

# *Life after* **LOCKDOWN**

*Social and Economic  
Impacts of COVID-19 on  
Disadvantaged Australians*

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COVID-19 on Disadvantaged Australians*

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## Summary - What Did We Find?

The COVID-19 pandemic and associated restrictions have had a significant economic and social impact across the community. There is evidence that COVID-19 has exacerbated a number of social problems including domestic and family violence, suicide ideation, deterioration of personal relationships, and increased alcohol consumption. It has been particularly problematic for people experiencing an intellectual disability or cognitive impairment.

While government policy has acted as a buffer for many people, the reduction of income supports over the past six months has coincided with an increasing demand for Anglicare financial hardship services, including among younger people aged 18-34 years and people in the private rental market. More broadly, rental arrears and rental debt have been escalating issues in the first quarter of 2021.

Regarding people accessing Anglicare's financial hardship services, this report shows that:

- With each stage of the winding back of the JobSeeker payment and Coronavirus Supplement there has been a surge in demand for Anglicare financial hardship services.
- The number of instances of service recorded in March 2021 was the highest for any month over the last three years.
- There is emerging significant unmet need, with increases in the number of people on waiting lists in the first quarter of 2021.
- The first quarter of 2021 has seen a rise in the number of one-off service users.

- Data indicates a 98% increase in people accessing support for rental arrears between August 2020 and March 2021. The amount of rental support provided to each person is, on average, around \$750, but there are increasing numbers of people presenting with rental debts in the thousands of dollars. This means the debt will continue to accumulate.
- There has been an increasing number of young people (aged 18-34 years) seeking support, especially in the first quarter of 2021. There is also an increasing proportion of younger people seeking one-off support.

Nearly two-thirds (63%) of people accessing Anglicare's Mental Health services and 62% accessing Anglicare's Family Support services have reported higher levels of stress and anxiety as a result of COVID-19. Almost half of all people accessing Anglicare Community Services reported disconnection from family and friends as a result of COVID-19.

A multi-faceted policy response at both a Federal and State Government level is required in relation to housing and mental health, particularly addressing the inadequacy of the new level of the JobSeeker payment, which consigns people into poverty and disadvantage.

There is a role to be played by community organisations, including churches, in addressing needs that have increased during and beyond the COVID-19 pandemic.

## 1 Introduction

At the time this report was written, Australia had experienced 29,886 cases of COVID-19 and 910 deaths. The pandemic, in a period of just over 12-months, has fundamentally changed how Australians work and gather socially. Lockdown was both an economic and a social policy. It has meant enforced physical distancing and restrictions on many activities that had previously been considered normal. It has disrupted travel, business, lifestyle, commerce, and the way services are delivered and has made many people jobless.

However, the pandemic's impact has not been spread evenly across the community; some parts of the population have suffered more than others or will experience serious, persistent effects well into the future. Since its onset in March 2020, COVID-19 has had an unequal impact on the following sub-groups, including some of the most vulnerable and marginalised people who seek Anglicare service support:

- Older people aged over 65 years – this group is the most likely to be impacted by COVID-19. As at February 2021, 678 deaths from COVID-19 had been recorded among people in residential aged care facilities.<sup>1</sup>
- Part-time and casual workers – struggling with reduced hours.<sup>2</sup>
- Those who lost their jobs entirely – estimated to be around 800,000 people.<sup>3</sup>
- People receiving welfare benefits and people on low income.
- Young people – impacted by disruptions to education including school lockdowns. Many have felt overwhelmed by the constant coverage of COVID-19 in social media.<sup>4</sup> The impact of COVID-19

restrictions on parts of the economy such as the hospitality sector has also led to higher levels of youth unemployment.<sup>5</sup>

- People with intellectual disabilities – often also coping with comorbid physical health issues such as congenital cardiac conditions and cerebral palsy, making them particularly susceptible to respiratory illnesses such as COVID-19.
- People from diverse cultural backgrounds – Aboriginal and Torres Strait Islander people have been at greater risk due to their compromised health status, in addition to historical, systemic and cultural factors. Chinese Australians have been the target of increased xenophobia and adverse media coverage about the origin of the novel coronavirus<sup>6</sup>. People from Culturally and Linguistically Diverse (CALD) communities have been more likely to miss out on important health information due to low levels of English language competency.<sup>7</sup>
- Women in the workforce – lost more jobs than men during the peak of the crisis, shouldered more of the increase in unpaid caregiving and, being more likely to be casual workers, were excluded from JobKeeper support payments.<sup>8</sup>
- People in prison experiencing difficulties in achieving physical distancing and loss of familial visits.<sup>9</sup>
- Undocumented migrants who lacked access to health care.<sup>10</sup>



### About this Report

This report analyses data and presents findings drawn from Anglicare’s own services, focusing on three main impact areas arising from COVID-19 and associated government regulations and spending initiatives:

- **Financial hardship** and the increasing demand for services as the buffer of temporary financial supports has been removed.
- **Mental health** as evident through increasing self-reported stress and anxiety.
- **Loneliness and social disconnection** as identified both through Anglicare client surveys and a qualitative research project with older Australians experiencing lockdown.

While the prevalence of COVID-19 in Australia is very low, the future is still uncertain because of the unpredictability of future outbreaks, problems with the rollout and take up of vaccines, the complexity of the global context, and the uneven nature of economic recovery. What has become evident from both external and Anglicare research is that the pandemic has had multi-level societal impacts which need to be clearly understood if we are to improve the wellbeing and quality of life of those most impacted.

## 2 Financial Hardship

### Context

When the pandemic struck in March 2020, the Federal Government began rolling out a series of income support measures to buffer the economy, support businesses and support people who were losing employment or hours as a result of the lockdowns. There were two major components to the income support program: the JobKeeper and JobSeeker payments.

**The JobKeeper Program** – From April 2020, eligible employers could continue to pay wages subsidised through the ATO at the rate of \$1500 per fortnight to workers, ensuring they could stay ‘on the books’ and be re-employed once businesses began to reopen and operate fully. The program, which had a number of eligibility and compliance requirements, would continue to operate until 28 September 2020. In July 2020, the Government announced it would extend the JobKeeper program until 28 March 2021 for those employers who still needed it. However, the payments made would be steadily decreased to \$1,200 per fortnight until 3 January 2021 and then to \$1,000 per fortnight until 28 March 2021.

**The JobSeeker Program** – On 20 March 2020, the Government also announced the replacement of the Newstart program with the JobSeeker program along with a temporary Coronavirus Supplement. These initiatives had the effect of temporarily raising unemployment benefits to a maximum base rate of \$1,115 per fortnight, well above the previous base rate of \$556 per fortnight for single people under Newstart. This move was widely applauded given the extensive national and international criticism of the very low rate of Newstart which had been indexed to CPI since 1994 and, consequently, was already well below the poverty line.

Since coming into effect in April 2020, the Coronavirus Supplement has been scaled back. It was reduced to \$250 per fortnight from 25 September 2020 and further reduced to \$150 per fortnight from 1 January 2021. From 1 April 2021, the final level of JobSeeker has been set at \$621 per fortnight for singles – or just over \$50 per fortnight above the previous JobSeeker rate.

