

# **TOWARDS SELF HELP: URBAN/RURAL DIFFERENCES IN ACCESS TO SERVICES**

MAY Policy Technical Paper 93/9

ISSN 1171-4662  
ISBN: 0-478-07323-2

Prepared by the New Zealand Association of Citizens Advice Bureaux

for

MAF Policy  
Wellington

June 1993

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## **FOREWORD**

In 1992 a series of meetings were held between MAF Policy and the New Zealand Association of Citizens Advice Bureaux (CAB). The purpose of these meetings was to discuss areas of mutual interest in achieving adequate access to basic services by rural people.

The CAB collects statistics on inquiry topics on an annual basis, and in May and June 1992 carried out a survey called 'Making Ends Meet'. It was agreed that further analysis of this data in a form which separated rural from urban would be of interest to MAF and rural people generally. Accordingly, the data sets (of both quantitative and qualitative data) provided by each CAB and by Family Budgeting Services (FBS) were divided into three groups: urban, urban with rural hinterland, and rural.

This report compares responses provided by the three groups and identifies which problems were specific to rural areas. The report also looks at strategies which were enabling CAB and FBS clients to help themselves, includes a summary of case study profiles and makes some recommendations on activities which could be followed to help rural people overcome access barriers.

The views represented are those of the New Zealand Association of Citizen's Advice Bureaux and do not necessarily represent the official view of the Ministry of Agriculture and Fisheries.

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## 1.0 INTRODUCTION

### 1.1 Background

This report has been commissioned by the Rural Resources Unit of the Ministry of Agriculture and Fisheries with the purpose of examining the nature of enquiries which Citizens Advice Bureaux and budgeting services affiliated to the Federation of Family Budgeting Services receive. It also aims to:

- assess and compare rural and urban differences in CAB client enquiries. There is a particular emphasis on analysis of CAB's rural sources;
- establish the similarities and differences in access by rural people to services from the enquiries presented to bureaux and budgeting services.

A variety of recommendations are made for addressing the service needs of rural communities.

### 1.2 Citizens Advice Bureaux - Their Role and Function

There are 87 Citizens Advice Bureaux in New Zealand. They operate from Invercargill to Kerikeri. They have been established in each area in response to expressed community need for an information service. After fulfilling a series of criteria, a bureau becomes a member of the New Zealand Association of Citizens Advice Bureaux.

The aims of each individual bureau and of the Association are:

1. To ensure that individuals do not suffer through ignorance of their rights and responsibilities, or of the services available; or through an inability to express their needs effectively.  
Kia kua e tukuna te takahi i te nana o te tangata na te kore mohio ki ona tikanga ake, ki nga ratonga hoki; na te noho whakamaa raanei ki inua i te tangata ke.
2. To exert a responsible influence on the development of social policies and services, both locally and nationally.

Kia whakaurua he reo tautoko hei hanga kaupapa, ratonga aa iwi, aa motu hoki.

The service therefore provides free to all individuals an impartial and confidential service of information, guidance and support, and makes responsible use of the experience so gained.

Bureaux are staffed by carefully selected and trained volunteers - about 2,500 throughout the country - whose task it is to keep up to date with and pass on information which bureau clients may require. As active members of their communities, bureau workers are also often in touch with community issues and needs. Indeed, issues facing clients may also be facing bureau workers.

Bureaux services are free to the *user*, an important hallmark of the service in a day and age of user pays, and a key element of the accessibility of the service to all clients- This free service would not be possible without the time and skills donated by volunteer staff. Financial assistance is provided from a variety of local community sources including local authorities, philanthropic trusts, the Community Organisations Grants Scheme (COGS), Trustbanks, and local bureau fundraising such as cake stalls.

Central government funding enables the national and regional operations of the Association to provide support services to bureaux. Lottery Board funds also play a vital support role at all levels.

The existence and "success" of a bureau is based on the amount and manner in which it is used by local people. Citizens Advice Bureaux are a customer driven service which people freely and independently choose to use. Each bureau sees itself as part of a network of colleague services. Bureaux do not claim or wish to claim that they have a monopoly on providing information. But the unique role of advice bureaux is as a "generalist" information service - the general practitioner among specialist community, social and recreation services and activities, to which clients are referred as necessary. As a result each bureau is in a unique position to be a "litmus test"<sup>1</sup> of current issues, concerns and developments in their communities. The combined information of all bureaux throughout the country is a formidable and impressive resource.

### **1.3 Federation of Family Budgeting Services - Their Role and Function**

The Federation is a voluntary, non-profit, bi-cultural organisation funded mainly by the Government, and is the umbrella association for affiliated budgeting services which are located throughout New Zealand from North Cape to Bluff and extending to the islands of Waiheke and Great Barrier and soon, to Stewart Island.

The New Zealand Federation of Family Budgeting Services (Inc) (mostly referred to as FFBS in this report) is made up of the President, Secretary, Treasurer and District Representatives in 25 locations, and a network of 150 affiliated and associate budgeting services for thousands of clients.

These services aim to help families find satisfaction and security in handling their own financial affairs through:

- the development of good money management skills;
- reduction and elimination of debt;
- increased savings;
- changes in financial priorities where necessary, to achieve happier family relationships and a more comfortable lifestyle.

These educational objectives are achieved in the one to one relationship of a client family with the service advisers through a process of education to develop the family's capacity to handle its own affairs and become fully independent.

During the last year - to June 1992 - 151 budget services had affiliated to the Federation. From statistics received, there are 72 co-ordinators employed by the services and 2500 volunteer advisers. (There are many services that do not employ paid Co-ordinators). The services received over 24,000 enquiries and worked with 17,500 clients helping with budgets and giving ongoing help and support.

