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## **Welfare agencies and the provision of emergency relief in Australia**

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**A strong and fair society for all Australians**

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# Executive summary

This report describes recent trends in the provision of emergency relief in Australia. Emergency relief includes material and financial assistance provided to individuals experiencing financial crisis. Usually distributed by welfare agencies, assistance most frequently takes the form of food vouchers or parcels, cash, and assistance with rent and utilities bills. The aim of this report is to describe whether and how the provision of emergency relief, as well as the characteristics of the people who were assisted, changed between 2007 and mid-2010.

The report uses data collected by three major welfare agencies over this period: Anglicare (Diocese of Sydney), the Salvation Army Southern Territory (Northern Territory, South Australia, Tasmania, Victoria and Western Australia), and St Vincent de Paul (Victoria). Each of these agencies maintains detailed records of every visit to their centres that provide emergency relief services. Information collected includes the demographic characteristics of clients, the reasons for seeking assistance, and the types and amounts of assistance provided. The findings reported draw mainly on data from Anglicare and the Salvation Army. We use these data to examine:

- the characteristics of emergency relief clients
- their reasons for seeking assistance
- the amounts and types of assistance provided
- how these factors changed between 2007 and 2010.

The characteristics and needs of emergency relief clients have been extensively documented in a number of reports of emergency relief services over the past 20 to 30 years. The findings are remarkably similar across these studies, and the characteristics of individuals who sought relief from the agencies represented in this study are largely consistent with those reported in this literature. We find that emergency relief clients are predominantly:

- female
- aged between 25 and 44 years old
- lone parents, or people living alone without dependent children
- renting, either from a public authority or privately
- receiving a government pension or allowance.

Like the existing emergency relief literature, the majority of clients in the data analysed here sought assistance because of immediate financial crisis. Although the specific factors or incidents leading to crisis are not well defined in the relevant datasets, a number of clients reported health and relationship issues as reasons for seeking emergency relief. This is indicative of the complexity of issues both underlying and exacerbating financial hardship within these vulnerable households. Finally, 50 to 60 per cent of clients were assisted more than once over the period covered by each dataset.

The longitudinal nature of the datasets permitted an examination of whether there were increases in the provision of emergency relief and/or a change in client base, with the onset of the global financial crisis (GFC). First, there were clear increases in the amount of assistance provided, as well as in the number of people assisted, between 2007 and 2010. This trend was apparent in each of the three datasets.

- Data from Anglicare and the Salvation Army suggest that the main increase occurred from mid-2008 to the end of 2009. This is consistent with previous observations of a lag between the onset of the GFC and increased demand for emergency relief (Swann et al., 2009).
- The forms of assistance that increased the most were the provision of food vouchers, assistance with utilities bills (e.g. vouchers), and cheques to assist with a range of major and minor expenses.

Second, despite the increases in assistance provided, the profile of emergency relief clients was largely stable between 2007 and 2010.

- There were no significant changes in the characteristics of those who were assisted in terms of age, sex, ethnicity, family composition, housing or principal income source.
- The onset of the GFC did not see significant new inflows into emergency relief from more advantaged segments of the wider population who would not generally seek such assistance, such as tertiary students, non-welfare recipients, and home owners.

Overall, the findings confirm previous reports describing the characteristics and complex needs of individuals and households who seek emergency relief because of financial crisis. They also show that there was an increase in the amount of assistance provided to these individuals between 2007 and 2010, at least by the agencies represented here. Although it is not possible to pinpoint exact causes of this increase, it may be due both to direct effects of the GFC on levels of hardship, as well as to concurrent increases in FaHCSIA funding to emergency relief providers. The relative stability of the client base over this period, however, suggests that the increased assistance was mainly required by groups who were already susceptible to financial crisis prior to the economic downturn.

# 1 Introduction

Emergency relief is funded under the Australian Government's Financial Management Program and 'aims to assist people in financial crisis to deal with their immediate crisis situation in a way that maintains the dignity of the individual and encourages self reliance' (FaHCSIA, 2010). Assistance may take the form of purchase vouchers (for food, utilities, transport, or pharmaceuticals), food parcels, cash, and cheques to support payment of rent or bills, and sometimes other items such as clothing and household goods. Currently, approximately 700 community/welfare organisations across 1,350 outlets receive supplementary Australian Government funding to provide emergency relief. As the Australian Government is not the main funder, some organisations also operate emergency relief programs with additional funding from other sources, such as donations, state/territory and local government funding, specialist service funding, and charitable trust funding (ACOSS, 2003).

This report describes aspects of emergency relief provision from 2007 to mid-2010, drawing on data collected by three major welfare agencies over this period. These datasets (described shortly) provide information about individual visits to emergency relief services, including the characteristics and circumstances of the people who made these visits, the reasons for the visit, and the sort of assistance provided. The aim of this report is to provide a descriptive analysis of these features over time, from 2007 to 2010.

Over the past decade several surveys of emergency relief providers and clients have been carried out in Australia (for example, Engels, Nissim and Landvogt, 2009; Engels, 2006; King et al., 2009; Flanagan, 2009). Collectively, these studies provide an excellent overview of the needs and characteristics of individuals who seek emergency relief, as well as issues relating to the provision of assistance by various agencies across Australia. We summarise findings from this literature that are relevant to this report below. Given the overall consistency of findings regarding the profile of emergency relief service users that emerges from the literature, this report instead focuses on describing whether and how aspects of emergency relief provision changed between 2007 and mid-2010. For example, did the demographic characteristics of emergency relief clients change over this period? Were there changes in the types and amounts of agency assistance included in this study?

## 1.1 Financial stress and emergency relief

Recently, the concept of financial hardship or stress has been adopted to provide a framework for discussions about services to support those in financial difficulty. According to Wilkins, Warren and Hahn (2009), a person or household is under financial stress if, due to a shortage of money, they are unable to meet their basic financial commitments. We prefer the term 'hardship' to 'stress', viewing 'stress' as a psychological phenomenon that may or may not be induced by the experience of financial hardship events, depending on the psychological make-up of individuals. Financial hardship is not the same as income poverty. It is a multi-dimensional construct that encompasses income, assets, debt, and the ways in which finances are managed.

Indicators of financial stress used in the ABS's General Social Survey (GSS) include<sup>1</sup>:

- inability to pay electricity, gas, or telephone bills on time
- inability to pay mortgage or rent on time
- inability to pay for car registration or insurance on time
- inability to make minimum credit card repayment
- sought financial help from friends or family
- went without meals
- was unable to heat home
- pawned or sold something because cash was needed; and/or
- sought assistance from a community organisation.

The 2006 General Social Survey data show that 18 per cent of respondents aged 18 or older had experienced one or more of the indicators of financial stress (ABS, 2007). Although none of the items specifically ask about

emergency relief, the final indicator—‘sought assistance from a community organisation’—is likely to capture incidents in which respondents sought assistance from agencies because of a shortage of money. Thus, emergency relief clients represent one subsection of the greater financially stressed population.

However, the emergency relief literature (reviewed below) suggests that individuals in the emergency relief subsection are particularly disadvantaged, even relative to other disadvantaged groups. First, the GSS data shows that seeking assistance from a community organisation is a low-frequency indicator of financial stress, experienced by only 2 per cent of the population. This is in contrast to an inability to pay utilities bills (11 per cent) and seeking help from family and friends (7 per cent). That is, even among those who are experiencing financial stress, seeking emergency relief is not the norm. Second, the literature suggests that emergency relief clients are often very socially excluded. They report high rates of mental and physical health problems, disabilities, legal difficulties, and often lack of family and community support. Third, emergency relief surveys show that for many who seek such assistance, financial stress is a long-term experience. Emergency relief is sought when combinations of circumstances push households from chronic financial stress into periods of financial crisis (Greenhalgh, Atwill and Eastgate, 2007; Flanagan, 2009).

This report focuses on the section of the financially stressed population who seek emergency relief. As shown by findings from the GSS and HILDA, many Australian households experience financial stress without seeking assistance from welfare organisations. For detailed discussion of financial stress generally, refer to Bray (2003), Wilkins et al. (2009), Marks (2007) and Breunig and Cobb-Clark (2006).

## 1.2 Structure of the report

The three different datasets used for this analysis are described below. Following this, we provide a background to the analysis through a review of several recent quantitative studies of emergency relief providers and clients. The remainder of the report presents the findings of our descriptive analysis. Section two examines trends over time in the total provision of emergency relief. ‘Total provision’ refers to the numbers of people assisted and the total monetary value of assistance provided, regardless of the forms that this assistance took. This assesses whether there was any aggregate increase in emergency relief after 2007. Section three discusses the characteristics of emergency relief clients, such as age, ethnicity, housing, and income, and considers whether these characteristics have changed over the periods covered by each relevant dataset. The fourth section summarises the reasons why clients sought emergency relief. This refers to both immediate financial reasons, as well as underlying issues like health and family problems. In the fifth section we use longitudinal data from the Household, Income and Labour Dynamics in Australia (HILDA) survey to examine the incidence of individuals accessing services from welfare agencies in the broader Australian population. This allows us to compare earlier findings about client needs and characteristics with those observed in a nationally representative study. The following two sections return to the welfare agencies’ data. Section six extends the aggregate trends reported in section two to consider trends over time in specific types of assistance (e.g. material, cash) provided to individuals. Section seven describes pathways of referral to and from emergency relief from other services, and the final section sets out the report’s conclusions.

It should be noted, however, that due to data limitations, there are several issues that we are unable to address. First, the three datasets only include information about instances in which clients were actually provided with assistance. There is no information about turnaways or instances in which clients were not assisted. Thus, we cannot assess **total** or **unmet** demand for emergency relief. Second, there is no information about client outcomes following the emergency relief visit. Third, the data do not contain the type of information needed to gauge provider capacity to meet demand. However, several recent publications discuss this issue in depth (e.g. King, Bellamy, Swann, Gavarotto and Coller, 2009; Access Economics, 2008; Major Church Providers, 2009). Finally, we emphasise that the results of our analysis are based on data from three providers only, and should not therefore be interpreted as representative of the whole emergency relief sector.

## 2 Sources of data

This report draws on data collected by Anglicare in the Diocese of Sydney, the Salvation Army Australia Southern Territory (Northern Territory, South Australia, Tasmania, Victoria and Western Australia), and St Vincent de Paul Victoria between 2007 and 2010. For convenience, these datasets will be referred to as ‘Anglicare’, ‘the Salvation Army’, and ‘St Vincent de Paul’.

Each of these agencies record two broad classes of information when a person contacts an emergency relief centre: general information about client background, and information specific to the visit. Client information includes basic demographics, living situation and income, and is usually recorded the first time that an individual visits the centre, regardless of how many subsequent visits they make. Visit information comprises details on the reasons why the client applied for assistance in this instance, other underlying issues (e.g. substance use, family breakdown), source of referral (if any), the types and amounts of assistance given, and the referral destination (if any).

Before describing each of the datasets in greater detail, there are some important differences that should be noted. First, the St Vincent de Paul data contains only information about the amount and type of assistance provided in aggregate form at the regional level, and does not include information about clients or referrals. For this reason we mostly use the Anglicare and Salvation Army data. Second, there are some substantial differences in the ways that various classes of information are recorded and defined between datasets, particularly for types of assistance, client presenting issues, and referrals. Third, the Anglicare data is drawn from metropolitan Sydney, while the Salvation Army and St Vincent de Paul datasets incorporate diverse urban and regional areas. For these reasons, we avoid making direct comparisons between datasets.

### 2.1 Anglicare

Anglicare Sydney implemented a new interactive data collection tool for its seven emergency relief centres between January and June 2007, and all centres were collecting data by July 2007. The seven centres are Moss Vale, Bondi, Marrickville, Liverpool, Campbelltown, Rooty Hill/Mt Druitt and Wollongong. Workers enter client and visit data onscreen, selecting from drop-down menus or entering free text as directed. Client information (e.g. age, household composition, ethnicity, income sources) is collected once at the first visit, and visit information is collected multiple times depending on how many repeat visits a client makes. Visit information includes referral source, presenting issues, the type and value of assistance given, and referral destination. Information on the value of assistance provided was not available.

Anglicare assign a unique client ID at each individual’s first visit. As this is retained across visits, it is possible to discern how often individuals were assisted at any of the seven centres since the implementation of the data collection tool. The period covered by the dataset used in this study is 1 July 2007 to 9 February 2010. As we analyse the data on a quarterly basis, we restrict the sample to observations up to the end of December 2009 in order to include the 10 complete quarters only. Over this period, there was a total of 42,207 visits in which emergency relief was provided, and 17,369 people were assisted (some more than once).

### 2.2 The Salvation Army

The Salvation Army collects emergency relief data through the Service and Mission Information System (SAMIS) program. Workers enter client and visit data like that described above with regard to Anglicare. Client information is collected once, and visit information is collected at each visit. Note that information about the client’s source of income and housing is collected at each visit. Although the value of assistance provided is recorded, this was not available for the present study.

The data is drawn from 138 centres in the Southern Territory, which includes the Northern Territory, South Australia, Tasmania, Victoria and Western Australia.<sup>2</sup> The period covered by the dataset is 1 January 2007 to 17 August 2010, but we restrict the sample to observations up to 30 June 2010 in order to include 14 complete quarters. Over this period, there were a total of 533,645 recorded instances in which assistance was provided.

However, there were some difficulties in accurately identifying how many different people were assisted. There are a small percentage of observations for which the client ID is recorded far too many times to be plausible. Further investigation of this issue suggested that some client IDs were not unique. Because it was not possible to identify non-unique IDs with any certainty, it was decided to exclude 9,437 observations for which the client id was recorded more than 20 times in any one year. Note, however, that this represents only 1.8 per cent of all observations, and only 0.12 per cent of all unique client IDs. Excluding these observations yields a conservative estimate of the number of people assisted over the period covered by the data of 152,134.<sup>3</sup>

## 2.3 St Vincent de Paul

The St Vincent de Paul Society in Victoria is divided into seven regional areas called Central Councils. Each Council comprises several regions, of which there are 34 state-wide. Regions are in turn made up of conferences, or local parish groups. For instance, the Western Central Council includes five regions (Altona, Broadmeadows, Central Highlands, Essendon and Geelong) and 55 conferences. The data used here is aggregated both at the level of the 34 regions and by year. For each region, information is provided about the overall value of different types of assistance provided in all conferences in that region in each of the years July 2007–June 2008, July 2008–June 2009 and July 2009–June 2010. The number of people and households assisted is also included. Over the period covered by the data, material aid was given in a total of 403,521 cases.

## 2.4 Eligibility criteria

Emergency relief providers impose some eligibility criteria to determine whether a person may receive assistance. The criteria employed differed between the three agencies included in this study. St Vincent de Paul requires only that individuals have housing of some sort. The final decision is made by the volunteer who carries out the home visit.

Both the Salvation Army Southern Territory and Anglicare Sydney consider a range of criteria, including Australian citizenship and being a Centrelink client or on a low income. However, an important consideration is whether an applicant is experiencing financial crisis or hardship, and this could occur for many different reasons. For this reason, people who are not Centrelink clients or who are on higher incomes may be assisted if this is deemed appropriate by a specific emergency relief centre.

### 3 The emergency relief literature

There is a substantial body of literature describing emergency relief. We do not aim to provide an exhaustive review of this literature. Given our focus in later sections on trends over time rather than in-depth description of client profiles, we review a selected range of recent studies that provide detailed descriptions of client characteristics and needs, and how these relate to each other. The aims and methodologies of these key studies are briefly described in Table 1 below. We also review findings relating to the types of assistance that clients receive and the nature of referrals from emergency relief to other services. The final part of the literature review summarises some recent findings regarding the impact of the global financial crisis (GFC) on households that access emergency relief.

**Table 1: Key studies**

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**Engels, B, Nissim, R and Landvogt, K 2009, *Under pressure: Costs of living, financial hardship, and emergency relief in Victoria***

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Carried out in partnership between the Victorian Council of Social Service (VCOSS), RMIT University and the emergency relief peak body ER Victoria, this study collected data on individuals and families seeking emergency relief in Victoria in 2007/2008. Qualitative and quantitative data were collected by way of a survey distributed to emergency relief recipients by 24 emergency relief agencies around Victoria in April–May 2007, September 2007, and January–February 2008. A total of 2269 surveys were collected. The survey included questions addressing respondent demographics, sources of income and employment, and main reasons for seeking emergency relief.

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**Flanagan, K 2009, *Hard times: Tasmanians in financial crisis***

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This study reports the findings of a survey of 411 clients of Anglicare's 20 emergency relief services and the single financial counselling service in Tasmania. Data were collected during April 2009. The aims of the study were to identify key demographic characteristics of clients, identify key causes of financial crisis, and inform policy development. Although both emergency relief and financial counselling clients were sought, 96 per cent of respondents were emergency relief clients.

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**King, S, Bellamy, J, Swann, N, Gavarotto, R and Coller, P 2009, *Social exclusion: The Sydney experience***

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This report, published in June 2009, aims to describe the overall reality of financial hardship and the experience of emergency relief among Anglicare clients in Sydney. It provides quantitative descriptions of the demographic characteristics of clients and analyses the types and amount of assistance provided to clients. These quantitative components use longitudinal data collected from seven Anglicare emergency relief centres in Sydney and Wollongong between July 2007 and February 2009. The data were collected through Anglicare's data capture system, implemented in 2007, and are in fact part of the same dataset that we analyse in later sections of the current report. King and colleagues' study, however, also uses qualitative data gathered from focus groups with emergency relief clients.

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**Swann, N, Moffitt, A, Bellamy, J and King, S 2009, *Social exclusion: The Sydney experience – An update***

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Swann and colleagues' October 2009 report provides an update to the major Anglicare report above. This update uses an additional five months of data (to the end of July 2009), to describe how demand for emergency relief services increased in late 2008 and the first half of 2009. Changes in the profile of emergency relief clients over this period are also discussed.

**Table 1: Key studies (continued)****Engels, B 2006, *The provision of emergency relief and contemporary pressures for change in metropolitan Melbourne***

This research was carried out in partnership between RMIT University and Emergency Relief Victoria. The aim of the study was to provide an overview of the organisations that provided emergency relief in metropolitan Melbourne. For example, the study sought to establish how many organisations provided relief, what procedures guided the provision of assistance, the sources of funding, and to identify issues and problems facing organisations. Data were collected via a survey of 60 organisations that provided emergency relief in the Melbourne area during early 2004.

**ORIMA Research, 2009, *Emergency relief provider survey—Report***

ORIMA Research, on behalf of FaHCSIA, carried out a survey of 544 emergency relief providers in March 2008. The objectives of the survey included collection of information about the characteristics and workforce of provider organisations, their data collection methods, service delivery models, and assistance provided to individuals seeking emergency relief.

**Greenhalgh, E, Attwill, A and Eastgate, J 2007, *Too many bills: A survey of emergency relief agencies in Gold Coast City***

This report was prepared on behalf of the Regional Managers Coordination Network (RMCN) Subcommittee on Homelessness (a Queensland government body). The research is the first survey of emergency relief on the Gold Coast and was conducted to confirm anecdotal information from welfare agencies that there were increasing numbers of individuals and households seeking assistance who were employed homeowners, rather than clients who were reliant on income support payments. Data was drawn from 395 surveys of emergency relief clients at 10 Gold Coast agencies during April 2007. The objectives of the survey were to identify characteristics of those seeking emergency relief as well as their immediate and underlying needs.

**Frederick, J and Goddard, C 2008, *Sweet and sour charity: Experiences of receiving emergency relief in Australia***

This is an exploratory, qualitative study that sought to investigate service users' experiences of receiving emergency relief in a large provincial centre in Victoria. Participants were 20 people (10 male, 10 female), aged between 19 and 51 years, who had recently sought emergency relief in the local area. These individuals were recruited by welfare agencies on behalf of the researchers. A semi-structured interview was used to investigate various aspects of emergency relief experiences, including feelings surrounding asking for emergency relief, experiences with workers and agencies, and the kinds of assistance provided.

### 3.1 Client characteristics

Findings from previous surveys of emergency relief services in Australia paint a consistent picture of the demographic characteristics of people who access these services. For instance, clients are:

- predominantly female (just over 60 per cent, across surveys)
- mostly aged between 25 and 44 years old
- over 80 per cent Australian born
- largely living in rented accommodation, both public and private
- mostly single-income households: either lone parents or people living alone
- in receipt of at least one government payment, and likely to rely on government payment/s as the main source of income
- if employed, likely to be working less than full-time in casual positions. For example, Engels (2006) found that 11 per cent of emergency relief clients surveyed were working, and of these 46 per cent were in irregular casual work and 15 per cent in part-time work.

The following paragraphs provide some more detail on these characteristics.

### **Age**

A consistent finding is that adults in the middle years of life constitute the majority of emergency relief clients. Despite public perceptions that older people are at high risk of poverty, only a small percentage of clients (from 3 per cent to 5 per cent across studies) are aged 65 and older. Some reasons for this may be that older people are less likely to have dependent children, more likely to own their own home or to have built up other assets over time, and may have lower expectations of living standards (ORIMA, 2009; Engels 2006). Flanagan (2009), however, suggests that there may be significant underreporting of financial hardship by older people. Providers comment that older people have a sense of pride in coping by themselves, and are therefore less likely to ask for or accept help.

### **Sex**

Women are more likely to access emergency relief than men. Engels (2006) lists several reasons for this. First, female lone parents make up a large proportion of emergency relief clients. Second, service providers suggest that women in partnered households are more likely than men to seek assistance on behalf of their household because they are the ones most often juggling day-to-day finances.

### **Ethnicity and Indigenous service users**

The majority (over 80 per cent) of emergency relief clients were born in Australia. However, authors note that people from non-English speaking backgrounds are over-represented among emergency relief clients relative to the population. A significant proportion of clients identify as Aboriginal or Torres Strait Islander (around 15 per cent across studies, although this will vary depending upon region). This is far in excess of their representation in the wider welfare system: *Analysis of the Longitudinal Data Survey (LDS)* (Black, Kalb and McGuiness, 2008) showed that, on average, 4 to 5 per cent of income support recipients were Indigenous between 1995 and 2005.

### **Household composition**

Sole parent households and single people without dependent children are consistently found to make up the largest groups of emergency relief clients. Across studies, single people and sole parent households each account for 30 to 40 per cent of all clients.

Engels and colleagues (2009) reported that over half of households with dependent children had a youngest child under five years old. Of these households with small children, 56 per cent were sole parents, mostly women. Single people without dependent children, on the other hand, were more likely to be men.

Single-income households are at high risk of financial hardship as the costs of rent and utilities can be almost as high for a single person as a couple. Moreover, people with babies and very young children who cannot rely on their families for support may be particularly vulnerable to financial hardship (Engels et al., 2009; Flanagan, 2009) and face multiple barriers to workforce participation.

### **Housing**

Prior studies report that the majority of people who seek emergency relief are living in either public or private rental accommodation. The relative proportions of public versus private renters vary between studies depending on location, but overall private renters constitute up to 50 per cent of clients, and public renters 30 to 40 per cent.

Only a small proportion of clients are homeowners or purchasing their home. For instance, Flanagan's (2009) Tasmanian survey reports that 8.9 per cent of respondents either owned or were buying their home, Engels and colleagues' (2009) Victorian survey puts this figure at 5 per cent, and King and colleagues' (2009) report of Anglicare Sydney clients at 7 per cent. This is at odds with reports from the sector that there has been increasing demand for emergency relief from home-buyers in recent years. Low numbers of homeowners/purchasers may

be due to the fact that many agencies require the presentation of a healthcare card to qualify for emergency relief, and Engels and colleagues suggest that people experiencing mortgage stress may not necessarily be on incomes low enough to possess health care cards. These households may also prefer to seek other services to cope with financial stress, such as financial counselling, financial advising, and credit advice centres. However, Engels also reports that agencies in the fringe suburbs of Melbourne were experiencing stronger demand from this group, and Flanagan found that around 60 per cent of clients who were owners/purchasers were living in rural communities where house prices were lower. Thus, demand for emergency relief from home-buyers, although low overall, may be focused in outer-suburban growth corridors.

Studies consistently show that many emergency relief clients (13 to 15 per cent) are living in insecure housing situations that can be defined as primary or tertiary homelessness. In addition to sleeping rough, such situations include transitional or crisis housing, boarding houses, hostels, and living in a car, tent, or caravan (King et al., 2009).

### **Income and employment**

As a common eligibility criterion for emergency relief is the presentation of a health care card or being a Centrelink client, almost all emergency relief recipients receive some type of government payment. For the majority, however, this payment or payments are their main source of income. Moreover, Flanagan (2009) found that many service users had been on income support for a long time: three-quarters had been on income support for more than two years and a quarter for more than a decade. Across studies, the most common types of payments received are the Disability Support Pension, Parenting Payment, and Newstart Allowance.

Surveys of emergency relief recipients and data from providers show that less than 10 per cent of service users have income from employment (Green et al., 2000; King et al., 2009; Flanagan, 2009). Those that are employed tend to work low hours in casual employment. For instance, of the Victorian recipients surveyed by Engels et al. (2009) who were working, two-thirds were working 15 hours or less a week and 46 per cent were in regular or irregular casual work. Barriers to work identified by respondents were illness and injury, costs associated with looking for work, lack of a car, insecurity of casual work, and the need to balance working with caring for children.

## **3.2 Client needs and reasons for accessing emergency relief**

People seek emergency relief because financial crisis means that they have insufficient money to pay for essential items (Greenhalgh et al., 2007). Flanagan's (2009) survey of Tasmanian emergency relief recipients found that most respondents were experiencing significant financial hardship. Due to a shortage of money, three-quarters reported having gone without meals in the past year, two-thirds had been unable to pay a utilities bill, half had been unable to pay rent, and half had been unable to heat their home. Consistent with these experiences of hardship, surveys show that the most common reason that people seek assistance is because of a lack of money to buy food. In both Flanagan's (2009) and Engel and colleagues' (2009) surveys, almost 40 per cent of respondents said that the main reason they sought assistance was because of a lack of food. Other highly ranked reasons included the lack of money to pay rent, utilities bills, loan repayments, and motor-vehicle costs like car registration and petrol.

The large proportion of people needing assistance with food does not, however, mean that outlays on food were the main cause of financial crisis (ACOSS, 2003). Agencies suggest that people 'triage' their income by paying major and essential costs first, such as rent and bills, then going without 'discretionary items' like food. In other cases, an unexpected or larger-than-expected expense will leave families unable to cope if they have no savings or other resources to fall back on (Engels, 2006). The type of assistance provided by agencies must also be considered when interpreting these findings. As most agencies provide food vouchers and food more often than any other type of assistance, those in crisis will tend to seek help with food if that is what the agency provides. Similarly, low numbers of people presenting for assistance with other costs does not imply that these items do not contribute to financial crisis. For instance, few emergency relief centres provide direct assistance with accommodation, so individuals will be less likely to report accommodation as their main reason for seeking assistance (Engels et al., 2009). However, agencies may refer clients to other agencies and services for assistance with such issues. We discuss referrals below.