*The Supplement improved poverty levels especially for children*

Research indicates that the higher supports were effective in protecting many Australians from the adverse economic impacts of the pandemic, since the number of people out of work or working fewer hours increased significantly between March and April 2020, yet household income did not seriously decline.<sup>11</sup>

### Current Studies

The protective effect of the Government’s spending initiatives has been noted in several Australian studies. The most recent modelling was by the ANU Centre for Social Research and Methods (April 2021), which examined financial hardship prior to the onset of the pandemic, the impact of the introduction and gradual winding back of the Coronavirus Supplement, and current levels of financial hardship now that the level of the JobSeeker payment has been finalised. This study estimates that, prior to the introduction of the Coronavirus Supplement, 39% of children in single parent families lived in poverty but that, after the introduction of the Supplement, this fell to just 17%. The total number of people in poverty fell from the

pre-COVID-19 estimate of 3.7 million to 3.5 million at the peak of the pandemic in June. According to the study report,

*This is a very significant outcome that, during a global pandemic and domestic economic recession, poverty gaps were reduced. This is entirely due to the significant increase in the JobSeeker and the level of JobKeeper both being well above the relative poverty line during the period considered in this study.<sup>12</sup>*

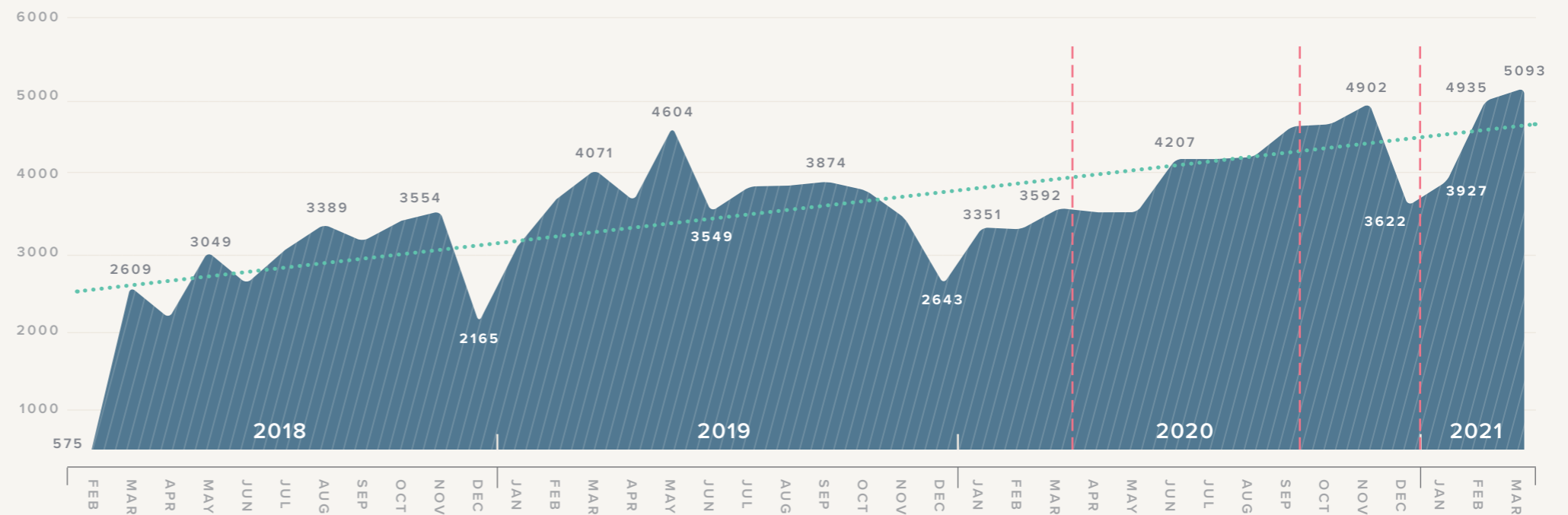
However, the buffer effect did not continue. The Melbourne Institute reported in their regular Taking the Pulse of the Nation surveys that, as of March 2021, those reporting financial stress in terms of being able to pay for essential goods and services had increased to 31%, with those most at risk being on either fixed-term or casual contracts.<sup>13</sup> The ANU study estimated that, prior to COVID-19, 3.7 million people, including 624,000 children, were living in poverty. In April 2021, it is estimated that, post lockdown, this figure will have risen to 4.2 million people including 750,000 children. It was noted that:

*Removing the Coronavirus Supplement but increasing JobSeeker by just \$50 per fortnight we estimate will increase single parent child poverty rates for children under 5 from a low in June 2020 of just 12 per cent to 46 per cent by April 2021.<sup>14</sup>*

This trend will continue as the Federal Treasury estimates that, with the removal of JobKeeper, a further 100,000 people will transition across to JobSeeker.<sup>15</sup>

## Anglicare FFA Clients - Total No. of Visits by Month

CHART 1



At a service level, Anglicare data supports these findings – with increasing numbers of people seeking access to financial hardship services.

### Anglicare Findings

For many decades Anglicare has run a suite of programs designed to support people experiencing financial hardship. These services – called Food and Financial Assistance (FFA) – provide a range of supports such as Emergency Relief, (incorporating material aid such as food packages), support with payment of rental arrears and utility bills, financial counselling and access to case management if required. Anglicare continued to provide a range of financial hardship services through FFA during COVID-19, but there were changes in how the program was delivered. FFA centres were not accessible, so some support was provided via telephone assessment.

Anglicare data collected over a three-year period, up to and including March 2021, indicates an increasing demand for financial hardship supports during the lockdown period of the pandemic but also as the lockdown conditions have eased. Several key trends emerge which are described below.

#### Continued demand for support during the COVID-19 lockdown periods

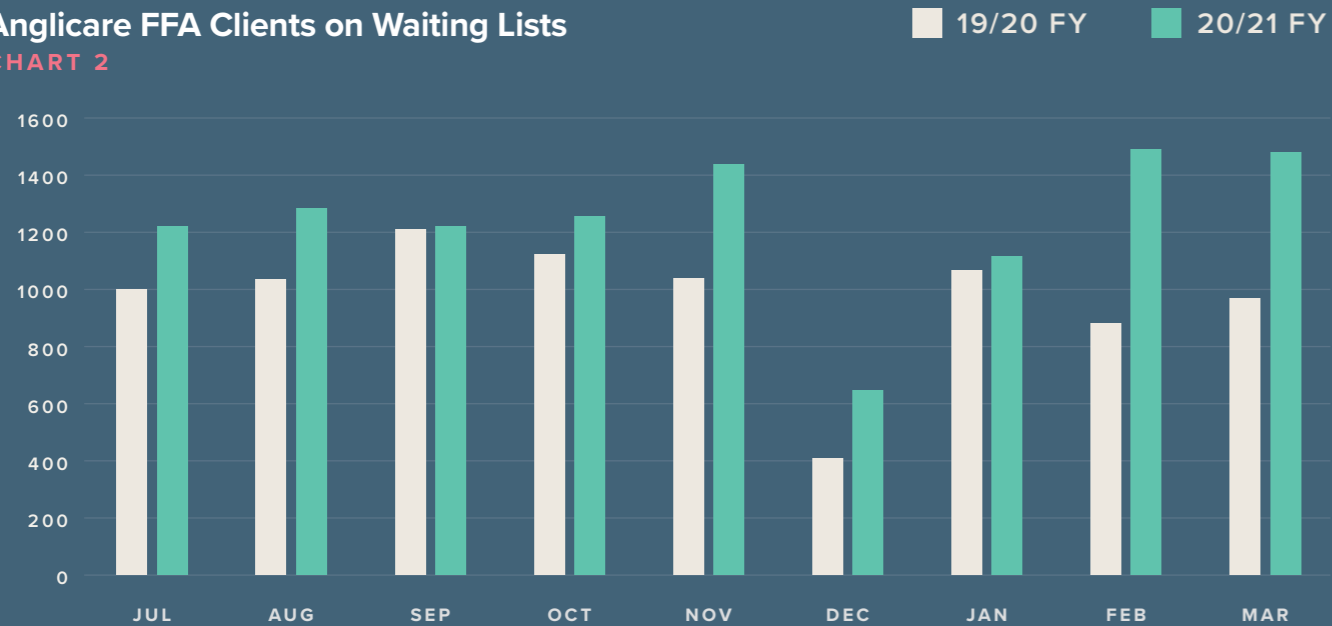
Anglicare data indicates a rising demand for financial hardship service support across the whole period from January 2018 to March 2021 (See **Chart 1**). The introduction of the \$550 Coronavirus Supplement at the end of March 2020, the drop in the Supplement to \$250 in late September 2020 and the further drop to \$150 as well as the cut to JobKeeper in January 2021, are indicated on **Chart 1**. A number of trends are evident:

- The introduction of the \$550 Supplement coincides with a levelling off in demand for hardship support services in April and May 2020 when compared with 2019, consistent with a buffer effect.
- However, there was then a steady rise in demand for such services between June and September 2020, higher than the rates in 2019 despite the Coronavirus Supplement.
- Demand for support further increased with the reduction in the Coronavirus Supplement to \$250 at the end of September 2020.