Clients using the services in this period had \$22,300,000 of arrears of debts. Budget services help return money back to their communities that may not have been returned except through expensive debt collection and court procedures. Clients are three times more likely to be beneficiaries than wage earners. Clients using the services are 40% European/other: 33% Maori: 17% Pacific Islander.

Budget services also undertake extensive community education programmes to encourage good money management and use as a support towards happy and well balanced families.

## 1.4 Methodology

### Making Ends Meet

This report is based on the survey "Making Ends Meet": a research project aimed at identifying the major concerns and associated opportunities and barriers for CAB and FFBS clients, from the perspective and experience of workers in both organisations. The survey also focused on issues which affect the operation of the bureaux/budgeting services and the relationship they have with the community.

The "Making Ends Meet" survey was carried out during May and June 1992. Similar questionnaires with mostly parallel questions were sent to each of the CABx and FFES services. The questionnaires were completed out of discussion amongst paid and unpaid workers in these services. Some questions were pre-coded, others were open-ended. Each question invited comment, which services responded to frequently and fully, including providing case studies in some instances. The results were analysed and prepared in the report "Making Ends Meet" released in September 1992.

### Response rates

The response rates were high, particularly for self-administered questionnaires. There were 97% returns from CABx and 59% from budgeting services. Data from the FFBS survey has been grouped and collated using the regional CAB breakdown for ease of presentation of data.

### Geographic breakdown

The services have been divided into three major geographic categories for the purposes of data analysis for this report. (N = number of respondents in each category):

Urban(U; N=43 CABx, N=33 FFBS), Rural(R; N=27 CABx, N=29 FFBS), and Urban-Rural hinterland(URH; N=17 CABx, &--15 FFBS). Urban services were defined as those operating in the 5 main metropolitan areas of Auckland, Hamilton, Wellington,

Christchurch and Dunedin. The city and suburban services in these cities service primarily an urban population, even though a few enquiries may come from non-city dwellers. The rural services were defined as those based in towns of less than 10,000 population, and so their clients would be predominantly rural. The urban/rural hinterland group covered services based in secondary cities of greater than 10,000 population, but were not one of the five major metropolitan centres. This group serves both city dwellers and a surrounding rural area.

### Source of data

This report is a combination of both quantitative and qualitative data drawing on the responses to the original Making Ends Meet survey; information drawn from the overall pattern of CAB enquiries for the 1990/91 and 1991/92 statistical years (July to June) and individual case studies sent in by CABx which illuminate the nature of the issues identified.

References in the report to data from "Making Ends Meet", especially regarding changes in the past year are referring to changes during the year to June 1992. Case studies presented in this report include examples sent in from bureaux since the "Making Ends Meet" survey.

### Limitations of the data

Both this report and the "Making Ends Meet" report are limited because the original survey was not developed with the purpose fully drawing out the nature and extent of access issues. As a result, the picture is incomplete and may well understate the full extent of problems.

Sample size of the raw data varies slightly from question to question. This is because in some questions respondents were asked to tick no more than three main factors/concerns. Where more than

three responses in a question were given, these responses have been excluded from the analysis.

Data in the URH geographic area is the least reliable in terms having the smallest sample size. This is important to note when examining reported percentages for this geographic category.

As discussed in the previous section, the CAB and EFES carry out different roles and functions. In responding to the "Making Ends Meet" survey, this affected their perceptions of the relative importance of the issues that their clients face.

While the reported results show a strong similarity of client concerns in many areas, they are reported separately in each section to emphasise:

- that they represent two different samples from the same population;
- to show the effect their different perceptions have had on the results;
- to avoid any double counting that might occur if the two samples were combined; and
- to account for the slight variations in survey format.

## 2 - 0 THE MAJOR PROBLEMS FACING CLIENTS

### 2 - 1 Introduction

This section looks at the major problems facing clients at a broad level. Services were asked what were the main problems clients have been dealing with over the last 12 months these were connected with. Responses the table below for both services. months and the are presented in

<u>Issue</u>	<u>Urban</u>		<u>URH</u>		<u>Rural</u>	
	<u>CAB</u>	<u>FFBS</u>	<u>CAB</u>	<u>FFBS</u>	<u>CAB</u>	<u>FFBS</u>
Income	84	100	90	71	77	88
Employment	61	60	90	57	64	68
Housing	23	43	20	64	41	24
Health care	19	23	10	7	32	20
Personal issues/ Family pressures	84	13	70	14	64	16
Personal confidence	6	7	-	14	5	
Training for paid work	3	10	-	21	8	
Lack of budgeting skills (Budget services only)		53		50		64
Sample size (N=)	31	30	10	14	22	25

Results expressed as percentage of responses. Respondents able to list up to three main problems.

### 2.2 CAB Results

Bureaux across all geographic areas saw the main problems their clients had been dealing with in the last twelve months as related to income, personal issues, and employment. These were more strongly identified as problems in the urban and URH areas. Some comments were:

- The degree of hardship has deepened consequent on loss of income due to unemployment, cuts in benefits and user pays philosophy, increased Housing Corporation rents and the costs of health care.
- Economic situation with high unemployment, cuts in benefits etc means more people with financial problems which lead to domestic and other problems.