The causes of financial crisis that lead to seeking assistance are complex. People seeking emergency relief are often experiencing multiple social, emotional, and physical problems, such as drug and alcohol abuse, poor mental and physical health, family violence or breakdown, childhood history of abuse, and lack of education. These are ongoing and complex problems that further exacerbate financial difficulties and contribute to exclusion from social and community support networks (King et al, 2009).

Flanagan's (2009) survey of Tasmanian emergency relief clients in 2008 provides a detailed insight into the health, social and financial issues that contributed to and exacerbated financial crisis, as well as the ways in which issues clustered within different sorts of households. Respondents were asked whether they, or someone in their household, had experienced any of a list of 20 issues that could create stress within the household. The five issues most frequently reported were family/relationship breakdown, mental illness, chronic debt, disability, and legal issues. Although most respondents were affected by more than one issue, the experience of multiple issues tended to be characterised by clustering of several (five or more) issues, rather than two or three. Flanagan suggests that this indicates the presence of qualitatively different groups of individuals: those who, despite financial hardship, experience few underlying issues, and those who have a range of complex issues and very high needs. Agencies comment that it is this latter group that present the greatest challenges to emergency relief workers on the ground, and who are most dependent on assistance. Multiple issues were most likely to be reported by people from a non-English speaking background, homeless people, Indigenous people, and those receiving the Disability Support Pension. Issues that were most often associated with reporting of other issues were eviction, bankruptcy, gambling problems, legal problems, drug or alcohol addiction, domestic violence, and imprisonment. These issues were uncommon, even among a population already experiencing financial hardship. Flanagan comments that these are also highly stigmatising experiences that would further contribute to these individuals' social exclusion.

Further analysis looked in more detail at links between underlying issues and financial hardship, and relationships between these factors and other characteristics such as income and housing tenure. Not surprisingly, the level of hardship reported increased with the number of issues that affected a respondent's household. Issues most frequently associated with higher levels of financial hardship and other measures of financial difficulty were eviction, chronic debt, and legal issues. Bankruptcy, drug and alcohol problems, the arrival of a new baby, and medical costs also ranked highly. Considering other characteristics of respondents along with these highly problematic issues showed that men, single people, private renters, and homeless people were over-represented among respondents who had experienced eviction. Single people, people on the Disability Support Pension, and older groups were most affected by chronic debt. Finally, groups over-represented among those affected by legal issues were people on Newstart, Indigenous people, and households with two children (or more). Those affected by legal problems were also much more likely to be affected by chronic debt, mental illness, disability, drug and alcohol addiction, and domestic violence. Consistent with the strong connection between legal problems and health problems, respondents from these households were more likely to cite medical expenses as a major cost contributing to their current financial crisis.

Some particularly interesting patterns emerged with regard to financial hardship and housing. Respondents who were renting privately reported higher levels of financial hardship than respondents who were public renters. At first, it seems logical to assume that private renters experienced greater hardship because they were paying higher rents. On the contrary, however, closer investigation showed that people who were paying lower rents reported greater hardship than those paying higher rents. Although this was true for both public and private tenants, low-rent private tenants were slightly worse off even than low-rent public tenants. Flanagan suggested several reasons for this finding. First, it could be that lower rents were for generally poorer quality accommodation, which might itself compound disadvantage and hardship. Second, it is possible that living in cheap housing is more likely among those already experiencing higher levels of hardship. Third, it was found that both public and private tenants paying low rents were more likely than those paying higher rents to be affected by multiple underlying issues. Flanagan notes that, while public tenants are generally expected to mostly have low incomes and complex needs, a much higher number of disadvantaged households live in private rentals. She argues that the private market creates and exacerbates social exclusion in several ways. For instance, rents are dependent upon market values rather than the ability to pay, and tenants may be vulnerable because private landlords are not subject to the same levels of accountability as public housing authorities. Moreover, cheap private rentals that are affordable for those on low incomes (who may have difficulty securing any other

accommodation) also tend to be clustered in disadvantaged areas with few facilities and services. Finally, the formal linkages between public housing and other support services do not exist in the private market.

In summarising her findings, Flanagan identified four especially vulnerable groups: Indigenous people, homeless people, people receiving the Disability Support Pension, and people receiving Newstart. Indigenous people and homeless people were particularly likely to be facing extreme financial hardship and to be affected by multiple and complex issues. Those on the Disability Support Pension were particularly likely to be having problems with multiple expenses related to essential services, such as phone bills, medical appointments, clothing, car registration, and food. Finally, although Newstart recipients reported high rates of financial hardship, they were not as likely to be experiencing problems with multiple expenses. Costs that were most frequently mentioned by these respondents were transport costs and debt to Centrelink. It is likely that some of these debts arose from difficulty with correctly declaring fluctuating income from casual work.

Overall, the literature confirms that people seek emergency relief because they are struggling with the costs of maintaining ordinary mainstream services: accommodation, food, utilities and transport. However, the causes of financial crisis are related to many other complex, interrelated factors beyond the lack of money. Authors comment that one of the main frustrations for emergency relief providers is their inability to provide support and services to effectively address these long-term underlying issues.

### 3.3 Types of emergency relief provided

Provider surveys clearly show that, not surprisingly, the main types of assistance provided by emergency relief centres are food vouchers (usually redeemable at supermarkets), food-in-kind, and various kinds of financial assistance. Financial assistance takes the form of utilities vouchers, cheques and cash: cheques are provided for specific purposes, and the value of cash is generally in the range of \$30 to \$60 (Engels, 2006; Green et al. 2000; King et al., 2009). Somewhat less frequently provided are a wide range of other material items such as clothes, household goods, and public transport tickets. Note that the provision of more than one type of assistance at a visit is common.

Which types of assistance are provided most frequently varies between studies due to differing ways of categorising assistance and differing organisational practices. For instance, of the 60 organisations surveyed by Engels (2006) in metropolitan Melbourne, food vouchers accounted for 14 per cent of all assistance, followed by cheques (12.9 per cent), cash (11.7 per cent), food parcels (10 per cent) and utilities vouchers (10 per cent). Other forms of assistance included vouchers for medicine from chemists, public transport tickets, and assistance with children's school expenses. ORIMA's 2009 provider survey showed that food (vouchers and food) and utilities vouchers were the most common types of material assistance provided. Clothing, accommodation (assistance with rent and bond), petrol vouchers/public transport tickets, and assistance with pharmaceuticals also ranked highly. Less frequently provided forms of material assistance included household goods, phone cards and education expenses. In other surveys, food vouchers and food-in-kind are recorded as provided to 50 to 60 per cent of clients in respondent agencies (e.g. ACOSS, 2003; Greenhalgh et al., 2007). In contrast, Green and colleagues' (2000) study of selected cases from New South Wales' Smith Family emergency relief centres found that cash was provided in 94 per cent of cases, followed by utilities vouchers (40 per cent) and material aid such as clothing (26 per cent).

However, the type and amounts of assistance provided should not be taken as indicators of the needs of emergency relief clients, nor of provider capacity to meet demand. First, the provision of assistance is limited by what agencies are able to provide, which depends on funding and organisational arrangements. Moreover, the types of assistance most frequently provided vary across agencies, depending on agency preferences and their client base. Engels (2006) describes how different sorts of agencies (e.g. church- and community-based, Indigenous-specific, or culturally-specific) were more or less likely to provide various types of assistance. For instance, religious and charitable/welfare agencies were skewed towards the provision of food parcels and food vouchers, whereas agencies catering to specific cultural groups tended to prefer cash. Those people seeking emergency relief are likely to be aware of what agencies provide, and will frame their request accordingly (Greenhalgh et al., 2007).

Emergency relief is provided by approximately 700 organisations across 1,350 outlets (FaHCSIA, 2010). These organisations include local government agencies, community organisations, religious organisations, and agencies focused on specific demographic groups, such as migrants or young people. It is possible that a number of these organisations providing emergency relief do not receive funding from FaHCSIA. There is naturally a variation in attitudes and opinions about emergency relief between agencies. In summarising the literature, Frederick and Goddard (2008) note that agencies all have their own sets of operational procedures and policies, and this leads to a fair degree of inconsistency in the application of emergency relief within the sector. For instance, Engels (2006) described substantial differences between agencies in criteria for assessing eligibility for emergency relief, how much to provide, and the number of times a person may receive emergency relief within a given period. Penter (2005), however, comments that the diversity of the sector can be both a strength and a weakness for effective practice. Local agencies with a large degree of procedural discretion can be more creative and responsive to the specific needs of the area. On the other hand, it may also hinder the building of connections between agencies and thus undermine sector capacity overall.

Despite the focus on material and financial assistance, most emergency relief agencies provide other forms of assistance and support to those in financial crisis. The types and extent of non-financial assistance varies depending on the size and resources of individual agencies (Engels, 2006). Generally, the most common types of non-financial assistance offered by agencies are financial counselling/budgeting support, personal/family counselling, and advice on a range of issues such as housing, taxation, and immigration. Agencies may also provide advocacy on behalf of clients with other organisations such as utilities providers. Another key service involves referrals to other services and organisations, which we discuss further below (Green et al., 2000; ORIMA, 2009).

### 3.4 Referrals

Emergency relief providers often refer clients to other services and organisations. In some cases this is because clients present with complex problems that may only be partially or temporarily addressed with financial/material assistance. In others, clients may be directed towards other services (including other emergency relief centres) because the agency is struggling to meet demand (King et al., 2009). For many providers, referrals are regarded as the most appropriate way of addressing client needs, and are therefore considered to be a form of emergency relief assistance (ORIMA, 2009).

Engels (2006) reported on referral arrangements for a sample of service providers in Melbourne during 2004. All the providers in the sample had referral arrangements with other local and regional emergency relief and community organisations. Respondents indicated that clients were most frequently referred to other local charities or welfare agencies, churches, municipal councils, and Centrelink. Other surveys record the types of services towards which clients are directed. Common referral destinations include financial counselling and budgeting support services, other counselling services such as family support, housing services, and legal aid (ORIMA, 2009; Greenhalgh et al., 2007).

The literature suggests that referral arrangements differ substantially between organisations. Engels (2006) noted that referral arrangements were largely informal, operating as a part of a local network between agencies. However, referral arrangements will differ depending upon the size of the organisation and the resources available. Emergency relief providers that are part of a large organisation are more likely to be able to refer clients to other services provided ‘in house’. For example, Green and colleagues’ study of Smith Family emergency relief operations in New South Wales during 1998–1999 reports that referrals were made in 29 per cent of cases and, of these clients, 51 per cent were directed towards another Smith Family service.

Recently several of the major social services providers have called for increased support for emergency relief providers to develop more integrated, holistic service models, that ensure client needs are adequately addressed (Access Economics, 2008; King et al., 2009; Major Church Providers, 2009). Referrals to, and advocacy with, other institutions are important features of this model. For instance, Major Church Providers (2009) recommended that emergency relief agencies be funded to deliver:

- wrap-around support services on site, or via formal partnerships with other agencies

- a case management approach, involving assessment, supported referral, and follow-up
- resources to build the capacity of agencies working in partnership with financial counselling services.

It should be noted that the Australian Government guidelines for Emergency Relief allow organisations to apply to FaHCSIA to use a reasonable amount of funding to employ staff to case manage clients or broker more holistic services, particularly for clients with complex or multiple needs (FaHCSIA, 2011).

### 3.5 Trends over time in emergency relief

The demand for emergency relief fluctuates over time. Most previous studies note that agencies report differing demand for emergency relief at different times of the year. Demand tends to be high over the Christmas period, lower in January, and rise somewhat during the winter and post-winter months (Engels, 2006; King et al., 2009). Authors list several reasons for these fluctuations. First, people may find themselves in financial difficulties over the Christmas and New Year period due to expenses incurred at this time, such as usage of credit over Christmas (Engels, 2006). Moreover, many agencies distribute increased numbers of Christmas food hampers and children's toys to families in hardship during December, which would contribute to rises in the provision of relief at the end of the year. Second, a drop-off in January may be attributable to the fact that agencies, which are mostly reliant on volunteers, close for some of January to allow volunteers to take leave (King et al., 2009). However, these patterns may not hold for all groups of clients. Engels (2006; Engels et al., 2009) notes a decrease in the proportion of Newstart recipients over the Christmas period, which may be attributable to increased casual employment opportunities in retail and hospitality over Christmas/New Year. Moreover, it is suggested that late January may be a time of difficulty for families with children due to cost pressures of the new school year. Finally, the increase in demand from July to September is generally attributed to costs of utilities bills over the winter months, at least in the southern states.

In the past few years there has also been a concern about the impact of the global financial crisis (GFC) on the disadvantaged members of society who seek emergency relief. Reports from the Major Church Providers in 2008 and early 2009 noted that although demand for emergency relief rose steadily over the past decade, the onset of the GFC resulted in unprecedented increases in the number of households seeking emergency relief. It was further predicted that the increase would continue throughout 2009 and into 2010 (Access Economics, 2008; Major Church Providers, 2009).

The 2009 Major Church Providers report argued that slowing economic growth and rising unemployment coupled with falling inflation and declining interest rates would hit low-income households disproportionately hard. Some of the predicted key impacts of these conditions on low income households included:

- Rising unemployment leading to shifts towards part-time and casual jobs. Those already unemployed will face increased barriers to employment due to competition from those who have recently exited the workforce.
- Sustained housing cost increases. Although falling interest rates may ease mortgage pressure, these benefits will be less for renters as high occupancy rates will continue to inflate rents.
- Continued cost-of-living pressures will put considerable pressure on households who spend most of their income on essentials, with little scope to reduce expenditure on discretionary items.
- Limited access to credit as lending shifts back to banks, means that low-asset households will have difficulty accessing credit at times when they need it the most.
- The failure of prosperity from the mining boom to have generated benefits for disadvantaged communities not connected with these industries.

In sum, these conditions were predicted to increase the extent to which low-income/low-wealth households rely on emergency relief services, and consequently increase demand on providers.

It is currently not possible to accurately observe overall provision of emergency relief either between agencies or within individuals, because of the lack of a national-level statistical linkage key. However, three of the studies reviewed here drew on data collected from individuals at multiple points in time, allowing some analysis of changes over time in the demand for emergency relief. Engels et al (2009) surveyed emergency relief recipients in Victoria at three points in time between 2007 and 2008. However, the relatively short time frame and 'snapshot' sampling makes this study less useful for discerning trends. King and colleagues' (2009) report provides a more detailed picture by reporting monthly data collected from seven Anglicare Sydney centres from July 2007 to January 2009. A follow-up report (Swann et al., 2009) reports an additional five months of data, to the end of July 2009. The following paragraphs consider the findings of these two reports together.

Overall, the authors report a rising demand for services towards the end of 2008 and the beginning of 2009, followed by sharper increases towards the middle of 2009. For instance, there was a 67 per cent increase in overall assistance provided in January/February 2009, compared with an increase of 37 per cent over the same period in 2008. Increases in the provision of cheques to pay creditors,<sup>4</sup> food, and utilities vouchers were also observed toward the end of 2008 and beginning of 2009. Moreover, there was a rising turn-away rate towards the end of 2008, due to some services being unable to meet the demand for appointments.

Analysis of data to July 2009 illustrated a sharper rise in the total number of visits from March 2009. For instance, there was a 20 per cent increase in the number of visits in July 2009 on July 2007 levels. Including client turn-aways<sup>5</sup> to give a more accurate picture of total demand showed that the demand for services increased by 25 per cent in April–May 2009, and by June–July it was almost 30 per cent higher than in the same period of the preceding year. Changes in the characteristics of those people accessing emergency relief in the first half of 2009 were also highlighted. First, there was an increase in the proportion of people presenting with complex issues relating to accommodation and unemployment. This was coupled with very slight (1 per cent) increases in the proportion of recipients who were living in private rental accommodation, living in insecure housing, and who were purchasing their own home. There was also a small rise (4 per cent) in the proportion of clients in single-person households. This was highlighted as an area of particular concern, since this group faces high living costs and greater labour market risks.

Finally, some changes were observed in the types of assistance most frequently provided to emergency relief clients during 2009. Assistance with utilities vouchers, telephone vouchers and cash remained relatively steady. The value of assistance in the form of food, however, was somewhat greater in the first six months of 2009 than in the same period in the previous two years, and there was a steep rise in the value of cheques to creditors in the first quarter of 2009. The authors noted that increased government funding during 2009 had facilitated assistance in the form of cheques to creditors.

Swann and colleagues concluded that the increase in demand for services, and shifts in the profile of those who applied, is indicative of a lagged effect of the GFC on disadvantaged households in the Sydney area. They further predicted that the adverse effects of the economic downturn and consequent pressure on emergency relief services would persist well into 2010, even as the economy begins to strengthen.

A final consideration is that of repeat visits. Emergency relief is intended to be a one-off form of assistance to those in temporary financial hardship, but studies that consider this issue (Greenhalgh et al. 2007; Flanagan, 2009) show that most people who access emergency relief do so more than once. For instance, two-thirds of the emergency relief recipients surveyed by Greenhalgh et al. (2007) in the Gold Coast area had sought assistance on at least one previous occasion. It might be expected that the recent economic downturn would see an increase in first-time visitors to emergency relief. However, Flanagan (2009) found that people accessing emergency relief for the first time had generally been experiencing financial problems regularly and for a long time. In other words, a first-time visit to an emergency relief provider does not necessarily indicate first-time financial crisis.

### 3.6 Summary

The Department of Social Security and the Australian Council of Social Services published the first survey of emergency relief agencies and clients in 1979. Like many of the studies reviewed above, its primary purpose was to determine how much emergency relief was provided by agencies, and to whom and for what purposes it was provided. Comparing these early findings with those of the more recent studies discussed above, it is remarkable how little has changed with regard to the characteristics and needs of emergency relief recipients. For instance, those groups that were most prevalent among emergency relief recipients in 1979 (aged between 25 and 45, women, lone parents, people in poor health) remain the most frequent emergency relief clients today. Recent studies have provided detailed accounts of the ways in which low income, social exclusion, and other health and social problems interact to lead to often repeated financial crisis among those who are experiencing long-term financial stress. This body of research also documents the many different types of material assistance provided by emergency relief agencies to assist those in financial crisis, while highlighting that material aid alone cannot adequately address the causes of such crisis. Finally, the question of whether there have been recent changes in the overall profile of emergency relief clients and in the types and amounts of assistance provided remains open. Subsequent sections of this report aim to address this issue.

## 4 Trends in total provision of emergency relief

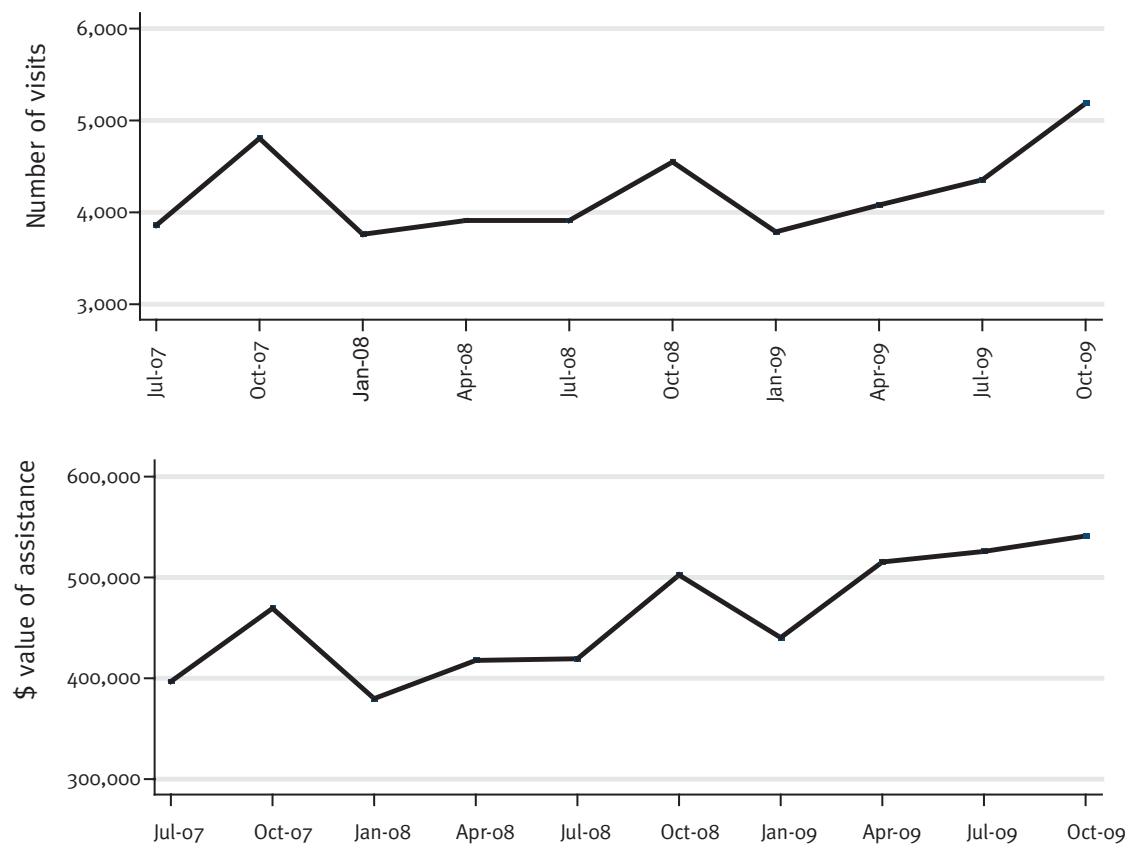
In this section, we describe changes over time in the total provision of emergency relief for each dataset. This includes trends in the total number of instances in which a person received some form of assistance from an agency and increases/decreases in the total monetary value of this assistance. It should be noted, however, that information was not available on the number of people turned away from centres because of ineligibility or a shortage of appointments and funding. Therefore, the total number of visits and the value of assistance do **not** reflect total demand for emergency relief services, but only the instances in which clients were actually provided with assistance. In this report the term ‘visit’ refers to visits at which a client received assistance.

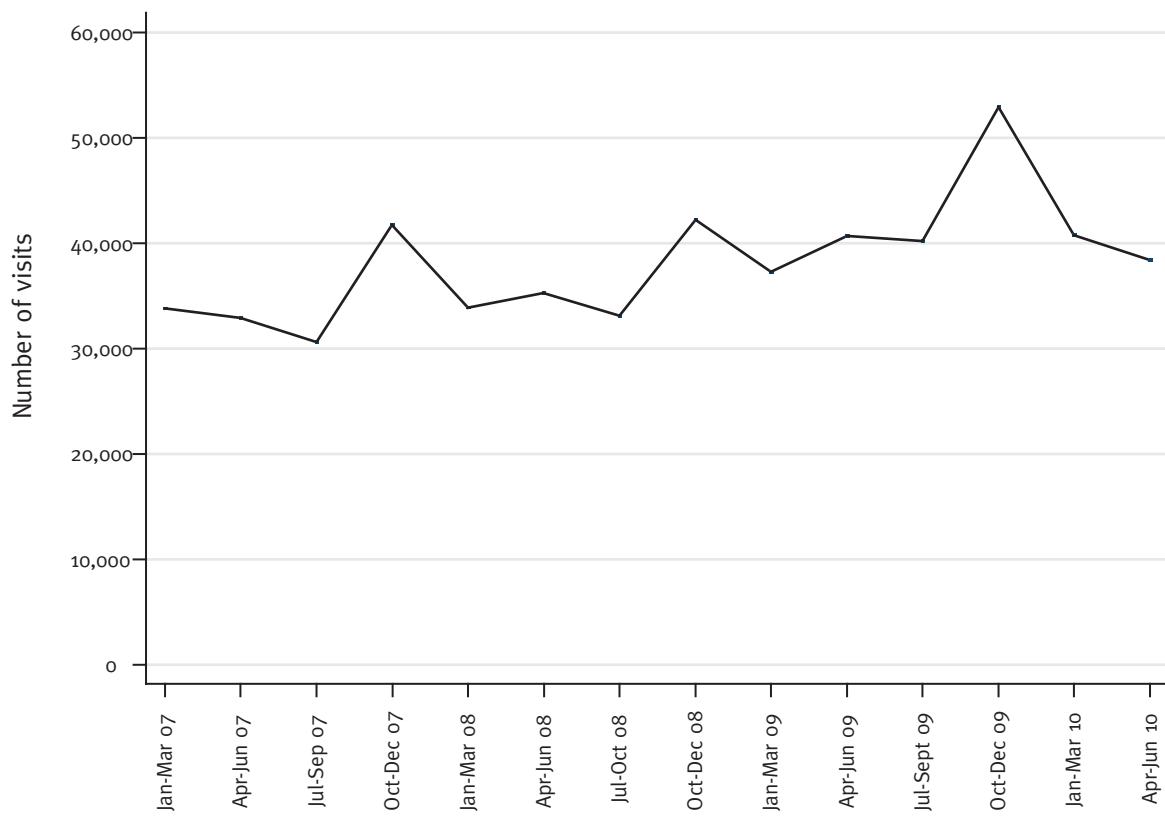
Figure 1 shows emergency relief provision at the seven Sydney Diocese Anglicare centres over 10 quarters, from July 2007 to December 2009. The upper panel shows the total number of visits in each quarter, and the lower panel shows the total value of assistance provided in each quarter.<sup>6</sup> Figure 2 shows the number of emergency relief visits recorded by the Salvation Army in its Southern Territory area (Victoria, Tasmania, Northern Territory, South Australia and Western Australia) over 14 quarters, from January 2007 to July 2010. Data on the value of assistance was not available for the Salvation Army.

### 4.1 Seasonal fluctuations

Ignoring for the moment any absolute changes in assistance over time, it is clear that more people access emergency relief in the fourth quarter of each year. The Salvation Army data records, on average, a 30 per cent increase in visits between the third and fourth quarters in 2007, 2008 and 2009 (Figure 2), and the Anglicare data records an average 20 per cent increase in visits between the third and fourth quarters in the same years (Figure 1, upper panel). The Anglicare data also shows that the overall value of assistance provided over Christmas increases in accordance with the increased number of visits at this time (Figure 1, lower panel).

**Figure 1: Total provision of emergency relief, Anglicare, July 2007–December 2009**



**Figure 2:** Total provision of emergency relief, the Salvation Army, January 2007–June 2010

These spikes in the fourth quarter of each year (October–December), and subsequent drops in the first quarter (January–March) reflect seasonal variation in demand for emergency relief. This is consistent with patterns observed in other studies and analyses of these data. Providers suggest that people are more likely to experience financial crisis over the Christmas and New Year period, due to increased expenses at this time, as well as the lay-off of casual workers following the Christmas rush in late December (Engels, 2006). Christmas spikes also reflect the delivery of Christmas hampers to families in need. One reason for the drop in January is that emergency relief centres that rely on volunteer workers may close for much of January as these workers take time off. Thus, lower levels of assistance provided during the first quarter of each year do not necessarily indicate lower levels of need for services (King et al., 2009).

