

Social Exclusion: The Sydney Experience – An Update

**Prepared by:
Natalie Swann
Alison Moffitt
John Bellamy
Sue King**

ANGLICARE Diocese of Sydney, Policy Unit

October, 2009



ANGLICARE Diocese of Sydney is the urban mission and welfare arm of the Sydney Anglican Church. ANGLICARE has been making Christ's love real to people in need for over 150 years. Each year, ANGLICARE reaches out to thousands of people, bringing Christian care and support to those struggling with poverty, disability, illness and despair.

ANGLICARE services include emergency relief for families in crisis; foster care and adoption for children and those with special needs; counselling and support for children and youth with disabilities; migrant services; aged care through both nursing homes and community services; opportunity shops providing low-cost clothing; emergency services in times of disaster and chaplains in hospitals, prisons, mental health facilities and juvenile justice institutions.

Our Vision: Lives changing and communities growing by care through Jesus Christ.

Our Mission is to care:

- By doing good works that grow communities and address emotional, social and physical needs, and which are the fruit of the gospel of the Lord Jesus Christ.
- By seeking to bring the gospel of the Lord Jesus Christ that alone meets spiritual needs.
- In partnership with churches where possible, and the wider community where appropriate.

© ANGLICARE Diocese of Sydney, 2009

For further information contact:

Natalie Swann ANGLICARE Diocese of Sydney
Policy Unit
PO Box 427
Parramatta NSW 2124

T +61 2 9895 8121

F +61 2 9687 8601

nswann@anglicare.org.au

CONTENTS

1. Introduction	1
1.1 Social Exclusion Framework	2
2. Demand for ER Services.....	3
3. Housing and Accommodation Issues	5
4. Unemployment.....	6
5. Profile of Families and Households	7
6. Assistance Given at ER Services	8
7. Conclusion	12

1. Introduction

*Social Exclusion: The Sydney Experience*¹ is a major report released in June 2009 that describes the situation of people who use ANGLICARE Sydney's Emergency Relief centres. The report outlines in some detail the trends in emergency relief usage, the characteristics of people accessing the centres and their experiences of disadvantage and social exclusion. The report also documents ANGLICARE Sydney's own journey in transforming its Emergency Relief services from simply meeting immediate needs to addressing the more complex underlying causes of disadvantage.

Social Exclusion: The Sydney Experience showed that in the midst of the Global Financial Crisis, demand for ANGLICARE's Emergency Relief (ER) services generally remained steady and that the profile of service users conformed with what has been a traditional profile of service users. This latest report shows that these trends are changing: the demand for ER services has increased and there are changes occurring in the circumstances of service users accessing the services.

This latest report provides an additional five months data (to the end of July 2009) beyond that published in *Social Exclusion: The Sydney Experience*. The additional data highlights:

- An increase in demand for ER services;
- An apparent lag between the onset of the Global Financial Crisis (GFC) and increase in demand for ER;
- Increases in the proportion of our clients living in insecure housing and increases in accommodation as a presenting issue among service users;
- An increase in unemployment as a presenting issue among service users that reflects the still rising NSW unemployment rate; and
- An increase in the proportion of single person households among our service users.

The report highlights the ongoing need that the Global Financial Crisis of late 2008 has created for many of ANGLICARE's service users. The full impact of the Global Financial Crisis on the persons and families that ANGLICARE serves is only now

¹ King, S, Bellamy, J, Swann, N, Gavarotto, R and Coller, P (2009) *Social Exclusion: The Sydney Experience*, Sydney: ANGLICARE Sydney. Available from: <http://www.anglicare.org.au/news-research-events/latest-research>

being understood, as data collected over a longer period is examined and as the effects of the GFC can be better assessed.

ANGLICARE has been able to respond to the Crisis with an increase in the amount of financial and material assistance given to service users, thanks to additional Federal funding released earlier this year. We continue to commit additional ANGLICARE funds and in-kind support from our donors to the program as well. However the issues faced by many service users are complex and cannot be solved with financial assistance alone. The increasing prevalence of housing and employment problems among ANGLICARE services users draws attention to the need for a more holistic model of Emergency Relief. A more holistic approach to Emergency Relief will allow organisations such as ANGLICARE to provide greater care and assistance for persons who are adversely affected by the Global Financial Crisis and may lack the economic, social or cultural resources needed to respond.

1.1 Social Exclusion Framework

The Social Exclusion framework has been adopted by the current Federal Government to frame social service delivery and outcomes. Unlike the frameworks of poverty or deprivation, social exclusion is not merely concerned with income or access to goods and services. Social exclusion considers the capacity of an individual to participate in society in terms of economic, social and civic engagement.

Social exclusion is a much broader concept than that of poverty. Rather than focusing on one economic indicator such as income, the framework of exclusion seeks to address relational issues such as social participation and integration, power and opportunity. Social exclusion has become a term that addresses multiple hardships, including unemployment, poor health, low levels of literacy and poverty. The concept of Social exclusion is now used widely in Europe and the United Kingdom and now forms an important framework for social policy in Australia.