In rural areas, clients appear to face a wider range of significant problems. For instance, in

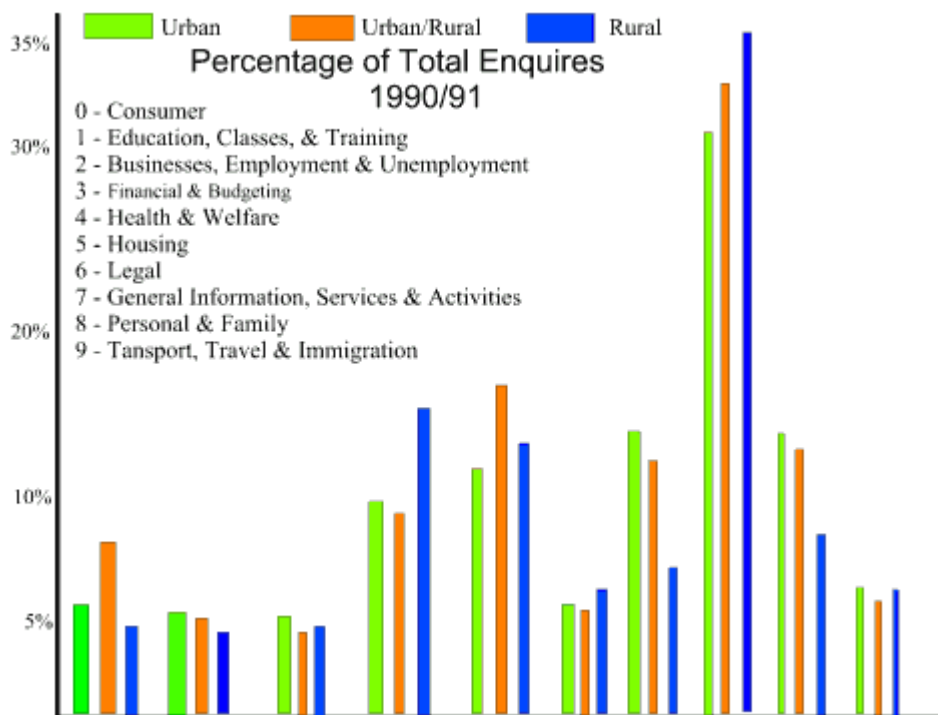
urban and in URH areas housing and health issues are not specified as major problems the same extent as in the rural areas, where they are specific as significant problems. For example, 41% respondents noted the housing and 36% the health concerns of rural clients. This appears strongest in the rural areas of the south region.

Rural bureaux also noted a greater complexity of client problems relative to three years ago. The following comment is typical of respondents' comments:

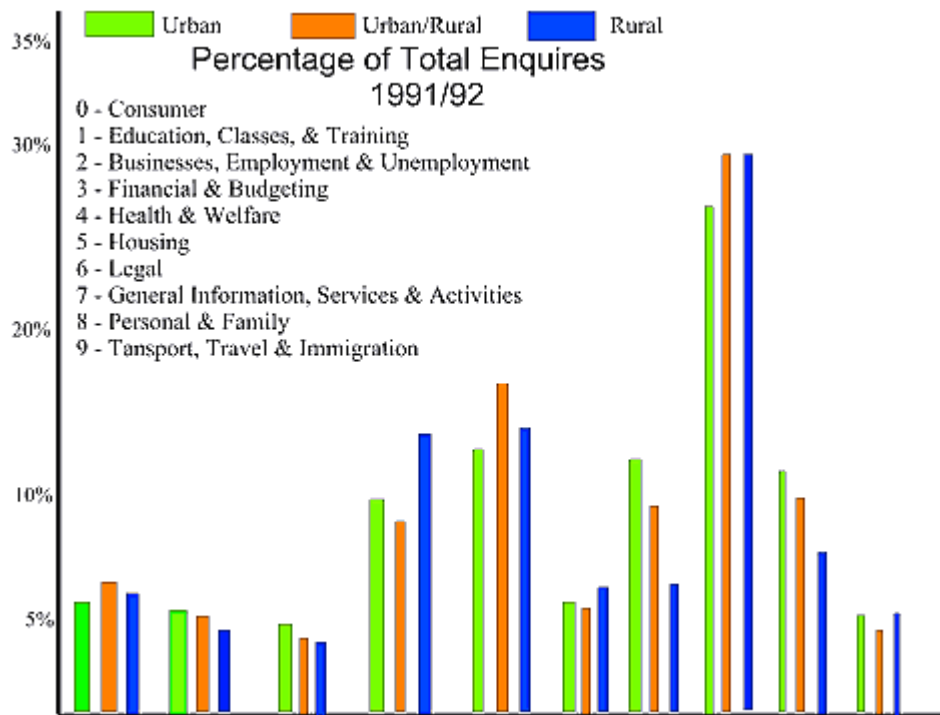
We would handle the occasional difficult problem less than once a month, now we have serious inquiries every week.

Across all areas, bureaux did not see an absence of personal confidence as a major problem that their clients faced in the last year. This indicates that material factors are more significant than emotional in terms of the problems that CAB clients face. It is also possible that people lacking personal confidence may not have found their way to the CAB services in the first place.

The enquiry statistics for the past two years provide another window into geographic differences in client needs.



These results highlight some significant differences in the last two years in usage of CABx by urban and rural clients. Financial and budgeting enquiries are significantly higher for the rural bureaux. This could, in part, be attributed to rural clinics set up with Inland Revenue Department to assist clients with tax returns, but many bureaux in other areas provide this service also. It suggests significant finance and budgeting needs in rural areas. Health and welfare enquiries are slightly higher in the rural areas and especially in the URH areas. Housing enquiries are greater in the rural areas, possibly reflecting the bureau taking appointments for the mobile Housing Corporation van, but also the lack of other agencies to turn to for problem resolution. Legal enquiries are considerably lower for the rural bureaux. This could reflect less rural bureaux having free legal advice sessions, and/or the greater



distances involved in accessing any such services. The lower rate of personal and family problems brought to rural CAEX highlights the barriers for clients in bringing these problems to a community service where they may be known.