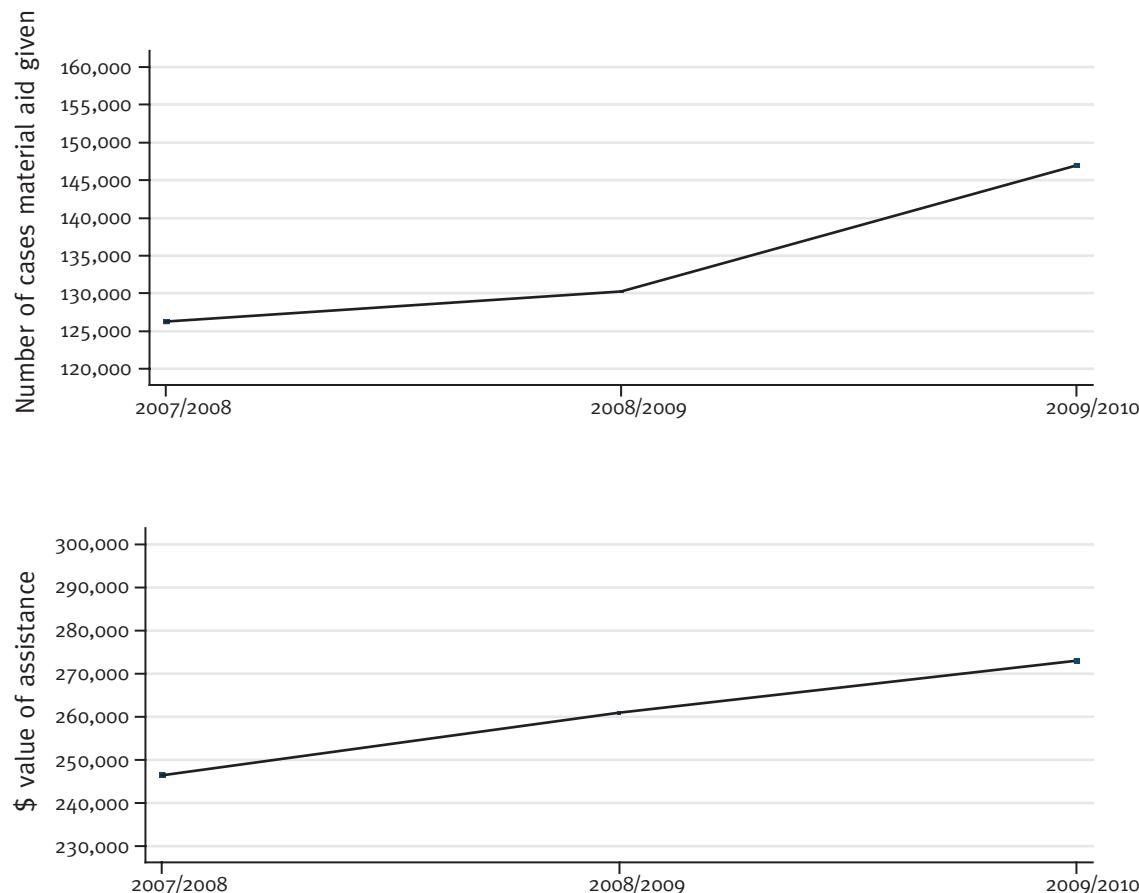
## 4.2 Trends over time

Despite seasonal variation, the data show a rise in both the numbers of people accessing services, and in the value of assistance provided, from late 2008 and throughout 2009. For instance, the Christmas peak in visits to Salvation Army centres (Figure 2) at the end of 2008 is of about the same size as the Christmas peak in 2007. However, visits after Christmas 2008 did not fall as much in January 2009 as they did in the previous year. Visits continued to increase throughout 2009: the rise in April–June 2009 was steeper than the corresponding period in 2008, and visits then climbed steeply to their highest level during the last quarter of 2009.

A similar pattern is observed in the Anglicare data. Again, the number of visits over Christmas 2008 was similar to the number of visits over Christmas 2007. While visits did drop back substantially during the first quarter of 2009, they rebounded in the second quarter and then increased steadily throughout 2009. This increase is seen more clearly in the value of assistance provided (lower panel, Figure 1), which illustrates a rise in the quarterly value of assistance from the second quarter of 2008, a peak over Christmas 2008 and seasonal drop in the first quarter of 2009, but a subsequent sharp rise from the second quarter to reach its highest observed level in the fourth quarter of the year.

Figure 3 below shows provision of emergency relief at centres in 34 St Vincent de Paul regions in Victoria from July 2007 to June 2010. Quarterly data was not available. The upper panel shows the total number of cases in which some form of material aid was given in each year across the whole state, and the lower panel shows the average value<sup>7</sup> of assistance provided in each year. Overall, the pattern is consistent with the increase in visits and value observed in the other two datasets. Similar to Anglicare, the rise in value of assistance precedes the rise in the number of cases, with the largest increase in value occurring during July 2007–June 2008, and the largest rise in recorded cases occurring during July 2008–June 2009.

**Figure 3: Total provision of emergency relief, St Vincent de Paul, July 2007–June 2010**



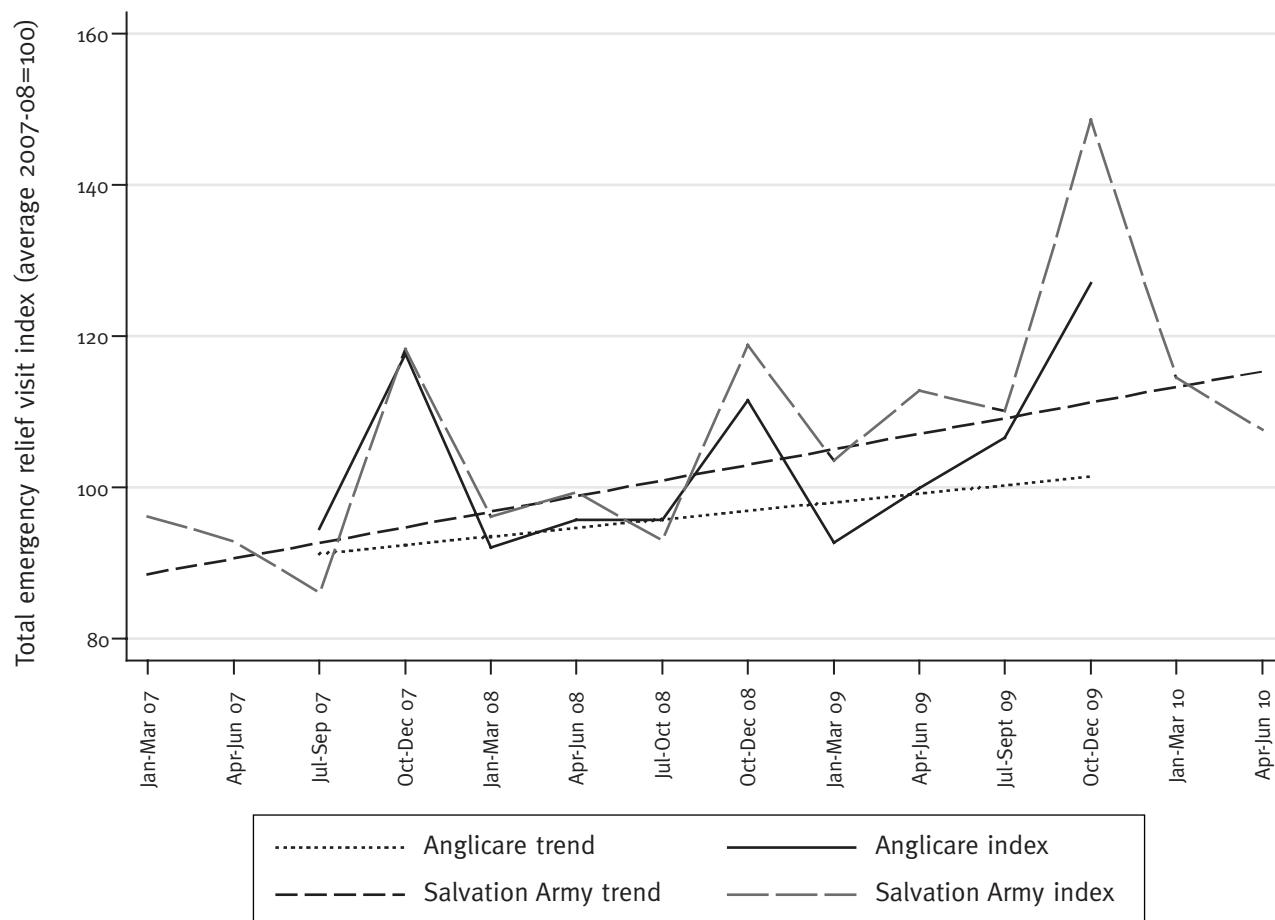
The trends observed have already been reported by Anglicare Sydney (Swann et al., 2009), using the Anglicare dataset up to the end of July 2009. The researchers concluded that the patterns indicated a lag between the onset of the GFC in 2007 and the impact of the crisis on the socially vulnerable. They further predicted that the impact of the GFC on emergency relief services would continue well into 2010. The additional data used in the present study confirms an increase in the assistance provided during 2009 from 2007–2008 levels. In each dataset, the rise in the provision of assistance (in both value and number of cases) occurred from mid-2008 and steepened during 2009. As noted earlier, it is possible that the increased provision of assistance may also reflect additional funding provided by FaHCSIA during 2009 and 2010.

It is difficult to determine from the data available whether this increase in emergency relief is continuing into 2010, as predicted by Swann and colleagues. Data for Anglicare is limited to the end of 2009, and it extends only as far as 30 June 2010 for the Salvation Army and St Vincent de Paul. It can be noted that the number of visits at which assistance was provided by the Salvation Army (Figure 2) dropped during the first quarter of 2010 to third-quarter 2009 levels, compared with the first quarters of 2008 and 2009 in which, despite the seasonal January

drop, visits remained higher than they were in the third quarters of 2007 and 2008. However, a longer time series will be required to determine whether this is the start of a continuing downward trend. We address this question in more detail in section six as we examine increases and declines in the provision of specific types of emergency relief between 2007 and 2010.

The growth in the numbers of people accessing services between 2007 and 2010 is made more explicit in Figure 4 below. It shows the number of visits between 2007 and 2010 in the Anglicare and Salvation Army data, this time in the form of index numbers so that the growth in visits for the two agencies is more comparable. The index is set equal to 100 for the average quarterly number of visits for each agency in the 2007–2008 financial year. The same seasonal factors were applied to each agency and the trend in visits estimated for the agencies.<sup>8</sup> The trend lines for both agencies are also shown in Figure 4 below. These indicate growth of about 10 percentage points in the Anglicare data between mid-2007 and the end of 2009 and 27 percentage points in the number of visits to Salvation Army centres between the beginning of 2007 and the middle of 2010.

**Figure 4: Trend growth in the number of visits to the Salvation Army and Anglicare, January 2007–June 2010**



## 5 Client characteristics and access patterns

This section describes characteristics of those who were assisted by emergency relief centres in the Anglicare Sydney Diocese and the Salvation Army Southern Territory between 2007 and early 2010. Characteristics include gender, age, ethnicity, family composition, housing, and income. We also examine how often individuals were provided with assistance over the periods covered by the Anglicare and Salvation Army datasets.

For the most part, our findings are consistent with those reported by previous studies of emergency relief in Australia. For instance, service users are predominantly:

- female
- aged between 25 and 45 years old
- lone parents or people living alone
- renting, either public or private
- receiving a government benefit or pension.

The following paragraphs describe these characteristics in more detail. We also examine whether there have been changes between 2007 and 2010 in the characteristics of emergency relief service users. Note that, while we briefly consider selected combinations of characteristics, we do not aim to build up a full profile of emergency relief service users, but mostly concentrate on describing each characteristic separately. For fuller treatments of client profiles, refer to King et al. (2009), Engels (2006) and Flanagan (2009).

### 5.1 Gender, age, ethnicity, and Indigenous service users

The majority of emergency relief service users are female, aged between 25 and 44 years old, and born in Australia. This is true of both datasets. Table 2 below summarises the distribution of client gender, age, place of birth, and Indigenous status for all visits recorded in each dataset. Table 2 shows that:

- About 60 per cent of clients were female.
- More than half the visits in both datasets were made by clients aged between 25 and 44 years old. In fact, a third of all client visits were accounted for by women in this age range.
- Approximately a further 20 per cent of clients were aged 45 to 54 years old, and about 15 per cent were over the age of 55 years.
- The majority of clients were born in Australia. Of those born overseas, most were born in non-English speaking countries. The percentage of clients from non-English speaking backgrounds is higher for the Anglicare dataset, and this may reflect the demographic profile of the Sydney area.
- Aboriginal and Torres Strait Islander people represent around 10 per cent of emergency relief service users, although this proportion is likely to be higher or lower in specific regions.

**Table 2: Gender, age, birthplace, and Indigenous status of emergency relief clients as percentage of total visits**

	Anglicare	%	Salvation Army	%
Female	25,942	59.4	313,988	58.8
Male	17,101	39.2	219,657	41.2
<i>Missing</i>	640	1.5	-	-
<b>Age (years)</b>				
<18	55	0.1	6,821	1.3
18–24	2,515	6.0	42,207	8.0
25–34	9,973	23.6	134,588	25.2
35–44	13,001	30.8	167,220	31.3
45–54	8,841	21.0	104,475	19.5
55–64	4,524	10.7	49,368	9.3
65 and older	2,217	5.2	26,021	4.9
<i>Missing</i>	1,081	2.6	2,745	0.5
<b>Birthplace</b>				
Australia	30,476	72.2	480,013	90.0
Overseas, English speaking country	2,950	7.0	6,692	1.2
Overseas, non-English speaking country	7,487	17.7	44,087	8.3
<i>Missing</i>	1,294	3.1	2,853	0.5
<b>Aboriginal/Torres Strait Islander</b>				
Yes	4,388	10.4	42,985	8.5
No	33,261	78.8	490,608	91.9
<i>Missing</i>	4,558	10.8	52	0.01
<b>Total</b>	<b>42,207</b>	<b>100.0</b>	<b>533,645</b>	<b>100.0</b>

The demographic characteristics in Table 2 were also examined over time. However, apart from small fluctuations between quarters, the profile of clients in terms of gender, age, ethnicity, and Indigenous status did not change in the periods covered by each dataset. The one exception was a slight rise in the percentage of clients in the 18 to 24 age category accessing Salvation Army services. This age category accounted for about 6 per cent of visits in 2007 (1,974 visits in the first quarter of 2007), and rose to almost 10 per cent by the end of 2009 (4,625 visits in the last quarter of 2009).

## 5.2 Access patterns: How often are clients assisted?

As noted earlier, emergency relief is intended to be a one-off form of assistance to those in temporary financial crisis. However, previous studies report that the majority of emergency relief clients surveyed have accessed services more than once. As the Anglicare and Salvation Army data use client identification numbers that are retained across visits, we are able to examine how many times clients were assisted in the period covered by each dataset. Note, however, that we are unable to determine whether there was an increase in **first-time** visits to emergency relief with the onset of the GFC. This is because both agencies commenced recording the information used here during 2007. Thus, on the first day of data collection, every client would be recorded as a first-time visitor, even if he or she had sought assistance previously. This results in a decreasing proportion of first-time visits over time which reflects the maturation of each dataset, rather than an externally-influenced increase in repeat visits.

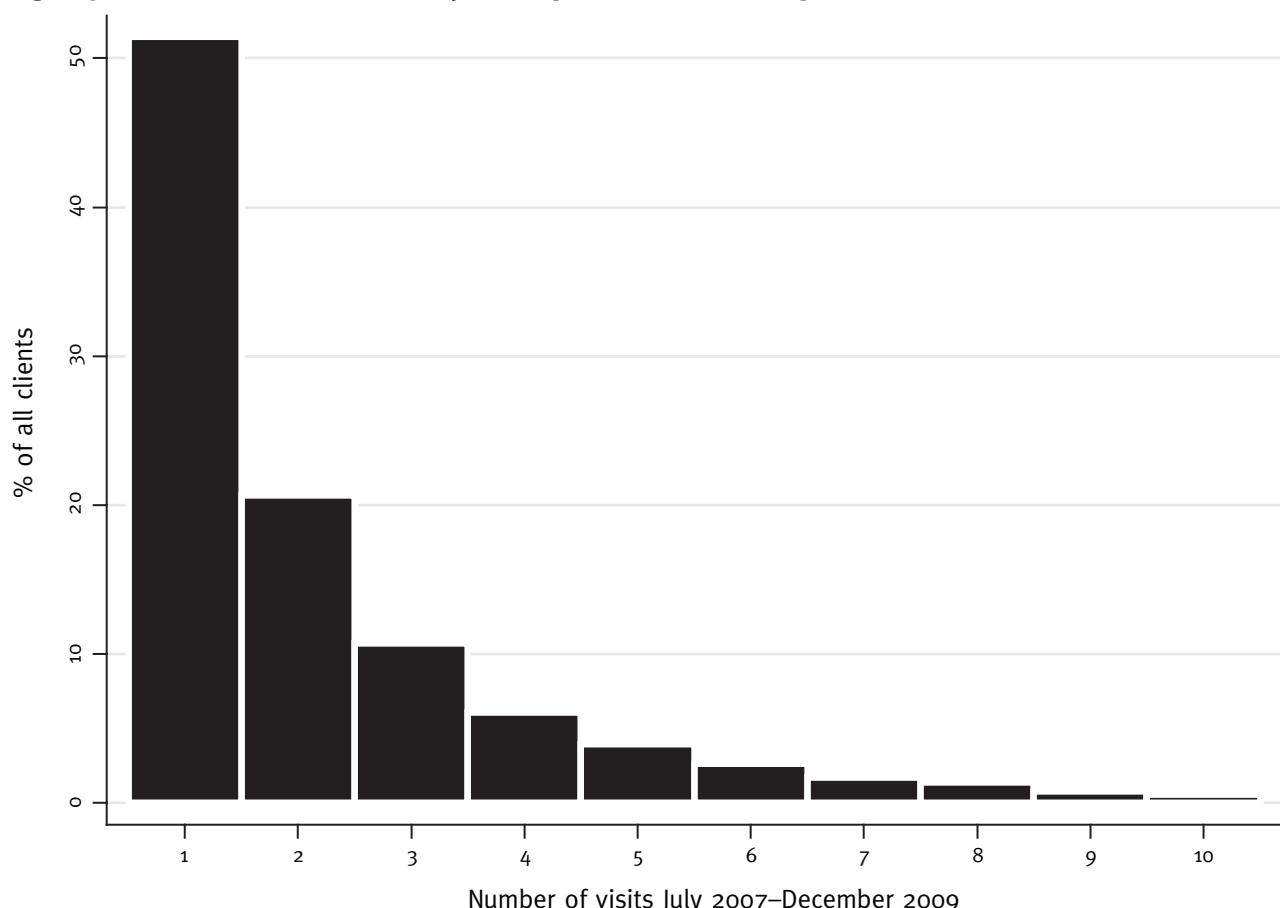
Tables 3 and 4 below summarise information about repeat visits for Anglicare and the Salvation Army<sup>9</sup> respectively. The first three columns of each table show how many individual clients were assisted on one or multiple occasions as percentages of all individual clients. The final three columns of each table show how many visits out of all visits in the dataset were by individuals who were assisted only once in the time period, how many visits were by individuals who were assisted twice over the period, and so on. This indicates how much of the emergency relief provided by each agency is directed towards repeat visits. The data presented in the tables is also shown as histograms in Figures 5 and 6 (Anglicare) and Figures 7 and 8 (the Salvation Army).

**Table 3: Number of client visits July 2007–Dec 2009, Anglicare**

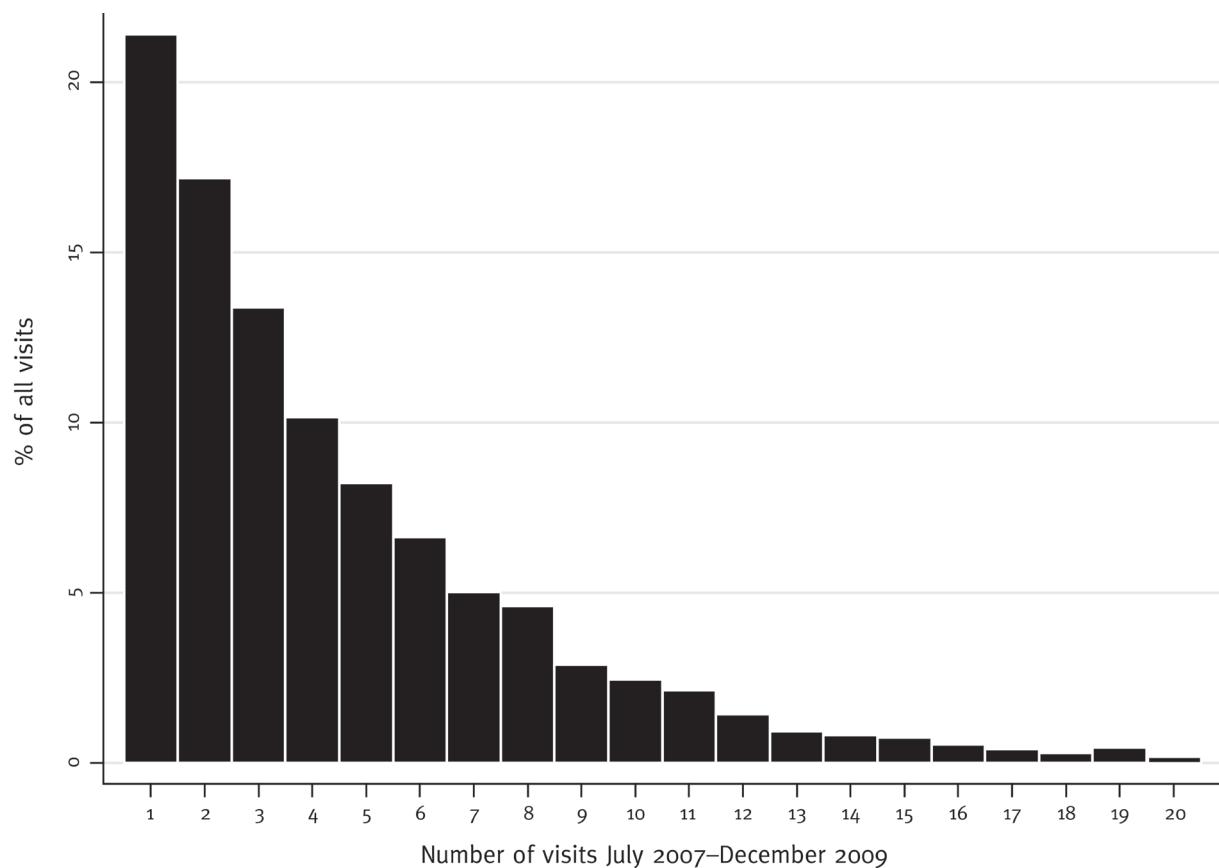
Over all clients			Over all visits		
Number of visits	No.	%	Number of visits	No.	%
1	8,783	50.57	1	8,783	20.81
2	3,526	20.30	2	7,052	16.71
3	1,832	10.55	3	5,496	13.02
4	1,042	6.00	4	4,168	9.88
5	675	3.89	5	3,375	8.00
6	455	2.62	6	2,730	6.47
7	295	1.70	7	2,065	4.89
8	237	1.36	8	1,896	4.49
9	132	0.76	9	1,188	2.81
10	101	0.58	10	1,010	2.39
11–15	204	1.17	11	880	2.08
16+	87	0.50	12	588	1.39
			13	390	0.92
			14	336	0.80
			15	315	0.75
			16–20	770	1.82
			21–30	889	2.10
			31+	276	0.65
<b>Total clients</b>	<b>17,369</b>	<b>100.00</b>	<b>Total visits</b>	<b>42,207</b>	<b>100.00</b>

**Table 4:** Number of client visits Jan 2007–June 2010, the Salvation Army

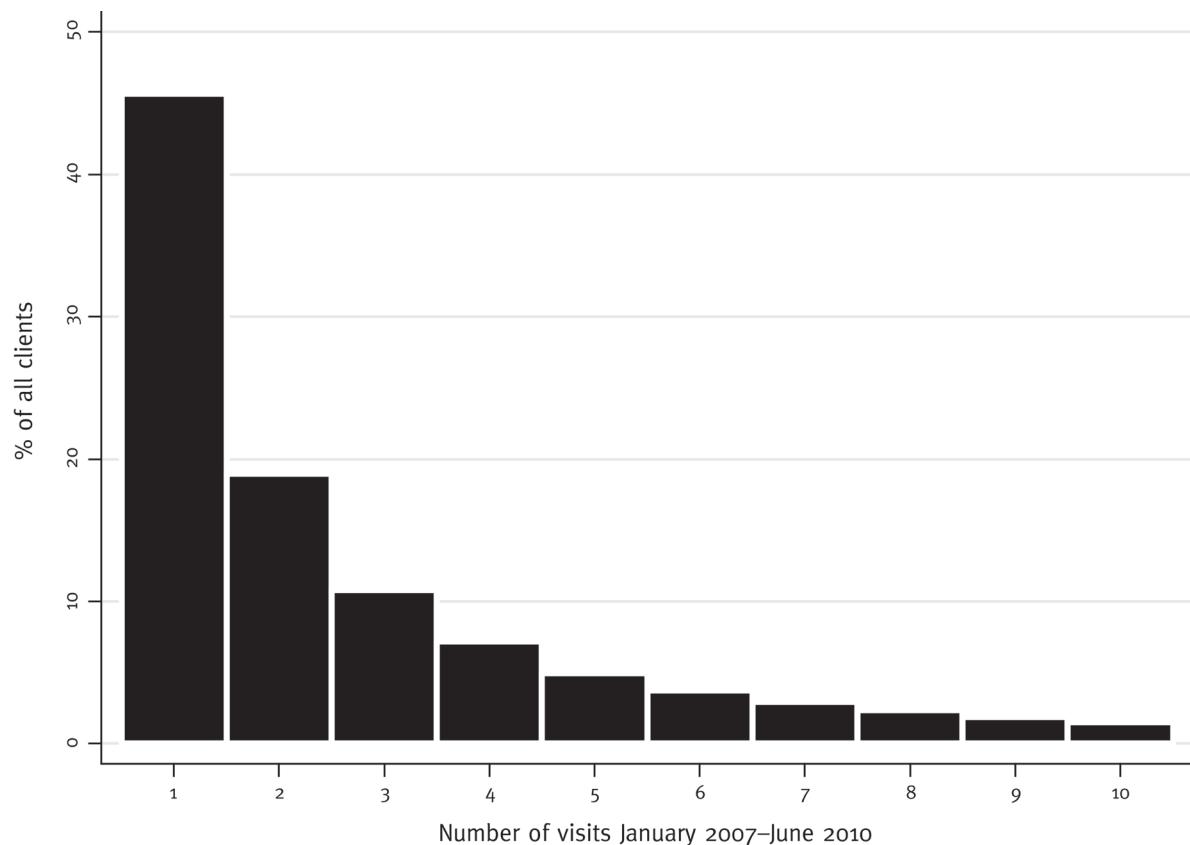
Over all clients			Over all visits		
Number of visits	No.	%	Number of visits	No.	%
1	65,098	42.79	1	65,098	12.42
2	27,006	17.75	2	54,012	10.30
3	15,427	10.14	3	46,281	8.83
4	10,241	6.73	4	40,964	7.81
5	7,063	4.64	5	35,315	6.74
6	5,315	3.49	6	31,890	6.08
7	4,189	2.75	7	29,323	5.59
8	3,397	2.23	8	27,176	5.18
9	2,678	1.76	9	24,102	4.60
10	2,216	1.40	10	21,261	4.06
11–15	6,086	4.00	11	18,953	3.62
16+	3,418	2.32	12	18,084	3.45
			13	14,599	2.78
			14	13,202	2.52
			15	11,850	2.26
			16–20	38,753	7.39
			21–30	24,021	4.59
			31 +	9,324	1.78
Total clients	152,134	100.00	Total visits	524,208	100.00

