affects the long run labour market outcomes of mothers. This report investigates the persistence of mothers' difficulties accessing affordable childcare. It shows 20% of issues with access to childcare at 9 months are clearly unresolved at 2 years, 37% may be unresolved (indicated by a child not in childcare where the main reason is parental preferences), and only 43% are clearly resolved (indicated by the child being in childcare). Māori and Pasifika face modestly more persistent issues than Europeans, which, when combined with their higher rates of access issues at 9 months, make them 3 to 4 times as likely to experience long term access issues. In general, the results show more disadvantaged mothers, who were found in the first report to have higher rates of issues with access to childcare, also have more persistent issues with access to childcare. This is particularly true for mothers from low-income households.

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1 Introduction

When New Zealand parents are unable to find suitable, affordable childcare, it is disproportionately the mothers who takes time out of the labour force to care for the children. This inevitably reduces mothers' contemporaneous labour supply, and has the potential to negatively affect their careers in the long term, for instance, if their human capital erodes while they are not working.

This is the second in a series of five reports that together use Growing Up in New Zealand data to explore how the inability to access affordable childcare affects the long run labour market outcomes of mothers. The first report investigated how common issues with access to childcare are, and who experiences such issues. This report investigates the extent to which mothers' issues with access to childcare at 9 months persist until their child is 2 years old and the characteristics of the mothers who are less likely to resolve their access issues.

The persistence of issues with access to childcare matters because access issues that are quickly resolved are less likely to have long-term impacts on mothers' labour market outcomes than are access issues that are unresolved for years.¹ Because less than 1% of children are not in childcare at 54 months due to access issues, this report focuses on the persistence of access issues between 9 months and 2 years; at both these ages around 7.5% of children are not in childcare due to access issues.

Subsequent reports in this series will explore the use of and experiences with childcare faced by those who previously experienced issues accessing childcare, how access to childcare issues are related to mothers' contemporaneous work, and how access issues are related to mothers' labour market outcomes in the long term.

The next section outlines the policy environment faced by the cohort of children studied. Section 3 gives a brief description of the data, construction of the sample used in this report, main variables of interest, and measurement of the persistence of issues with access to childcare. Section 4 presents results on the persistence of access issues overall, by ethnicity, and for various other subpopulations.

¹ Sin et al. (2018) show mothers who return to work after parental leave of over a year experience substantially larger wage penalties than mothers who take shorter parental leave.

2 Policy setting

The children studied in this report were born between April 2009 and March 2010. The focuses of the report are their childcare situations at 9 months old, which was approximately during the 2010 calendar year, and 2 years old, which was between April 2011 and March 2012.

The parents of these children were eligible for a maximum of 14 weeks of paid parental leave (PPL), the value of which was equal to their pre-birth weekly earnings, capped at the average New Zealand wage.² PPL has subsequently increased, reaching 26 weeks in June 2020.³ These changes may have affected the parental leave decisions of later cohorts of mothers, but because PPL is still only 6 months, their effect on mothers' work and childcare at 9 months is likely to be limited.

At both the ages of focus, the children were too young to be receiving the universal 20 Hours ECE subsidy for attending early learning services; this is available for children aged three to five only. However, low income parents in the cohort studied could have been eligible for MSD's Childcare Subsidy, which is administered through Work and Income. This income-tested subsidy is available for children who are not yet of school age who attend an approved early childhood programme for at least three hours per week.⁴ While the 20 Hours ECE subsidy is automatically applied, parents must know about the MSD Childcare Subsidy and manually apply for it. Prior studies show not all eligible parents know about this subsidy, and among those who do, the bureaucracy that must be dealt with to get it can be a major barrier.⁵

3 Data

3.1 Growing Up in New Zealand longitudinal survey

This report uses data from the Growing Up in New Zealand (GUiNZ) survey run out of the University of Auckland. This longitudinal survey focuses on 6,846 children born in the Auckland, Waikato, and Counties-Manukau regions in April 2009 to March 2010 and their families. The participating families were selected to be roughly ethnically and socioeconomically representative of the overall New Zealand population. Further details of the study can be found in Morton et al. (2013).

² Forbes (2009).

³ <https://www.business.govt.nz/news/paid-parental-leave-changing-2020/> accessed 21 September 2021.

⁴ <https://www.workandincome.govt.nz/products/a-z-benefits/childcare-subsidy.html> accessed 21 September 2021.

⁵ Statistics New Zealand (2017).

3.2 Sample construction

Because the focus of this research is mothers, all analysis is at the family level, meaning multiple births to one mother are combined into one observation. Analysis is limited to the sample of families that meet several criteria:

- the mother was present in the antenatal survey (conducted approximately 3 months before the child's due date);
- the same mother was present in the antenatal, 9-month, and 2-year surveys; and
- the childcare situation at 9 months and 2 years is fully known (whether the child was in regular childcare, if so then the number of hours of care each week, and if not then the main reason why not).