Social exclusion avoids the static measures of income used in the frameworks of poverty and deprivation and instead looks at the complex interaction between economic, social, cultural and political forces that impact on an individual. Although social exclusion can arise from poverty and unemployment, its causes are much more complex than these two factors. Social exclusion is most often found where there is multiple disadvantage relating to economic, cultural and social factors.

Social exclusion highlights the multi-faceted nature of disadvantage and the need for a multi-faceted policy approach. Social excluded persons not only need assistance in paying bills and purchasing food, but often face other forms of deprivation and exclusion from mainstream activities. A holistic approach is needed to help socially excluded persons shift to a more sustainable lifestyle.

Most ANGLICARE ER service users can be described as socially excluded. The fact that service users have no other option but to access Emergency Relief services implies that these individuals and families are in a position where they are not able to provide for themselves and have inadequate social supports. The report *Social Exclusion: The Sydney Experience* identified a number of groups accessing ANGLICARE Emergency Relief services that are overrepresented among ANGLICARE service users, such as indigenous persons, sole parent and single person households and public housing tenants.

This latest report highlights the increasing vulnerability of single person households. It shows an increase in the number of persons presenting with complex issues such as unemployment or housing problems. Finally, it suggests there has been an increase in demand from persons in living in private rentals, purchasing a home and living in insecure housing.

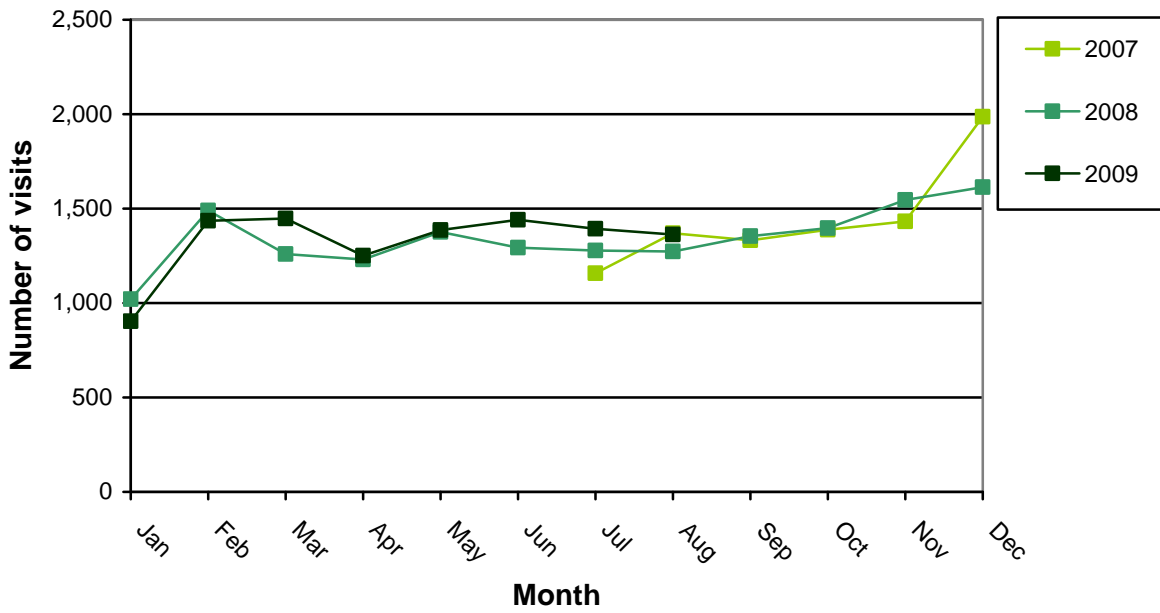
2. Demand for ER Services

The rising number of service users accessing services at ANGLICARE is an indicator of increasing social exclusion in the areas where ANGLICARE emergency relief centres are based. Emergency relief is available at seven of ANGLICARE's Community Care Centres: Bondi, Campbelltown, Liverpool, Marrickville, Moss Vale, Mount Druitt and Wollongong. The overall number of visits to Emergency Relief services fluctuates during the year, with most visits occurring in December and fewer visits occurring in January. The first seven months of 2009 has seen an increase over 2008 levels, especially from March 2009 onwards (Figure 1). In July 2007, the seven ER centres had 1157 visits. This has grown by 20% to 1394 visits recorded in July 2009.

The total number of visits however, is limited by ANGLICARE's capacity to conduct appointments and does not adequately reflect the total demand for assistance. In order to capture the total demand being experienced, most centres keep records of the numbers of people they have to turn away because of a shortage of appointments or because they are otherwise ineligible. By adding the total number of visits to the number of persons who are turned away, the total observed demand for ANGLICARE services can be ascertained.