Further analysis of the sub-categories within which client enquiries are recorded in these 10 broad categories would be necessary to understand more fully why rural and urban enquiry patterns show these differences.

## 2.3 FFBS Results

FFBS saw the problems their clients have been facing over the last 12 months as being broadly similar to that of CAB clients. Income is ranked first in all areas (100% U, 88% R, 71% URH) as the issue to which most of the problems are connected. Employment is also significant (60% U, 63% R, 57% URH).

Some general comments include:

- Many clients now have debts to DSW.(Liable parent, overpaid benefit etc), IRD (overpaid family support), Area Health Boards (child sick) and very little left on the benefit to pay these. There is much more unemployment, Housing Corp rents have increased and benefits reduced so in many cases there is very little money available to pay large debts. Most clients now do not have a car or a phone but are still paying debts on them.
- There is no longer employment security or availability of help through DSW or Housing Corporation. (People feel a) loss of control of their own lives, always told what to do. Loss of hope that the situation will improve.
- Hire purchase and store accounts were the common debt, now power rates and "ordinary"<sup>1</sup> living costs are not being met.

Budgeting service results also show that a large number of problems are seen to relate to a lack of budgeting skills. This is not surprising given that this is the presenting problem for budgeting services

and the reason for their existence.

In the comments on budgeting services questionnaires however, many noted the absence of budgeting skills as less significant than in earlier years. This is consistent with the importance of income as a major source of problems.

- One thing I have noticed in the past twelve months is that we have been seeing people who have budgeted as well as they could and in fact are doing everything right. They just didn't have enough money to go around and so house, car and health maintenance just didn't get done.
- Lack of budgeting skills is a far less common reason now than three years ago for financial difficulties. These are now often beyond the clients' control because of insufficient income to balance the budget. A large number of clients think there must be something wrong with themselves if they can't meet all of their needs from their income so they approach us to find out what they are doing wrong. Often they are relieved when they find out that they haven't enough income to cover their modest and essential expenses.

### 3.0 THE BARRIERS AND ENABLERS TO CLIENTS HELPING THEMSELVES

#### 3.1 Introduction

This section looks at the nature and scope of client problems in more depth and begins to draw out access issues. Bureaux and budgeting services were asked to identify what they saw as the blocking and enabling factors to clients helping themselves, listing the three most important factors, and asked to make any further comment.

#### 3.2 Barriers

Services were asked to list the three most important as factors seen as blocks for clients in helping themselves.

<u>Blocks</u>	<u>Urban</u>		<u>URH</u>		<u>Rural</u>	
	<u>CAB</u>	<u>FFBS</u>	<u>CAB</u>	<u>FFBS</u>	<u>CAB</u>	<u>FFBS</u>
Lack of knowledge about rights as a consumer	26	24	60	5	48	17
Insufficient income	100	82	100	84	52	79
Lack of information about govt assistance	37	24	30	32	43	34
Lack of personal confidence	33	70	20	42	30	24
Difficulties with access to health care	23	3	10	5	17	14
Difficulties with access to childcare				3		
Lack of life skills /budgeting skills	57	85	30	21	48	79
Difficulties with access to housing	7	15		10	22	3
Discrimination	3	6		5	4	17
Lack of access to transport	3	-	16	17	17	
Sample size (N=)	30	33	10	14	23	29

Results expressed as percentage of responses. Respondents able to list up to three main blocks.

#### CAB

In all three areas, the most important block to CAB clients helping themselves was seen to be insufficient income. This was listed by all urban and URH bureaux as the most significant block, yet was only listed as such by 53% of rural bureaux.

Rural communities indicated a wider range of blocks in trying to help themselves. As well as income, other blocks featured as highly significant in terms of people being able to help themselves - especially access to transport, housing and health care.

For instance, in the Waikato/Bay of Plenty region 3 out of 9 rural bureaux responding listed poor access to transport as a block to clients helping themselves. In the Southern region 3 out of six rural bureaux listed difficulties with access to health-care and difficulties with access to housing. This comment from a southern rural bureau captures the range and extent of these blocks in comparison to

three years ago:

Bus services to country townships were cut 18 months ago and there is no public transport available in Westport. Since benefit cuts 18 months ago, there is little or no money left for health care or to maintain and run a car. Problems starting to come through now that low cost housing is no longer available. More and more hospital services are being centralised in Greymouth meaning Buller people have to travel 200kms or more for specialist appointments/ certain types of x-rays etc. Little or no help is available from the Area Health Board or DSW towards these travel costs.

Other comments from rural bureaux in the Waikato and Central regions were:

There has been a substantial increase in the requests for the volunteer transport services to Waikato hospital and specialists. Cutbacks in the local bus service has resulted in a meagre service with times that do not fit in well with hospital or DSW visits. This also affects clients needing urgent DSW payments, as our local office is a non-payment office so clients are expected to go to Hamilton. Sometimes they cannot afford petrol or do not have a car.

Otorohanga does not have any government departments except police so people must go to Te Kuiti for DSW, Rural Bank, NZFS, District Court, ACC etc. Transport costs are a problem and there is a very poor bus service and no train service.