Table 1: Characteristics of full GUiNZ population and analysis sample

	All GUiNZ mothers	Mothers present in antenatal, 9-month, and 2-year surveys	
		All	With non-missing childcare information
Mother's age	30.0	30.3	30.3
First child	41.8%	42.2%	42.1%
Mother's self-prioritised ethnicity: European	52.9%	56.5%	57.0%
Maori	13.9%	13.2%	13.0%
Pasifika	14.7%	12.9%	12.8%
Asian	14.7%	13.7%	13.6%
MELAA	2.1%	2.0%	2.0%
Other ethnicity	0.2%	0.2%	0.2%
New Zealander	1.2%	1.3%	1.3%
Missing ethnicity	0.3%	0.3%	0.2%
Mother lives with a partner	90.4%	91.3%	91.3%
Partnership status missing	9.6%	9.7%	9.6%
Deprivation Index	6.0	5.9	5.9
Observations	6,821	6,071	5,971

Notes: Antenatal characteristics of mothers in the full GUiNZ sample, sample linked between survey waves, and analysis sample.

Table 1 compares the characteristics of mothers in this analysis sample (third column) with GUiNZ mothers in all three surveys waves of interest (second column) and all GUiNZ mothers (first column). The 6,821 mothers in the full GUiNZ sample fall by 750 to 6,071 mothers who are present in the first three survey waves, and by another 100 to the analysis sample of 5,971 for whom full information on childcare situation at 9 months and 2 years is available.

The table shows mothers in the analysis sample are similar in terms of age, whether the GUiNZ child was their first child, and deprivation index. However, the ethnic breakdown of the samples is quite different. Mothers who identify most strongly as European constitute 52.9% of

the full GUINZ population compared with 57.0% of the analysis sample, those who identify as Māori constitute 13.9% of all GUINZ mothers and 13.0% of analysis mothers, and those who identify as Pasifika constitute 14.7% of all GUINZ mothers and 12.8% of analysis mothers. Mothers in the analysis sample are also disproportionately likely to live with a partner, 91.3% compared with 90.4% of the full population.

3.3 Main variables of interest

The main variables of interest in this report are the childcare situation at 9 months, constructed from information in the 9-month survey, and the childcare situation at 2 years, constructed from information in the 2-year survey. In each survey wave, children are classified as being in regular childcare, not in regular childcare due to parental preferences, or not in regular care due to access issues. The regular childcare can be formal or informal, and includes care by relatives or friends. It excludes only care by the mother or her partner.

Two main differences should be noted between the variables for childcare situation at 9 months and at 2 years. First, at 9 months, a child is classified as not being in care due to access issues if their main reason for not being in regular childcare is (i) cost, (ii) no spare places, (iii) not available when I need it, (iv) transport difficulties, (v) not available locally, (vi) poor quality of care, or (vii) does not suit our beliefs. At 2 years, the wordings on some of these options have been cosmetically altered, and health concerns is an additional option.

Second, in the 9-month survey, a child is classified as not in care due to preferences if the main reason for not being in care is (i) does not need it or (ii) do not want baby cared for by strangers. At 2 years, (i) too young and (ii) mother does not want/need it are additional options.

This report uses two different measurements of ethnicity to examine differences in issues with access to childcare by ethnic group. Both are based on information gathered on the mother's ethnicity in the antenatal survey. The figures by ethnicity use total response ethnicities, where an individual is included in the ethnic group if they report it as their only ethnicity or as one of their ethnicities. In the appendix table, information is presented separately for those who report a single ethnicity, such as Māori, and those who report multiple ethnicities, such as Māori and any other ethnicity. Information is also shown for self-prioritised ethnicities, which allocate each individual to the one ethnic group with which they identify most strongly.

3.4 Conceptualising and measuring the persistence of access issues

We consider a child to be not in childcare due to access issues at 9 months if the main reason reported for them not being in care is an access issue as opposed to parental preference. To

investigate the persistence of such issues, we look at the extent to which access issues that are present at 9 months are no longer reported at 2 years. A limitation of the analysis is that only one reason for a child not being in childcare is given. Thus we can be confident a child who has entered childcare by 2 years is no longer kept from childcare by access issues, but a child who is not in childcare due to parental preferences may still have unresolved access issues. For instance, their parents may have given up on trying to secure childcare and decided to stay home with them. Among children who have access issues at 9 months, we distinguish children moving into care by 2 years from those moving into not being in care due to preferences, acknowledging that we are less certain the latter group have fully resolved all their access issues.