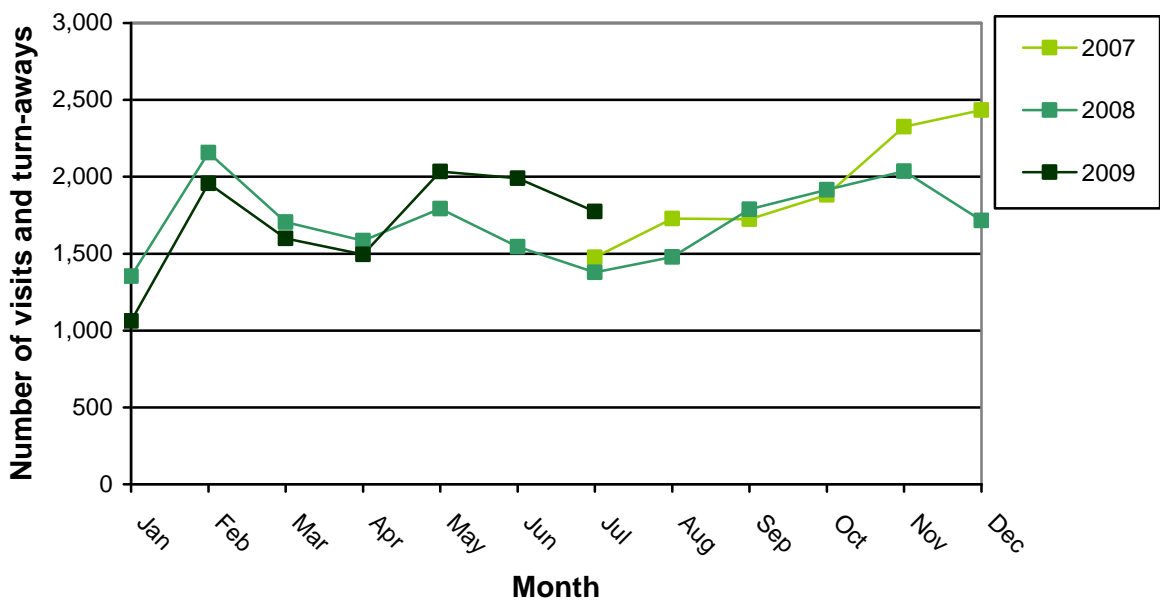
Data on the number of persons who are turned away from Emergency Relief services are recorded by five of the seven ANGLICARE Emergency Relief centres. The data shows that total demand was lower in the summer of 2008/9 than it was in 2007/8. However, the demand for Emergency Relief services increased by 25% in one month from April 2009 to May 2009. In June and July 2009, demand was 29% higher than it was during the same period in 2008 (Figure 2).

Figure 1: Total Number of Visits



This data suggests a lag between the onset of the GFC and an increase in demand for ANGLICARE’s ER services. This is consistent with current discourse about the improving health of the Australian economy but at the same time an expectation that important measures of the impact of the GFC on individuals, such as the level of unemployment, will continue to rise well into 2010. The impact of the GFC on service users will lag behind any upswing in the economy.

Figure 2: Total Demand at Five Emergency Relief Centres



3. Housing and Accommodation Issues

Many ANGLICARE service users who accessed Emergency Relief services during the period from July 2007 to July 2009 have presented with significant housing and accommodation issues. A very high proportion of all people who have used our services during that period live in public housing (44%) compared to just 5% across NSW.² Fourteen percent of ANGLICARE ER service users live in insecure housing, such as hostel accommodation, living with friends or family, living a tent, caravan or car or living on the street. Less than 8% of ANGLICARE ER service users own their own home or are in the process of purchasing their own home.

This section assesses the changes in this profile of service users during 2009 with regards to housing and accommodation. Data for service users up until February 2009 as profiled in the report *Social Exclusion: The Sydney Experience*, has been compared with more recent data for the period March–July 2009. A comparison of the housing types of ANGLICARE service users both before and after February 2009 show some changes (Figure 3), specifically:

A 3% decrease in the proportion of service users living in public housing; and

- A 1% increase in each category of service users:
 - living in private rental accommodation;
 - living in insecure housing; and
 - who are purchasing their home.

This alteration in the profile of service users is also reflected in the proportion of service users who have presented at the service with housing difficulties. Since July 2007 there has been a steady increase of service users presenting with housing or accommodation issues: in July 2009 over 25% of ANGLICARE service users presented with accommodation or housing problems, up from 15% in the same month in 2007 (Figure 4).

These figures suggest that, apart from the impact of the GFC, finding affordable housing is an increasing challenge for persons who access our Emergency Relief services.

² Australian Bureau of Statistics (2006), 'New South Wales (State or Territory) Basic Community Profile B32: Tenure Type and Landlord Type by Dwelling Structure', DataPacks: Excel spreadsheet, Cat. no. 2069.0.30.001, Canberra: ABS