People on limited income who need to travel use the house keeping allowance for transport to attend appointments at government departments leaving little money for food and bills. When applying to DSW for reimbursement there is a processing delay when food is needed on the table. People who act as emergency drivers are also often beneficiaries too and need petrol money immediately

Another significant block in all three areas was noted as a lac of life skills (57%) but especially in urban areas. An indicative comment on life skills was:

Some young people lacking in ordinary life skills need instruction in basic cooking skills- foodbanks often supply essential ingredients - flour, sugar etc but the client cannot use them because of inadequate skills.

In rural areas the availability of information (about government assistance and consumer rights) was noted as a major issue and as a particularly significant block in the W/BOP and southern regions. Comments about access to information include:

Rapid changes in government policy make it very difficult for people to keep abreast of up to date information particularly the elderly and less well educated.

More and more Government departments seem to be withdrawing their services to regional offices and visits to some places are only made fortnightly or monthly, thereby making it harder for clients in rural areas and waiting times for decisions becomes longer.

Staff cuts in some Government departments (e.g. DSW) makes it difficult for clients to make contact with particular division and/or staff member qualified to give information. Particularly difficult to get past the telephone exchange in a number of departments.

### FFBS

The most significant block in the urban and rural areas noted by budget services was a lack of life skills (defined to include a lack of budgeting skills). This strongly reflects the FFBS service focus.

The responses support those of the CAB in that insufficient income ranks either first or second in all areas as a significant block. Budgeting services note that this can have multiple impacts.

Insufficient income is more important now and leads to health care and housing problems.

The lack of information about government assistance is broadly similar across all three categories and at the level of the region confirms the greater significance as a problem again in the southern region.

So many changes with benefits that it is hard for people to keep up. Information is more difficult to get and constantly changing.

The constant change in our society is confusing for a lot of people and it is easier for them to just block problems out and hope they will go away.

A lack of access to transport is also seen as an important block in rural areas, particularly in the far north of the Northern region. Some comments include:

Lack of public transport involves heavy car expenses that are often unsustainable.

No public transport so means people are very dependant on friends, family, neighbours and community.

We lost bus services, then when they started up again time tables were not helpful to all community needs. The cost of transport to Auckland from here is \$40.00 each way. Leaves 1.30pm and the private bus (\$34.00) leaves at 9am. It costs \$15 dollars each way to Whangarei and this leaves at 5pm so almost all trips away need an overnight stay.

### 3.3 Enablers

Services were asked to list the three most important factors which enable clients to help themselves. The list of options presented to respondents differed from and was not always comparable to the question asking about blocks.

<u>Enablers</u>	<u>Urban</u>		<u>URH</u>		<u>Rural</u>	
	<u>CAB</u>	<u>FFBS</u>	<u>CAB</u>	<u>FFBS</u>	<u>CAB</u>	<u>FFBS</u>
Paid employment	56	69	54	62	52	57
sufficient income	53	67	64	54	35	57
Personal motivation	31	11	45	23	48	39
Information	22	9	45	30	35	14
Life skills	34	38	36	54	13	29
Availability of community support	25	19	27	8	17	18
Access to affordable health care	16	13	-	15	22	-
Access to transport	-	3	9	8	26	18

Access to housing	13	19	18	15	13	4
Training	16	25	9	38	17	29
Toll free lines	3			-	22	
Affordable childcare	6			8	4	
Personal confidence	6	3	18	3	4	21
sample size (N=)	32	32	11	13	23	28

Results expressed as percentage of responses. Respondents able list up to three main enablers.

### CAB

Across all three categories the most important enablers for clients helping themselves are broadly similar, with paid employment and sufficient income being the main themes.

Also listed as enablers in the rural areas are access to toll-free lines (2/9 WBOP and 2/3 central), access to transport (2/5 northern and 2/6 southern), and access to affordable health care, especially in the southern and W/BOP regions.

We are the smallest toll free area in New Zealand, consequently a lot of our clients do not have the telephone. [Telephone costs presumably too high if mostly toll calls.]  
Toll tree lines to DSW and IRD especially are needed.(Rural bureau in Taranaki)

In urban areas, access to information about government services was seen as less important as an enabler, though availability of community support is much more important in urban(34%) and URH (36%) and least so in rural areas(17%). This suggests community networks are stronger in rural areas, but that accessing official information is relatively more difficult.

Significantly, life skills are seen as a less important enabling factor in rural areas. This may reflect the fact that life skills for managing in the rural areas have changed less over time than urban life skills. It may also reflect greater availability of community support with smaller communities pulling together more, and the relative importance of other access issues.

### FFBS

The FFBS responses are similar to CAB. Across all three categories paid employment and sufficient income were seen as the most important enablers to clients helping themselves.

Budgeting services also emphasise the importance of training as an enabler to clients helping themselves. This may reflect the FFBS goal of educating their clients to manage their finances better.

Access to transport was seen as most significant as an enabler in the rural Northern region.

## 4.0 ACCESS TO SERVICES

### 4 -1 Introduction

This section focuses on comparing the level of access to services across the three geographic areas. The following discussion draws on answers from bureaux and budgeting services to the survey questions about services in their area.

Only the CAB survey asked questions on whether there were appropriate or sufficient services in their communities so the first portion of this discussion represents CAB results only. CABx as a generalist service play a significant role in referring clients to other relevant specialist services. FFBS services are one such specialist service and are less likely to be engaged in such widespread referral work with their clients.