An access issue that prevents a child from being in childcare might later be resolved in a number of different ways. First, parental or external circumstances might change. For instance, this could occur if the mother's partner gets a higher paying job that enables the family to afford care they could not previously afford, the family purchases a car that makes more distant childcare options accessible, the family moves so childcare is closer, a new childcare provider opens or an existing provider changes its services so they better suit the family's needs, the child makes it to the top of a provider's waiting list, extended family or whānau become available to provide childcare, the mother completes a qualification that increases her earning potential, or a single mother enters a relationship with a partner who can assist with childcare costs.

Second, issues with access to childcare might be resolved when the child ages into available childcare options.

Third, the disadvantages of the child not being in childcare might grow until a childcare option that was considered unsuitable previously becomes preferable to no childcare. This should not be considered true resolution of access issues, but is challenging to distinguish from resolution in the data. Whether parents with "resolved" childcare access issues use care differently or have different satisfaction with the care they use will be investigated in the third report in this series. This may shed light on the extent to which such parents are unhappy with their care arrangement but feel they have no choice but to use it.

In the analysis we group all access issues together, not distinguishing cost issues from other access issues or looking at the more detailed breakdown of other access issues considered in the previous report. There are two main rationales for this. First, access issues are likely to cluster together within disadvantaged households. For instance, low income parents can afford to pay less for care, which may mean the only childcare options they can afford are out of reach geographically, have no spaces, or are not culturally appropriate. Second, a child who moves from having one main reason they cannot access childcare to having a different main reason

they cannot access childcare should not be considered to have successfully resolved their access issues. In terms of the persistence of childcare issues, resolving all access issues is the relevant objective, not resolving individual issues.

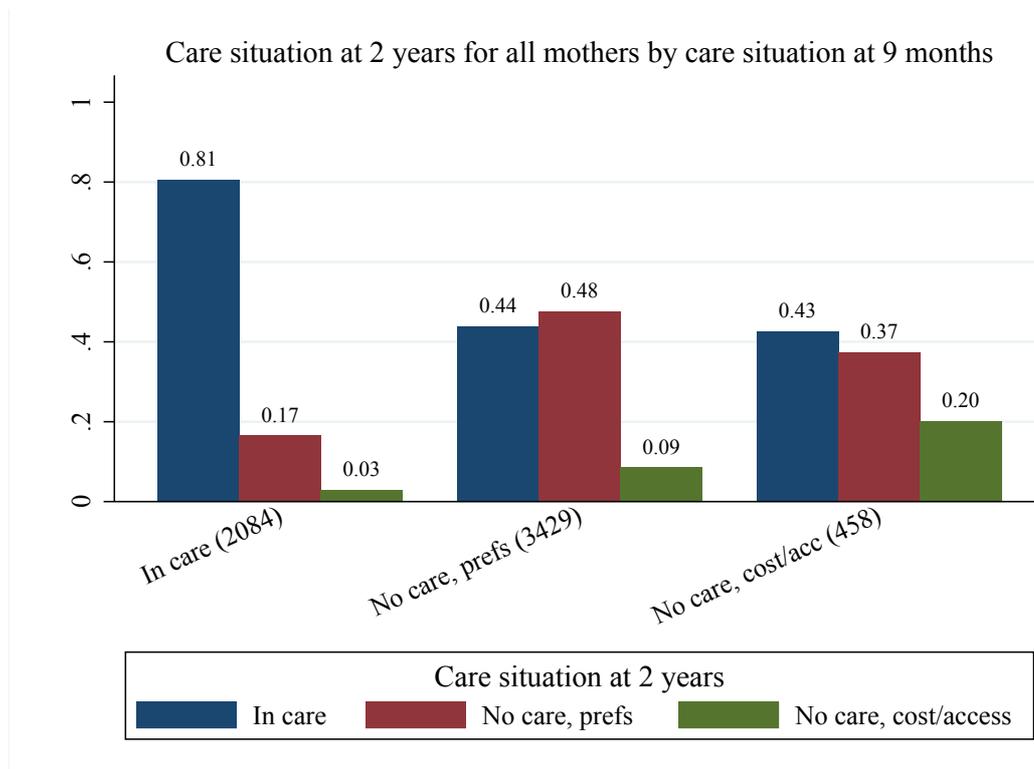
4 Results

4.1 How commonly do access issues at 9 months persist to 2 years?

This section investigates the persistence of issues with access to childcare between when the child is 9 months old and when they are 2 years old for the full population.

Figures 1 and 2 show 20% of children who were not in childcare at 9 months due to cost or other access issues are still in this situation at 2 years. This relatively low percentage suggests the majority of issues with access to childcare are not long term problems. However, 37% are not in childcare due to their parents' preferences, and we can't rule out these children also having unresolved access issues. Forty-three percent of the children have moved into childcare.