Figure 3: Service Users by Housing Type before and after February 2009

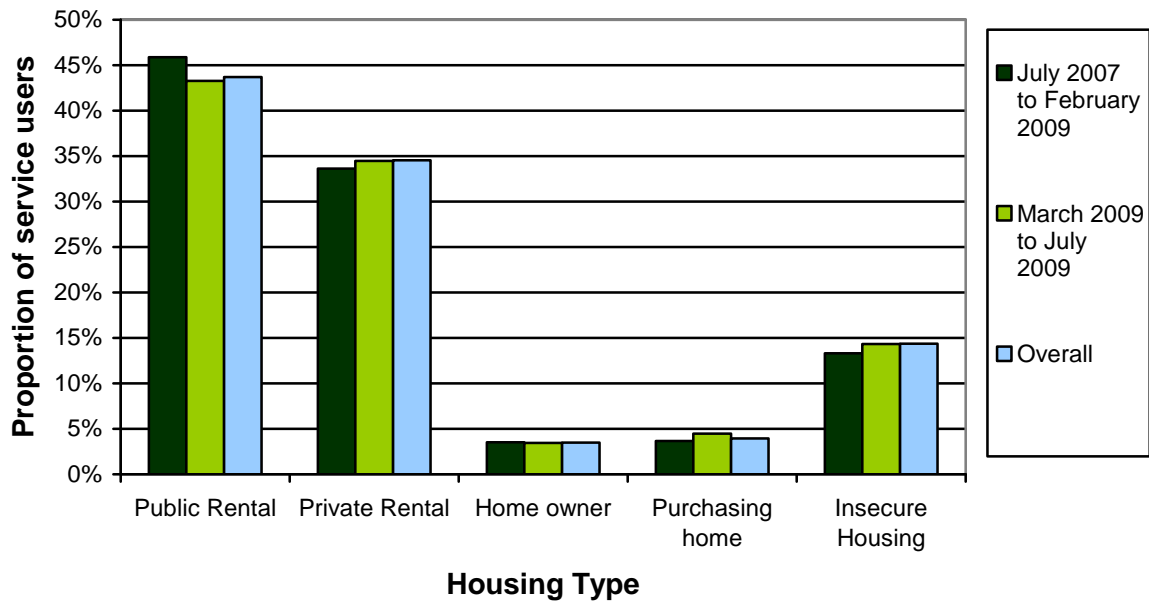
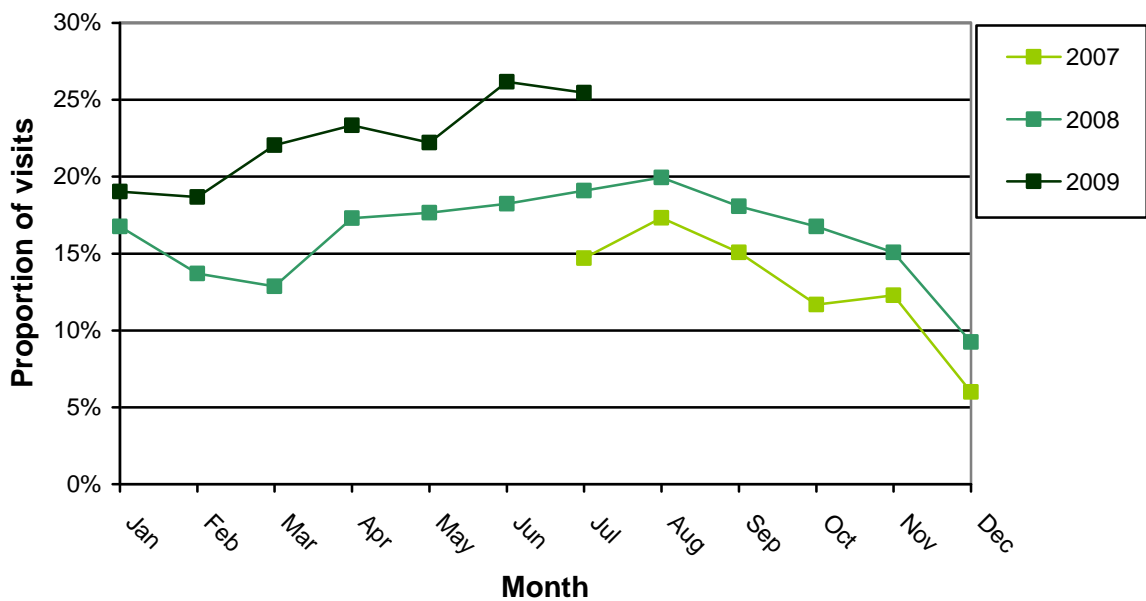


Figure 4: Proportion of Visits where Service User Presented with Accommodation or Housing Problems