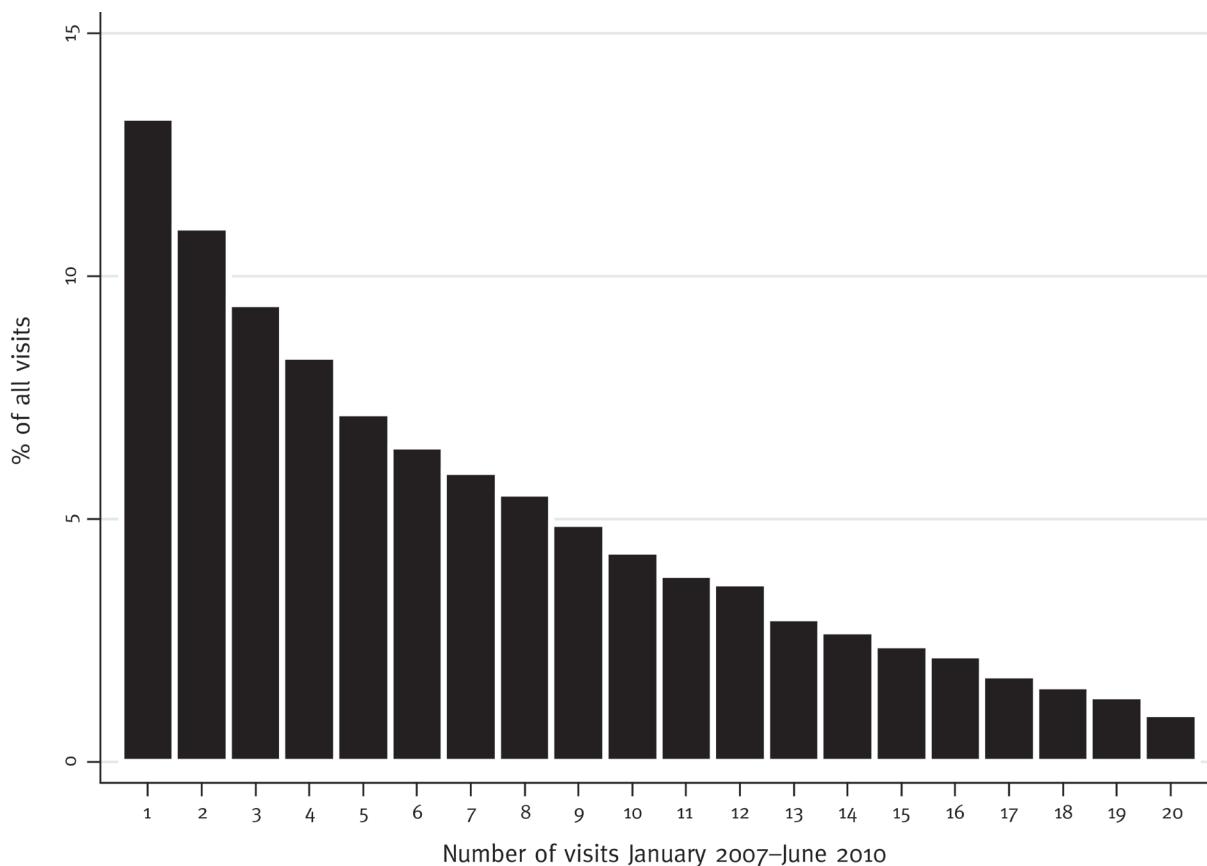
**Figure 5:** Number of client visits as percentages of total clients, Anglicare

**Figure 6: Number of client visits as percentages of total visits, Anglicare**



**Figure 7: Number of client visits as percentages of total clients, the Salvation Army**



**Figure 8:** Number of client visits as percentages of total visits, the Salvation Army

We consider first the number of visits over the entire period covered by each dataset. Note that the number of repeat visits is slightly higher in the Salvation Army data, because it covers a longer time period than the Anglicare data. Despite this difference, the distribution of repeat visits is quite similar between the two datasets. Figures 5 and 7 above show that:

- About half of all clients were assisted more than once. Most of these were assisted two or three times over the three-year period.
- Frequent visits were rare. The majority of clients were assisted on five or fewer occasions between 2007 and 2010 (90 per cent in the Anglicare data and 82 per cent in the Salvation Army data), and fewer than 10 per cent were assisted ten times or more often.

As half of the clients were assisted more than once, Figures 6 and 8 above show that the majority of assistance is provided to individuals who have previously sought emergency relief. For example, 12.4 per cent of visits in the Salvation Army data and 20.8 per cent of visits in the Anglicare data were first-time visits. These findings are consistent with findings from recent surveys showing that emergency relief clients experience chronic financial stress punctuated by recurrent periods of financial crisis. While the majority of clients were assisted on five or fewer occasions in both data sets, those who visited more than five times make up a substantial proportion of the visits to the agencies—more than 50 per cent of the visits to the Salvation Army and 30 per cent of the visits to Anglicare.

## 5.3 Family composition

Single-person households make up the largest group of emergency relief clients (38 per cent of total visits in the Anglicare data and 43 per cent in the Salvation Army data), followed by lone-parent households (28 per cent in the Anglicare data, and 35 per cent in the Salvation Army data). Table 5 below shows the clients' family composition as a percentage of all visits over the periods covered by each dataset.

**Table 5:** Family composition

	Anglicare	The Salvation Army
	% of all visits (July 2007–December 2009)	% of all visits (January 2007–June 2010)
Single person	37.8	43.1
Lone parent with dependent children	28.4	34.8
Couple with dependent children	11.3	20.2
Couple without dependent children <sup>(a)</sup>	7.4	-
Other grouping	6.7	1.9
<i>Missing</i>	8.3	0.08
<b>Total</b>	<b>100</b>	<b>100</b>

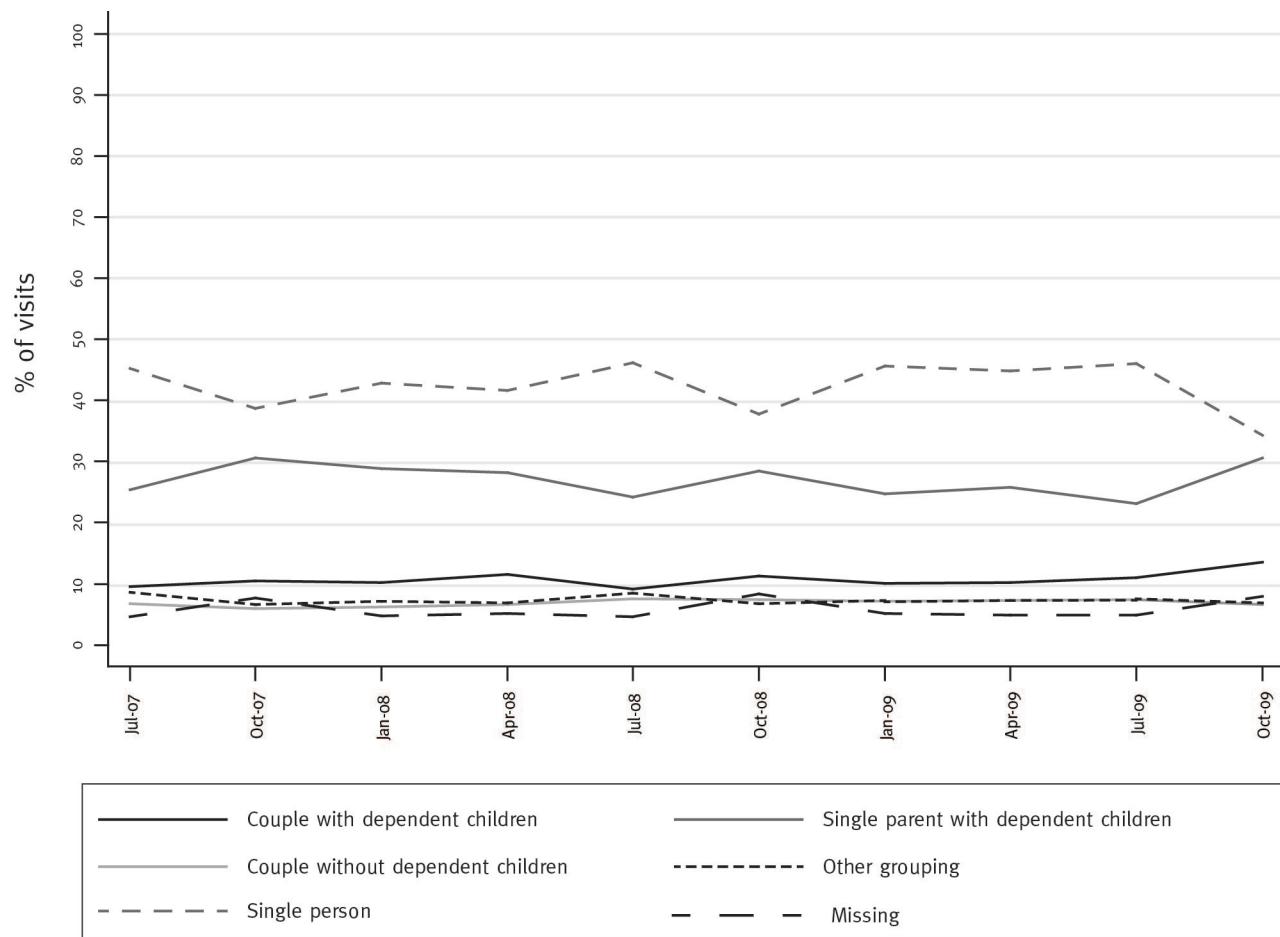
(a) Not specified in the Salvation Army dataset.

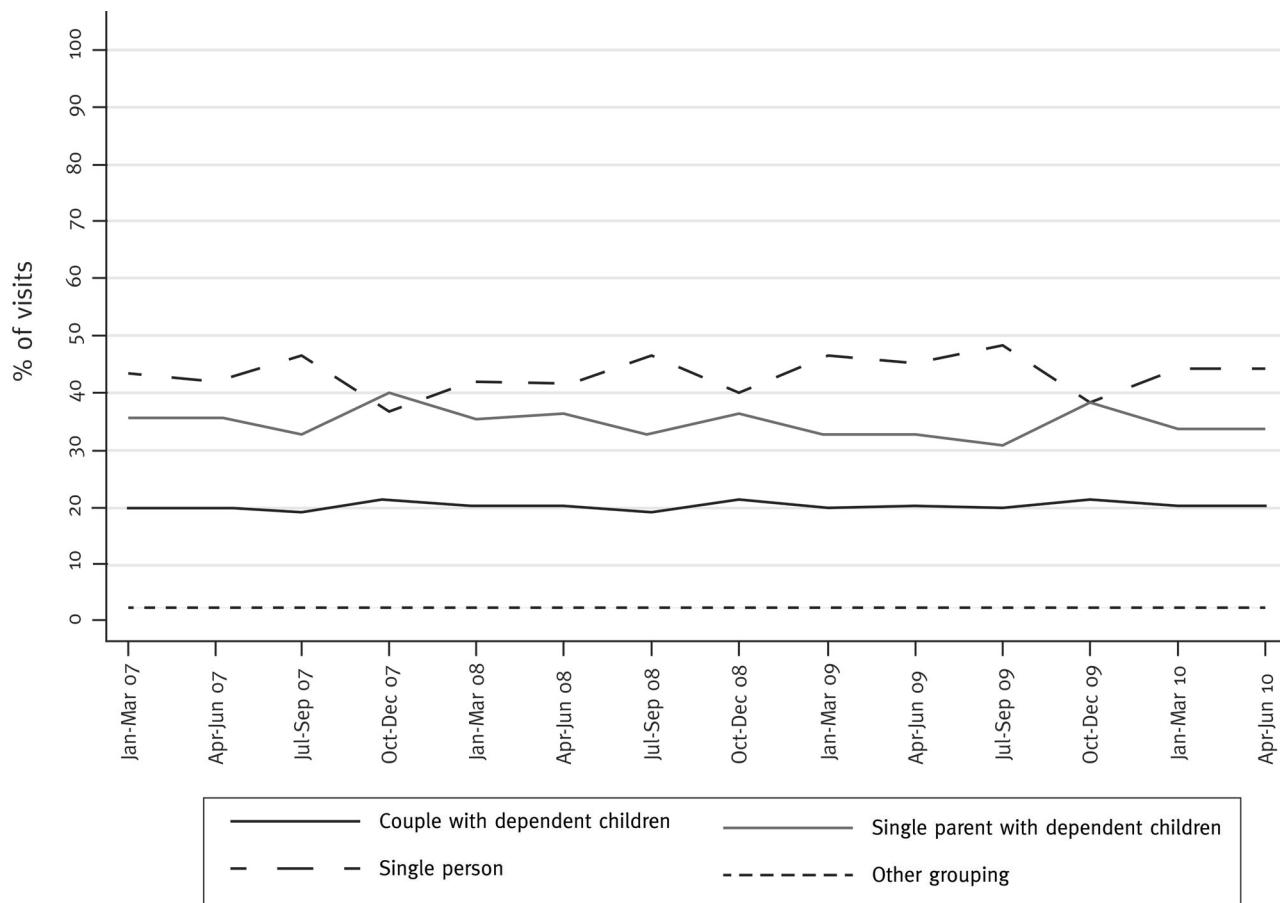
Considering family composition together with age and gender yielded patterns that were consistent across the two datasets:

- Half of all women who accessed emergency relief in both datasets were sole parents.
- Single people were more likely to be male.
- Female sole parents and men living alone were the two single largest demographic groups accessing emergency relief services. Female sole parents and men living alone comprised 24 per cent and 25 per cent of all visits in the Anglicare dataset respectively, and 30 per cent and 24 per cent of all visits in the Salvation Army dataset.
- Couples without dependent children (Anglicare dataset only) were more likely than any other family grouping to be aged 55 years and above.

### Trends in family composition

Figures 9 (Anglicare) and 10 (the Salvation Army) below show the distribution of different family compositions in each quarter over the periods covered by each dataset. There is clear seasonal variation for the two most prevalent groups, with individuals from single-person households less likely to access emergency relief in the fourth quarter of the year, and lone parents more likely to access services at this time. We discuss these patterns in the context of income below.

**Figure 9:** Clients' family composition, Anglicare

**Figure 10: Clients' family composition, the Salvation Army**

Apart from small fluctuations between quarters, there was little change in the overall profile of emergency relief clients in terms of family composition between 2007 and 2010. Swann et al. (2009) noted the proportion of clients who were in single-person households was 4 per cent higher in early 2009 than in early 2008. To explore this pattern a little more closely, we considered the percentage of single-person clients across the first three quarters of each calendar year, excluding the fourth quarter because single people were less likely to access services at this time. In each dataset, the percentage of single people was highest during 2009 (45.5 per cent in the Anglicare data and 46.5 per cent in the Salvation Army data), although these rates are only 2 to 3 percentage points higher than those recorded during 2008 (43.6 per cent and 43.4 per cent for Anglicare and the Salvation Army respectively).

## 5.4 Housing

The majority of emergency relief service users were living in rental properties, either public or private. Table 6 below summarises housing information over the periods covered by Anglicare and the Salvation Army. Although similar proportions of service users in the two datasets were private renters, the proportion of public renters was somewhat higher in the Anglicare data. One reason for this could be features specific to the Sydney accommodation market. However, it should also be noted that a large amount of housing information for Salvation Army service users was missing (13.1 per cent), and that tenure was not specified for a further 6.4 per cent of visits. It is possible that some of these service users were public renters.

**Table 6: Housing**

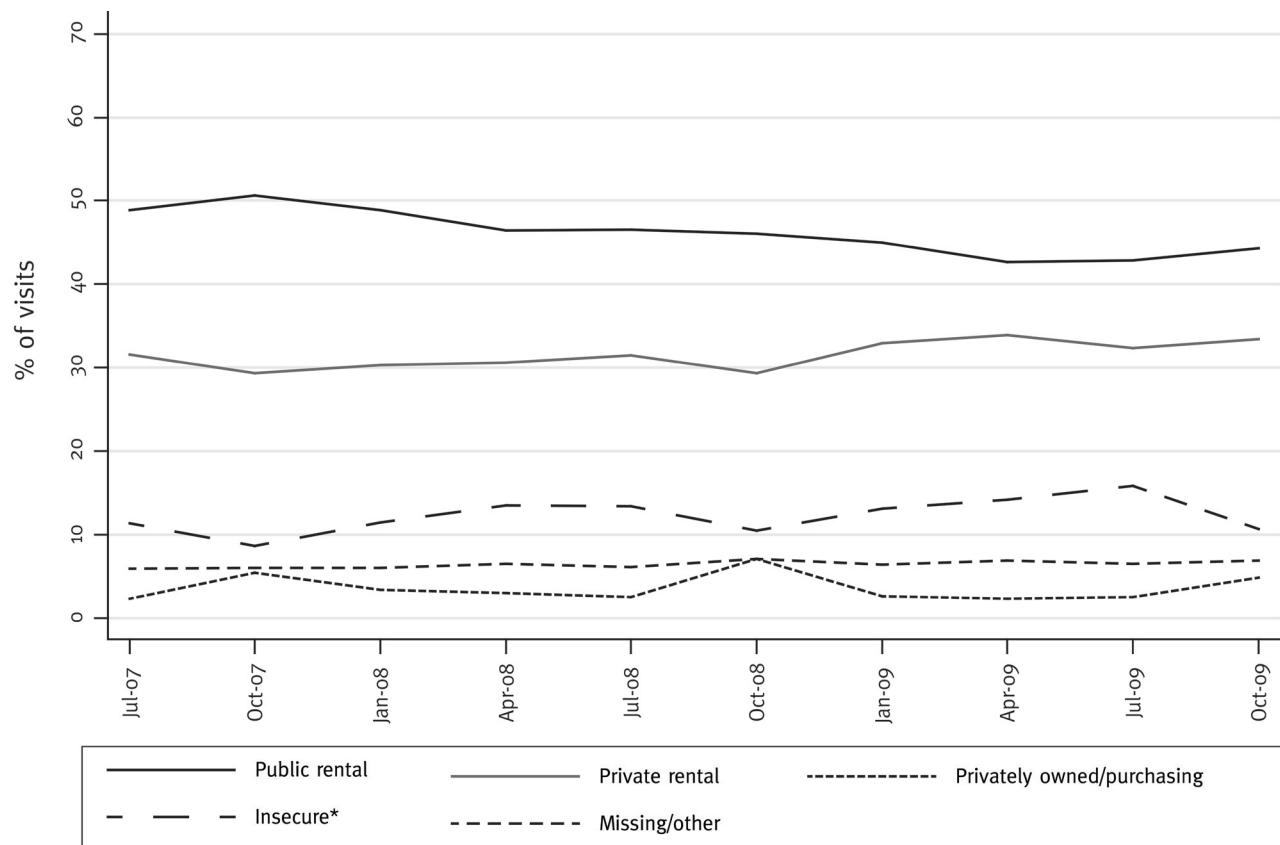
	<b>Anglicare</b>	<b>The Salvation Army</b>
	<b>% of all visits (July 2007–December 2009)</b>	<b>% of all visits (January 2007–June 2010)</b>
Public rental	46.2	25.9
Private rental	31.5	33.1
Owned/mortgage/purchasing	6.4	7.1
Insecure	12.1	14.3
House/flat, tenure not specified	-	6.4
<i>Missing</i>	3.7	13.1
<b>Total</b>	<b>100</b>	<b>100</b>

Despite these differences, it is clear that homeowners make up only a small percentage of those who access emergency relief services, less than 10 per cent in both datasets. Consistent with previous research, as well as the precarious financial situations of those who benefit from emergency relief, 12 to 15 per cent of service users were living in ‘insecure’ accommodation (King et al., 2009). Insecure accommodation includes living in boarding houses, hostels, hotels, cars, squats, refuges, caravans, ‘couch surfing’, as well as being homeless or sleeping rough.

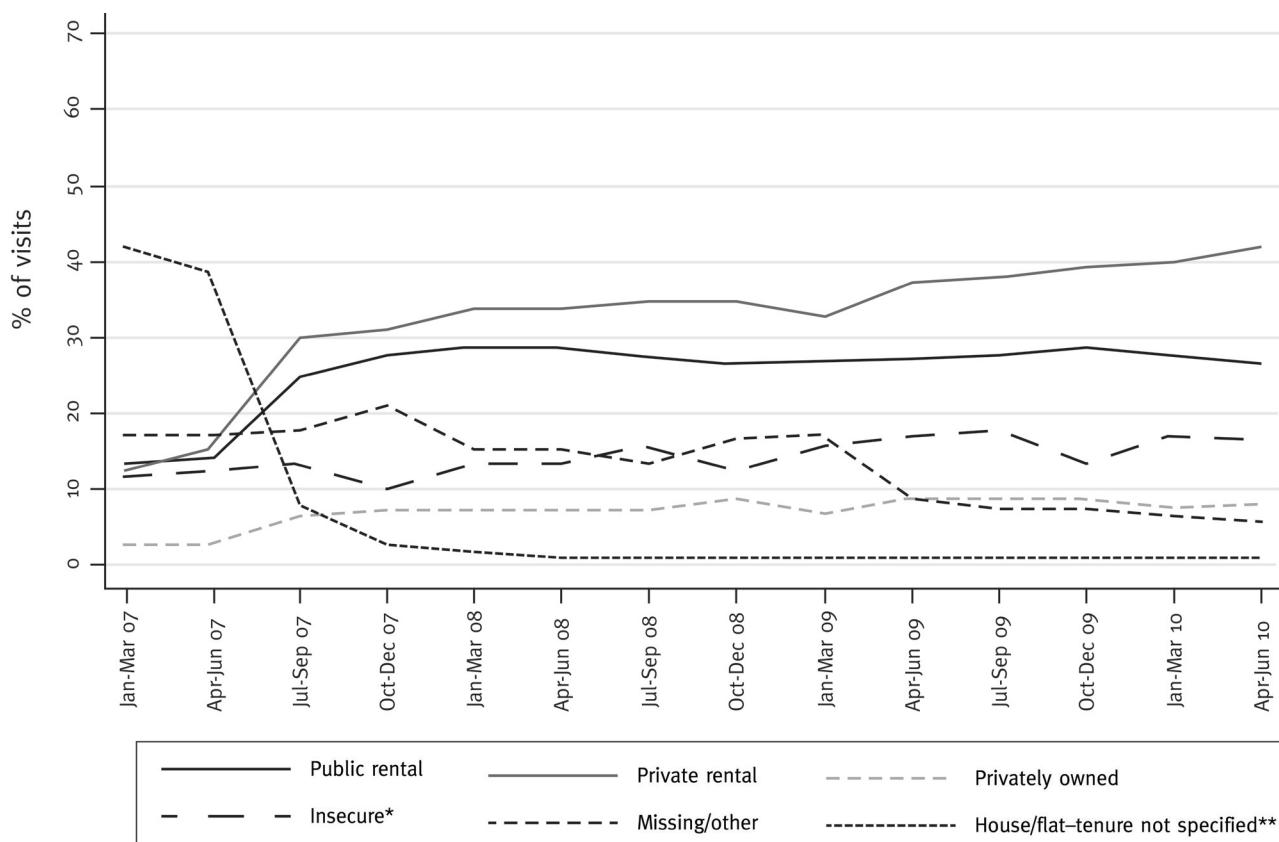
### Trends in housing

Figures 11 (Anglicare) and 12 (the Salvation Army) below show the distribution of housing situations in each quarter over the periods covered by each dataset. As reported by Swann et al. (2009), the Anglicare data is characterised by a very slight increase in the percentage of clients renting privately, and a slight decrease in the percentage of clients renting publicly. For instance, 30 per cent of clients who visited in 2008 were renting privately and 47 per cent were renting publicly, while during 2009 private rentals accounted for 33 per cent of visits and public rentals for 43 per cent of visits. The percentage of clients who owned or were purchasing their own home was highest at 7 per cent in the fourth quarter of 2008, but this is not much higher than the lowest rate of 6 per cent in July 2007.

**Figure 11: Clients' housing situations, Anglicare**



\*Boarding house, caravan, hostel/hotel/motel, car, squat, refuge, homeless

**Figure 12:** Clients' housing situations, the Salvation Army

\*Boarding house, caravan, hostel/hotel/motel, car, squat, refuge, homeless

\*\*May include public/private rentals prior to 2007

Discerning trends in the Salvation Army data is complicated by the large proportion of cases before 2008 for which housing tenure was not recorded. It seems likely that the substantial and abrupt increase in public and private renters in the third quarter of 2007 is due to a change in data collection practice leading to the corresponding drop in cases of non-specified tenure. Focusing just on quarters from January 2008 onwards (after the drop in non-specified tenure) suggests an increase in the percentage of clients renting privately; however, a gradual decrease in the percentage of missing housing information over the same period could account for the increase in clients recorded as renting privately. Overall, the data do not support significant changes in the housing situations of those people who accessed emergency relief between 2007 and 2010.

## 5.5 Sources of income

Both the Anglicare and Salvation Army datasets contain information about client income sources. Table 7 below summarises the major sources of income for all visits recorded in each dataset. There are, however, some differences between the agencies in the way that income information was collected. First, Anglicare emergency relief providers recorded **all** client income sources, regardless of how much each source contributed to overall income, while Salvation Army providers recorded only the client's **main** source of income. Thus, sources of income in the Anglicare dataset do not sum to 100 per cent because many service users had more than one source of income. Another result of these differing practices is that income sources that are frequently received, but may contribute relatively little to overall income (like the Family Tax Benefit), rank much lower in the Salvation Army data because clients do not report these payments as their main source of income. The second difference between agencies is that income information was collected by Anglicare providers at the time of a

client's first visit, but not at subsequent visits, while Salvation Army providers collected income information at every visit. A final issue to consider is that income data was missing in about 12 per cent of cases in the Salvation Army data. Thus, the percentage of clients receiving the major sources of income may be slightly higher than the figures shown in Table 7.