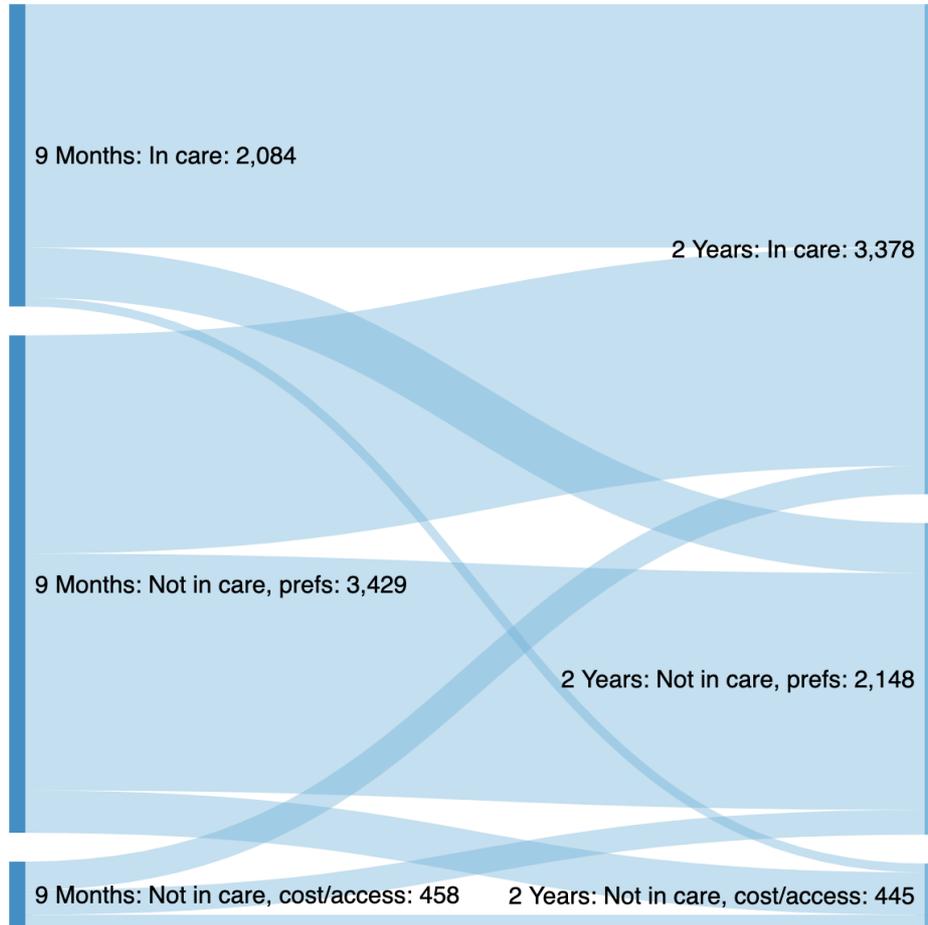
Figure 1: Persistence of care situation between 9 months and 2 years



Notes: The proportion of children at who are in each childcare situation at 2 years (coloured bars) by their childcare situation at 9 months (horizontal axis categories). The population count for each group is given below the horizontal axis and bars are labelled with the fraction of the sample that falls into the category.

In addition, 9% of children who at 9 months were not in childcare due to parental preferences and 3% of those who were in childcare are now not in childcare due to cost/access issues.

Figure 2: Flows between care situations from 9 months to 2 years



Appendix Table 1 presents a slightly different perspective on the persistence of issues with access to childcare for the full population (first row) and a range of subpopulations (subsequent rows). The first column gives the percentage of the population not in childcare at 9 months; the first row shows this is 65% of all children. The second column narrows this population to those not in childcare specifically due to access issues, which is 7.7% of the full population.