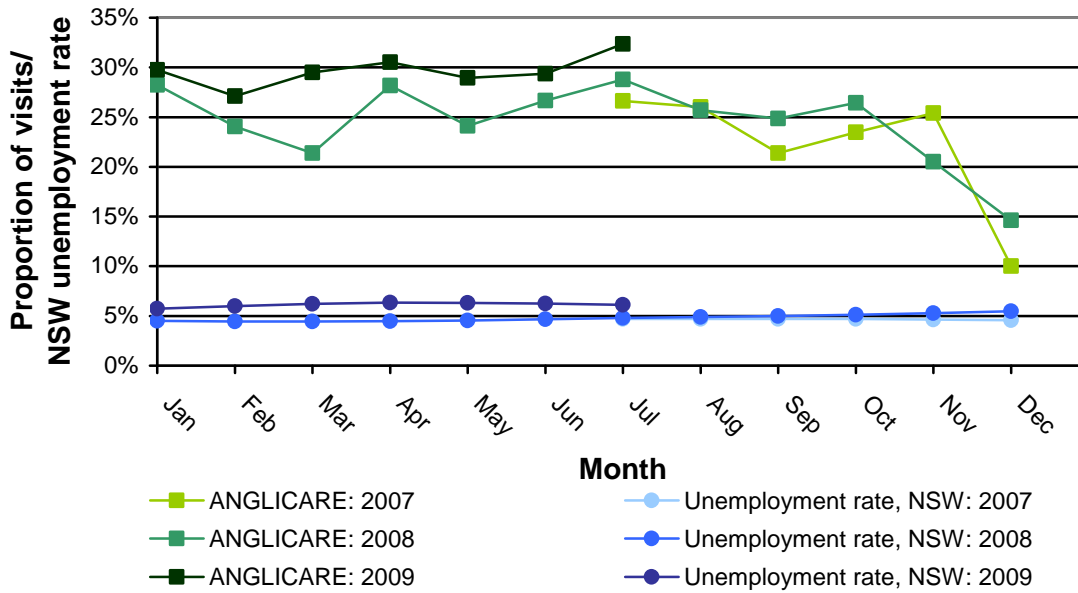


4. Unemployment

There has been an increase in the proportion of service users who are unemployed (Figure 5). In April and July of 2009, over 30% of ER service users were unemployed. The increase in the proportion of service users presenting as unemployed mirrors

changes in the unemployment rate for NSW, which increased from less than 5% during 2007 to over 6% by March 2009.

Figure 5: Proportion of Visits where Service User was Unemployed, compared with NSW Unemployment rate, July 2007 to July 2009³



5. Profile of Families and Households

Most ANGLICARE service users accessing Emergency Relief live in single person households. The second most common household type among service users is single parents with dependents. Comparing data from before and after February 2009, there has been a 4% increase in the proportion of single person households (Figure 6).

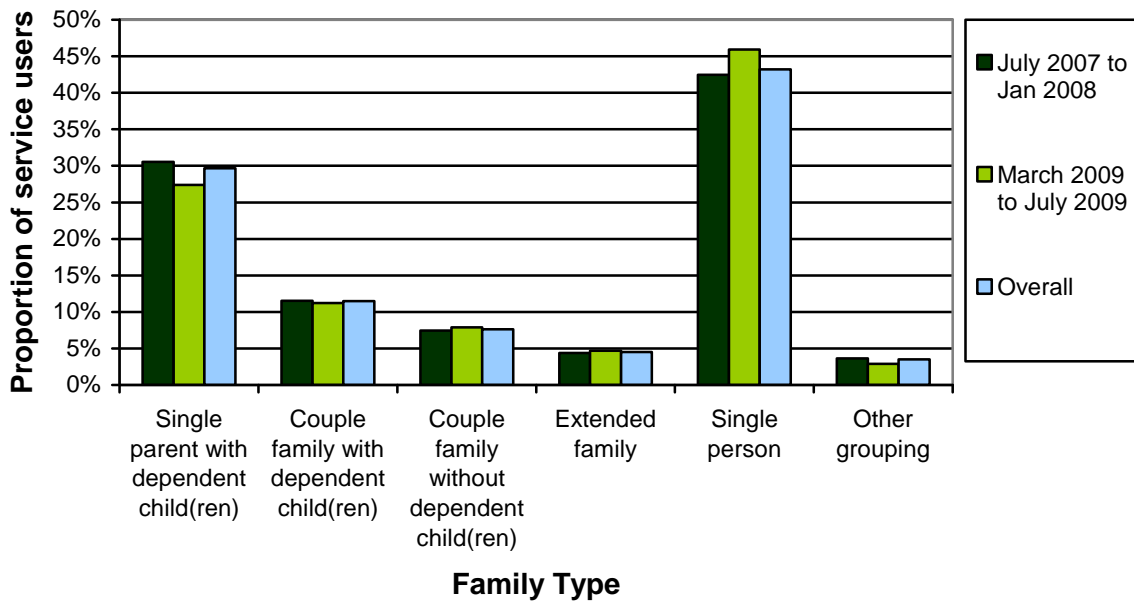
ANGLICARE has recognised that single person households are at greater risk of poverty as they face higher living costs and greater labour market risks. Furthermore, up until February 2009, 90% of single person households accessing ANGLICARE Emergency Relief services lived on incomes of less than \$600 and 28% of males in single person households lived in insecure housing⁴. The increase in the proportion of

³ Australian Bureau of Statistics 2009, Labour Force, Australia, Sep 2009, ‘Table 04. Labour force status by Sex - New South Wales - Trend, Seasonally adjusted and Original’, data cube: Excel spreadsheet, Cat. no. 6202.0, viewed 27 October 2009, <http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/6202.0Main+Features1Sep%202009?OpenDocument>

⁴ King *et al* (2009) op cit p23

single person households since February 2009 is cause for concern. This group faces significant problems in terms of financial and material resources and have limited social connections. There is a great need to provide a more holistic model of care for service users that will not only address financial problems but also assist with housing, health and other issues that single person households face.