### 4.2 CAB - Appropriate and Sufficient Services

Bureaux were asked: When they refer clients to other services in the community, do they find that there are appropriate services; and/or if there are enough services. Responses are set out in the table below:

		Appropriate	Sufficient
Urban	Yes	88%	76%
	No	5%	8%
	No response	7%	16%
URH	Yes	100%	93%
	No	-	7%
	No response	-	-
Rural	Yes	88%	69%
	No	8%	31%
	No response	4%	-

Nearly all bureaux considered that their communities had appropriate services available to them.

Just what "appropriate" is, is not defined but could indicate satisfaction with the quality of services or that the community services are relevant to the client needs.

In terms of whether the local community had enough services, the rural areas appear to be the worst off. While 91 and 93% of urban and URH bureaux said that there were enough services available, only 69% of the rural bureaux said the same. Some particular comments made by URH and rural bureaux were:

Our bureau has difficulty in locating good, reliable, affordable counselling services. Marriage Guidance have only six trained counsellors so often there is a 3-5 week delay. There are not enough people (especially men) to cope with the demand for Anger Management courses. Also there is a reluctance in this area for one on one counselling - group work is preferred by the counsellors but not by the people in need. We also worry that many call themselves counsellors but that there is no system for accountability. (Waikato/Bay Of Plenty region)

We don't have a rape crisis or any specialists in the field of counselling sexually abused clients. CAB tend to give them a listening ear and then for ongoing counselling we have to arrange something out of town and this is a cost to the client. (Waikato/Bay of Plenty)

We so lack family and stress counselling services. Marriage Guidance have one counsellor available who also does Family Court work. With the clergy being busy with their own people, the family health team are the most accessible referral. With no Rape Crisis or refuge available there is a gap here. But with the establishment of community constable and possible development of Victim Support, a safe house could become available. (South)

There has in recent years been a move by solo parents to the country areas in the belief that cheaper living was obtainable but much to their horror, even though accommodation has been gained, more and adverse expenses have been incurred through isolation. One parent families are struggling here to survive. We are far from NZ Post, DSW branches, doctors, dentists and supermarkets (where food is considerably cheaper). A good car is essential. (South)

### 4.3 Services Starting Up in the Last Year

Services were asked about changes in community and government services in the past twelve months.

		<u>Services Started Up</u>
Urban CAB	-Yes	85
	-No	7
	- No response	8
Urban FFBS	-Yes	61
	-No	33
	-No response	6
URH CAB	- Yes	93
	- No	7
	- No response	-
URH FFBS	- Yes	58
	- No	37
	- No response	5
Rural CAB	- Yes	92
	- No	4
	-No response	4
Rural FFBS	-Yes	62
	-No	32
	-No response	6

#### CAB

All bureaux reported a high rate of service start up with the level of rural and URH being slightly higher. Of those that responded yes to this question the predominant form of new services were either food-banks, related to community mental health (such as victim support, counselling services, anger management and Mothers Against Drunk Driving) or Link Centres. This comment from a rural bureau typifies the issue of voluntary services responding to new needs:

Voluntary community agencies are coping with higher workloads because of winding down of some Government departments functions. More voluntary agencies are promoting health skills, life skills, budgeting skills, age support etc (Central region)

In Urban areas, particularly in the Northern region there are higher proportion of advocacy based services (such as Poverty Action, combined Beneficiaries Union and State Action Housing) noted as having started. This may correlate with the greater knowledge of consumer rights in the urban areas highlighted earlier. There is less of a population base to support such specialist services in rural areas and may also indicate that higher priority in rural areas has been for services that foot on peoples day to day survival such as foodbanks, leaving little time or energy for other action.

#### FFBS

FFBS report a lower level of service start up than the CAB though the rate of start up supports the same trends as the CAB figures. This possibly reflects the differing extent of networking and lesser role in new service development among the budgeting services. Rural areas noted the highest rate of development of community mental health services and community resource centres.

### **4.4 Service Cutbacks and Closures in the Past Year**

Services were asked to note and give examples have closed or been cut back over the last 12 months.

#### CAB

In terms of the closure of services rural bureaux have noted less service closures - 50% have noted service closure (c.f. 68 and 64% in Urban and URH). This does not however indicate the impact of these closures or the level of service existing at the start of the year. The main form of closure and cutbacks noted were government agencies. This comment from a Waikato bureaux highlights the problems caused by closures:

The fortnightly visits by the Housing Corporation caravan to the area have stopped this month after years of valuable service. A letter of appreciation was sent by CAB and the reply from them was to urge our clients to write instead of phoning Housing Corporation as the staff shortages delayed them in finding the right person who could well be out of the office or delay finding the information that the client requires. Looking to the future Housing Corporation hope to have smaller offices around the area. No indication of when this is likely.

One particular access problem highlighted in the URH was the cut backs in the industrial relations service. These comments were both from Waikato/Bay of Plenty bureaux:

For those with employer/employee problems resulting in loss of employment there are long stand down periods. This is made worse by the fact that the nearest industrial relations mediator is in Auckland or Wellington.

No local contact for employee contract problems. The remoteness of the Industrial Relations service means that those unfairly dismissed have difficulty in gaining quick redress.

#### FFBS

All FFBS reported a relatively lower level of service closure than CABx. Service closure is slightly higher in the rural and URH categories (25 vs 35 and 37%). The lower level reported by budget services may reflect the narrower range of specialist services with which the FFBS have contact. Of those that reported what the closure was, the majority are again government agencies and the rural areas are most affected. While it appears that rural and URIT areas are worse off in terms of the level of service cuts and closures, this again does not give a picture of the impact of service closure.