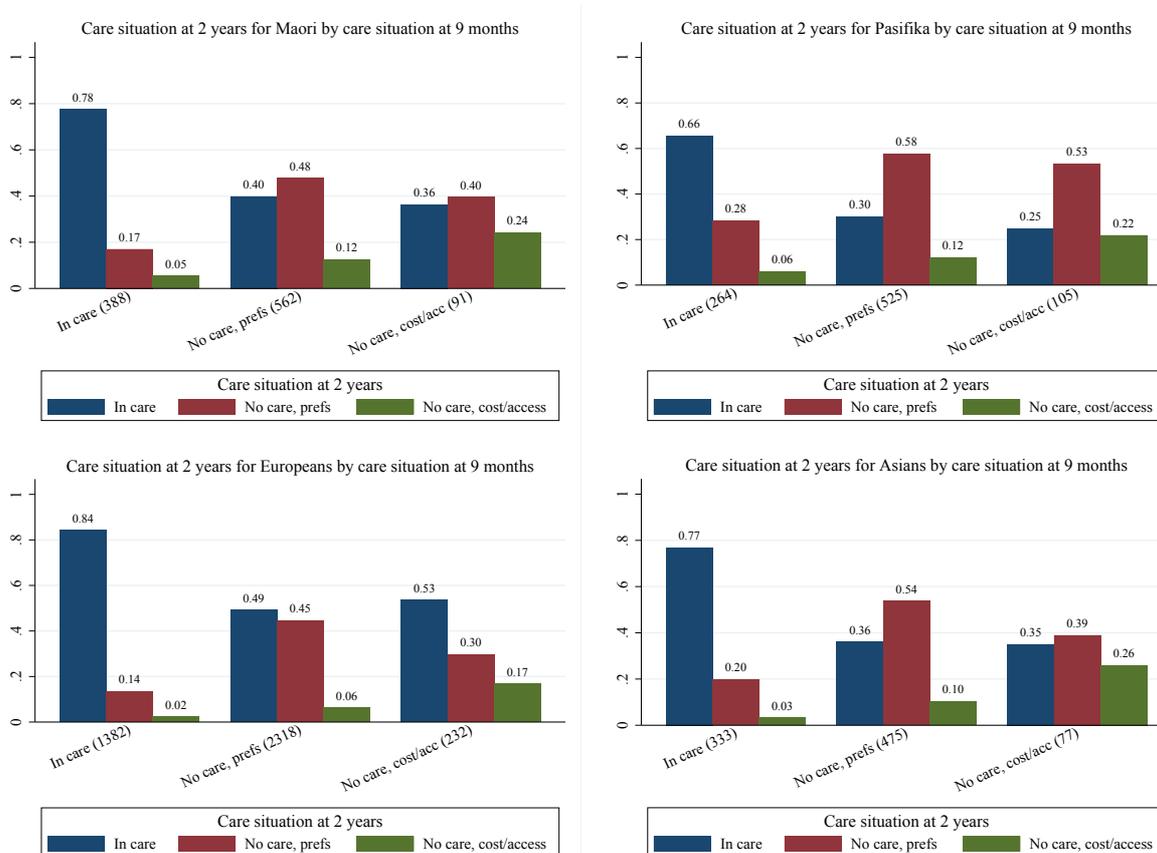
The third and fourth columns both give information on the persistence of access issues, where persistent access issues are narrowly defined as access issues that are the main reason a child is not in childcare at both 9 months and 2 years. The third column gives the percentage of the population with persistent access issues, which is 1.5% of the full population. The fourth column considers access issues that are present at 9 months, and shows the percentage of these that are still the main reason for a child not being in childcare at 2 years. The first row shows 20% of access issues present at 9 months persist to 2 years.

The fifth and sixth columns both give information on *potentially* persistent access issues, where a family is defined as experiencing potentially persistent access issues if they have access issues at 9 months and their child is not in childcare at 2 years for any reason. As discussed in Section 3.4, the size of this group provides an upper bound on the proportion of families with persistent access issues. The fifth column gives those with potentially persistent access issues as a percentage of the total population. This group makes up 4.4% of the full population, and the sixth column shows they are 57% of those with access issues at 9 months. The seventh column of the table gives the subpopulation size, specifically the number of mothers reporting the childcare situation.

4.2 Ethnic differences in the persistence of issues with access to childcare

Among those with issues accessing childcare at 9 months, Figures 3 and 4 shows the rate of remaining in this state at 2 years is lowest for Europeans (17%) and somewhat higher for Māori (24%), Pasifika (22%), and Asians (26%). Europeans are the most likely to resolve these issues and enter childcare by 2 years (53%); this compares with 36% or less for the other ethnicities.