Figure 6: Service Users by Family Type before and after February 2009



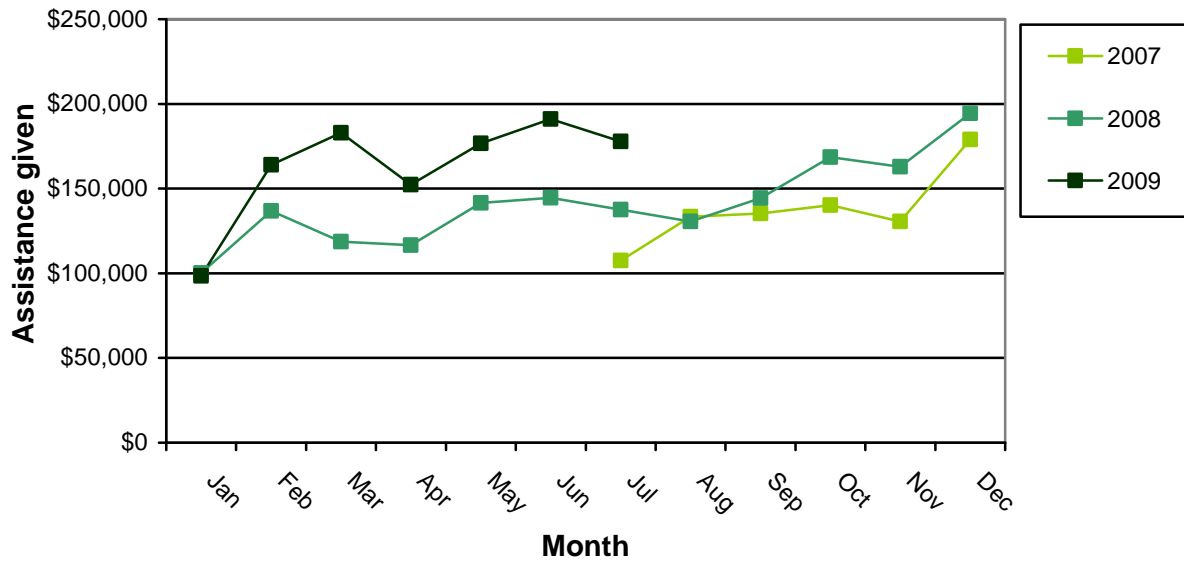
6. Assistance Given at ER Services

The total amount of financial and material assistance given per month through ANGLICARE’s ER services has increased from July 2007 to July 2009. This overall rise in assistance has seen over \$150,000 worth of assistance distributed through ANGLICARE Emergency Relief every month since February 2009 (Figure 7).

ANGLICARE Emergency Relief assistance is funded by the Government and by financial and in-kind donations to ANGLICARE. It takes the form of financial assistance or material provisions which can be grouped into five categories:

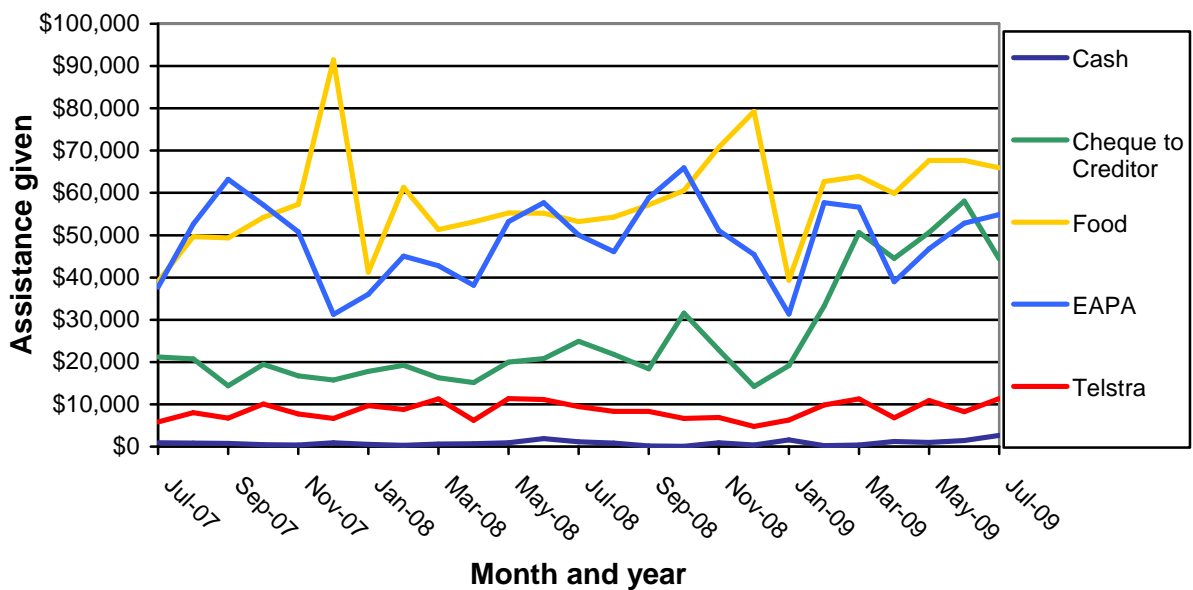
- Food (either in the form of vouchers or food in kind)
- Cheques to creditors
- Assistance in paying bills (through EAPA and Telstra)
- Vouchers for op shops
- Cash cheques