## 4.5 Initiatives in Response to service Closure

Most bureaux have set up or encouraged the establishment of community service agencies in their area. Some of the services are based in the bureau itself. Examples of such services include:

- toll free line
- suitcase bureau
- interpreters services
- free legal advice services
- survey to gauge the need for transport services for elderly people
- providing a venue for other services such as the public health nurse, Inland Revenue Dept tax advice
- making newspapers available for elderly and unemployed people
- Justice of the Peace service
- budgeting service
- speaking in hospitals, prisons, schools
- establishing a telephone contact service for the elderly
- rural bureaux organising a transport service to hospitals
- positions vacant display boards for NZ Employment Service
- increased bureau hours and/or installed extra phone lines

Other services bureaux have assisted in establishing but are not based in the bureau include Toughlove, foodbanks, women's wellness centre, accountancy service, groups for orchardists, drug and alcohol counselling, information room in community centre, victim support, library book "drop off". Bureaux have not been the only catalyst for the establishment of these services, but have worked with others in their area to identify the need and develop solutions.

Rural and URH bureaux have attempted to overcome the problem of terms of access to government departments in a variety of ways, but have not always met with success as the following comments demonstrate.

Inland Revenue have advertised locally for shared office space but this hasn't eventuated. We get quite a number of tax enquiries and with no local office a toll is needed. Not all clients have a phone or the transport to take them through to the nearest office. We intend to approach IRD to see if we could make appointments for them for a regular visiting day.

Two officers have visited our town twice from nearest major city more than three hour's drive away to deal with child support. Bureau took appointments. Although we offered they insisted on doing their own advertising which for their first visit consisted of an advertisement in a paper not read in our town. consequently there were only three appointments for the one and a half days they were here.

We contacted IRD and pointed out that visits needed to be advertised in the local paper with plenty of time before the visit and again offered to do this. Once again they refused and the advertising for the second visit consisted of one ad in the local paper the Friday before the visit was due the following Tuesday. The Monday was a public holiday and the bureau was closed. The result was no appointments for this visit and the Tuesday date was advertised again after they left. Subsequently future visits were cancelled by IRD due to lack of interest.

Bureau contacted nearest metropolitan Rousing Corporation office to clarify dates for visits to local area. They were receiving many calls wanting to know when the office was open, and from clients unable to make contact by the numbers advertised and clients unable to make

appointments. Bureau Housing Corporation statistics for enquiries had doubled within the last month. Phonecalls to base office on several occasions failed to clarify so bureau wrote a letter. Visits had been advertised in local newspaper, but sometimes this occurred after the dates of the visits, and the last advertisement had no contact numbers. Problem resolved out of bureau contact with base office.

## 5.0 CLIENT CASE PROFILES

The issues raised by bureaux come alive particularly in the recounting of real life difficulties of clients. Some cases have been selected as just one small slice of the situations bureaux deal with each day. They highlight the extent to which all the issues noted earlier are interconnected in clients lives. All the cases noted come from rural or URH bureaux.

In line with the CAB policy of client confidentiality, detailed case studies are not used in any public way. Heavily disguised case notes have been used to provide additional evidence to government agencies, but are presented in such a generalised way that clients could never be identified.

The case studies provide examples of:

- Difficulties for a large family coping with Housing Corporation loan repayment changes and health charges, on DSW benefit and family support income;
- Difficulties of a solo parent unprepared for DPE stopping when her child turned 18 years, and subsequent problems with mortgage repayments.
- Expense for people needing to move long distances to get in nearest available state rental housing. Used up DSW emergency benefit entitlement for removal expenses, and then had no money left to buy food.
- People having problems getting to hospital appointments, and to government agencies to sort out benefit, housing problems rural areas, with no private or public transport and serious financial difficulties managing on a benefit.
- Costs for unemployed people job searching from rural areas (toll calls, petrol, etc);
- Costs for family of moving to a different climate for sake children's asthma.
- Stress of low wages (\$2/week less than the benefit), new C and cost of doctor's visits and prescription.
- Cost of contraceptives unaffordable for young unemployed woman;
- Expense of travel and accommodation for hospital care for child, care arrangements for other children for family managing on unemployment benefit. Lack of information given to the family about support available from health authority and DSW, but even when entitlements given a considerable shortfall in meeting costs. Family debts and mental health difficulties rising for family.
- Itinerant ex psychiatric patients moving to rural towns needing help with accommodation, food, clothing, job search, information on benefit assistance. Some difficult to find any suitable accommodation. Also serious lack of backup to emergency mental health support services.
- Costs of being in hospital, including paying for childcare, medication, and post-operative doctor, travel expenses.

Bureaux staff have assisted all these clients first with a listening ear and then with information and support to:

- renegotiate loan repayments;
- access DSW benefit entitlements;
- access local services such as foodbanks, volunteer transport; Furthermore, they have documented these cases to highlight the social policy and service issues, which the national Association can take up at a national level on behalf of clients.

## **6.0 CONCLUSION AND RECOMMENDATIONS**

### **6.1 Conclusions**

The original "Making Ends Meet" survey was not specifically designed to identify access problems for rural clients. Nevertheless, the responses from bureaux and budgeting services have provided some useful insights into the particular access problems facing rural communities, especially regarding transport, health and welfare services, housing and information from government agencies.

The quantitative results presented from the survey need to be used as indicative, rather than as a strict measure of differences. However the CAB enquiry statistical profile is an important confirmation of the trends identified in the survey a case studies.

The majority of rural bureaux are in the Waikato/Bay of Plenty and South regions, with a lesser number in the northern parts 0 central and north region. Therefore the fact that the W/BOP and South regions identify rural needs most strongly is likely to b a factor of the location of our CAB services, rather than necessarily highlighting deeper problems in these areas.