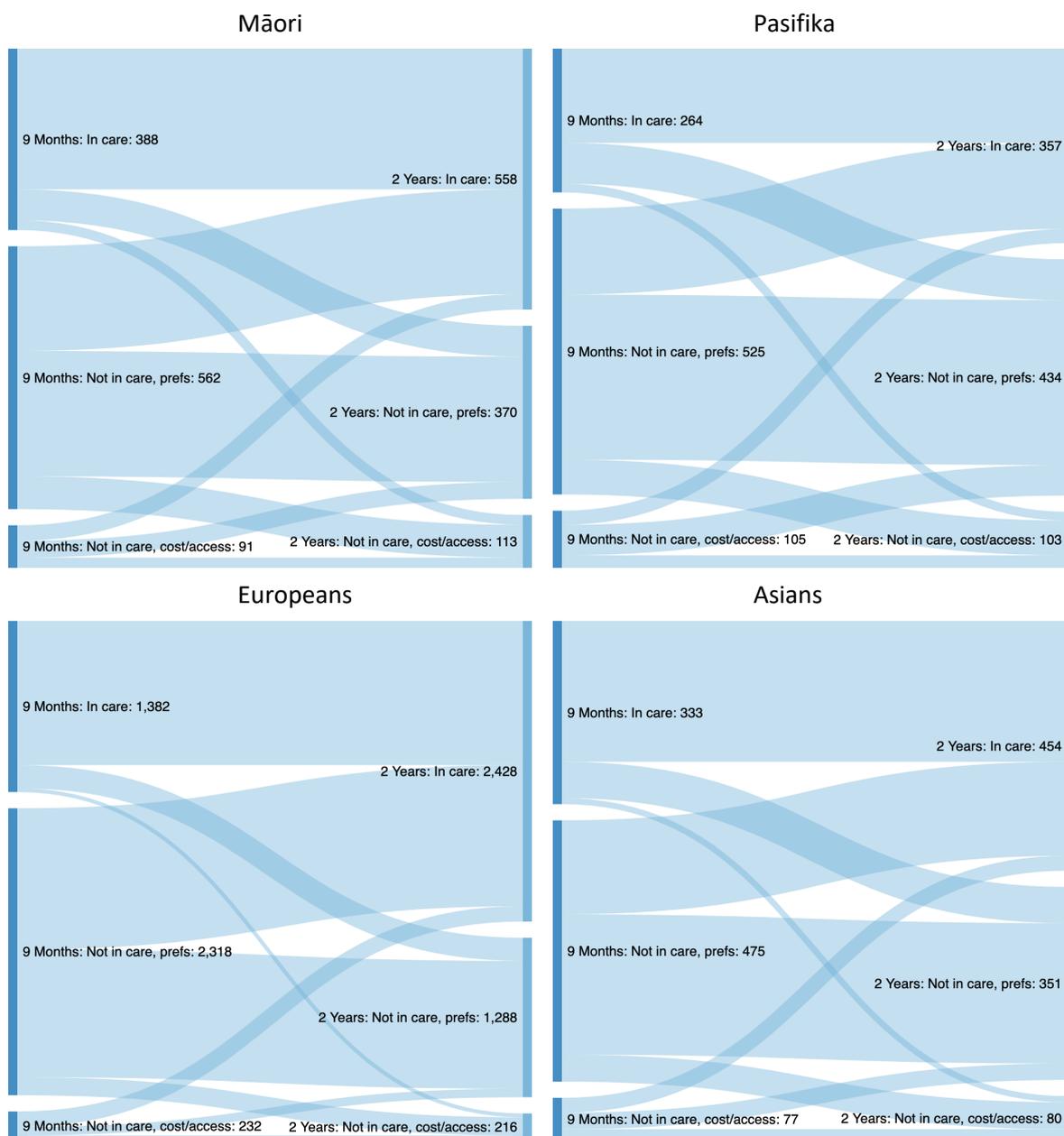
Figure 3: Persistence of care situation between 9 months and 2 years by ethnicity



Notes: The proportion of children at who are in each childcare situation at 2 years (coloured bars) by their childcare situation at 9 months (horizontal axis categories) for each common ethnicity (total responses). The

population count for each group is given below the horizontal axis and bars are labelled with the fraction of the sample that falls into the category.

Figure 4: Flows between care situations from 9 months to 2 years by ethnicity



However, these differences ignore the different rates of access issues at 9 months and also group single-ethnicity mothers with multiple-ethnicity mothers. Appendix Table 1 shows ethnic differences are greater among single-ethnicity mothers. Single-ethnicity Māori mothers are nearly four times as likely as single-ethnicity European mothers to report persistent issues with access to childcare (issues that are present at 9 months and 2 years), at 3.4% compared with 0.9%. Pacific and Asian mothers are three times as likely as European mothers at 2.7% and 2.6%

respectively. These differences in the proportion of mothers reporting persistent access issues are statistically significant at conventional levels.

Ethnic differences in the proportion of children with access issues at 9 months who have not entered care at 2 years are just as large: the Māori rate is 8.4%, three-and-a-half times the European rate of 2.4%, and the Pasifika rate is 10.1%, more than four times the European rate. Although this difference partially reflects differences in parental preferences, underlying differences in the opportunities available to families of different ethnicities are also likely to contribute.

Figure 3 also shows rates of developing issues with accessing childcare between 9 months and 2 years are higher for Māori and Pacific mothers than for European mothers.

The results suggest moderate differences between ethnicities in the persistence over time of issues with access to childcare, and large differences in the proportion of families facing persistent access issues.

4.3 Differences in the persistence of issues with access to childcare by other parental characteristics

Appendix Table 1 shows how the persistence of issues with access to childcare varies over different subpopulations defined by mother's age, mother's education, whether the mother has previous children, deprivation index, urban residence, mother's migration status, whether the mother is partnered, whether the pregnancy was planned, the mother's antenatal labour force status, antenatal household income, whether the mother was a beneficiary antenatally, and the mother's antenatal occupation.