**Table 7: Sources of income**

	Anglicare All sources of income	The Salvation Army Main source of income
	% of all visits (July 2007–December 2009)	% of all visits (January 2007–June 2010)
Disability Support Pension	27.8	24.3
Newstart	26.6	22.9
Parenting Payment (lone or partnered)	25.8	24.4
Family Tax Benefit	28.7	-
Other government pension or benefit <sup>(a)</sup>	13.2	11.9
Employment/own business	3.5	1.9
Other income <sup>(b)</sup>	17.7	0.2
No income	2.5	3.1
<i>Missing</i>	-	11.3
<b>Total</b>	-	<b>100</b>

(a) Includes Carer's Allowance, Age Pension, Youth Allowance, Abstudy/Austudy, FTB (Salvation Army only).

(b) Includes compensation/workcover, child support payments, and other income nec.

Despite these differences, the trends that emerged were strikingly similar. In keeping with previous emergency relief research, the vast majority of service users were receiving at least one government payment: 92 per cent of Anglicare service users, and 84 per cent of Salvation Army service users. The majority of clients were receiving the Parenting Payment, Newstart, or the Disability Support Pension. Just under 30 per cent of Anglicare service users were receiving the Family Tax Benefit, but 75 per cent of these individuals were also receiving the Parenting Payment. Consistent with previous analyses of emergency relief (Engels, 2006; King et al., 2009), very few service users (less than 5 per cent in each dataset) were receiving income from employment. In a further reinforcement of past findings, less than 5 per cent of clients were Age Pension recipients.

Breaking down information about income by household composition revealed several patterns that were largely consistent across datasets:

- Not surprisingly, 73 per cent of Parenting Payment recipients were lone parents, and most of these were women.
- Single persons were mostly receiving either the Disability Support Pension (Anglicare: 40 per cent, Salvation Army: 35 per cent) or Newstart (Anglicare: 40 per cent, Salvation Army: 32 per cent).
- Couples with dependent children reported the most varied sources of income, with up to a third receiving the Parenting Payment (Anglicare: 30 per cent, Salvation Army: 25 per cent), 20 per cent receiving Newstart (both datasets), and a further 20 per cent receiving the Disability Support Pension (both datasets). However, service users who were members of a couple with children were also more likely than any other group to receive income from employment. Just under 10 per cent of these individuals in the Anglicare dataset were receiving some income from employment, and 4 per cent in the Salvation Army dataset cited employment as their main source of income.

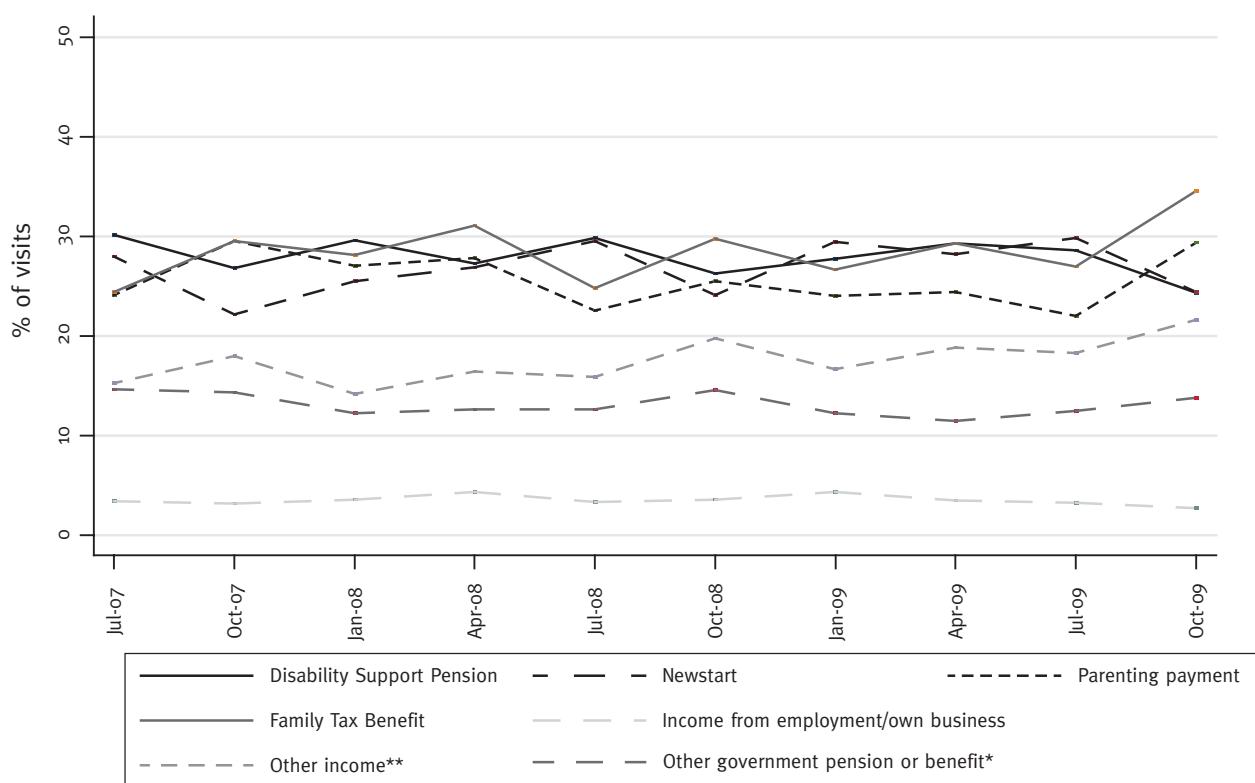
A small number of service users received no income at all (3.1 per cent for the Salvation Army and 2.5 per cent for Anglicare). The Anglicare dataset included information about the reasons for this situation. In most cases

complete lack of income was due to difficulties with Centrelink claims: 25 per cent of these individuals were waiting for a claim to be assessed or had had a claim rejected, a further 27 per cent were waiting for their first payment or were waiting to become eligible, and 12 per cent had had payments suspended. Fourteen per cent had not made an application. Other reasons included recent unemployment (13 per cent), reemployment and waiting for first pay (2 per cent), waiting for workcover or compensation payment (3 per cent), and failure to obtain immigration sponsorship (4 per cent).

### Trends over time in income sources

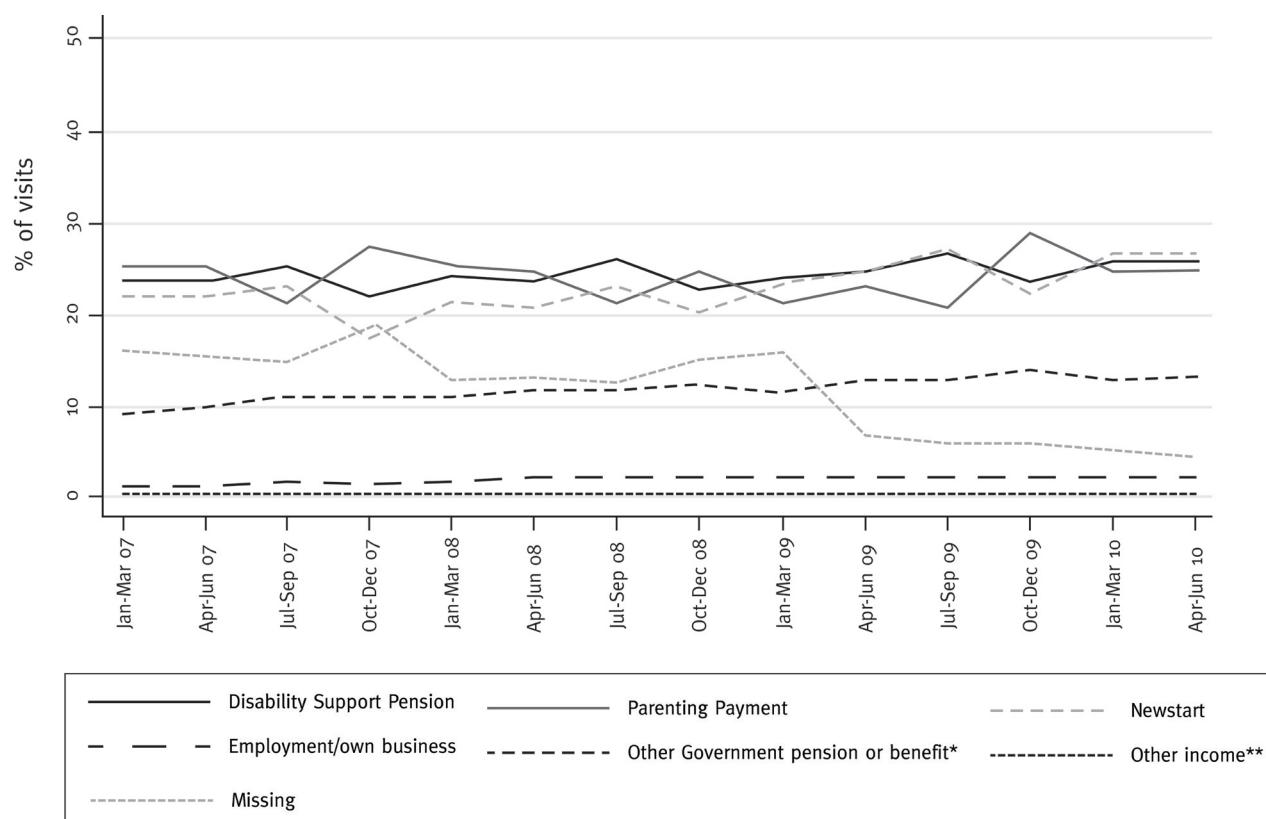
Figures 13 (Anglicare) and 14 (the Salvation Army) below show the distribution of the major income sources as percentages of visits in each quarter for the time period covered by each dataset. Both figures show that there are seasonal variations in the income groups who access emergency relief at different times of the year. Those receiving the Disability Support Pension or Newstart are least likely to access services in the fourth quarter of the year, while those receiving the Parenting Payment are most likely to access services at this time. This may reflect the fact that single people access services less often in the fourth quarter, and families more often (see Figures 9 and 10). It is possible that people receiving Newstart take advantage of increased opportunities for casual employment over the Christmas period, while lone parents and couples with children may be more likely to require assistance with increased costs of the Christmas and New Year period (Engels, 2006).

**Figure 13: Clients' sources of income, Anglicare**



\*Includes Youth Allowance, Age Pension, Abstudy, Austudy, Carer's Pension, DVA pensions, Young Homeless Allowance, Widow Pension

\*\*Includes Workcover/compensation, child support, overseas pension, redundancy pay, superannuation

**Figure 14:** Clients' sources of income, the Salvation Army

\*Includes Youth Allowance, Age Pension, Abstudy, Austudy, Family Tax Benefit, Carer's Pension, DVA pensions, Exceptional Circumstances Relief Payments, CDEP.

\*\*Includes Workcover/compensation and child support

Apart from seasonal variation, however, there is little indication of any substantial increase or decrease from 2007 to 2010 in any particular income group. Figure 14 (Salvation Army) above seems to indicate a slight upwards trend in the percentage of people receiving government payments from the start of 2009, but this may be due to the decrease in the percentage of cases with data missing for income.

### Client characteristics—summary

The characteristics of emergency relief service users described in this section are largely consistent with those reported in the emergency relief literature (e.g. Engels, 2006; King et al., 2009; Flanagan, 2009). Moreover, the relative consistency in the service user profile from 2007 to 2010 suggests that the emergency relief population is relatively stable, at least in terms of the characteristics examined here (Engels et al., 2009). As reported by Swann et al. (2009), the percentage of clients who were homeowners was very slightly higher in late 2008 than in mid-2007. Also consistent with this report, the proportion of clients who were in single-person households was 2 to 3 percentage points higher during 2009 than in 2008. However, these small changes do not support a marked change in the profile of emergency relief clients. Thus, while the overall provision of emergency relief rose with the onset of the GFC, there is no indication in these data that recent years have seen significant new inflows into emergency relief from more advantaged segments of the wider population who do not generally seek such assistance, such as tertiary students, non-welfare recipients, and homeowners.

# 6 Presenting issues

People who present at emergency relief centres have a range of immediate financial needs. Many also have concerns that are not directly financial, such as problems with health and relationships, and most present with more than one issue. This illustrates the complexity of issues facing service users and the multiple forms of disadvantage they experience. This section examines the profile of presenting issues at emergency relief visits from 2007 to 2010. As discussed earlier with regard to client characteristics, we do not examine presenting issues in combination with each other or with other characteristics like income or gender. For discussion of issues for different client groups, refer to King et al. (2009), Engels (2006), Engels et al. (2009) and Flanagan (2009).

Both Anglicare and the Salvation Army collect information about reasons for each emergency relief visit, as well as other problems that clients may have. Although the way in which information about client needs and issues is classified and recorded differs between the agencies, there is enough similarity to allow the creation of two broad categories. The first includes issues relating to financial difficulties, accommodation/housing, and unemployment, and the second includes issues relating to health and relationships. The issues that fall into each category are summarised in Table 8, as follows.

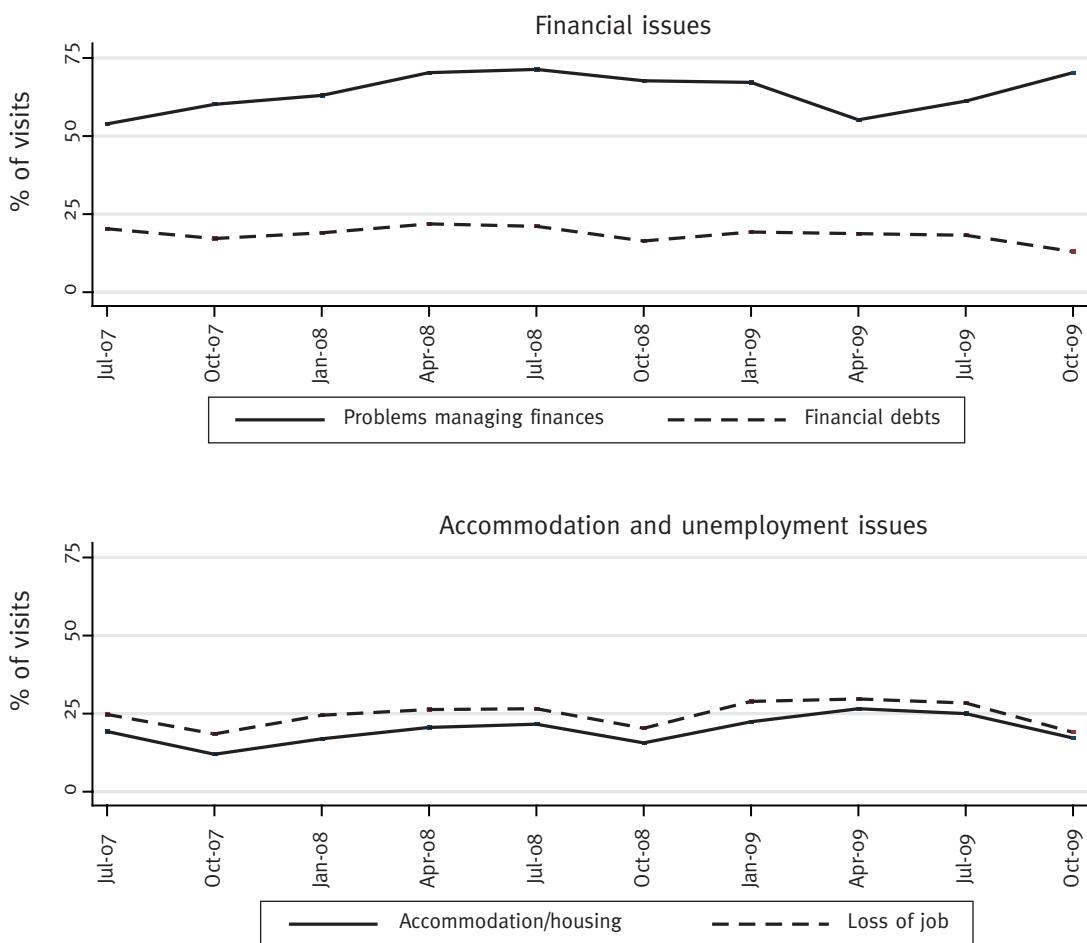
**Table 8: Presenting issues, Anglicare and the Salvation Army**

<b>Anglicare</b>		<b>The Salvation Army</b>	
<b>Category</b>	<b>Examples</b>	<b>Category</b>	<b>Examples</b>
<b>Financial, accommodation and unemployment</b>			
Accommodation/ housing	Tenancy problems; homelessness	Accommodation/ housing	Eviction, previous accommodation ended, overcrowding, itinerant
Unemployment	Loss of job	Unemployment	Loss of job, loss of income
Problems managing finances		Problems managing finances	Budgeting problems
Financial debts	Significant financial debts; credit card debts; gambling	—	—
		Unexpected or extraordinary expenses	
		Other financial difficulty	Mostly unspecified, but also includes gambling debts, increased medical expenses, and Centrelink quarantined income
<b>Health and relationships</b>			
Mental health		Mental health	
Physical health		Physical health	
Substance use	Drug/alcohol addiction	Substance use	Drugs, alcohol
Issues with family relationships		Issues with family relationships	Family relationships breakdown, needing time out, interpersonal conflicts
Issues with children	—	—	—

## 6.1 Financial, accommodation and employment issues

Figure 15 below shows the percentage of visits in each quarter (from July 2007 to December 2009) at which issues relating to finances, accommodation, and unemployment were cited by clients who received emergency relief at the Sydney Anglicare centres. The upper panel shows financial issues and the lower panel shows accommodation and unemployment. The most common issue, cited by 64 per cent of clients over the whole period, is problems with managing finances (upper panel). The next most frequently cited issue is unemployment (24 per cent of all visits), followed by accommodation (19 per cent) and debts (18 per cent). Note that percentages do not sum to 100 per cent because clients could report more than one issue per visit.

**Figure 15: Presenting issues: financial, accommodation and employment, Anglicare**



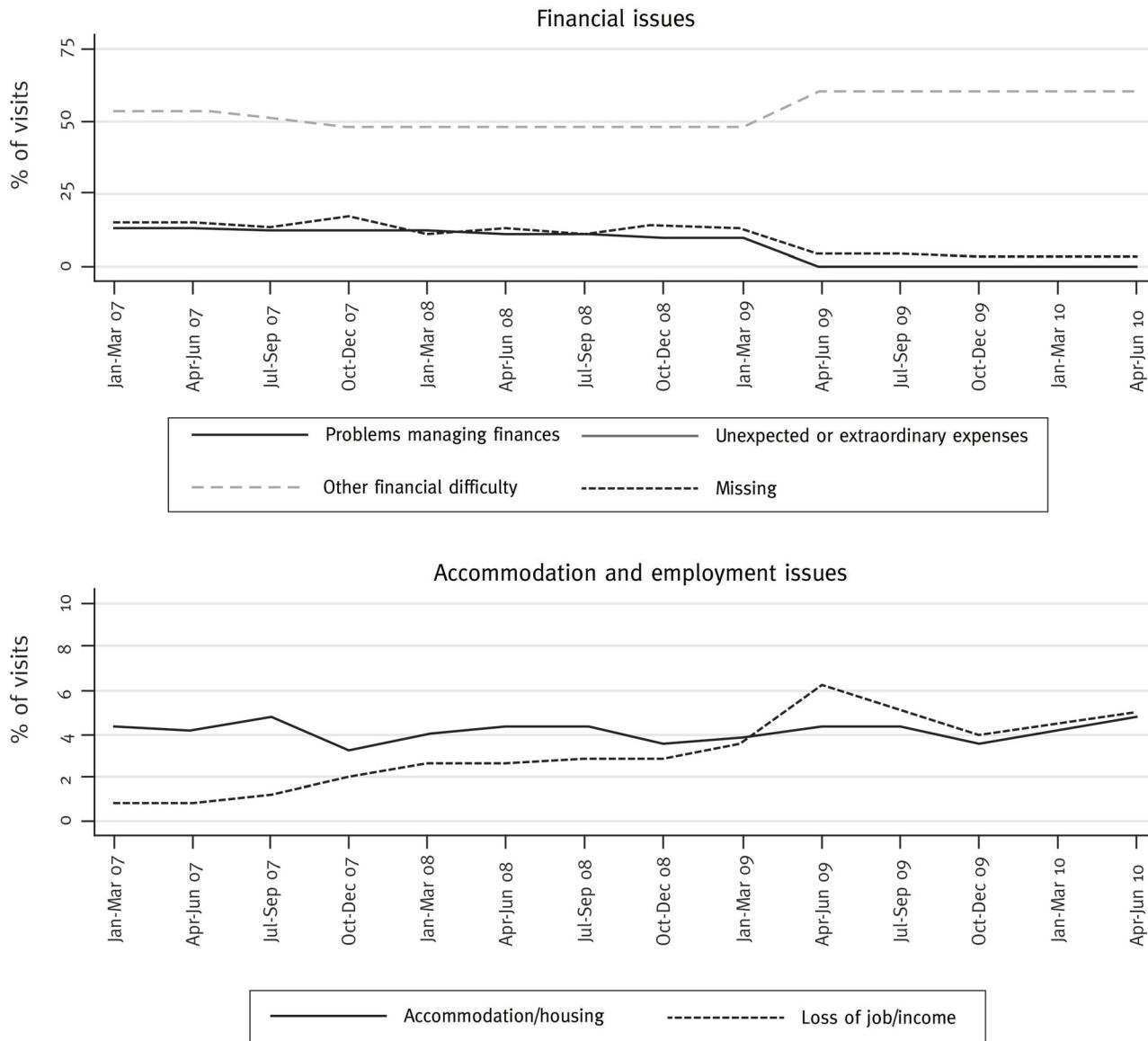
The proportion of clients presenting with difficulties managing finances rose across 2008 to a peak in July of that year (71 per cent of visits), dropped in mid-2009 and rose again in the fourth quarter of 2009. Those citing financial debts, however, remained steady over the entire period. Clearer patterns are apparent for issues relating to accommodation and unemployment:

- Issues relating to unemployment and accommodation both demonstrate a seasonal pattern, with low points in the fourth quarter and rises in the first quarter of each year.
- The percentage of clients who presented with issues relating to accommodation or unemployment was highest in the first three-quarters of 2009. For example, in July 2009, 30 per cent of clients presented with unemployment issues and 25 per cent with accommodation issues, compared with 25 per cent and 19 per cent respectively in July 2007.

- The percentage of clients citing these issues dropped in the fourth quarter of 2009 to about the same levels as the fourth quarter of 2008.

Financial, accommodation and employment issues recorded by the Salvation Army Southern Division are shown in Figure 16 below. Once again, trends are illustrated as the percentage of visits in a quarter (from January 2007 to June 2010) in which clients cited each issue. However, this dataset records only the **main** presenting issue for each visit, rather than multiple presenting issues. Therefore, percentages will sum to 100 per cent.

**Figure 16: Presenting issues: financial, accommodation and employment issues, the Salvation Army**



Looking first at financial issues in the upper panel, the most frequently cited issue (about 50 per cent of visits over the whole period) is 'other financial difficulty', the nature of which is not further specified. Budgeting problems account for 10 to 15 per cent of visits over the period, and unexpected or extraordinary expenses for a further 10 per cent. The lower panel shows that, together, accommodation and unemployment were cited as the main presenting issue in only 7.5 per cent of total visits. While this is much lower than the corresponding category in the Anglicare data, it seems likely that although many clients may have issues relating to accommodation or unemployment, the main reason for seeking emergency relief is immediate financial crisis. Thus, the low rates of accommodation/unemployment issues may simply reflect the way in which the data was recorded.