*Much higher demand for financial hardship supports in 2021 than for the same period in 2019 or 2020*

### Anglicare FFA Clients on Waiting Lists

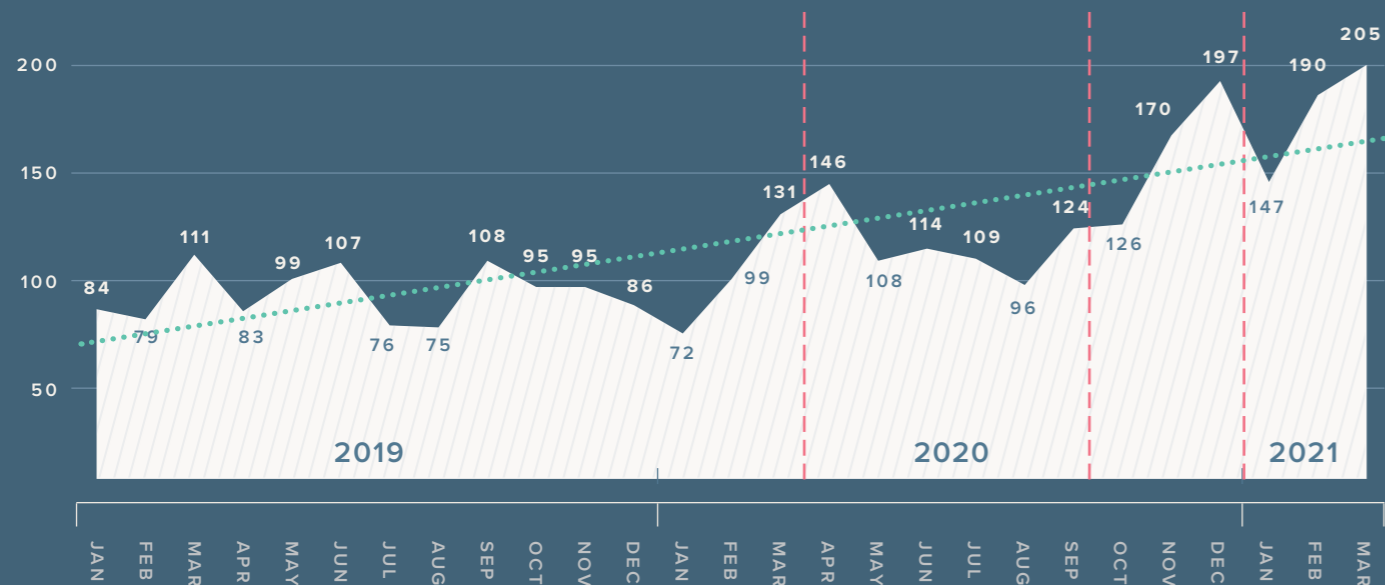
CHART 2



*The number of one-off service users is the highest in the last three years*

### No. of Single Visit FFA Clients by Month 2019-2021

CHART 3



- Demand for support followed the usual fall in demand in December 2020, as in the previous two years.
- The first quarter of 2021, which coincided with the fall in the Supplement to \$150 as well as a fall in the JobKeeper payment, has seen a dramatic rise in demand for financial hardship services. Data indicates that in the first three months of 2021 demand was 36% higher than for the same period in 2020. This reflects reports from caseworkers and program managers that there has been a significant increase in demand for services in 2021 stretching capacity to meet that demand. The number of instances of service recorded in March 2021 was the highest at any time over the past three years.

#### Increasing numbers of one-off users of financial hardship services

What may be partially driving this higher demand is the emergence of people accessing these services for one-off supports after the reduction of the Supplement in September 2020 and the falls in the JobKeeper payments over the same period. After the September fall in the Supplement to \$250, a higher number of one-off service users were recorded in November and December (**Chart 3**), which then accelerated significantly in the first quarter of 2021 with the further drop in the Supplement to \$150 and the drop in the JobKeeper payment to \$1,000 per fortnight. This data indicates a rising trend of people who have accessed Anglicare for the first time between 2019 and 2021 but who did so only once.

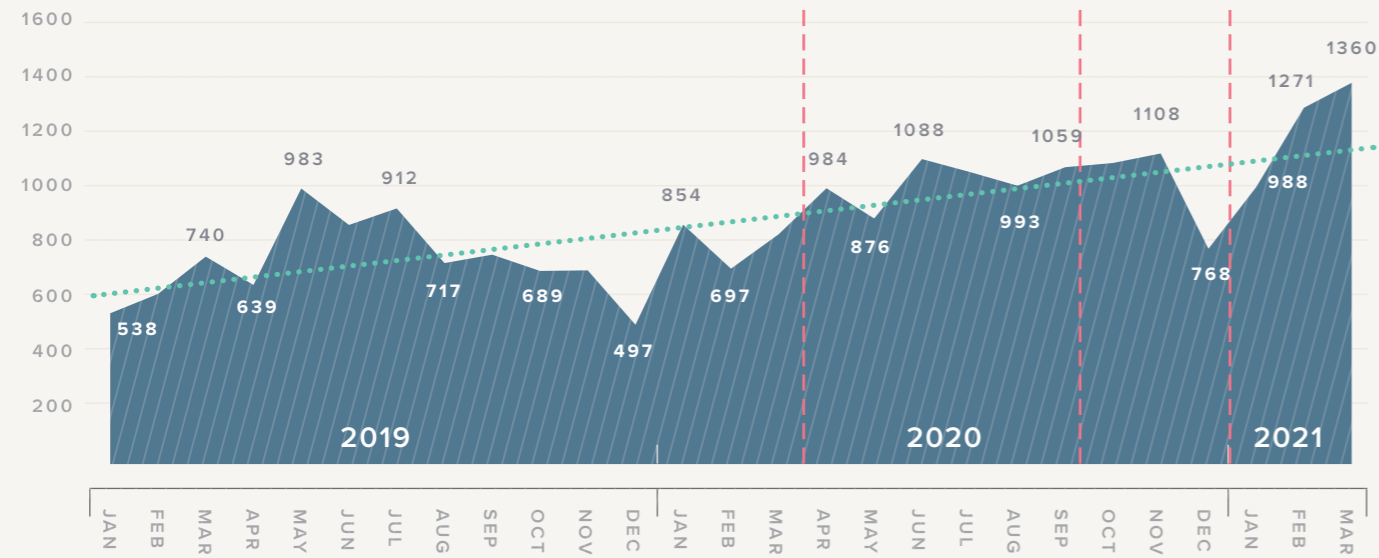
The profile of people increasingly accessing FFA on this basis are:

- Younger people aged 18-34 years who have shifted as a proportion of this group from 26% in 2019 to 39% in 2021.
- Single people living on their own who in 2019 represented 36% of all one-off users of services, rising to 42% in 2021.

While the data in **Chart 1** represents the number of people who accessed a service there have been increasing numbers of people who are on the waiting list for casework support. **Chart 2** highlights the significant unmet demand in the form of waiting lists for February and March 2021, which are much higher than in the previous period.

## Visits by Private Renters to FFA 2019-2021

CHART 4



### Increasing numbers of people in private rental

Anglicare’s data also indicates a rising percentage of people seeking support who are renting privately – from 42% in 2018 to 52% in the first three months of 2021. **Chart 4** highlights the increasing number of visits requiring service support by people in private rental.