In general, the table shows more disadvantaged mothers, who were shown in the first report to have higher rates of issues with access to childcare, also have more persistent issues with access to childcare. For instance, 3.2% of mothers with no qualifications have persistent access issues compared with 0.7% of mothers with bachelor's degrees, and 29% of the access issues faced at 9 months by mothers with no qualifications remain at 2 years compared with 12% of those faced by mothers with bachelor's degrees.

This gradient is particularly strong by household antenatal income. Among households with annual incomes under \$20,000, 4.5% have persistent access issues, which is 36% of those with access issues at 9 months. In comparison, among households with incomes over \$150,000, only 0.3% have persistent access issues, or 6.7% of those with access issues at 9 months.

However, a few characteristics are related to persistent access issues in unexpected ways. Overall, mothers who live in urban areas have slightly lower rates of access issues at 9 months than mothers in rural areas, but the access issues of urban mothers are more persistent, with

21% unresolved by 2 years compared with only 13% of access issues faced by rural mothers (though this difference is not statistically significant). Migration from rural to urban areas (16% of rural mothers moved to urban areas over this period) may help explain this difference.

Similarly, mothers who were unpartnered antenatally are much more likely to have access issues at 9 months than are partnered mothers (11% compared with 7%), yet the access issues of unpartnered mothers are more likely to resolve by 2 years, with only 12% remaining unresolved compared with 20% for partnered mothers (though again this difference is not statistically significant). One possible explanation is that mothers who were unpartnered antenatally (who are still substantially more likely to be unpartnered at 9 months) may find a partner by 2 years, thus gaining an additional income in their household and increasing their ability to pay for childcare.⁶

The relationship between the mother's antenatal employment status and the persistence of access issues is also somewhat surprising. Although employed mothers are less than half as likely as unemployed mothers to have access issues at 9 months, the persistence of existing issues for these groups is the same, 18%. At 9 months, students have slightly fewer access issues than employed mothers, but 26% of students' access issues persist until 2 years. Note, however, that the overall number of students is small, so this difference should not be overinterpreted.

The next report in the series will explore how use of childcare and satisfaction with it differs for families where the mother previously reported her child not being in childcare due to access issues. This will shed light on whether families that appear to have resolved their access issues may be tolerating unsuitable childcare.

⁶ Around a third of mothers in this sample who do not have a partner at 9 months do have one at 2 years.

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Appendix Table 1: Persistence of issues with access to childcare from 9 months to 2 years by subpopulation