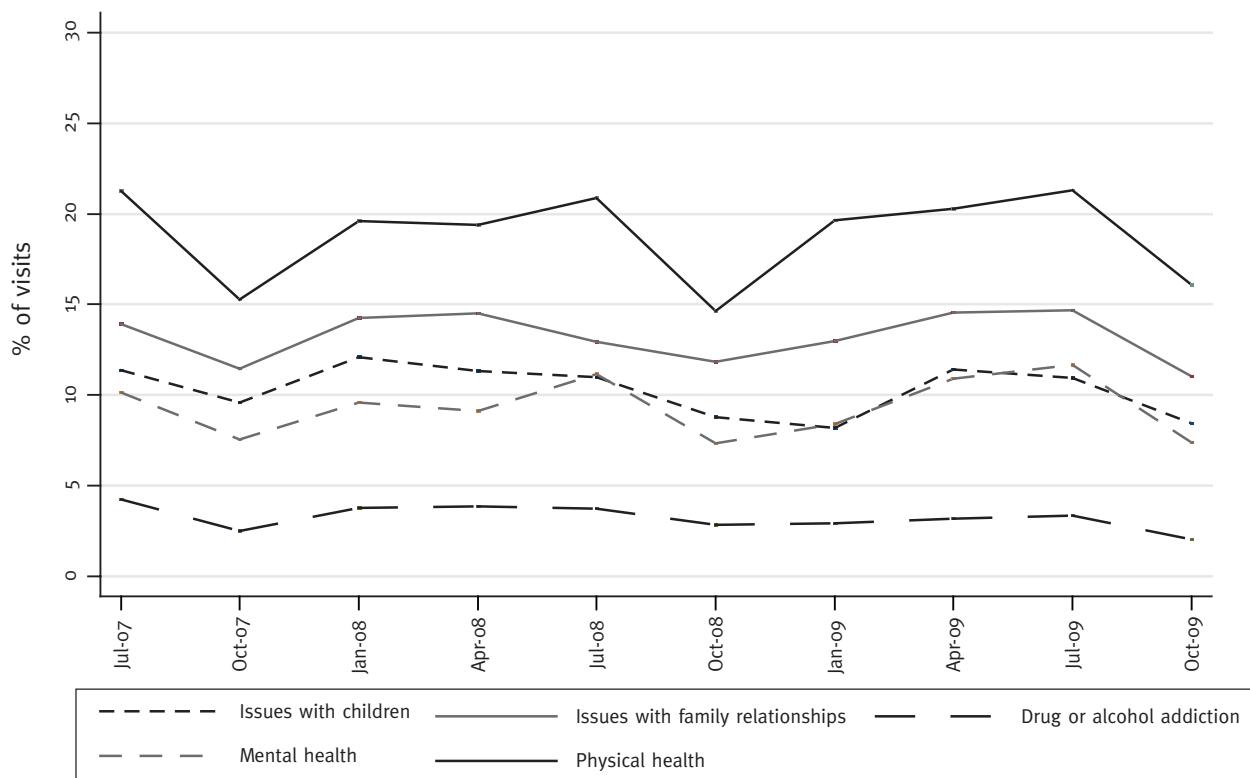
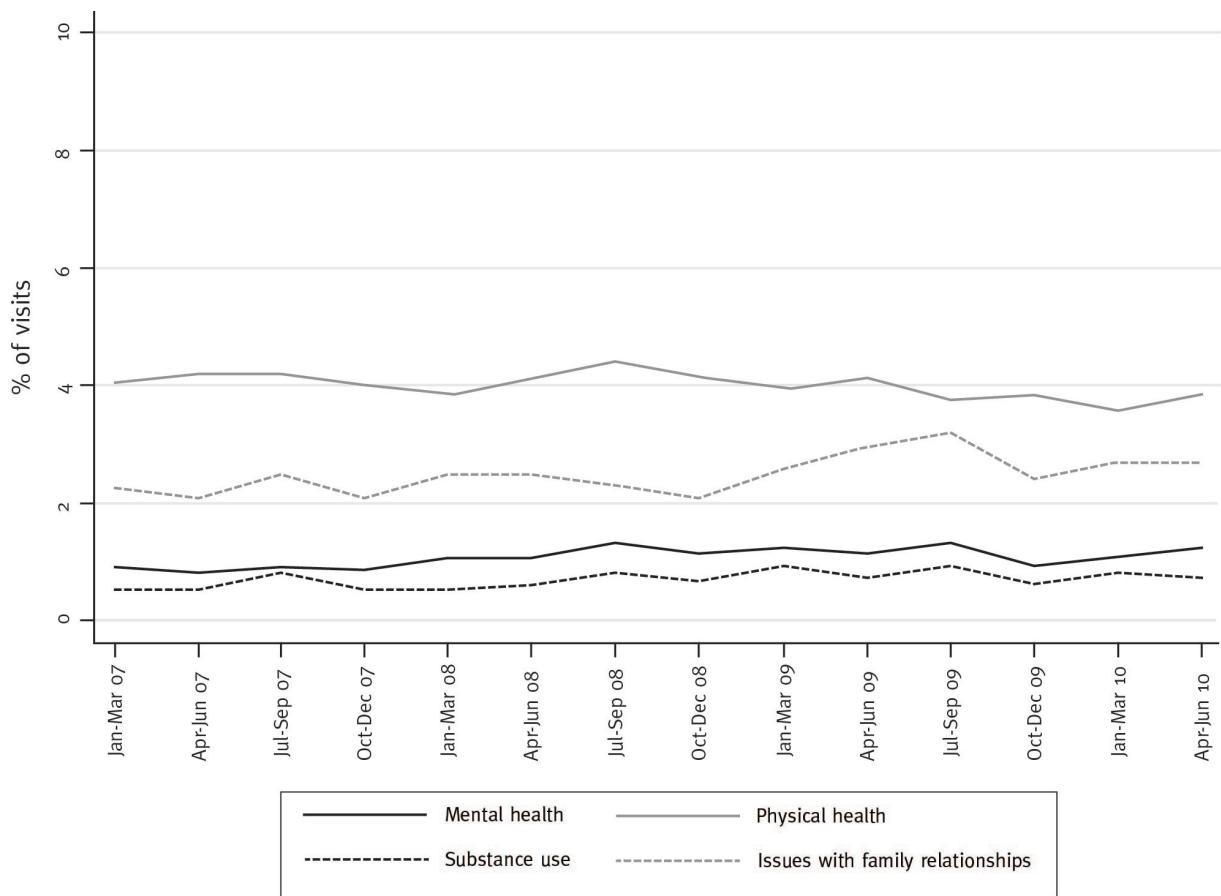
Discerning trends over time is complicated by the pattern of missing information for the presenting issue over time (represented by the yellow line in the upper panel). The proportion of missing data abruptly dropped 10 percentage points between the first and second quarters of 2009. This corresponded with a rise of 12 percentage points in 'other financial difficulties', which had previously been fairly stable since 2007, and which remained stable at this higher rate until June 2010. There was also a drop at this time in problems managing finances. It is therefore possible that the apparent increase in financial issues in early 2009 is the result of a change in data collection methods at this time. However, the increase in the percentage of unexpected/extraordinary expenses issues over 2009 does not seem to mirror the reduction in missing values as closely. In October 2009, 17 per cent of clients presented with issues relating to unexpected/extraordinary expenses, compared with 9.5 per cent in October 2008 and 7.5 per cent in October 2007.

The decrease in missing data could also be a factor in the spike in the percentage of clients reporting unemployment as the main presenting issue in the second quarter of 2009. However, it should be noted that there was an increase in the percentage of unemployment issues in the period leading up to 2009: 3.9 per cent of clients cited unemployment as the main presenting issue in January 2009, compared with 2 per cent in January 2008 and 0.9 per cent in January 2007. Finally, the rate of accommodation issues remained steady over the entire period.

## 6.2 Health and relationship issues<sup>10</sup>

Figures 17 and 18 below show the percentage of visits in each quarter at which clients cited health and relationships issues, for Anglicare and the Salvation Army respectively. Once again, the rates for the Salvation Army are far lower than for Anglicare, presumably as a result of differing data collection methods. Despite these differences, two overall patterns are apparent:

- In each dataset, physical health issues is the most frequently reported issue, followed by issues with family relationships/children, mental health issues, and substance use.
- The rates of different issues fluctuate over the reporting periods, but there do not appear to be any clear patterns of increase or decrease in any particular issue.

**Figure 17: Presenting issues: health and relationships, Anglicare****Figure 18: Presenting issues: health and relationships, the Salvation Army**

### 6.3 Presenting issues—summary

Not surprisingly, the majority of clients access emergency relief services for financial reasons. Although these data do not provide information about the main costs contributing to financial difficulties, previous research suggests that lack of money to buy food is the main reason why many clients in financial crisis seek emergency relief. Engels et al. (2009) argue that households in financial crisis may prioritise payment of essential expenses such as rent and utilities, and then seek assistance with discretionary expenses such as food.

Finally, as reported by Swann et al. (2009), the Anglicare data indicated a 5 to 6 per cent rise during the first half of 2009 in the percentage of clients citing unemployment or accommodation issues as reasons for seeking emergency relief. These levels dropped toward the end of 2009. This is consistent with normal seasonal fluctuations and without a longer time series it is difficult to determine whether the 2009 increase was significantly out of the ordinary. The Salvation Army data also indicated a small rise in unemployment-related issues in early 2009, but due to data difficulties the interpretation of trends is unclear. On the basis of the available data, it appears that there was no substantial change in the main reasons why people sought emergency relief. Nonetheless, both datasets recorded a rise in people citing 'general financial difficulties' or 'unexpected expenses' during 2008–2009. Unfortunately, we are unable to determine which costs contributed to these difficulties.

## 7 Reports of approaches to welfare agencies in HILDA

This section uses waves 1 to 8 of the Household, Income and Labour Dynamics in Australia (HILDA) dataset to examine the incidence of individuals under financial hardship accessing the services of welfare agencies in the broader Australian population.<sup>11</sup> HILDA is a longitudinal dataset that provides information on the characteristics and behaviour of Australian households, intended to be representative of the Australian population, at least those living in non-remote areas of Australia when the survey commenced. The first wave of the HILDA dataset collected in 2001 contains information on over 7,500 households and almost 14,000 individuals. Subsequent waves, which have been collected on an annual basis, contain somewhat smaller numbers of observations (see Watson 2010).

Of note for this study is that the self-completion questionnaire, provided to all subjects in the survey, contains a series of questions designed to ascertain the extent to which individuals face financial hardship. Respondents are asked whether, ‘because of a shortage of money’, they undertook any of a number of actions since the beginning of the survey year. The set of actions are set out in Table 9 below. Among the list is: ‘Asked for help from welfare/community organisations’. Since the preamble to the question indicates that this is meant to capture times when respondents had little money and the activity involves ‘asking for help’, this question should get close to the type of situation covered by the provision of ‘emergency relief’, at least for the population represented by the HILDA data. Responses that these individuals sought such assistance should involve more than them simply shopping at community opportunity shops.

**Table 9: Wording of HILDA financial stress questions (self-completion questionnaire)**

---

Since January (survey year) did any of the following happen to you because of a shortage of money?

- Could not pay electricity, gas or telephone bills on time
  - Could not pay the mortgage or rent on time
  - Pawned or sold something
  - Went without meals
  - Was unable to heat home
  - Asked for financial help from friends or family
  - Asked for help from welfare/community organisations
- 

On the other hand, it seems unlikely that the HILDA survey responses to this question might capture completely the population who access emergency relief from welfare agencies. First, the self-completion questionnaire is completed only by a subset of respondents each year (around 85 per cent), with item ‘non-response’ adding to response problems. If it is the most disadvantaged who do not answer the question and are most likely to suffer financial hardship, the proportion responding that they sought help from community organisations might be too low. Second, non-random attrition of the most disadvantaged from the survey from one wave to the next might have a similar impact, although the analysis reported here uses the weights provided in the data that are meant to weight the data back to the population surveyed by HILDA. Third, as a survey of households initially in ‘dwellings’, HILDA can only capture imperfectly those in very ‘marginal’ housing circumstances, including ‘homeless’ individuals (10 to 15 per cent of all emergency relief recipients for the data described earlier). Since this group is likely to make much more use of emergency relief, again the proportion approaching welfare agencies is likely to be under-estimated in HILDA. Nevertheless, HILDA can provide valuable information about the broad (but under-estimated) magnitude of the group accessing welfare agencies, the characteristics of that group, in terms of the type of information collected by welfare agencies themselves, and a good deal of information that is additional and complementary to that collected by agencies that fills out the picture of those who access welfare agencies. Further, if the recent global financial crisis induced different, more advantaged types of individuals to seek emergency relief from welfare agencies, that population would be represented in HILDA and such trends would likely be apparent in the data.

## 7.1 Incidence of seeking assistance

The proportion of respondents who reported that they sought assistance from a welfare agency because of a shortage of money in each year from 2001 to 2008 is shown in Table 10 below.<sup>12</sup> Three features are evident. First, seeking such assistance is an uncommon event. On average over the eight years, some 3.4 per cent of respondents reported that they sought assistance from a welfare agency. Second, those who did seek assistance from a welfare agency typically also exhibited other behaviour indicative of financial hardship—over 80 per cent of those who received assistance from a welfare agency also reported experiencing one of the other financial hardship indicators. Third, the proportion seeking such assistance has trended down, from 5.1 per cent in 2001 to 2.6 per cent in 2008. This downward pattern in responses from 2001 to 2006 was also described in Wilkins, Warren and Hahn (2009). This pattern of reduced incidence in HILDA may depart from that of the agency data reported in section 4 because it records the proportion of individuals who access emergency relief at least once in a nine- to ten-month period, while the agency data also reflect the intensity of usage (number of visits). Alternatively, HILDA may not capture the emergency relief population well. Research might profitably be directed towards trying to reconcile the divergent trends in the HILDA and agency data. Table 10 also indicates that the proportion of respondents who live in households where someone sought assistance is somewhat higher than the proportion who sought assistance of their own accord.<sup>13</sup>

**Table 10: Proportion indicating they asked for help from welfare/community organisation by year, 2001 to 2008<sup>(a)</sup>**

	Respondent asked			Someone in household asked Total
	Welfare organisation only	with other stress event	Total	
		(per cent)		
2001	0.7	4.4	5.1	8.5
2002	0.5	3.2	3.7	6.0
2003	0.6	3.1	3.7	5.8
2004	0.7	2.5	3.2	5.2
2005	0.5	2.6	3.1	5.3
2006	0.5	2.2	2.8	4.9
2007	0.5	2.2	2.7	4.8
2008	0.4	2.2	2.6	4.5
Average all years	0.6	2.8	3.4	5.6

(a) Based on weighted HILDA data, using all respondents in each year.

Table 11 below confirms a point made earlier—that seeking assistance from a welfare agency is an uncommon event, even among groups most likely to do so. The first three columns of Table 11 provide information for respondents who received government income support payments for at least some time during the previous financial year. The majority of these people, who make up just over one quarter of the population aged 15 or older, report no money-related financial hardship events. Fewer than 10 per cent of them report seeking assistance from a welfare agency. The event is even less common among those who never received a welfare payment in the preceding financial year—the group shown in the last three columns.

**Table 11: Distribution of population and stress events by welfare receipt status, 2001 to 2008<sup>(a)</sup>**

	Government welfare			Not on welfare		
	Welfare organisation	Other stress event	No stress event	Welfare organisation	Other stress event	No stress event
		per cent			per cent	
2001	2.7	6.7	17.3	2.3	16.5	53.7
2002	2.1	6.4	19.7	1.6	14.3	55.5
2003	2.2	5.5	19.7	1.5	13.9	56.4
2004	2.0	4.9	20.0	1.2	13.0	57.9
2005	1.7	4.9	20.5	1.4	12.7	58.4
2006	1.6	4.3	20.2	1.1	12.0	60.3
2007	1.7	4.7	19.3	1.1	12.1	60.8
2008	1.6	3.9	18.7	1.0	10.1	63.9
Average all years	2.0	5.2	19.4	1.4	13.2	58.2

(a) Based on weighted HILDA data, using all respondents in each year.

## 7.2 Characteristics of those who sought assistance

Associations between the activity of seeking assistance from welfare agencies and other factors are shown in Table 12 below for data in HILDA from 2008. The other variables included in Table 12 are like those that are recorded in the data from welfare agencies and described in sections 5 and 6 above. The first column of numbers shows the incidence of approaching a welfare agency for the characteristic named in the left column—being male, in the first row—while the second column shows the incidence of the event in the balance of the population. The third column shows whether the difference between these two numbers is significantly different from zero, with numbers less than 0.05 indicating that the incidence is indeed different between the named characteristics and the balance of the population. The final two columns show the summary statistics (mean and standard deviation) for the relevant characteristics, essentially showing how prevalent the characteristic is in the (weighted) data.

Taken together, the numbers in Table 12 below confirm many of the patterns evident in the data from welfare agencies about the nature of their client base. Males are less likely to report approaching a welfare agency than females, the incidence generally falls with age but is highest among those aged between 25 and 44 years old, does not vary by birthplace, is higher among Indigenous individuals, is higher for lone parents, but lower for couples with children, is more common among people not living in houses they own or are purchasing (especially those living in public housing), and is most common among those whose main source of income is welfare or income support payments. Among this group, the incidence is high among those who received Newstart Allowance at some stage in the previous financial year, or the Disability Support Pension or Parenting Payment. The incidence is lower among some other types of income support recipients, notably those in receipt of the Age Pension.

**Table 12: Incidence of asking welfare agency for help, variables like those collected by welfare agencies, 2008**

	Possess the characteristic	Balance of population	p-value proportions equal	Descriptives mean	sd
<i>Demographic characteristics</i>					
Male	2.1	3.1	0.001	0.49	0.50
Aged 15 to 24	2.9	2.5	0.000	0.17	0.38
Aged 25 to 34	4.5	2.2	0.001	0.17	0.38
Aged 35 to 44	3.0	2.5	0.017	0.19	0.39
Aged 45 to 54	1.7	2.8	0.058	0.18	0.38
Aged 55 to 64	2.4	2.6	0.020	0.14	0.34
Aged 65 or more	1.1	2.9	0.000	0.15	0.36
Australian-born	2.6	2.7	0.141	0.75	0.43
Born overseas, English	3.0	2.6	0.452	0.10	0.30
Born overseas, NESB	2.5	2.6	0.061	0.15	0.36
Indigenous	7.1	2.5	0.000	0.02	0.15
<i>Living arrangements</i>					
Single person	2.9	2.6	0.089	0.12	0.32
Lone parent	7.4	2.1	0.000	0.10	0.30
Couple with children	2.0	3.1	0.003	0.45	0.50
Other living arrangements	1.8	3.0	0.000	0.32	0.47
<i>Housing tenure</i>					
Own or purchasing house	1.1	7.1	0.000	0.74	0.44
Private renter	6.0	1.9	0.000	0.18	0.39
Public housing	14.1	2.1	0.000	0.04	0.20
Living with parents	3.1	2.5	0.131	0.16	0.37
Other housing	5.0	2.5	0.001	0.04	0.19
<i>Income source</i>					
Main income source - wages, business income	1.8	5.5	0.000	0.68	0.46
Main income source - investment income	0.0	2.9	0.006	0.02	0.14
Main income source - superannuation	0.6	2.9	0.028	0.02	0.15
Main income source - government payments	6.6	1.7	0.000	0.27	0.45
<i>Welfare receipt</i>					
Financial year - Newstart recipient	24.0	2.1	0.000	0.03	0.18
Financial year - DSP recipient	10.6	2.3	0.000	0.04	0.20
Financial year - Parenting Payment recipient	12.8	2.3	0.000	0.04	0.20
Financial year - respondent welfare recipient	6.5	1.4	0.000	0.27	0.44
Financial year - household contains recipient	5.2	1.2	0.000	0.38	0.48

In Table 13 below, we find that data available in HILDA, but not from welfare agencies, round out this picture somewhat. From information in this table, it appears that the incidence of approaching welfare agencies falls with education, is less common among full-time workers, and is more prevalent among those whose self-assessed health is poorer or has deteriorated over the previous twelve months. This result is also evident in Table 14 which shows the mean values of a set of continuous variables according to whether individuals reported approaching welfare agencies. Once more, the average health levels of those who did approach welfare agencies were lower for all scales than for those who did not approach welfare agencies. Those who sought assistance from welfare agencies had much lower levels of personal and household income, lived in more disadvantaged areas, worked fewer hours if they worked, and worked in lower status jobs.

**Table 13: Incidence of asking welfare agency for help, additional HILDA variables, 2008**

	<b>Possess the characteristic</b>	<b>Balance of population</b>	<b>p-value proportions equal</b>	<b>Descriptives</b>	
				<b>mean</b>	<b>sd</b>
Indigenous	7.1	2.5	0.000	0.02	0.15
<i>Education</i>					
Post-graduate qualification	1.2	2.8	0.000	0.07	0.26
Degree	1.2	2.8	0.000	0.12	0.33
Year 12 & post-school qual	2.1	2.7	0.185	0.11	0.31
Year 12 but no post-school qual	1.9	2.8	0.156	0.16	0.37
No Year 12 but post-school qual	4.1	2.3	0.012	0.18	0.39
No Year 12 & no post-school qual	3.3	2.3	0.000	0.36	0.48
<i>Employment</i>					
Employed full-time	1.1	3.8	0.000	0.43	0.49
Employed part-time	2.5	2.7	0.377	0.20	0.40
<i>Health</i>					
Long-term health condition	4.7	1.9	0.000	0.26	0.44
Excellent health	1.3	2.8	0.001	0.12	0.32
Very good health	1.3	3.3	0.000	0.34	0.48
Good health	2.1	2.9	0.029	0.35	0.48
Fair health	6.0	2.0	0.000	0.14	0.35
Poor health	11.7	2.3	0.000	0.03	0.18
Health change - much better than a year ago	3.3	2.6	0.020	0.05	0.22
Health change - better than a year ago	2.5	2.6	0.133	0.12	0.33
Health change - same as a year ago	1.9	4.2	0.000	0.68	0.47
Health change - worse than a year ago	5.0	2.2	0.000	0.12	0.33
Health change - much worse than a year ago	15.7	2.4	0.000	0.01	0.12

**Table 14: Means of continuous variables by whether asked welfare agency for help, 2008**

	<b>Asked welfare organisation</b>	<b>Did not ask welfare organisation</b>
<i>Income (\$'000)</i>		
Person's financial year income	17.5	30.8
Household's financial year income	22.0	38.6
Equivalised household financial year disposable income	24.2	38.4
<i>Regional SES (scale 1 - 10)</i>		
SEIFA 2001 Decile of Index of relative socio-economic disadvantage	4.6	5.7
SEIFA 2001 Decile of Index of education and occupation	4.8	5.7
<i>Health measures (scale 0 -100)</i>		
SF-36 physical functioning	72.0	81.3
SF-36 role-physical	59.0	77.5
SF-36 bodily pain	60.2	73.1
SF-36 general health	54.7	67.4
SF-36 vitality	47.9	60.2
SF-36 social functioning	61.3	82.4
SF-36 role-emotional	55.3	81.4
SF-36 mental health	59.3	73.7
<i>Employment</i>		
Hours worked in all jobs	31.8	37.1
Hours worked in main job	30.8	36.3
Occupational SES status (scale 0-100)	36.4	47.7

The last table in this section (Table 15) makes use of reports of ‘life events’ that occurred to respondents over the previous twelve months to assess the extent to which these events might have been associated with the incidence of approaching welfare agencies. While not comparable to the ‘presenting issues’ discussed earlier, these data fill out the picture to some extent by suggesting some of the life events that might contribute to the financial crises that lead to people seeking emergency relief. The life events include losing a job, becoming separated from a spouse, and having an adverse income or wealth shock (reporting a ‘major worsening in finances’). These results are reported in Table 15 below. Not surprisingly, many of these events are indeed associated with approaching a welfare agency for assistance, most notably among the group reporting a major worsening in finances. Individuals who report being made redundant and those who separate from a spouse report high rates of approaching welfare agencies.

**Table 15: Incidence of asking welfare agency for help, life events over the past year, 2008**

	Possess the characteristic	Balance of population	<i>p-value</i> proportions equal	Descriptives mean	Descriptives sd
Past year					
Fired or made redundant	8.9	2.3	0.000	0.03	0.17
Retired	7.1	2.5	0.124	0.03	0.16
Changed jobs	5.5	2.2	0.000	0.13	0.34
Got married	2.1	2.6	0.470	0.03	0.16
Separated	9.5	2.4	0.000	0.04	0.19
Got back together with spouse	6.4	2.6	0.000	0.01	0.10
Birth/adoption of new child	3.9	2.6	0.017	0.03	0.18
Pregnancy	4.3	2.5	0.020	0.05	0.21
Major improvement in finances	1.0	2.7	0.067	0.03	0.17
Major worsening in finances	16.4	2.1	0.000	0.03	0.17
Changed residence	5.2	2.2	0.000	0.14	0.35

## 8 What assistance is provided?

This section examines trends in the provision of emergency relief over the period 2007–2010. Section 4 contained an analysis of trends in aggregate assistance provided. In this section, we consider trends over time in specific types of assistance provided by the welfare agencies studied here. For instance, did more people seek assistance for help in paying bills after the onset of the GFC? Information pertaining to this issue is presented separately for each dataset. This is necessary because the ways in which different types of assistance (for example, material, financial, counselling) are defined differ substantially across the three datasets. For this reason it is not appropriate to make direct comparisons between agencies in specific types of assistance provided. However, it is possible to identify more general patterns and trends, and we do this at the conclusion of the section.

### 8.1 Trends in different types of assistance

#### Defining different types of assistance

Emergency relief encompasses a wide range of material, financial, and non-financial forms of assistance. Different agencies define and record information about the assistance they provide differently, depending upon agency and client needs. The three datasets differ substantially in the amount and specificity of information that is available about broad classes of assistance, and for this reason it was not possible to create categories of assistance that were completely consistent across datasets. To address this problem, five categories of assistance were defined based on the more detailed information available from Anglicare and the Salvation Army: food, financial, material, Christmas, and non-financial. These categories are broadly similar, but the specific types of assistance within each were allowed to differ depending on the structure of each dataset.

Table 16 below shows the forms of assistance that fall into each broad category for Anglicare and the Salvation Army. A few points should be noted:

*Christmas Cheer, the Salvation Army:* ‘Christmas Cheer is a specific budget item to fund the delivery of financial and material assistance to clients in need over specific day/s in December and before Christmas’ (SAMIS User Guide, THQ Social Programme Department, 2007). This means that financial, food and other material assistance that would be classified as such at other times of year is likely to fall into the ‘Christmas Cheer’ category at this time. In this report, Christmas Cheer items that could be identified as food cards/vouchers and food parcels/meals were moved into the ‘food’ category, and utilities vouchers into the ‘financial’ category. Other Christmas Cheer items such as children’s toys and vouchers for stores like K-Mart were retained within the Christmas category.

*Cheques to creditors, Anglicare:* Cheques to creditors are an assistance item that ‘typically covers large one-off expenses such as a rental bond, shortfalls in rental payments, household goods, funeral expenses, and green slips’ (Swann et al., 2009, p. 10).

**Table 16: Types of assistance, Anglicare and the Salvation Army**

Anglicare		The Salvation Army	
Category	Examples	Category	Examples
<b>Food</b>			
Food-in-kind		Food parcels and meals	
Food cards/vouchers		Food cards/vouchers	e.g. supermarket
<b>Material</b>			
-	-	Material (in kind)	Clothing, blankets, nappies, toys, household goods
<b>Christmas</b>			
Christmas	Child toys, hampers	Christmas Cheer	Child toys, material assistance nec
<b>Financial</b>			
Utilities vouchers	EAPA, PAS, and Telstra vouchers <sup>(a)</sup>	Utilities voucher	Water, gas and electricity, telephone
Cheque to creditor		Cheque	Costs of education, petrol and car costs, rent, rates and medical items
Other financial	Opshop vouchers, vouchers nec, cash	Other financial	Opshop vouchers, vouchers nec, transport, cash
<b>Non-financial assistance</b>			
Advocacy on behalf of client		Advocacy	Liaise with utilities providers, Centrelink
Information	Help filling in forms, other information	Information & advice	Help with forms and applications, e.g. tax returns, loan applications
-	-	Counselling	Financial counselling, emotional support, relationships
Other non-financial assistance	Budgeting assistance, spiritual	Other non-financial assistance	Disaster relief, migrant support, spiritual

(a) EAPA: Energy Accounts Payment Assistance: \$30 vouchers distributed by the Electricity and Water Ombudsman NSW (EWON) to welfare agencies to help clients pay gas and electricity bills; PAS: Payment Assistance Scheme: \$25 vouchers distributed by EWON to agencies to help clients pay water bills

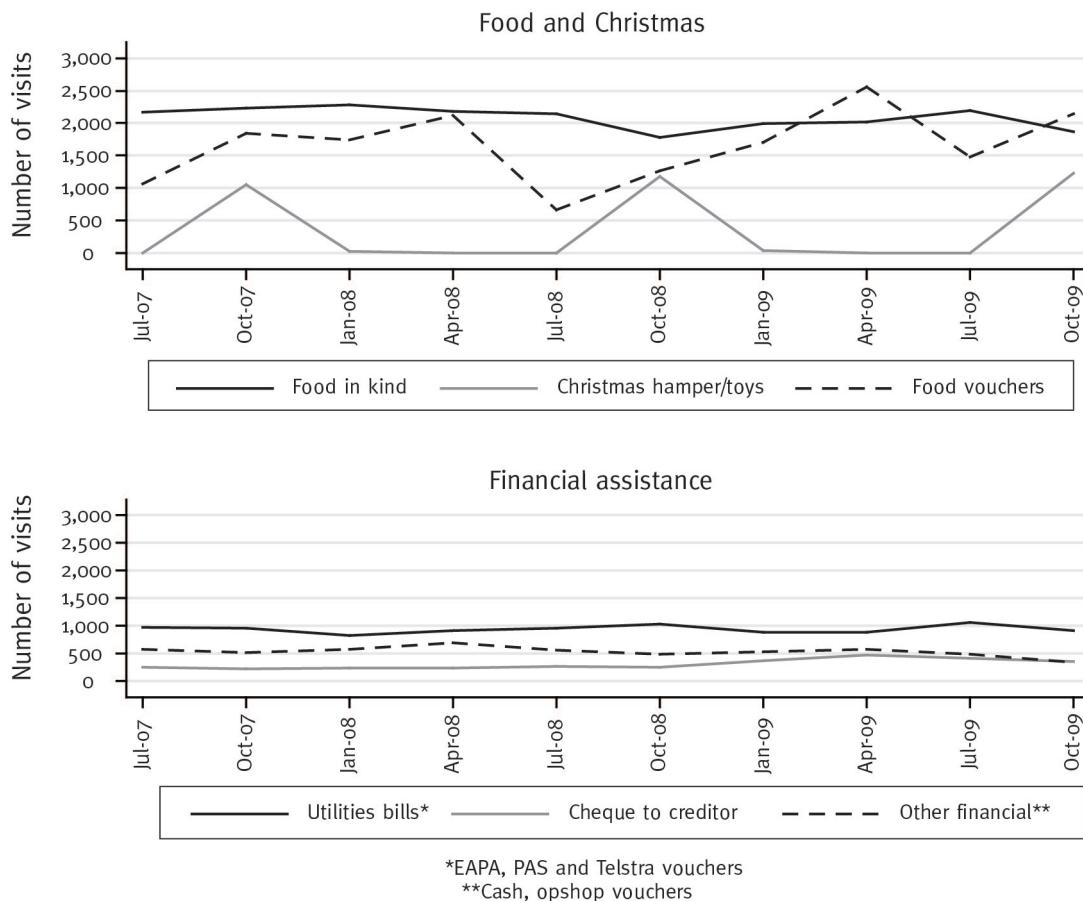
Due to the structure of the data, assistance types for St Vincent de Paul could not be fitted into the categories defined for Anglicare and the Salvation Army. Table 17 below shows the categories that were used. Items falling into 'Other assistance' were grouped together because, individually, each occurred very infrequently.