Figure 7: Total Assistance



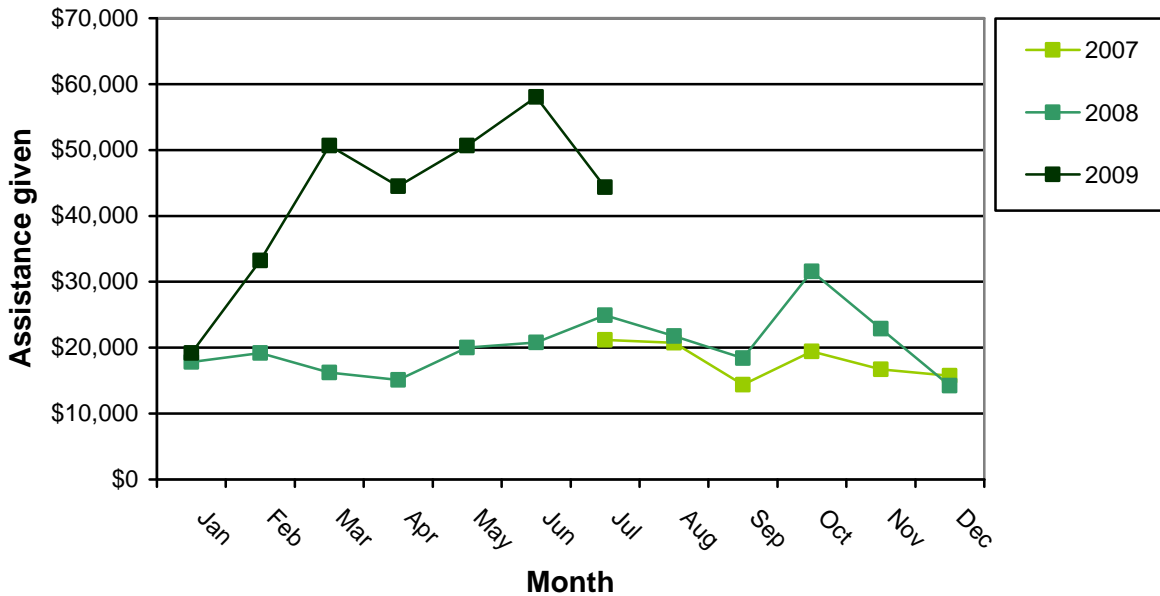
Some of these forms of assistance have clearly increased since July 2007 whereas others have remained static (Figure 8). Assistance in the form of cash and assistance with Telstra bills has remained fairly consistent over the two year period from July 2007 to July 2009. Assistance in the form of food and EAPA vouchers has fluctuated dramatically over the 2 year period, however total levels of assistance in the form of EAPA vouchers has seen little change during this time. By contrast, assistance in the form of cheques to creditors has risen dramatically since January 2009 (Figure 9).

Figure 8: Total Assistance given by type of assistance



The increase in assistance in the form of cheques to creditors has been facilitated by increased government funding in 2009. Cheques to creditors typically cover large one-off expenses such as a rental bond, shortfalls in rental payments, household goods (e.g. whitegoods), funeral expenses and green slips.

Figure 9: Total Assistance: Cheques to Creditors (\$ per month)



Although assistance in the form of food has fluctuated significantly during the two year period, the total amount of assistance given in the form of food, food vouchers and hampers has increased since July 2007 (Figure 10).

Financial assistance is necessary for our service users, however it is not sufficient for addressing the challenges they face. Although the current government funded Emergency Relief services model is a good safety net, it cannot meet the complex underlying needs of people experiencing multiple disadvantage. By implication, this approach must prioritise the immediate financial needs of services users over other issues such as health, relationships, addiction and disability that can prevent a service user from moving out of a situation of disadvantage. Furthermore, the current model of emergency relief is unable to address the issues of housing and unemployment that are becoming increasingly prevalent among ANGLICARE service users following the Global Financial Crisis.

ANGLICARE has already begun implementing a holistic model of Emergency Relief as part of its *Sustainable Living* program. This program seeks to provide additional support to service users, such as advocacy, referrals to other services, counselling and budgeting assistance. These forms of additional support are not government funded at present, being wholly funded by ANGLICARE. Current funding limitations restrain

staff from providing additional support and limits ANGLICARE’s capacity to develop other services and programs that would be beneficial to socially excluded service users. Although ANGLICARE has been able to provide an increasing amount of financial assistance to service users, its capacity to provide more comprehensive support is still severely limited (Figure 11).

Figure 10: Total Assistance: All Food (\$ per month)