Subpopulation	Not in care	Issues	Persistent issues	Potentially persistent issues			Number of mothers
	Not in care at 9 months as % of total population	Not in care at 9 months due to cost/access as % of total population	Not in care due to cost/access at both 9 months and 2 years as % of total population	% of cost/access issues at 9 months that persist until 2 years	Not in care due to cost/access at 9 months and not in care at 2 years (for any reason) as % of total population	% of cost/access issues at 9 months that are not resolved by child entering care by 2 years	
Full population	65.1	7.7	1.5	20.1	4.4	57.4	5,971
Mother's antenatal ethnicity:							
European (single ethnicity)	65.3	5.7	0.9	15.5	2.4	42.0	3,076
European (multiple ethnicity)	63.2	6.8	1.4	20.7	4.1	60.3	856
European (self-prioritised ethnicity)	65.3	5.5	0.9	16.6	2.5	45.5	3,401
Maori (single ethnicity)	64.1	12.9	3.4	26.1	8.4	65.2	357
Maori (multiple ethnicity)	62.0	6.6	1.5	22.2	4.1	62.2	684
Maori (self-prioritised ethnicity)	63.0	9.8	2.2	22.4	5.9	60.5	776
Pacific (single ethnicity)	71.1	13.1	2.7	20.2	10.1	77.4	641
Pacific (multiple ethnicity)	68.8	8.3	2.4	28.6	5.5	66.7	253
Pacific (self-prioritised ethnicity)	69.8	12.7	2.7	21.6	9.6	75.3	764
Asian (single ethnicity)	62.7	9.1	2.6	28.2	6.0	66.2	782
Asian (multiple ethnicity)	60.2	5.8	0.0	0.0	2.9	50.0	103
Asian (self-prioritised ethnicity)	62.8	9.1	2.5	27.0	5.9	64.9	811
Other ethnicities (self-prioritised ethnicity)	68.8	13.3	1.6	11.8	6.3	47.1	128
Mother's age antenatally:							
Under 25	69.6	10.3	2.8	27.3	7.1	68.2	1,063
25 to 34	64.0	7.3	1.4	19.1	3.9	53.7	3,347
35 and over	64.4	6.5	1.0	14.7	3.6	54.9	1,561
Mother's highest qualification antenatally							
No qualifications	77.8	11.1	3.2	29.3	8.6	78.0	370
School qualifications	68.9	9.6	1.8	18.5	6.4	66.2	1,354
Post-school qualifications	66.6	8.4	2.0	23.7	4.7	55.9	1,814
Bachelor's degree	61.9	5.7	0.7	12.3	2.7	46.9	1,425
Higher degree	56.7	5.2	0.9	17.3	2.0	38.5	991
First child	61.1	6.8	1.2	18.0	3.8	55.8	2,516
Subsequent child	68.0	8.3	1.8	21.3	4.8	58.4	3,455
Deprivation index at 9 months							
1-3	64.5	5.9	1.0	16.8	2.8	48.4	1,615
4-7	63.5	6.5	1.0	16.0	3.4	52.1	2,215
8-10	67.3	10.2	2.5	24.2	6.6	64.8	2,139
Mother lives in an urban area at 9 months	64.5	7.6	1.6	20.7	4.4	57.9	5,510
Mother lives in a rural area at 9 months	72.2	8.2	1.1	13.2	4.3	52.6	461
Mother's migration status:							
NZ born	65.4	7.0	1.4	19.9	3.7	53.3	3,932
Migrated to NZ as child	60.4	8.4	1.3	14.9	5.7	68.1	558
Migrated to NZ as adult	66.0	9.2	2.0	22.2	5.7	62.2	1,469
Mother did not live with a partner antenatally	62.9	10.8	1.3	11.8	7.6	70.6	472
Mother lived with a partner antenatally	64.8	7.2	1.5	20.3	3.9	53.8	4,926
Pregnancy was not planned	64.9	10.3	2.3	22.2	6.4	62.6	2,236
Pregnancy was planned	65.2	6.1	1.1	18.1	3.2	52.2	3,708
Mother's antenatal labour force status:							
Employed	56.6	6.2	1.1	17.5	2.8	45.1	3,343
Unemployed	81.9	13.7	2.4	17.5	9.4	68.4	415
Student	56.0	5.7	1.5	26.1	2.5	43.5	407
Not in workforce	80.9	9.6	2.2	22.4	6.8	70.7	1,534
Antenatal household income:							
<\$20k	73.3	12.5	4.5	36.4	10.8	86.4	176
\$20k-\$30k	73.4	11.6	3.0	25.9	8.2	70.4	233
\$30k-\$50k	75.6	10.9	2.3	21.2	6.6	60.6	607
\$50k-\$70k	71.1	10.5	2.1	20.3	6.6	63.3	755
\$70k-\$100k	61.1	6.2	0.7	11.8	2.4	38.2	1,101
\$100k-\$150k	54.7	4.3	0.6	13.0	1.2	28.3	1,080
>=\$150k	54.5	4.2	0.3	6.7	1.3	30.0	712
Mother did not receive benefit antenatally	63.0	6.6	1.2	17.8	3.3	49.8	4,738
Mother received benefit antenatally	75.5	13.5	3.0	22.5	10.3	76.4	658
Mother's antenatal occupation:							
Managers	49.0	4.7	0.3	6.3	1.2	25.0	341
Professionals	52.5	4.7	0.6	13.5	1.7	35.1	1,573
Technicians & Trades Workers	55.4	7.7	3.8	50.0	3.8	50.0	130
Community & Personal Service Workers	59.9	6.7	0.7	10.0	2.4	35.0	297
Clerical & Admin Workers	54.8	7.1	1.1	15.2	2.6	37.0	651
Sales Workers	61.8	6.7	1.8	26.7	4.4	66.7	225
Machinery Operators & Drivers	73.9	17.4	4.3	25.0	13.0	75.0	23
Labourers	71.5	8.8	2.9	33.3	8.0	91.7	137

Notes: The first column presents the percentage of all mothers who report their child is not in childcare at 9 months. The second column presents the percentage of all mothers who report their child is not in childcare at 9 months due to cost or access issues. The third column presents the percentage of all mothers who report their child is not in childcare due to cost or access issues at both 9 months and 2 years, thus showing the percentage of all mothers with persistent access issues. The fourth column gives mothers who report their child is not in childcare due to cost or access issues at both 9 months and 2 years as a percentage of those who reported this at 9 months, thus showing the persistence of the access issues that are present at 9 months. The fifth column presents the percentage of all mothers who report their child is not in childcare due to cost or access issues at 9 months and is not in childcare at 2 years for any reason. The sixth column gives these mothers as a percentage of mothers who report their child is not in childcare due to cost or access issues at 9 months. The final column gives the number of mothers in the group.

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