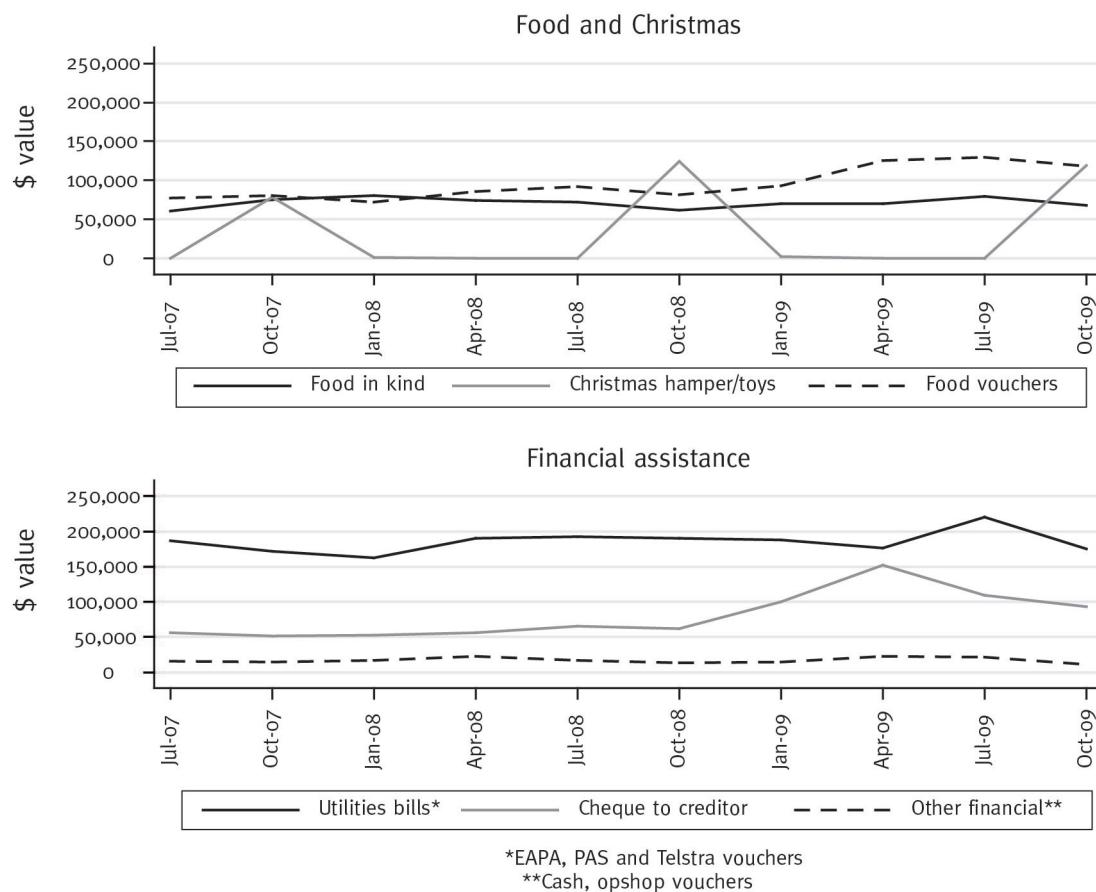
**Table 17: Categories of assistance, St Vincent de Paul****St Vincent de Paul**

Food-in-kind	Purchased food Donated food
Food vouchers	
Utilities	
Other forms of assistance	Transport Cash Pharmaceutical Education Whitegoods Accommodation

**Anglicare**

Patterns in the provision of different sorts of material and financial assistance for Anglicare, for each of the ten quarters from July 2007–December 2009, are presented in Figures 19 and 20 below. Figure 19 shows the number of visits in each quarter for which each type of assistance was provided, and Figure 20 shows the total value of each type of assistance in each quarter. The first point to note is that material assistance (food, food vouchers, and Christmas hampers/toys in the season) is most frequently provided by emergency relief centres. On average, food-in-kind was provided in 50 per cent of visits (in which clients were assisted), and food cards/vouchers at 40 per cent. Both were provided in 18 per cent of visits. In contrast, clients were provided with vouchers to assist with utilities bills in 22 per cent of cases over this period, cheques to creditors in 7 per cent of visits, and other forms of financial assistance (e.g. cash, opshop vouchers) in 13 per cent of visits. Note that these percentages do not sum to 100 per cent of visits, as clients may receive more than one type of assistance per visit.

**Figure 19: Types of material and financial assistance provided, Anglicare**

**Figure 20: Value of material and financial assistance provided, Anglicare**

We consider first patterns for assistance types involving food vouchers and food, shown in the upper panels of Figures 19 and 20 above. Figure 19 illustrates a seasonal pattern in the provision of food cards and vouchers, characterised by a low point in the July to September quarter, followed by a rise in the fourth quarter until the second quarter (April–June) of the following year. Given this established pattern, it is clear from Figure 19 that the number of people in need of food vouchers increased to a much greater extent in the three quarters from July 2008 to April 2009 than from July 2007 to April 2008. Specifically, the number of visits at which food vouchers were provided doubled between July 2007 and April 2008, but more than tripled between July 2008 and April 2009. This pattern is reflected in the value of assistance for food cards/vouchers. Figure 20 shows that the value of this type of assistance rose from the fourth quarter of 2008 to peak in the third quarter of 2009, a much greater increase in visits compared with the same period in the previous year. The number of food voucher visits rose by 15 per cent between July–September 2007 and October–December 2008, but by 60 per cent between July–September 2008 and October–December 2009.

In contrast to the observed increase for food vouchers, the provision of food-in-kind was steady over the period. The number of visits at which food was provided was much the same, or even slightly lower, in 2009 than in 2008, and the value of this assistance also remained mostly steady from 2007 to 2009.

Turning to financial assistance, the lower panels of Figures 19 and 20 show that these forms of assistance began to increase from mid-2008 and continued to rise during the first half of 2009. The clearest increases were observed for vouchers to assist with utilities bills and cheques to creditors. This is reflected in both the numbers of visits at which these types of assistance were provided, and in the changing value of assistance over the 30-month period. Features of the increase in utilities vouchers include:

- a 10 per cent rise in the number of visits at which clients were assisted with utilities bills in the annual peak

period of need (July–September, when electricity and gas bills are larger, possibly due to increased heating bills during winter) between 2008 and 2009 (Figure 19)

- a 13 per cent rise in the value of utilities assistance provided between the first and second quarters of 2008, remaining steady at this higher level throughout 2008, and rising sharply during the third quarter of 2009.

While cheques to creditors accounted for a relatively small proportion of overall assistance, demand increased from the second half of 2008:

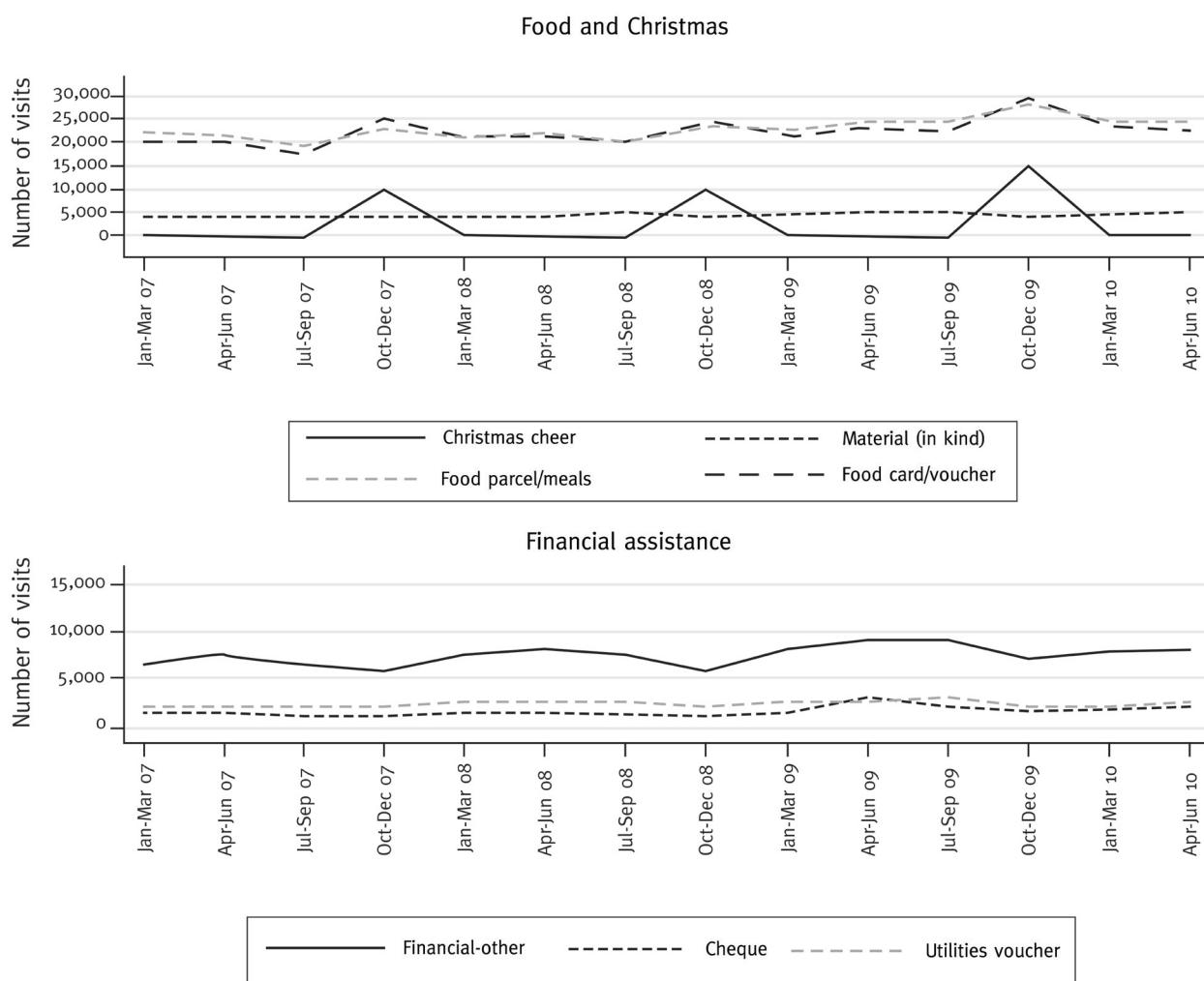
- The number of visits at which cheques were provided peaked during the second and third quarters of 2009: there were almost twice as many such visits during April–June 2009 than during April–June 2008.
- The quarterly value of cheques increased substantially in the fourth quarter of 2008 and the first two quarters of 2009. For example, the total value of cheques increased by 147 per cent between October–December 2008 and April–June 2009.
- The quarterly value of cheques rose relative to the quarterly number of visits at which cheques were provided, especially in the first two quarters of 2009. The average cheque value during April–June 2009 was \$35 compared to \$14 during April–June 2008.

Finally, the provision of other forms of financial aid, such as Opshop vouchers and cash, demonstrates small fluctuations in both number of visits and the value of assistance over the period, but unlike utilities vouchers and cheques, no clear increase occurred during 2008 and 2009.

To summarise, the Anglicare data show that the provision of food vouchers, utilities vouchers, and cheques to creditors changed the most between 2007 and 2010. As noted, these trends have already been reported by Anglicare (Swann et al., 2009) up until the end of July 2009. The additional five months of data used here is not sufficient to adequately address the question of whether the increase is continuing, or whether demand for emergency relief is falling as the economy improves.

### **The Salvation Army**

Figure 21 below illustrates the provision of financial and material assistance in each quarter from January 2007 to June 2010 in the Salvation Army Southern Territory. As information on the value of assistance was not available, Figure 21 shows the number of visits at which different types of assistance were provided, summed across emergency relief centres. As before, the upper panel shows patterns for assistance that was mainly material in nature, including food and Christmas-related, and the lower panel shows patterns for assistance that was mainly financial in nature. Once again, note that the number of visits for each type of assistance do not sum to 100 per cent of visits, as clients typically received more than one type of assistance per visit. As was apparent in the Anglicare data, material assistance (food, food vouchers, and Christmas Cheer in the fourth quarter of each year) was most frequently provided by Salvation Army emergency relief centres. On average, 60 per cent of visits involved the provision of either food or food cards/vouchers, and both were provided in 36 per cent of visits. Other forms of material assistance (e.g. blankets, clothing, household goods) were received in 12 per cent of visits and, of these, one-third also received food or a food voucher. Some form of financial assistance was provided in 28 per cent of visits over this period. Of these, a utilities voucher was provided at 20 per cent of visits (making up only 6 per cent of overall visits) and 15 per cent (or 4 per cent of all visits) involved a cheque to address costs associated with education, motor vehicles, etc (see Table 16). The remaining instances of financial assistance occurred in 20 per cent of total visits, and included a wide range of minor forms of assistance such as cash, opshop vouchers, and other non-specified vouchers.

**Figure 21: Types of material and financial assistance provided, the Salvation Army**

All types of assistance began to increase during 2008 and reached their peak during 2009. Looking first at food and material assistance in the upper panel of Figure 21, it can be seen that:

- The provision of food and food cards/vouchers rose steadily from the end of 2008, with the highest levels reached in the fourth quarter of 2009. For instance, the number of visits at which food vouchers were provided rose by 23 per cent and 17 per cent across 2007 and 2009 respectively, but by 40 per cent between January and December 2009.
- Material assistance (non-food) visits peaked in the second and third quarters of 2009. Specifically, there were 18 per cent more visits at which clients received material assistance in the period April–June 2009 than in April–June 2008.

Financial forms of assistance also peaked in the second and third quarters of 2009:

- The highest numbers of utilities vouchers were provided during the second and third quarters of 2009, with these numbers 10 to 15 per cent higher than in the second and third quarters of 2008.
- The number of visits at which cheques were provided more than doubled between the second quarter of 2008 and the second quarter of 2009.
- Other forms of financial assistance (cards and vouchers, cash, transport, etc.) reached their highest levels in the first half of 2009. Figure 21 shows a seasonal pattern in the provision of these forms of assistance,

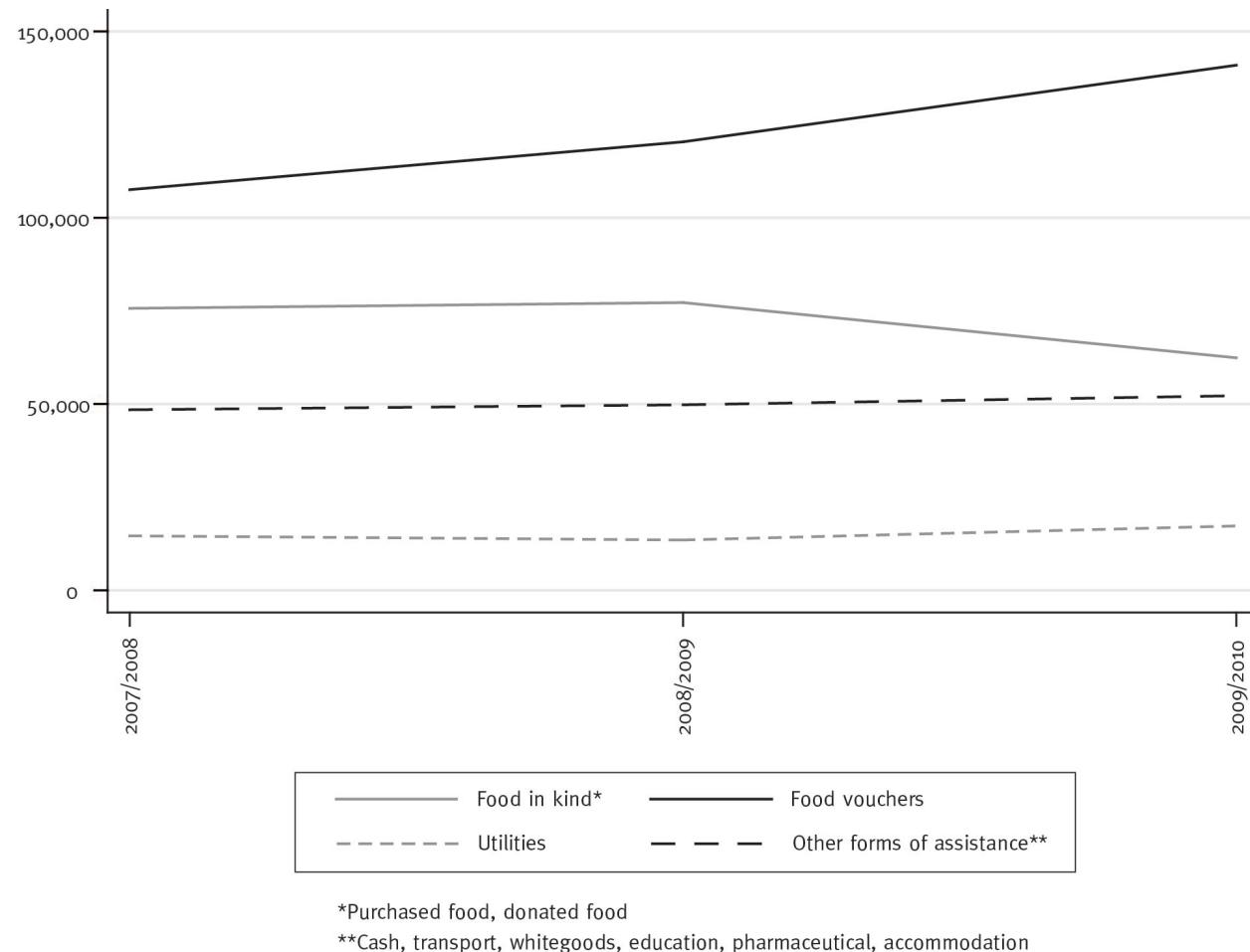
characterised by a drop in the fourth quarter of each year (presumably due to some assistance shifting to Christmas Cheer), and then a rise until the third quarter of the following year. Over the period from the fourth quarter of 2007 to the third quarter of 2008, this seasonal rise was 26 per cent compared with a 53 per cent increase over the corresponding period in 2008–2009.

The availability of complete data for the first six months of 2010 allows us to consider whether emergency relief provision is continuing at higher levels. Figure 21 suggests that, although the provision of financial and material assistance remained above early 2007 levels, numbers of visits either dropped or levelled out across most assistance types during the first half of 2010. A drop in visits is most apparent for food parcels and food vouchers. Both types dropped a little between the fourth and first quarters in 2007–2008 and 2008–2009, to rise again by the second quarter in these years. Although a similar drop is observed between the first and fourth quarters of 2009–2010, visits continued to fall in the second quarter, in contrast to previous years. The pattern for material assistance (upper panel of Figure 21) and financial assistance (lower panel) is one of remaining steady or levelling out in the first half of 2010. However, this is in comparison to marked increases over the same period in 2008 and 2009. For instance, the number of visits at which general financial assistance was provided rose by 40 per cent between October 2007 and April 2008, and by 50 per cent between October 2008 and April 2009. In 2009–2010, however, visits increased by only 12 per cent. Similarly, the number of visits involving cheques more than doubled between October 2008 and April 2009, but remained steady over the same period of 2009–2010. Overall, the available data suggests that, although the provision of financial and material aid has not returned to pre-2008 levels, it did not increase in the early months of 2010. However, several more quarters of data will be needed to clearly establish whether this actually indicates a pattern of decline in the provision of emergency relief, or simply temporary fluctuation.

### **St Vincent de Paul**

Figure 22 below shows the value of four categories of material/financial assistance—food-in-kind, food vouchers, assistance with utilities bills, and other forms of assistance—provided by St Vincent de Paul emergency relief centres in Victoria for the financial years July 2007–June 2008, July 2008–June 2009, and July 2009–June 2010. Data for number of visits associated with specific assistance items was not available.

**Figure 22: Value of different types of material and financial assistance, averaged over regions, St Vincent de Paul**



The greatest amount of resources was directed towards the provision of food vouchers and food-in-kind. On average, food-in-kind and food vouchers accounted for 75 per cent of the total value of assistance in each year, with 60 per cent of this attributable to food vouchers and 40 per cent to food-in-kind. Utilities assistance was the largest category of non-food assistance (6 per cent of the total value). Other forms of assistance (including cash, transport costs, whitegoods, education costs, and accommodation costs) accounted for 19 per cent of the total value. Of these, transport and accommodation had the largest values, each accounting for about 4 per cent of total assistance.

Although these data are presented at the yearly level, there is nonetheless a clear increase in the provision of food vouchers from 2007 to 2009. The value of food vouchers was 12 per cent higher in the financial year 2008–2009 than in 2007–2008, and the value rose by a further 17 per cent of 2008–2009 levels during 2009–2010. Food-in-kind, in contrast, increased only slightly between 2007–2008 and 2008–2009, and actually fell by 19 per cent by 2009–2010.

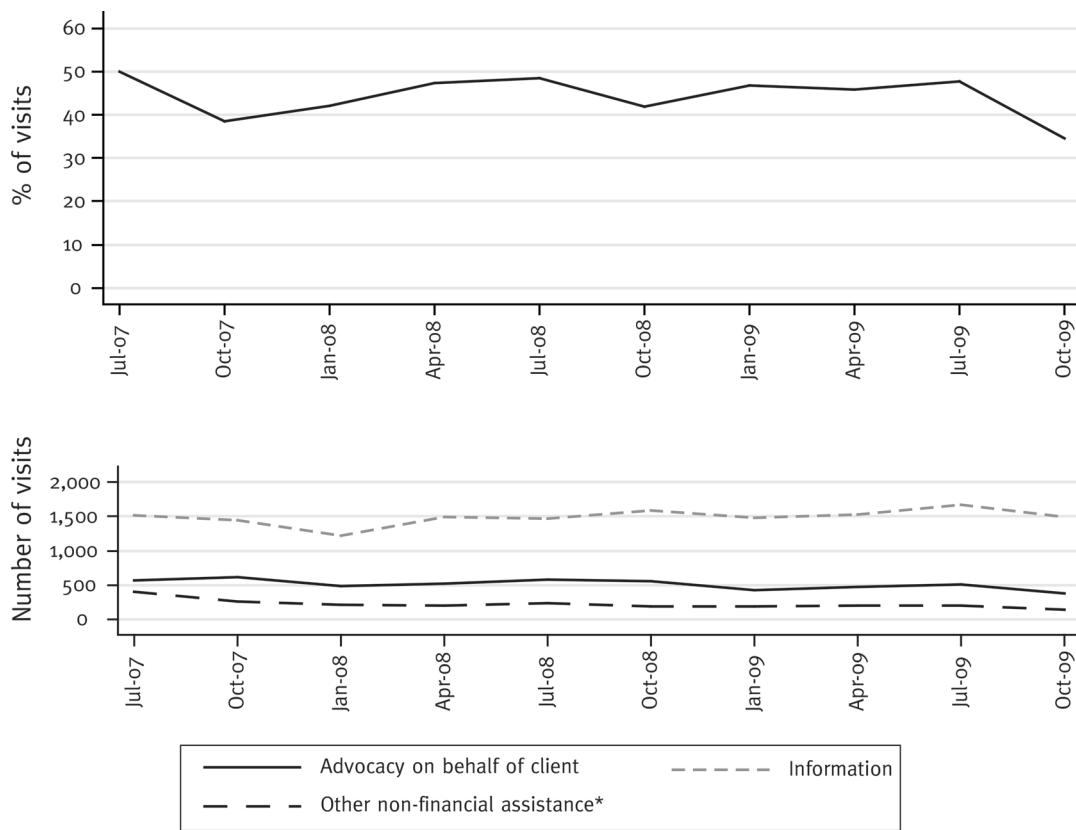
The clearest increase in financial assistance is apparent for utilities costs. Interestingly, the increase occurred later than the rise in food voucher value. The utilities value for 2008–2009 was 7 per cent lower than the previous year's value, but the value across 2009–2010 was 29 per cent higher than that recorded during 2008–2009. Finally, the value of other forms of assistance increased by a more modest 2 per cent from 2007–2008 to 2008–2009, and 5 per cent from 2008–2009 to 2009–2010.