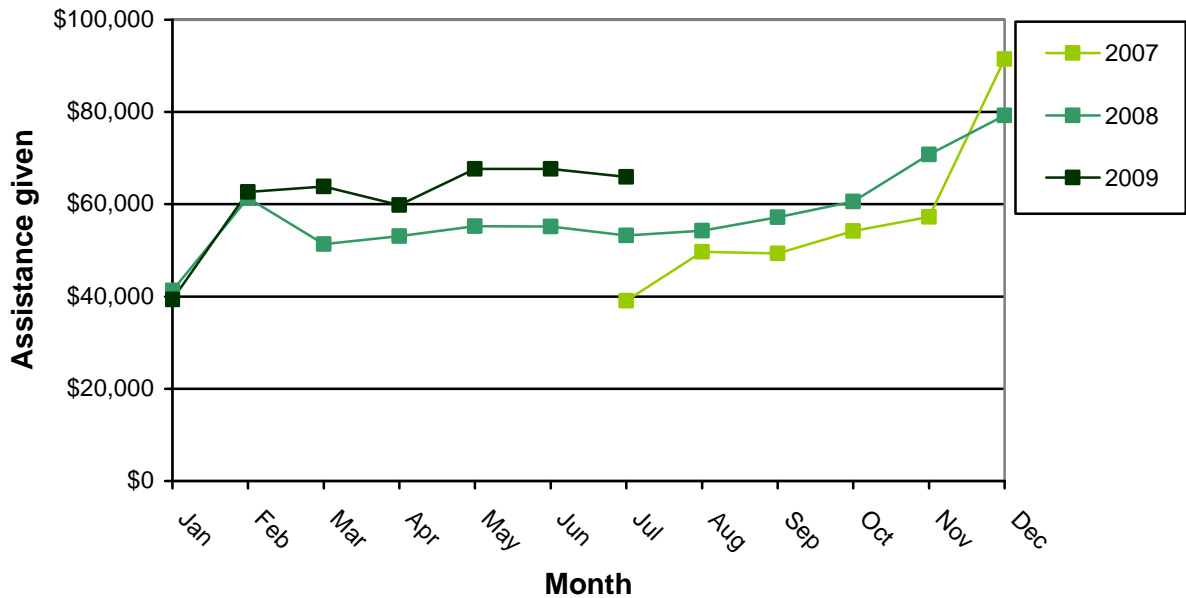
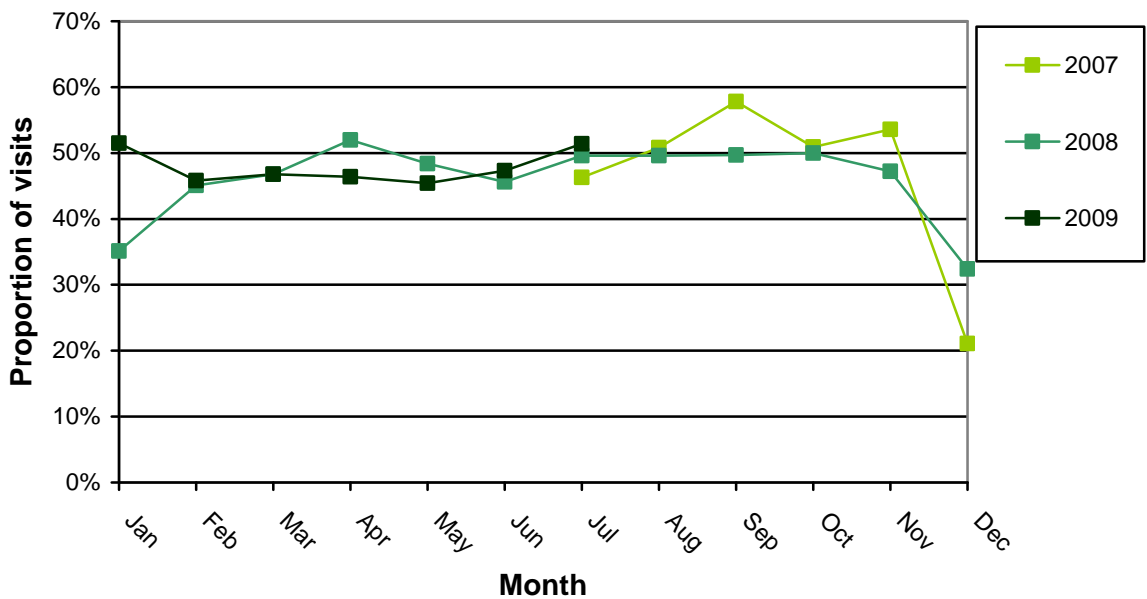


Figure 11: Proportion of visits in which service users are provided with additional support



ANGLICARE has recently launched a pilot program of case management of ER service users as part of its Sustainable Living program in the Illawarra. However despite these efforts, the Sustainable Living program will only remain available to a minority of visitors until more funding is made available for its development.

7. Conclusion

Circumstances such as unemployment and housing problems and the proportion of persons in single person households have increased among ANGLICARE service users during 2009. ANGLICARE's data suggests that the prevalence of housing problems and unemployment are increasing among service users, despite signs that the Australian economy is improving. This trend is consistent with the notion that improvements in such indicators usually lag behind improvements in the economy by a number of months, if not years. Furthermore, there has been an increase in the observed demand for ANGLICARE ER services since April 2009, well above the levels of demand usually observed at that time of year. It is likely that these trends will continue even after the economy improves as service users struggle to re-enter the labour force and find affordable housing in a near saturated market.

ANGLICARE Emergency Relief is seeing an increasing demand for its services, yet its services have limited capacity to provide more than temporary financial assistance to most of its service users. If Australia is to be committed to real social inclusion, then it must be acknowledged that ER service users require assistance that addresses not only food and basic financial issues, but multiple disadvantage and social issues as well. Consequently ANGLICARE Sydney is moving to a more holistic approach with ER service users, in order to foster social inclusion among some of the most vulnerable people in society.

Symbolic of this change of direction is the progressive redesign of ANGLICARE's Emergency Relief services as *Sustainable Living* services. A program of case management to help build resilience and overcome multiple disadvantage will be piloted in the coming year. It is hoped that, for some clients at least, ANGLICARE's ER services can address underlying issues of disadvantage in a greater way.