*More private renters are seeking support with issues of rental debt and rental stress*

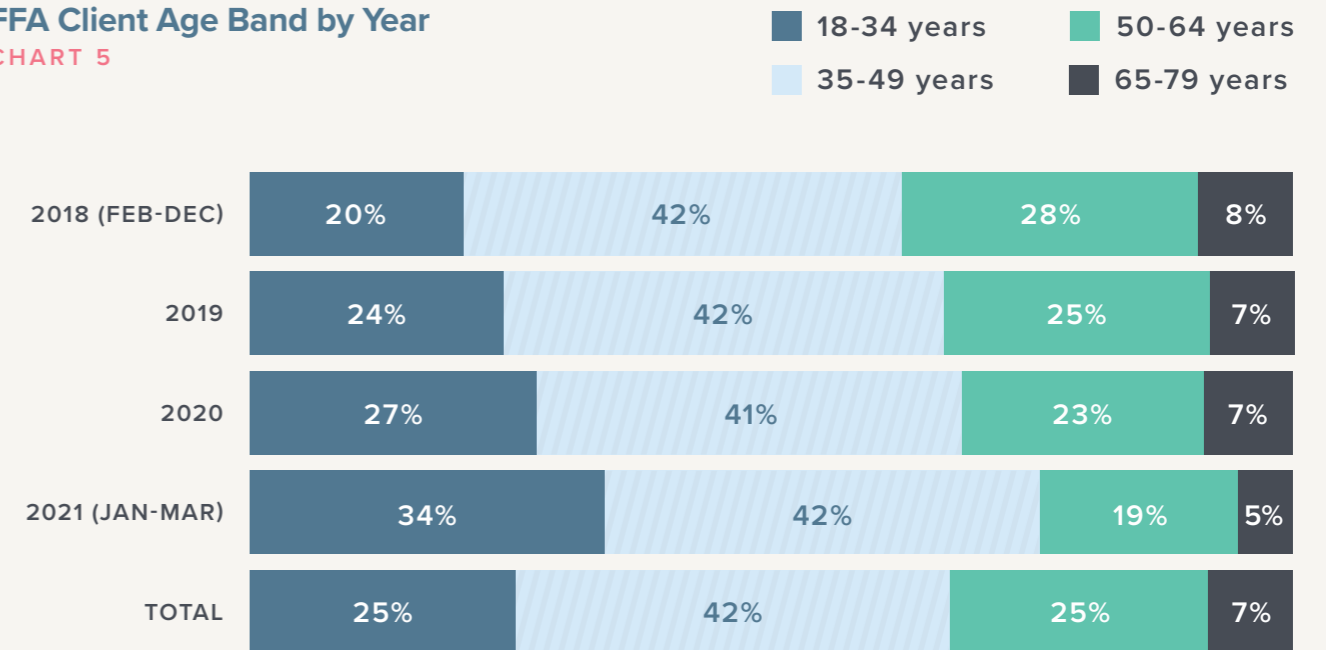
This aligns with reports from service staff of people presenting with rental debt and rental arrears, with some at increasing risk of homelessness. Program data indicates a 98% increase in people accessing support for rental arrears between August 2020 and March 2021. The amount of rental support provided to each person is, on average, around \$750, but there are increasing numbers of people presenting with rental debts as high as \$4,000 to \$5,000 which is a new and concerning trend.<sup>16</sup>

### Increasing proportion of young people

There has been an increasing number of younger people aged 18-34 years presenting to FFA services. This age group represented 24% of all visits in 2019 which increased to 27% in 2020 and then to 34% for the first three months of 2021 (**Chart 5**). Program managers and staff have reported anecdotally that young people are often highly casualised in their work and have struggled with a loss of work or significantly reduced working hours. This has led to an increasing inability to pay rent and the accrual of rental arrears in a very tight private rental market. This conclusion is supported by research which highlights the endemic nature of casualisation of work for younger people particularly in retail, hospitality, arts and recreation – the areas hardest hit by COVID-19 restrictions<sup>17</sup>. As casuals, many were not eligible for the JobKeeper payment.

## FFA Client Age Band by Year

CHART 5



### Self-reported employment impacts

Anglicare Sydney conducted an Annual Survey of all the people who accessed our community services over a 2-month period from 21 September to 30 November 2020, when the community was still experiencing the impacts of COVID-19. There were responses from 1,303 clients, across ten different service streams. This provided an opportunity to directly ask our clients about the impact of COVID-19 on their lives. For many, the most immediate impact was on work. Across all service streams 17% of respondents reported losing their job completely and a further 22% had their hours of work reduced. Some groups of people were more adversely affected than others; clients most commonly reporting either job loss or a loss of hours were accessing FFA Casework (52%), Men’s Behaviour Change Program (34%) and Youth Services (33%).

### Self-reported hardship impacts

There was a range of hardship impacts also reported by clients:

- 15% of people accessing FFA and 13% accessing the Men’s Behaviour Change Program (MBCP) reported they had stopped paying rent or were paying reduced rent. This accords with the increasing number of people in private rental accessing services from October 2020 onwards.
- 19% of participants in the MBCP also reduced payments on or stopped paying their mortgage altogether.
- 12% of people accessing FFA had experienced homelessness.
- More than half of FFA clients reported not being able to pay bills (52%) or being unable to afford essentials (50%).

*An increasing proportion of young people is accessing Anglicare FFA services*



### Conclusion

While the introduction of both JobSeeker and JobKeeper appears to have had an initial protective effect, it is evident that from June 2020 onwards there has been an increasing demand for financial hardship support services as provided through the Anglicare Sydney FFA program. It is also clear that as the Supplement was progressively reduced, there was an increase in the number of people seeking assistance. Some of this demand appears to have been driven by first-time users, people in private rental and younger people compared with data collected in 2019. Clients across all Anglicare Community Services streams have highlighted the impacts

that COVID-19 has had on employment and financial hardship in terms of paying rent, repayment of mortgages, ability to pay bills and increasing homelessness. For some clients – especially those accessing FFA and the Men’s Behaviour Change program – these impacts have been significant. The increasing numbers accessing FFA suggests that the final level of JobSeeker, set at around \$50 per fortnight above the previous rate and implemented on 1 April 2021, will not be sufficient to address the deep and persistent disadvantage of many clients and has the potential to push further people into hardship and poverty.

## 3 Emotional Wellbeing and Mental Health

### Current Studies - Prevalence

Studies of the effects of the pandemic on mental health began very early in 2020. An online survey of 5,070 Australians in March-April 2020 showed that 78% of respondents reported their mental health had worsened during the pandemic.<sup>18</sup> Another survey, by Relationships Australia,<sup>19</sup> revealed that 63% of respondents had experienced changes to their mental health in response to changes in their working conditions. The Australian Bureau of Statistics’ Household Impacts of COVID-19 Survey in August 2020 showed that almost half (46%) of those surveyed felt nervous at least some of the time. Some 17% of those who had reported a decline in their emotional and mental wellbeing had discussed this with a health professional.<sup>20</sup> In another survey of young people, about half (51%) felt their mental health had worsened during the pandemic<sup>21</sup>. Other research highlighted that 76% of those who lost their employment or reduced hours of work as a result of COVID-19 reported moderate or severe levels of psychological stress; the 31% of people who reported severe stress was over 2.5 times the rate for Australian adults.<sup>22</sup> Of significant concern is the association between unemployment and the increased risk of suicide.<sup>23</sup>

University of Melbourne research indicates that mental distress has been a key policy concern before and during the pandemic. Their trending data indicates that mental distress among the Australian population doubled in April 2020 from pre COVID-19 levels. The levels of mental distress were approximately four times higher for people experiencing financial stress, which rose sharply with the Federal Government’s announcement in August 2020 of planned reductions in both the Coronavirus Supplement and

JobKeeper. The effects of the pandemic on mental health appear to be persistent even as lockdowns ease and there is some resumption of normal life. The levels of mental stress in November 2020 were even higher than in April 2020 at the onset of the pandemic which was roughly two and a half times the levels pre COVID-19.<sup>24</sup>

### Social Impacts

What does this decline in mental health look like? According to several studies it includes elevated levels of depression, anxiety, acute stress and distress,<sup>25</sup> and self-harm and suicide.<sup>26</sup> In a study by Rahman and colleagues,<sup>27</sup> there was also a strong association with fear. Some recent studies indicate that depression affects the individual’s ability to solve problems, set goals and function effectively both at work and in the home environment. People lose their sense of control over life and their environment.<sup>28</sup>

This deterioration in mental health associated with the pandemic has generated adverse social impacts including:

- **Increased alcohol consumption**<sup>29</sup> – it is reported, for example, that in the first five months of 2020, twice the number of calls were made to the National Alcohol and Other Drug Hotline as in the same period in 2019.<sup>30</sup> Some of this resulted from pre-existing factors such as heavier drinking pre-pandemic, being middle aged, and earning average or higher income. However, pandemic-related issues including job loss, increased food consumption, altered sleep patterns and stress and depression also influenced rates of alcohol consumption<sup>31</sup>. During the pandemic,



13% of Australian alcohol consumers were concerned about the amount of alcohol they or someone in their household was drinking.<sup>32</sup>

- **A rise in demand for suicide prevention** – Research from the Brain and Mind Centre at the University of Sydney<sup>33</sup> predicted that, across Australia, psychological distress would peak at 40% by December 2021, and among youth at 48% by September 2021. The report also predicts that the youth suicide rate will increase by 12% over the next five years. Congruent evidence has emerged from the suicide prevention sector. Survey results show that over 75% of such organisations reported an increase in demand for services, with one third requiring additional funding and support.<sup>34</sup>

*Youth suicide rate predicted to increase by 12% over the next 5 years*

- **Deterioration in personal relationships** – Specific details about relationship issues emerged from a survey conducted by Relationships Australia (2020), which showed that, among people accessing the RA website, 42% had experienced a negative change in their relationship with their partner and 55% of respondents had been challenged by their living arrangements during COVID-19 restrictions.<sup>35</sup> More alarmingly, family and relationship breakdowns were identified as emerging risk factors for suicide by the State of the Nation in Suicide Prevention survey.<sup>36</sup> Some of the recommended interventions for alleviation of these problems include supporting parents, subsidising relationship counselling via the Better Access Initiative, and more funding for early intervention parenting programs.

*Two-thirds of women who had experienced DFV said it had started or escalated during the pandemic*

- **An escalation of Domestic and Family Violence** – The Australian Institute of Criminology conducted a survey of 15,000 women in May 2020. In the three months prior to the survey, 4.6% of respondents experienced physical or sexual violence from a current or former cohabiting partner. Two-thirds of these women who had experienced physical or sexual violence since the start of the pandemic said the violence had started or escalated during the pandemic.<sup>37</sup> Relaxation of the pandemic restrictions did not ameliorate the situation. Foster and Fletcher<sup>38</sup> reported that a Women's Safety NSW survey of frontline workers showed that 41.9% of respondents reported increased Domestic and Family Violence (DFV) client numbers since restrictions began to lift, and 47.6% of these workers saw an increase in the proportion of high-risk cases since restrictions began to lift. Other DFV service providers and workers report a similarly alarming increase in cases. Calls to national domestic violence hotline 1800 RESPECT have increased during the pandemic.<sup>39</sup> Similarly, a Wesley LifeForce survey of 30 Suicide Prevention Network members showed that more than a third (37%) reported the pandemic had increased DFV in their communities.<sup>40</sup> Targeted research has identified two specific groups that have experienced an escalation in DFV, and factors that have contributed to the increase. A Women's Safety NSW survey of frontline workers revealed that 44% reported an increase in Aboriginal and Torres Strait Islander women and children DFV clients during the pandemic, and 56% had noticed an increase in complexity of Indigenous client needs.<sup>41</sup> Six out of ten multicultural DFV service providers reported an increase in migrant and refugee women clients during the pandemic.<sup>42</sup>



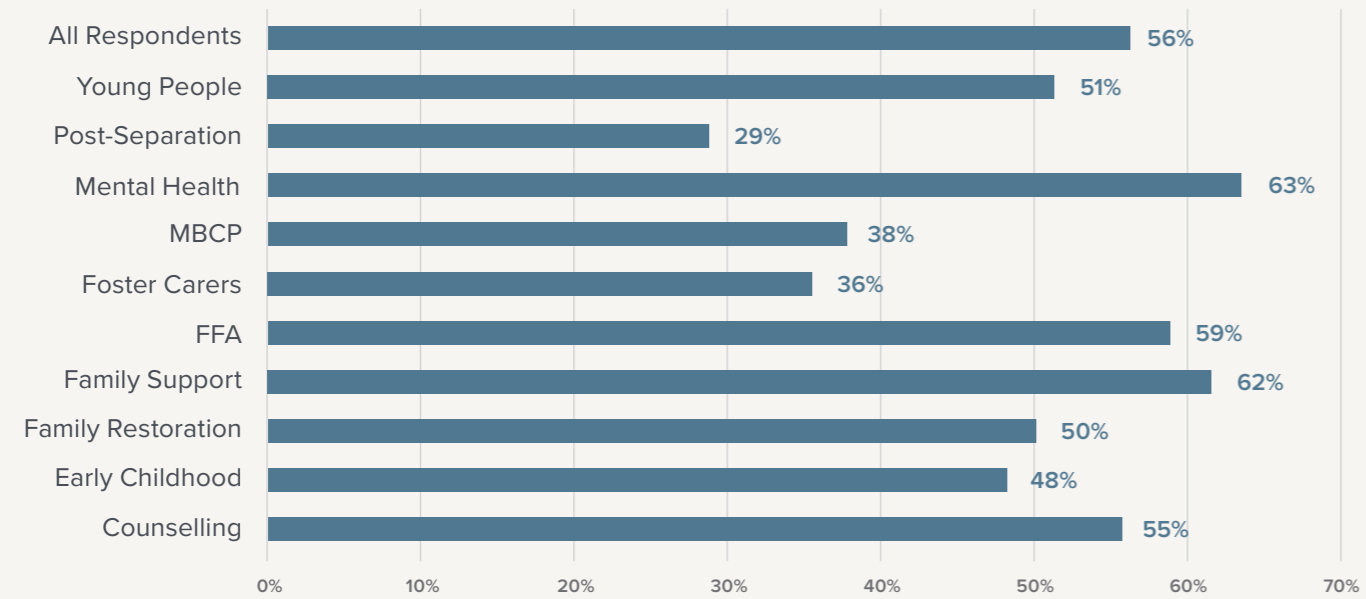
- **Risks to future financial security** – Baker and colleagues (2020) argue that the full effects of the pandemic upon renters may only emerge in the future because many are drawing on existing financial reserves including savings and superannuation, resorting to rent deferment, or relying on temporary government supports including eviction moratoriums, JobKeeper and JobSeeker.<sup>43</sup>
- **Escalation of issues for people with an intellectual disability** – For many people living with intellectual disability, adherence to routine is a vital part of life. When their routines are disrupted, anxiety and even aggression can result.<sup>44</sup> Specific behavioural issues such as irritability and depression were reported to have increased in the early days of pandemic restrictions.<sup>45</sup> The support needs for children with Autism Spectrum Disorder and their parents increased during the pandemic, especially for in-home support, as well as interventions aimed at alleviating the effects of potentially disruptive COVID-19 quarantine. Family members have reported struggling with the management of daily activities in the home<sup>46</sup> and the reduced access to respite care has only exacerbated

their level of distress.<sup>47</sup> People living outside the family home have also been affected through limitations on the number of visitors.<sup>48</sup>

- **Significant adverse impacts on older people with dementia** – people living in nursing homes, where the rates of COVID-19 infection tended to be higher, were also more likely to have dementia. Physical distancing between care staff and residents was not feasible in such settings. Furthermore, residents' tendency to wander and act intrusively further diminished the effectiveness of safety protocols and increased the likelihood of spreading infection. Finally, social isolation resulting from pandemic restrictions compounded pre-existing levels of isolation among this group. People with dementia could not understand why their relatives were not visiting and, consequently, their behaviour became more agitated. Indeed, even those older adults with good cognitive health were observed to exhibit neuro-psychiatric symptoms as a result of reduced visits from relatives and the limiting of other social interactions.<sup>49</sup>

## Clients of Anglicare services who felt more anxious / more down than usual

CHART 6



### Anglicare Findings

In the annual Anglicare client survey conducted between September and November 2020, people were asked to assess the impact on their lives as a result of the pandemic. **Chart 6** indicates that more than half the clients accessing counselling, family support, FFA and mental health services reported much

higher levels of anxiety and 'feeling down more than usual'. The highest levels of anxiety were reported by those accessing Mental Health services (63%) and Family Support services (62%).