### Non-financial assistance

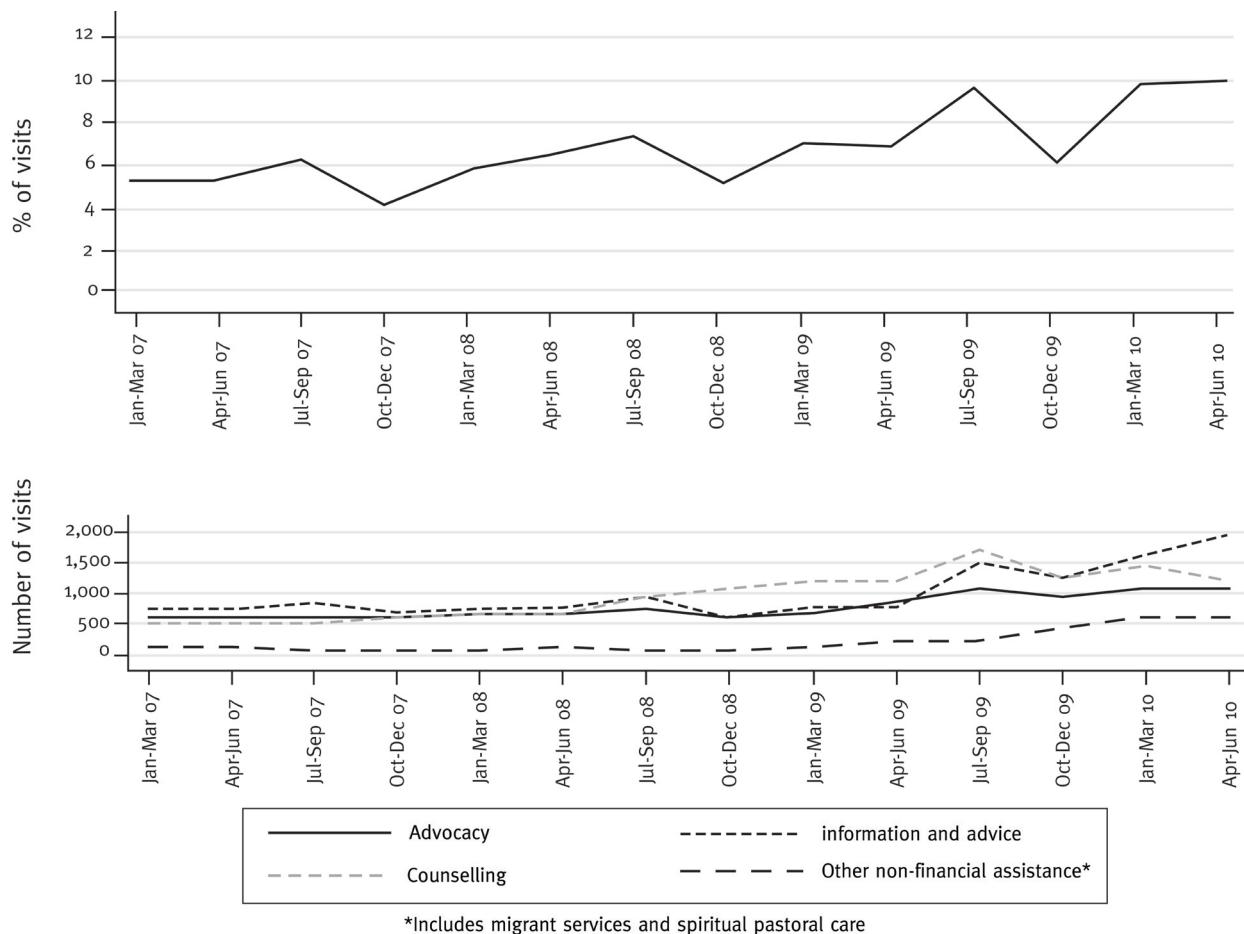
The Salvation Army and Anglicare data include information on support offered to clients in addition to material and financial assistance. This support takes a variety of forms (refer to Table 16), and includes information and advice on accessing other services, help with tasks like loan applications and tax returns, financial and relationship counselling, and advocacy on behalf of clients to other organisations like government departments and utilities providers. These agencies also refer clients to other organisations and services, but we discuss these patterns separately in section 5 below.

Figure 23 below shows the provision of non-financial assistance for Anglicare, and Figure 24 for the Salvation Army. In each figure, the upper panel shows all types of non-financial assistance as a percentage of total visits in each quarter, and the lower panel shows the number of visits at which specific types of non-financial assistance were provided.

**Figure 23: Types of non-financial assistance provided, Anglicare**



\*Budgeting assistance, contract for further assistance, spiritual

**Figure 24:** Types of non-financial assistance provided, the Salvation Army

Beginning with Anglicare, Figure 23 shows that non-financial assistance was provided in 40 to 50 per cent of visits over the period. At these visits, the majority of clients were provided with information. There is a peak in overall assistance in the third quarter of each year, which is consistent with an increased burden of bills during the winter months. However, there is no clear indication of an increase in the provision of non-financial assistance between 2007 and the end of 2009.

The Salvation Army data differs in several ways. First, non-financial assistance accounts for a much lower percentage of overall visits. There may be many reasons for this—for example, differences in the availability of staff with training to provide services like counselling across emergency relief centres, different pathways of referral, and different ways of recording visit data. Second, it shows an increase in non-financial assistance during 2008 and 2009:

- Provision of non-financial assistance increased from around 6 per cent of total quarterly visits during 2007 and much of 2008 to 10 per cent by the end of 2009. This suggests that not only were more clients accessing services, but that the proportion of these receiving non-financial assistance increased.
- The number of visits at which clients received some counselling increased the most, by 82 per cent between July–September 2008 and July–September 2009. Information and advocacy increased by 50 per cent and 65 per cent respectively over the same period.

- Overall provision of non-financial assistance continued to rise in the first two quarters of 2010.

Although patterns for the two agencies do not agree with each other, they nonetheless give some indication of the multiple forms of assistance that those in financial crisis require, and that this need remained at least constant and possibly increased between 2007 and 2010.

## 8.2 Summary

The three datasets used differ substantially in many respects, including the region of Australia, the period covered by the data, the data recording practices, the definitions of assistance, and the degree of specificity in terms of information about the provision of assistance. Despite these differences, several broad conclusions may be drawn about changes in emergency relief provided to those in financial crisis from 2007 to mid-2010:

- There were increases in the number of people assisted, and in the value of this assistance, between 2007 and 2009.
- The main increase occurred from mid-2008 to the end of 2009. This appears consistent with Swann et al.'s (2009) observation of a lag between the onset of the GFC and the increase in demand for emergency relief. It could also reflect increased FaHCSIA funding over this period.
- The types of assistance that changed the most were food vouchers, assistance with utilities bills, and the provision of cheques to assist with a range of major and minor expenses that become unmanageable for individuals in financial crisis.
- The provision of relief remained above 2007 levels in the first two quarters of 2010. However, based on the limited 2010 data available, it is possible that these trends are beginning to decrease or are at least levelling out in the first half of 2010. Data for at least three to four additional quarters would be required to confirm any decline.

## 9 Pathways of referral to and from emergency relief services

Emergency relief providers operate as part of a network of multiple government and non-government organisations, and clients may be referred to emergency relief services from these organisations, or emergency relief providers may direct clients to services offered by other organisations. Tables 18 and 19 below summarise information on sources and destinations of client referral over the whole time period, separately for each dataset. Referral sources are shown in relation to all visits recorded in the relevant dataset. However, very few visits include information on referrals to other services or organisations. Over the entire periods covered by the Anglicare and Salvation Army datasets, clients were referred elsewhere in 10 per cent of Anglicare visits, and in less than 3 per cent of Salvation Army visits. Thus, referral destinations are shown both as percentages of the total number of visits in which a client was referred, as well as percentages of total visits.

**Table 18: Sources and major destinations of referral, Anglicare, July 2007–December 2010**

Referral source	Major referral destinations		% of total referrals	% of total visits
	% of total visits			
Self	81.6	Total visits in which client referred	10.3	
Family/Friends	4.7	Other emergency relief provider	56.0	5.8
Centrelink	3.7	Energy provider customer service	16.8	1.7
Other welfare/Emergency relief provider	2.2	Centrelink	14.2	1.5
Anglicare services	1.3	Accommodation service	8.4	0.9
Other non-government organisation	1.1	Other Anglicare service	7.3	0.8
Department of Housing	0.7			
Other	2.6			
<i>Missing</i>	2.1			
<b>Total</b>	<b>100</b>			

**Table 19: Sources and major destinations of referral, the Salvation Army, July 2007–Dec 2010**

Referral source	Major referral destinations		% of total referrals	% of total visits
	% of total visits			
Self	73.3	Total visits in which client referred	2.4	
Centrelink	3.9	Other Salvation Army service	35.5	0.8
Other government organisation	3.9	Counselling	16.2	0.4
Other non-government organisation	3.8	Other community organisation	11.3	0.3
Family/Friends	3.5	Accommodation service	8.3	0.2
Salvation Army services	2.9	Other emergency relief provider	3.1	0.07
		Other	21.0	0.5
<i>Missing</i>	9.9			
<b>Total</b>	<b>100</b>			

## 9.1 Sources of referral

As individuals access emergency relief services in times of financial crisis, the vast majority of visits are self-referred. Self-referrals, or visiting on the advice of family or friends, accounted for at least 80 per cent of visits in the datasets examined. However, a small proportion of clients visit on referral from other government and non-government organisations. Of note is that the largest source of non-self/family referrals in both datasets is Centrelink, just under 4 per cent of total visits for each agency.

Little information was available for referrals from government organisations other than Centrelink. For those that were specified, the majority in both datasets were from departments relating to accommodation and housing, although it should be noted that these referrals comprised less than 1 per cent of all visits.

Providers also received clients from a wide range of non-government organisations, including other welfare agencies, utilities providers, health services, schools, police, and telephone counselling services. However, these external referrals represent a relatively small proportion of total visits (less than 5 per cent) for both agencies. Finally, a small percentage of clients were referred from other services offered by the wider agency such as Opshops, employment services, and individual caseworkers.

## 9.2 Referral destinations

As noted above, referrals from emergency relief to other services and organisations seemed to be made in only a small proportion of overall visits. This percentage is shown in the top row of the right-hand column in Tables 18 and 19. The remaining rows in the right hand column show the most frequently recorded referral destinations, both as percentages of total referrals, and as percentages of total visits. The major referral destinations differ between agencies due to different organisational procedures, client needs, and data recording practices. However, it is apparent that emergency relief providers direct clients to a similar range of organisations from which they also receive referrals, including Centrelink, other welfare agencies, accommodation services, and utilities providers.

More than half of client referrals for Anglicare were to other emergency relief providers. This equates to 5.8 per cent of total visits over the period. There could be many different reasons why a provider would send service users to another emergency relief provider, but it is beyond the scope of the present analysis to investigate them further. However, it should be noted that these referrals do not necessarily reflect client turnaways or unmet

need for assistance, since the dataset only includes cases in which assistance was provided. Moreover, clients who were referred to other emergency relief providers were no less likely to have also received financial and/or material assistance than clients who were not referred to other emergency relief providers. They were, however, much more likely to have received non-financial forms of assistance, especially information and advice.

The greatest proportion of client referrals for the Salvation Army was to other services offered by the organisation, such as drug and alcohol, mental health, and employment programs and services. The next most frequent referral destinations were non-Salvation Army counselling services, other community organisations (not further specified), and non-Salvation Army accommodation services. Very few clients (less than 0.5 per cent) were directed to other emergency relief providers.

## 10 Conclusion

This report set out to describe trends in the provision of emergency relief between 2007 and 2010, using data collected from emergency relief operated by Anglicare Sydney, the Salvation Army Southern Territory, and St Vincent de Paul Victoria. These data allowed us to describe the demographic characteristics of all people assisted by these agencies over this period, the reasons for seeking assistance, the types and amount of assistance provided, and the various pathways of referral to and from emergency relief services. The main focus of our analyses was on examining whether and how these aspects of emergency relief provision changed between 2007 and 2010.

Our findings regarding client characteristics and needs, as well as the sorts of assistance provided, are strongly in line with previous surveys of emergency relief clients and agencies. Lone parents (especially women) and single people without children (especially men) between the ages of 25 and 44 formed the majority of emergency relief recipients. The vast majority were reliant on government payments, mostly Newstart, the Parenting Payment, or the Disability Support Pension. Most clients were living in rented accommodation and rates of home purchasing/ownership were low. Although reasons for seeking emergency relief were defined and measured differently in the datasets used, the vast majority of visits were associated with some sort of unmanageable financial difficulty, such as difficulty managing finances, unexpected or extraordinary expenses, or debt. Information about the costs that contributed to these circumstances was not available, but the literature shows that people seek assistance because of an inability to meet basic financial commitments like paying utilities bills, rent, and buying food. Finally, although the data did not include comprehensive information about life circumstances, significant proportions of clients cited difficulties with physical and mental health, substance use, and family relationships as factors contributing to the need to seek emergency relief.

While these patterns have been reported in many other surveys of emergency relief, we were able to complement the findings by using nationally representative data from the HILDA survey to examine the incidence of seeking assistance from welfare agencies in the context of the broader population. This analysis confirmed the characteristics of emergency relief clients that were evident in the Anglicare and Salvation Army data. For instance, seeking assistance from a welfare agency was more common for women, Indigenous people, lone parents, and those living in rented accommodation. Rounding this out, the HILDA data also showed that those who sought assistance were in poorer health, had less education, lived in more disadvantaged areas, and had low incomes. Finally, respondents who approached welfare agencies were also likely to report adverse life events in the previous 12 months, including job loss and separation from a spouse. Taking these findings from HILDA together with those from the Anglicare and Salvation Army data, the overall picture that emerges is of a client base experiencing chronic financial hardship and periods of financial crisis when there may be insufficient money for basic necessities like food. Moreover, many clients experience complex social and health difficulties that both contribute to and further exacerbate social exclusion and ongoing financial hardship.

Recent surveys suggest that the incidence of financial hardship in the general population has increased since the onset of the global financial crisis in 2008 (FaHCSIA, 2010; Wesley Mission, 2010). The longitudinal nature of the three datasets used in this report permitted an early examination of whether the impact of the GFC was reflected in an increase in the provision of emergency relief, and/or a change in client base. Several interesting patterns emerged. However, given the recency of the GFC, these findings should be regarded as preliminary.

First, the data confirmed the presence, discussed in the literature (Engels et al., 2009; Flanagan, 2009), of seasonal variations in emergency relief that are independent of the broader economic climate. The Anglicare and Salvation Army datasets showed clear increases in assistance provided over the Christmas period, much of which may be attributable to Christmas food hampers distributed to families in need at this time. There was some indication, particularly in the Salvation Army data, of increases in non-food forms of financial assistance between April and September, which may reflect higher energy bills during the winter months. The segments of the emergency relief client base receiving assistance also varied seasonally: families with children were more likely to be provided with assistance over the Christmas period, and single people receiving Newstart less likely at this time.

Second, there were increases in the amount of assistance provided, and in the number of people seeking assistance, from mid-2008 to the end of 2009. This pattern was observed in all three datasets. Increases were most apparent for food vouchers, assistance with utilities bills, and cheques. However, it is important to note that the trends we report in the provision of assistance do not reflect the total need for assistance. This is because many emergency relief centres report having to turn people away due to the limited availability of funding and staff (King et al., 2009). If, for instance, agencies were already operating at capacity in 2007 before the economic downturn, increase in demand for a particular type of assistance would not be reflected in an increase in provision, unless additional funding became available. Thus, the trends reported provide only a partial picture of the demand for emergency relief.

Third, there were slight increases from late 2008 to early 2009 in the percentage of a) clients who cited unexpected or extraordinary expenses as their main reason for seeking emergency relief, and b) clients who cited unemployment as a reason for seeking relief. The latter was most apparent in the Anglicare data. However, these patterns are not particularly informative because people who seek emergency relief almost always do so because of financial crisis, regardless of the economic climate. Without information about the main costs contributing to financial crisis, it is impossible to determine the areas in which the GFC caused most difficulties for households experiencing financial stress.

Finally, the data do not support any significant shift in the demographic profile of emergency relief clients between 2007 and 2010. The characteristics of the emergency relief clients examined here (in terms of age, sex, family composition, housing and income) remained stable between 2007 and 2010. This suggests that increases in the provision of emergency relief were not directed towards 'new' segments of the population who would not generally seek emergency relief. Rather, it seems likely that the economic downturn contributed to worsened conditions for groups who were already disadvantaged.

It was fortunate that this report could draw on rich datasets that provided a great deal of information about the provision of emergency relief in some parts of Australia between 2007 and 2010. However, much remains to be understood about longitudinal patterns of demand for and provision of emergency relief, characteristics of different client groups, and variation in different parts of the nation. Consistency in reporting both within and between organisations will be very important for this future research. For instance, national standards on definitions of different forms of assistance and presenting issues would facilitate research that would be applicable across the sector, and that could be related more directly to policy or economic changes. It would be appropriate for FaHCSIA to consider what support might be required to develop this kind of national data collection framework.

## List of shortened forms

ACOSS	Australian Council of Social Service
GFC	Global Financial Crisis
GSS	General Social Survey (ABS)
HILDA	Household, Income and Labour Dynamics in Australia Survey
MIAESR	Melbourne Institute of Applied Economic and Social Research
RMCN	Regional Managers Coordination Network subcommittee on homelessness (Queensland Government)
SAMIS	Service and Mission Information System (the Salvation Army)
VCOSS	Victoria Council of Social Service

## Endnotes

1. Similar indicators were used in the Household, Income and Labour Dynamics in Australia (HILDA) Survey, and we discuss findings from this survey in section 7.
2. Information on locations of centres may be found at <<http://www.salvationarmy.org.au/community-and-family-support.html>>
3. Every client in the database should have a unique ID number, issued either the first time he or she seeks assistance from a Salvation Army emergency relief centre, or the first time he or she is entered into SAMIS. Demographic information collected at this time includes sex, date of birth, family composition and birthplace. Information collected at each subsequent visit includes visit date, income source, housing situation and main presenting issue, as well as information about assistance provided. Thus, client ID numbers that appear in the data more than once indicate that the person has sought emergency relief more than once. While this is to be expected for a majority of clients, there is a small percentage of observations for which the client ID (and matching demographic information) is recorded far too many times to be plausible. For instance, there are 21 IDs that are each recorded more than 100 times in the 14 quarters from January 2007 to June 2010, and one is recorded 869 times. In contrast, the highest number of visits recorded in the Anglicare data is 56 over 10 quarters. To take an example, there is an ID that is recorded 210 times between 3 January 2007 and 25 June 2010 (38 times in 2007, 71 in 2008, 74 in 2009 and 27 in the first two quarters of 2010). The demographic information attached to this ID indicates a female lone parent with dependent children. However, the date of birth is 1 January 2003, which does not seem plausible. A more reasonable example is an ID recorded 43 times over the period. The data indicates a male, born in 1985, who is a member of a couple with dependent children. Over visits, the client's main income source switches between Newstart, Youth Allowance, Parenting Payment, and missing. His housing situation switches numerous times between insecure, private rental, and missing. Such variation may be genuine, as emergency relief clients often lead chaotic lives characterised by high mobility and income insecurity. These inconsistencies could also be data processing errors by different workers. It is also possible that this information reflects an ongoing case-management situation, in which each contact with this person is recorded as a provision of emergency relief. Finally, it is possible that this client ID and demographic information represents more than one client because the ID has, through a processing error, become attached to multiple people. However, there is no way of knowing from the available data which of these situations is the case.
4. Within Anglicare Sydney emergency relief centres, cheques to creditors are usually used to cover large, one-off expenses such as bond, green slips, household goods, funeral expenses, and rental shortfalls (Swann et al., 2009).
5. King et al. (2009) state that a turn-away is recorded when someone is turned away from services because of insufficient resources to address their need/s.
6. All values are deflated to June 2007 dollars.
7. Deflated to June 2007 dollars.
8. Both steps were conducted via regression analysis.
9. In examining repeat visits for the Salvation Army, we exclude clients who were recorded as visiting more than 20 times in any single year, as discussed earlier.

10. There are some minor presenting issues, in terms of frequency, that are not shown in the figures. In the Anglicare dataset, these were recorded in 8 per cent of all visits over the period, and included bereavement (2.4 per cent), theft of money/possessions (2.1 per cent), domestic violence (1.8 per cent), recent discharge from prison (1.3 per cent), language barriers (0.8 per cent), and assault (sexual and nonsexual, 0.9 per cent). Similar minor issues accounted for less than 5 per cent of total visits in the Salvation Army dataset, and included domestic abuse (1 per cent), recent immigrant arrival with limited means of support (1 per cent), natural disaster/drought (0.74 per cent), financial problems arising from crime victimisation (0.62 per cent), recent discharge from an institution (like prison) (0.37 per cent), and bereavement (0.23 per cent).
11. This paper uses confidentialised unit record files from the HILDA survey. The HILDA Project was initiated and is funded by the Commonwealth Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) and is managed by the Melbourne Institute of Applied Economic and Social Research (MIAESR). The findings and views reported in this paper, however, are those of the authors and should not be attributed to either FaHCSIA or the MIAESR.
12. The HILDA data for 2009 show an increase in the proportion reporting they sought assistance from a welfare agency to 3.6 per cent, with 0.7 per cent indicating this was their sole hardship event and 2.9 per cent reporting this event in conjunction with other hardship experiences.
13. Note that this is smaller than the proportion of people in households where someone sought assistance, since this calculation is just respondents who sought assistance and ignores the children in such households; children under the age of 15 years cannot be respondents in HILDA and, as is demonstrated later, households with children are more likely to seek assistance.

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# Occasional Papers

1. *Income support and related statistics: a ten-year compendium, 1989–99*  
Kim Bond and Jie Wang (2001)
2. *Low fertility: a discussion paper*  
Alison Barnes (2001)
3. *The identification and analysis of indicators of community strength and outcomes*  
Alan Black and Phillip Hughes (2001)
4. *Hardship in Australia: an analysis of financial stress indicators in the 1998–99 Australian Bureau of Statistics Household Expenditure Survey*  
J Rob Bray (2001)
5. *Welfare Reform Pilots: characteristics and participation patterns of three disadvantaged groups*  
Chris Carlile, Michael Fuery, Carole Heyworth, Mary Ivec, Kerry Marshall and Marie Newey (2002)
6. *The Australian system of social protection—an overview (second edition)*  
Peter Whiteford and Gregory Angenent (2002)
7. *Income support customers: a statistical overview 2001*  
Corporate Information and Mapping Services, Strategic Policy and Knowledge Branch, Family and Community Services (2003)
8. *Inquiry into long-term strategies to address the ageing of the Australian population over the next 40 years*  
Commonwealth Department of Family and Community Services submission to the 2003 House of Representatives Standing Committee on Ageing (2003)
9. *Inquiry into poverty and financial hardship*  
Commonwealth Department of Family and Community Services submission to the Senate Community Affairs References Committee (2003)
10. *Families of prisoners: literature review on issues and difficulties*  
Rosemary Woodward (2003)
11. *Inquiries into retirement and superannuation*  
Australian Government Department of Family and Community Services submissions to the Senate Select Committee on Superannuation (2003)
12. *A compendium of legislative changes in social security 1908–1982* (2006)
13. *A compendium of legislative changes in social security 1983–2000*  
Part 1 1983–1993, Part 2 1994–2000  
Bob Daprè (2006)
14. *Evaluation of Fixing Houses for Better Health Projects 2, 3 and 4*  
SGS Economics & Planning in conjunction with Tallegalla Consultants Pty Ltd (2006)
15. *The ‘growing up’ of Aboriginal and Torres Strait Islander children: a literature review*  
Professor Robyn Penman (2006)
16. *Aboriginal and Torres Strait Islander views on research in their communities*  
Professor Robyn Penman (2006)

17. *Growing up in the Torres Strait Islands: a report from the Footprints in Time trials*  
Cooperative Research Centre for Aboriginal Health in collaboration with the Telethon Institute for Child Health Research and the Department of Families, Community Services and Indigenous Affairs (2006)
18. *Costs of children: research commissioned by the Ministerial Taskforce on Child Support*  
Paul Henman; Richard Percival and Ann Harding; Matthew Gray (2007)
19. *Lessons learnt about strengthening Indigenous families and communities: what's working and what's not?*  
John Scougall (2008)
20. *Stories on 'growing up' from Indigenous people in the ACT metro/Queanbeyan region*  
Cooperative Research Centre for Aboriginal Health in collaboration with the Telethon Institute for Child Health Research and the Department of Families, Housing, Community Services and Indigenous Affairs (2008)
21. *Inquiry into the cost of living pressures on older Australians*  
Australian Government Department of Families, Housing, Community Services and Indigenous Affairs submissions to the Senate Standing Committee on Community Affairs (2008)
22. *Engaging fathers in child and family services: participation, perception and good practice*  
Claire Berlyn, Sarah Wise and Grace Soriano (2008)
23. *Indigenous families and children: coordination and provision of services*  
Saul Flaxman, Kristy Muir and Ioana Oprea (2009)
24. *National evaluation (2004–2008) of the Stronger Families and Communities Strategy 2004–2009*  
Kristy Muir, Ilan Katz, Christiane Purcal, Roger Patulny, Saul Flaxman, David Abelló, Natasha Cortis, Cathy Thomson, Ioana Oprea, Sarah Wise, Ben Edwards, Matthew Gray and Alan Hayes (2009)
25. *Stronger Families in Australia study: the impact of Communities for Children*  
Ben Edwards, Sarah Wise, Matthew Gray, Alan Hayes, Ilan Katz, Sebastian Misson, Roger Patulny and Kristy Muir (2009)
26. *Engaging hard-to-reach families and children*  
Natasha Cortis, Ilan Katz and Roger Patulny (2009)
27. *Ageing and Australian Disability Enterprises*  
Shannon McDermott, Robyn Edwards, David Abelló and Ilan Katz (2010)
28. *Needs of clients in the Supported Accommodation Assistance Program*  
Australian Institute of Health and Welfare (2010)
29. *Effectiveness of individual funding approaches for disability support*  
Karen R Fisher, Ryan Gleeson, Robyn Edwards, Christiane Purcal, Tomasz Sitek, Brooke Dinning, Carmel Laragy, Lel D'aegher and Denise Thompson (2010)
30. *Families' experiences of services*  
Morag McArthur, Lorraine Thomson, Gail Winkworth and Kate Butler (2010)
31. *Housing costs and living standards among the elderly*  
Bruce Bradbury and Bina Gubhaju (2010)
32. *Incentives, rewards, motivation and the receipt of income support*  
Jacqueline Homel and Chris Ryan (2010)
33. *Problem gamblers and the role of the financial sector*  
The South Australian Centre for Economic Studies (2010)

34. *Evaluation of income management in the Northern Territory*  
Australian Institute of Health and Welfare (2010)
35. *Post-diagnosis support for children with Autism Spectrum Disorder, their families and carers*  
Kylie Valentine and Marianne Rajkovic, with Brooke Dinning and Denise Thompson; Marianne Rajkovic, Denise Thompson and kylie valentine (2011)
36. *Approaches to personal money management*  
The Social Research Centre and Data Analysis Australia (2011)
37. *Fathering in Australia among couple families with young children*  
Jennifer Baxter and Diana Smart (2011)
38. *Financial and non-financial support to out-of-home carers*  
Marilyn McHugh and kylie valentine (2011)
39. *Community attitudes to people with disability: scoping project*  
Denise Thompson, Karen R Fisher, Christiane Purcal, Chris Deeming and Pooja Sawrikar (2012)
40. *Development of culturally appropriate gambling services for Indigenous communities*  
Cultural and Indigenous Research Centre Australia (2012)