Overall the data gathered shows the following themes:

1. Rural and, to a lesser extent, URH areas face a wider rang of service access barriers in trying to help themselves are become less dependent on the government support, than their urban counterparts.
2. Life skills and community support networks may be less problematic for rural clients than urban clients.
3. A reduction in the level of one service in rural communities creates access problems to other services, e.g. travelling to a government agency or hospital after there have been transport cuts. With cuts/closures in public transport services the impact has been unsustainable travel costs for those on low incomes; greater dependence on community help for those that do not own a car; and the transport services that remain are often not adequate to meet the needs of those who need to make an appointment at a particular time.
4. The closure of government departments and transport services appears to have a far greater impact in rural areas than urban centres. In an urban centre the closure of branches a service may lead to the demand being picked up by other branches that are still within the toll free calling area There is also likely to be cheaper and more frequent public transport to be able to get to the office if necessary.
5. Service cuts and closures has resulted in longer waiting times for decisions, difficulty in contacting the right person, additional costs such as for travel and tollcalls that are particularly difficult for those on low income in rural areas to meet. In many cases low income people cannot afford to run a car or maintain a telephone rental. This further traps people in poverty situations and makes self help more difficult.

6. Some beneficiaries have moved to rural areas because of a perceived better lifestyle, including lower costs of housing. However in reality other costs of living mean that a rural lifestyle can be just as, if not more expensive than city living, and there are not always the necessary services available to help these people.
7. With community care for the mentally ill it appears that existing services are under a high level of demand with long waiting lists. In some areas services do not exist at all, necessitating travel to another town/city. There are particular problems of accessing support for itinerant expsychiatric patients.
8. There is a clear pattern of voluntary community services starting up in urban, URH and rural areas in response to service cutbacks and closures by many government agencies. There is a greater range of advocacy services developing in urban areas, whereas in the URH and rural areas it appears that the resources available are channelled more into services that support day to day survival. Rural areas highlighted the lack of sufficient services much more often than their urban or URH counterparts. The pool of population needed to support and sustain community services in rural areas is clearly stretched, and this will always constrain the range of services able to be localised in any one rural area
9. Given the smaller range of services available and the long distances/costs in accessing government and other services, rural areas have a significant need for information and advisory services, such as those provided by NZACAB and FFBS members. Access to information was emphasized as a significantly more important enabling factor for URH and rural clients than their urban counterparts.

## 6.2 Recommendations

Finally it is important to consider the role that NZACAB and its member bureaux, FFBS and its members and government agencies can play in responding to the rural needs identified. Some suggestions for further discussion with HAF are noted below:

- 1 NZACAB brief MAF's regional policy managers about this report and discuss the potential for co-operation at the next gathering of these staff in Wellington.
- 2 Encourage liaison between rural CABx and MAF regional policy managers to identify:
  - ways of better publicizing the resource of information held in CABx which can help rural people keep up to date with government changes affecting their lives, and access the support they need. This could include articles in local rural groups newsletters, radio interviews, speaking to groups and word of mouth referral.
  - ways of taking the CAB service out into particular communities. This could include the development of further suitcase CAB services to isolated areas and/or CAB tollfree lines to cover a wider catchment. MAF assistance in the community needs assessment process required of bureaux prior to the establishment of SUOS outreach services could provide a valuable catalyst.
  - cooperative links with other rural groups and service e.g. WDFF, CWI, Federated Farmers, District nurses in development of rural services.
- 3 MAF contract NZACAB to continue to provide annual enquiry statistics on an

urban/URE/rural breakdown to monitor the ongoing pattern of client need. This could include further analysis of particular sub-categories of statistics, and provision of relevant case studies.

- 4 MAF to encourage agencies like DSW (Income Support especially), Inland Revenue, Housing NZ to take out regular "clinics" to rural areas that are effectively advertised and appropriately staffed, to facilitate contact with To clients. In many areas local CABx would be able to take appointments and/or provide a venue for such a service, approached. This contact can also serve the purpose of providing briefing/ training to local CAB workers on the agency's service, so that the CAB can be better equipped handle client enquiries in between visits.
- 5 Toll free lines for client enquiries should also be provided by DSW (Income Support), IRD and Housing NZ especially, also other government agencies. Otherwise the costs of centralisation of offices fall disproportionately on rural clients. Recent changes in the pricing and structure of free options makes this more financially viable than it have once been. Access to communication links is a key t for client self help and problem resolution. Other tools better communication include rural radio programmes and as media for better information dissemination.
- 6 MAF liaise with Ministry of Transport, and other relevant agencies to discuss transport needs of rural areas. In particular, encourage documentation of community based transport initiatives like the hospital transport service run by volunteers in parts of the Waikato. Practical information about such initiatives to be provided to local authorities, MAF regional policy managers, NZACAB, FFBS the major voluntary welfare sector umbrella groups (NZ Council of Social Services, NZ Council of Christian Social Services, NZ Federation of voluntary Welfare Organisation for their members' consideration.
- 7 MAF encourage Regional Health Authorities in purchasing health services for rural areas to consider proposals for community health services to rural people and funding for rural people to access specialist centralised services towards a goal of equity of health access. Particular attention needs to be given to community mental health services in rural areas, and close consultation with local communities in the development of appropriate services.
- 8 MAF liaise with Community Funding Agency regarding their services planning in rural areas, to get feedback on their identification of service coverage and gaps. MAF can highlight the need for adequate resources for community agencies filling the gaps where government services have closed or cutback.