These findings align with the reports from the field where program managers and staff

are reporting increasing complexity in the situation facing people accessing financial hardship services including issues of mental health – particularly in the growing breakdown of family and intimate partner relationships.

*Anglicare clients across the board are reporting higher levels of anxiety*

### Conclusion

A number of studies have highlighted the increasing prevalence of mental health issues as a result of the pandemic and accompanying lockdown. This in turn has generated adverse social impacts including reports of increasing domestic and family violence, increased alcohol consumption, family and relationship breakdown and issues for older people with dementia and people with disability. Young people in particular have been adversely impacted. Anglicare clients across the board are reporting higher levels of anxiety and a sense of 'feeling more down than usual' but this is particularly prevalent among clients of Anglicare's mental health, family support and FFA services. There is the possibility that these impacts will continue for some time for those with longer term underlying mental health conditions even though lockdown has effectively ended at the time of writing this report. Consideration needs to be given to provision of ongoing mental health supports and, in particular, strengthening the capacity of DFV services to be able to respond to the need in the community.

## 4 Social Isolation and Loneliness

There is a distinct difference between social isolation and loneliness.<sup>50</sup> Social isolation is a state of separation from people and the social environment, while loneliness is a feeling of disconnectedness and/or sadness about this separation. Both have been evident during the current pandemic crisis. People have experienced various forms of social isolation and disconnection over the last 12 months due to mandatory community lockdown and, in some cases, quarantine. Anglicare services have noted a fear of emerging from the home environment among some older people and/or hesitancy in allowing support services to enter their home – a fear driven by the possibility of infection. The pandemic has thus forced many to accept disease-preventing social isolation despite the reduced interpersonal relations.

### Current Studies

As noted by Lifeline Australia (2021)<sup>51</sup> and the Australian Journal of General Practice,<sup>52</sup> various declines in physical and mental health can result from such isolation and disconnection, including tiredness, low energy, sleep problems, loss of appetite, reduced physical activity, feelings of hopelessness and, in worse case scenarios, suicidal ideation, post-traumatic stress and increased substance use or abuse. Ongoing and endemic social isolation also has a physical health cost including cognitive impairment, reduced immunity, increased risk of heart disease and risk of premature death.<sup>53</sup> Such outcomes can occur long after the actual experience ends. One overseas study estimated that periods of social isolation, even for a period of less than 10 days, can have long term impacts up to three years later.<sup>54</sup>

### Anglicare Findings

#### Client Survey

Anglicare's 2020 annual client survey has revealed the significant impact on social isolation and disconnection for vulnerable populations. Survey participants were asked to indicate if, as a result of COVID-19, they had felt more disconnected from family and friends. It is evident from **Chart 7** that about half of all people accessing Anglicare community services had experienced some degree of impact. Those reporting the highest level of an adverse impact were people accessing Mental Health (57%), Family Support (55%), Counselling (53%), and Early Childhood (52%) services.

This social disconnection was also reflected in other survey results. Clients were asked to indicate their current level of social connectedness on a scale from '0' ('I am completely isolated socially and often feel lonely') to a score of '10' ('I have completely fulfilling relationships and am never lonely'). Across all services, the average score of 5.9 out of 10 was lower than in 2019 (at 6.2). The lowest scores were found among people accessing FFA services (5.2) and mental health clients (5.3), both results being poorer than in the equivalent 2019 survey. These falls are consistent with the social isolation experienced by so many people during the lockdown and social distancing phases of the pandemic.

#### Anglicare 2020 Social Isolation Study

Anglicare conducted a qualitative study on the impact of COVID-19 restrictions on the reported social isolation and loneliness of older people receiving in-home support services.<sup>55</sup> As part of the study, 27 interviews were conducted by phone between May and June 2020 when the lockdown was at its peak.

Participants lived in the Greater Sydney region with some living in their own home and others in a retirement village. Some interviewees had been very active prior to the pandemic while others were fairly restricted in their participation in community activities because of frail physical health.

Lockdown restrictions imposed by the Federal and NSW Governments came into effect in mid-March 2020, when all Australians were required to remain at home except for essential activities including food shopping, medical appointments and visits to the bank. Many participants led busy lives prior to this enforced confinement and indicated that a deep affective rupture had resulted from the sudden disengagement from family, friends, hobbies and health-related activities. The most difficult adjustment for some appeared to be the loss of physical contact with close family. Even when family could visit, the social distancing required was often keenly felt. While electronic communication was a widely-used substitute for meeting face-to-face, some interviewees did not possess the required technical competence while others felt this option was unsatisfactory.

Being forced to remain at home, combined with the sudden cessation of community activities outside of the home, resulted in boredom and decreased motivation among participants. For those who were already feeling lonely, the deeper state of isolation exacerbated those emotions. Throughout the data, there was also evidence of the four emotional themes identified in the literature: fear, anxiety and insecurity; a loss of meaningful interpersonal connections; disconnectedness and feeling useless; and a struggle to move forward because there are no worthwhile social connections on which to focus.

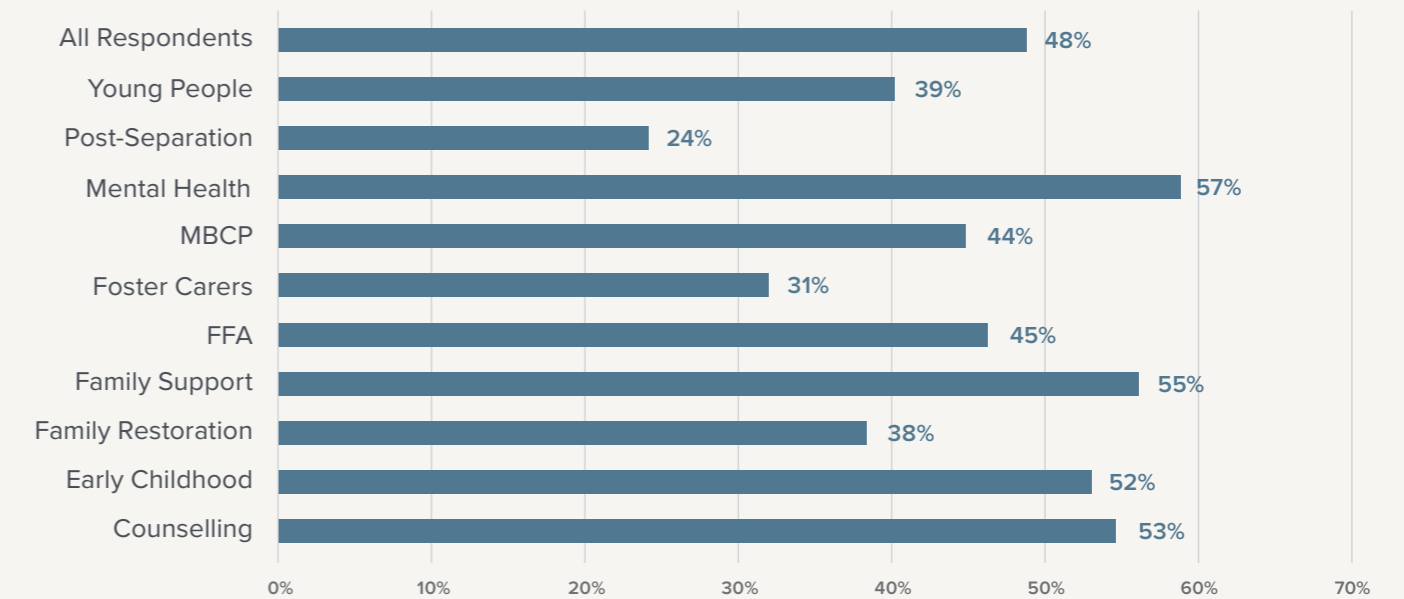
For many participants, loneliness was a natural corollary of enforced social isolation, with descriptions such as ‘hemmed in’ and ‘struggling’ exemplifying their difficulties. However, it is also noteworthy that loneliness was not a universal experience; some reported that they had already adapted to a socially-restricted lifestyle due to worsening physical health, while others reported that their loneliness pre-dated COVID-19 and was the result of relatives and friends either dying or moving away. Yet another group related that they were not distressed through spending time by themselves and had hobbies such as sewing and gardening to occupy their time. These results underscore the personal variability of loneliness as an emotional experience but, at the same time, highlight the distress felt by people for whom loneliness is a normative experience as well as the increased levels of anguish that are induced in situations of heightened social isolation.

An additional question, ‘What are you most looking forward to when the restrictions are lifted?’ and the supplementary prompt, ‘How do you think you will feel once the restrictions have been lifted?’ also elicited responses which suggested that respondents have been struggling with life in enforced social isolation. Participants were looking forward to the freedom of choice between staying home and going out, contact with family members, the resumption of activities and, in particular, the ability to visit cafes and restaurants.

Overall, the respondents were aware that the pandemic and accompanying restrictions were unavoidable circumstances with global consequences, but this did not diminish the negative impacts, including loneliness, that were reported during the interviews.

### Clients of Anglicare services who felt more disconnected from family and friends

CHART 7



### Conclusion

While social isolation and loneliness had been ongoing social issues prior to the onset of COVID-19, it is apparent that the experience of lockdown and social distancing has exacerbated this situation for some. For others, the lockdown led to social isolation among people who were previously socially connected. Among Anglicare Community Services’ clients, the levels of social disconnection that resulted from COVID-19 were most keenly felt by people accessing mental health, family support, counselling and early childhood services. Qualitative research provides a more nuanced

understanding of the nature and impact of isolation particularly on older people accessing community supports. With the removal of lockdown conditions in the community there is an expectation that enhanced social connection, particularly for the most vulnerable populations, has the potential to improve. However, the impact of social isolation as a result of the pandemic should be considered in policy development and implementation, given the significant adverse social and economic impact that such isolation can generate.

## 5 Policy Context

In addressing declines in mental health, escalating financial hardship and social isolation experienced in the wake of the COVID-19 pandemic in Australia, both ongoing government and community-based responses need to be considered.

### Policy-based Approaches

The introduction of JobKeeper and JobSeeker acted as a buffer against the economic impact of the pandemic. Reductions in the levels of both

payments, especially of JobSeeker to a level only \$50 per fortnight above previous levels, will have serious hardship impacts on those who rely on such benefits. While there is some resumption of normal economic activity, there are still large parts of the Australian population who are vulnerable and at risk – especially those who are employed on a part-time or casual basis and those who are considered to be deeply disadvantaged. A multi-faceted policy approach is required, but there are clearly several policy areas which are critical.

*While there is some resumption of normal economic activity, there are still large parts of the Australian population who are vulnerable and at risk*

### Affordable Housing

The issue of accommodation is becoming increasingly urgent for many people. There are three key issues which have emerged in the housing policy space as a result of COVID-19.

**Increasing rental stress and rental debt** – Research by the University of NSW and ACOSS<sup>56</sup> indicates that private renters were particularly hard hit by the pandemic with at least a quarter of private rental

households losing income. Only a small proportion of renters received a rent variation (between 8-16%). However, at least 30% of rent variations deferred the rent rather than reducing it.<sup>57</sup> The report estimates that around 75,000 tenants nationally would have had mounting rental debts by the end of 2020. This is currently reflected in Anglicare's FFA service data with an increasing number of private renters accessing Anglicare services in the first three months of 2021.

Anglicare caseworkers refer clients with rental issues to financial counselling for payment plans, to No Interest Loans programs and also advocate to landlords to ease the debt burden. However, of concern is that staff are reporting a number of people accessing payday lenders. This means the debt will continue to accumulate. While the rental moratoriums were helpful in preventing rising homelessness, the process itself required significant consumer education. Many people accessing Anglicare services did not understand that the rent would need to be repaid. Additionally, some people began privately renting during the COVID-19 period and the landlord took into account the Coronavirus Supplement as part of income. As the Supplement was reduced the rent no longer became serviceable, pitching tenants into rental stress and rental debt. At a policy level, government needs to consider further financial supports to assist with accumulating rental debt for those most financially disadvantaged.

**The risk of homelessness** is an ongoing problem. The COVID-19 lockdown measures demonstrated the importance of having a safe and secure dwelling. The Castan Centre for Human Rights Law noted that homeless persons, and



especially women, were among the most vulnerable groups affected by the threat of COVID-19.<sup>58</sup> While some state governments authorised mass provision of emergency accommodation for rough sleepers and other homeless people, the transfer to longer term tenancies was only possible for a third of people.<sup>59</sup> The failure to rehouse more homeless people is a consequence of the low proportion of public and community housing (4%).<sup>60</sup> A disturbing finding from Anglicare's annual client survey data was that at least 12% of clients in Anglicare's financial hardship service indicated they had become homeless as a result of the pandemic. Anglicare staff have also noted with increasing rental arrears and rental debt a much greater risk of homelessness.

### Risk of homelessness is an ongoing problem

**Rental affordability** – Apart from homelessness, rental affordability is also an important issue. Anglicare caseworkers reported that, with the advent of JobSeeker and JobKeeper payments, along with the Coronavirus Supplement, a number of people entered the rental market at levels which were not sustainable; once those payments were reduced, more people entered into rental stress. Anglicare Sydney's recently released annual Rental Affordability Snapshot (April 30, 2021)<sup>61</sup> indicated that rental affordability is a long-standing issue, and this has been exacerbated over the last 12 months by the impact of the pandemic. At a national level, the Federal Government should immediately increase Commonwealth Rent Assistance and/or reform the eligibility rules so as

to improve the targeting of the payment to those households who need it most<sup>62</sup>.

The government should also defer the expiry of homes under the National Rental Affordability Scheme, due to expire this year<sup>63</sup>. At a state level, attention must continue to be directed to social housing. With over 51,000 approved applicants for social housing waiting on the NSW Housing Register, waiting times for general applicants on the register in the Greater Sydney and Illawarra region are either

5-10 years or over 10 years<sup>64</sup>. In addition, the Snapshot this year has highlighted the need for social and affordable housing in regional and outer metropolitan areas as the private rental market has become tighter in these areas over the past year due to the pandemic and natural disasters.

It is also important to improve security and stability for renters in the private rental market. The NSW Government previously enacted laws that introduce more protections into lease agreements,

including limiting the frequency of rent increases<sup>65</sup>. However, 'no grounds' evictions should be prohibited, to improve security of tenure for tenants. The temporary moratorium on evictions and other supports in response to the pandemic should be used as a

guide to more permanent housing policy changes. Better regulation of the boarding and share housing market is also needed to increase rental

protections and safety for low-income tenants<sup>66</sup>. As Australia emerges from the COVID-19 pandemic and economic protections are removed, it is a critical time for governments, communities and business sectors to work together to ensure the financially disadvantaged in our society have safe and secure housing.

### Income Supports

In the wake of the COVID-19 pandemic, Australians are still facing significant economic challenges, with a study by the University of Melbourne finding that one third of Australians report being in financial distress.<sup>67</sup> ACOSS suggested that up to 250,000 Australians will experience unemployment as a result of the cessation of JobKeeper in April 2021.<sup>68</sup>

The ANU study, referred to earlier in this report, highlights that with the finalised permanent level of JobSeeker being set at just \$50 per fortnight above previous levels, there will be a significant return to the pre-COVID-19 levels of poverty. The poverty gap will have moved from \$140 per week pre-COVID-19 to \$21 per week during the height of the pandemic, then back up to \$125 per week post April 2021.<sup>69</sup> For people on allowances this means that, while their poverty rate fell from 88% to just 26% at the peak of COVID-19, 85% will be in poverty after 1 April 2021. This is also true for other households. "As we transition out of COVID-19 we estimate for April [2021] that poverty gaps return for pre-COVID levels for lone persons and single parents and are increased for couples and couple families with children".<sup>70</sup>

The findings from the Anglicare 2021 Rental Affordability Snapshot demonstrate that, even with the \$50 per fortnight increase in JobSeeker, Youth Allowance and Parenting Payment single rates, which came into effect on 1 April 2021,

there were virtually no affordable and appropriate properties for these households in Sydney and the Illawarra in the private rental market. The experience of the Coronavirus Supplement has shown how these households can benefit from income support payments that come closer to meeting current costs of living. There need to be more substantial permanent increases to the base rates of income support payments such as JobSeeker. This will reduce rental stress and provide more money for life essentials, food security, utility payments, health needs, and children's educational requirements for families reliant on these income supports.

The much higher levels of demand for Anglicare's financial hardship services since September 2020 as the Supplement has been wound back is indicative that income supports will continue to be needed. For agencies like Anglicare who provide significant wrap-around supports and material aid to the most financially vulnerable members of the community, raising the permanent rate of JobSeeker needs to be further considered. Raising the rate needs to be part of a broader policy response involving social policies and programs, including workforce planning, training, economic development and inclusive employment and support services.

### Mental Health Supports

Issues of isolation and loneliness have been exacerbated by the restrictions on social gatherings and periods of lockdown during COVID-19. This is especially true for vulnerable groups including the elderly and those with disabilities and mental ill health. Evidence suggests that loneliness can play a role in other health outcomes, and can elevate an individual's mortality risk,<sup>71</sup> as well as increasing

levels of depression.<sup>72</sup> Researchers have suggested that globally, we are facing a 'social recession', the effects of which will extend beyond periods of lockdown and social distancing methods.<sup>73</sup>

In Australia some researchers considered mental health was in crisis before the pandemic, but COVID-19 has exacerbated the issues. The current mental health system, according to University of Sydney researchers, is "palpably inadequate for the challenges ahead".<sup>74</sup>

The World Health Organisation considers that substantial investment is required in mental health services as a core element

in the response to and recovery from COVID-19.<sup>75</sup> The Australian Government outlined a mental health response plan in May 2020<sup>76</sup> which highlighted the need for targeted, effective and timely responses, with proactive outreach to people who may have disengaged from services. It argued for "connected pathways of care" across the current mental health landscape as well as the traditional

health system.<sup>77</sup> A series of principles and priorities was outlined including the need for an integrated approach; participation of consumers and carers; partnership and collaboration across health, other sectors and communities; flexible solutions; and equity and equality of access. It called for a whole-of-government approach and received \$48.1m in funding towards its implementation. It is critical that such funding and this approach are planned and embedded into a recovery strategy rather than representing a one-off

*Substantial investment is required in mental health services as a core element in the response to and recovery from COVID-19*

*With JobSeeker being set at just \$50 per fortnight above previous levels, there will be a return to pre-COVID-19 levels of poverty.*

*Households can benefit from income support payments that come closer to meeting current costs of living*



response to a situation which is clearly ongoing. These funding models need to support best practice and evidence-informed multidisciplinary teams providing care for those with complex conditions including mental health care in the home. It should also include increased funding for early intervention services and psychosocial community supports.

One of the most critical concerns in the past twelve months has been the escalation in domestic and family violence (DFV). This reflects isolation within the home, making disclosure of DFV difficult and escape problematic, compounded by reduced access to support services. Specialist women safety services and women's refuge agencies are calling for \$150m in special funding as a record number of women experiencing such violence reach out for support. Such agencies require ongoing and expanded funding supports to meet the increasing demand.

### Community-based Approaches

The strength of a society is not just measured in the fairness and effectiveness of government policies in improving the lives of its citizens but in the strength of its social fabric and social institutions. This strength is expressed by the idea of social capital, which has to do with networks, norms and trust, which facilitate coordination and cooperation for mutual benefit. In simple terms, it is the 'glue' which holds society together.<sup>78</sup>

Recovery from the pandemic will also rely upon the actions of ordinary citizens. At a basic, individual level, this involves people joining organisations, volunteering and giving. It can involve activity through the workplace and associated groups such as professional bodies, employer groups and trade unions. It may involve participation in clubs, sporting and leisure activities and taking an interest in the welfare of family, friends and strangers. It may also involve working with others through political systems.<sup>79</sup>

### Churches

One social institution that is a focus for Anglicare is the local church. Churches have an integral role to play in addressing issues of social isolation because of their capacity to create and offer social capital. The Organisation for Economic Co-operation and Development (OECD) defines social capital as 'networks together with shared norms, values and understandings that facilitate co-operation within or among groups.'<sup>80</sup> In his seminal study on social capital, Putnam asserted that faith-based organisations are arguably the most important social capital repository in the US. This is because of their direct input to civic life by offering social support to members and, significantly, to the broader community,<sup>81</sup> a role that is reflected in the Australian context.

The capacity for churches to offer social capital is demonstrated by the partnership

that Anglicare Sydney has established with churches in the Sydney Anglican Diocese to provide food and financial assistance to local communities through Anglicare Sydney's Mobile Community Pantry. The pantry vans set up on church properties fortnightly and provide locals with affordable groceries. Anecdotal evidence gathered from volunteers and staff suggests that the social support offered by these programs extends beyond the provision of cheap groceries; participants also report the pantries offering social connection and the opportunity to meet other locals.

Churches therefore can play a key role in addressing issues of social isolation and loneliness experienced in the wider community by creating spaces and programs where community members can form connections with others and receive social support, thus mitigating feelings of aloneness and isolation.

*Opening up the economy needs to be done in a way which ensures that many are not left behind.*

## 6 Conclusion

The COVID-19 pandemic has brought the dangers of infection, disease and premature death to all corners of the globe, including Australia. The response to the pandemic has resulted in a swathe of economic and social disruption as government and community have sought to find the best way of bringing the disease under control. It has been a difficult balancing act to bring about long-term public health outcomes without setting the nation back economically and socially for years to come.

At the time of writing, Australia was in the midst of a vaccine rollout for the population and the beginnings of an economic recovery. A 'travel bubble' has just been opened with New Zealand and there is growing optimism around the possibility of resuming overseas travel, allowing overseas students to return to Australia and an economic boost to tourism, hospitality and services sectors.

Yet, opening up the economy needs to be done in a way which ensures that many are not left behind. Anglicare service and client data outlined in this report demonstrates ways in which the ranks of the disadvantaged appear to be increasing. As one of the major providers of emergency relief services in Sydney, there is evidence that the numbers of people accessing such services are

*Life after lockdown means some Australians being further behind economically, psychologically and socially than they were prior to the pandemic.*

increasing, including those who are one-off service users. These numbers have been increasing as JobKeeper was slowly phased out and the level of JobSeeker has returned to a level only \$50 per fortnight above the previous level, but without the Coronavirus Supplement.

The proportion of those using Anglicare's services who are private renters is also increasing, consistent with wider concerns about the accumulation of sizeable rent debts during the pandemic. Younger people also appear to be more at risk as they struggle to pay rents with loss of jobs and loss of hours.

Disadvantage involves a shortage of the income and resources needed to acquire the essentials of life. This report shows that some Australians are also being held back in other ways apart from the material. Higher levels of

anxiety were reported among clients of Anglicare's mental health, family support and FFA services, an impact which may continue well beyond the pandemic. Social isolation and loneliness, which were already issues for some prior to the pandemic, have been exacerbated by the experience of lockdown and social distancing. For others, the lockdown led to social isolation among people who were previously socially connected. There is evidence that the social disconnection that resulted from COVID-19 has been felt by people accessing mental health,

family support, counselling and early childhood services, and that social isolation is being experienced among older people accessing support through Anglicare At Home.

The lesson of this report is that life after lockdown means some Australians being further behind economically, psychologically and socially than they were prior to the pandemic. This calls for a robust policy response in, but not limited to, housing policy, including more ambitious social housing targets, better protections for renters and action to contain and reduce levels of homelessness – issues about which Anglicare Sydney has long advocated. There have been calls for better mental health supports and support for the victims of domestic violence in the wake of the pandemic. While supporting calls for greater government intervention, Anglicare believes there is a role to be played by community organisations in building social trust and addressing a variety of needs; in this respect Anglicare recognises the part to be played by local churches both in partnership with organisations such as Anglicare and in working on the ground in local communities.

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