



# **‘Can’t afford to live’**

**The impact of the rising cost of living on  
Victorians and Tasmanians on low incomes**

October 2022

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**CENTRE  
for SOCIAL  
IMPACT**

**Uniting**

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## Acknowledgement of country

Uniting acknowledges Aboriginal and Torres Strait Islander peoples as Australia's First Peoples. We acknowledge Aboriginal and Torres Strait Islander peoples as the Traditional Owners and original custodians of the lands and waters on which we all live and work. We recognise the continuing sovereignty of Aboriginal and Torres Strait Islander peoples over their lands and waters and the inalienable right of Aboriginal and Torres Strait Islander peoples to self-determination. We offer our respect to all Elders: past, present, and emerging. This always was and always will be Aboriginal land.

## Acknowledgement of lived and living experience

We would like to thank the Uniting consumers who gave their time to complete this survey, and the many staff and volunteers who supported them to access it. We thank our consumers for sharing their experiences with honesty and integrity, many of whom acknowledged a desire to have their voices heard on the very significant issue of cost of living pressures and financial hardship.

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# Foreword

We are very proud to be the 2022 Anti-Poverty week Co-Chairs for Victoria and Tasmania. Anti-Poverty Week will celebrate its 20th anniversary and be held from the 16th to the 22nd of October 2022. Once again, we are raising our collective voices to call on our governments to alleviate poverty for millions of Australians by raising income support above the poverty line and investing in social housing.

Uniting is the community services organisation of the Uniting Church in Victoria and Tasmania. We have worked alongside local communities in both states since 1881. We deliver a broad range of services in the areas of crisis and homelessness; child, youth and families; alcohol and other drugs; mental health; disability; early learning; employment and aged and carer services.

At Uniting our advocacy is for and by consumers. We strive to go beyond focusing on what we do as an organisation to focus on the interests and needs of the people we work alongside. Listening to and acting on our consumers' voices is central to our work.

People can only live a safe and dignified life if they can afford life's essentials and can live free from constant worry about how they will keep a roof over their heads and food on their table. Affording the basics means families can turn on the lights and not worry about having their power cut off. It means being able to afford basic living costs like food, rent, energy, water, medicine and education, without being pushed into financial stress or crisis.

An affordable cost of living means people can pay for health care and medicines, their daily travel to work or school, be active in their communities, and have opportunities to connect with family and friends. Unfortunately, this research shows us that for too many Victorians and Tasmanians this is not possible. Affording the necessities is now out of reach for many.

This report sheds new light on the depth and impacts of the rising cost of living on low-income Victorians and Tasmanians. A growing number of families are choosing between putting food on the table and paying their bills. We heard stories

of individuals and whole families wearing layer upon layer of clothing in unheated homes during winter 2022; reading by candlelight or using torches because they can't afford to turn the lights on. Many don't have enough food to eat and are relying more heavily on food and material relief just to survive.

Our communities deserve better. People have a right to the essentials of life – safe, secure and appropriate housing, access to education and secure employment with fair income, decent income security for those who can't work, nutritious food, meaningful connection and opportunities for contribution.

Finally, we would like to acknowledge the strength and determination of those who participated in this research – and the kindness and care for others expressed by so many who told us “I know others are doing it tougher than me”. Through this research and our everyday service delivery, we meet many people who are working hard to make ends meet, care for their children and other dependents and to live a dignified life. Many who spoke with us expressed a real desire for their voices to be heard and a deep hope that their stories might drive change, allowing them and their families to have enough to live.



Bronwyn Pike  
**Chief Executive Officer**



Jeremy Pettet  
**Executive Officer**

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# Executive summary

“There are some days that I can’t go out in the car due to the cost. We can’t afford to have the heater on at night. We use blankets and our house has damp. We can’t afford to use the electricity at night. We... use torches instead of turning the lights on. The kids can’t have baths any more.”

– Uniting consumer

## About this research

This research was undertaken by Uniting in partnership with the Centre for Social Impact, Swinburne University of Technology in order to better understand the impact of cost of living rises on consumers of community services. Specifically, the research sought to understand:

1. What was the impact on the lives of consumers, if any, of the rising cost of living?
2. What are the current needs of consumers?
3. What would make the biggest positive difference to the lives of consumers now?

Uniting consumers across 15 emergency relief sites in Tasmania (2) and Victoria (13) were surveyed (Appendix 1) over a three-and-a-half-week period in August 2022. Surveys were also distributed at two housing and tenancy programs, one alcohol and other drugs program, and two meals programs. Flyers with a survey link were distributed with food hampers delivered to peoples’ homes across a number of locations.

## Key findings

The data is based on a diverse cohort of 112 consumers including people on income support, as well as people working full-time, parents, carers and retirees.

### The report found:

- 92% of respondents were cutting back on food and groceries due to costs
- 70% were unable to eat well
- Parents, carers and people with a disability were skipping meals even if cooking for others
- Two thirds reported pressure from the rising cost of energy bills
- Half of respondents were cutting back on heating
- One in two were experiencing mental health impacts resulting from cost of living increases
- Half of respondents reported impacts on their housing situation with Tasmanians 25% more likely to report impacts on their housing situation
- Women were more frequently experiencing cost pressures and were more negatively impacted across life areas than men
- 11% felt more at risk of family violence as a result of rising costs of living.

**This research provides evidence that the rising cost of living is deepening financial, housing and food insecurity, and impacting mental and physical health, while also increasing social isolation.**

In the main, this cohort were already struggling financially prior to the recent cost of living rises. However, sixteen percent were seeking support when they had not done so before.

The front line of impact is food. Ninety-two percent of all consumers reported pressures of food affordability resulting from cost of living increases, and cutting back on food and groceries was the most frequently cited strategy used by all. Seventy percent (70%) reported an impact on their ability to eat well, with parents, carers and people with disability all reporting that they would skip meals even if cooking for others.

Pressures from cost of energy, fuel, housing, and health including the cost of medications were also frequently reported. The rising cost of energy bills was impacting two thirds of respondents and almost half identified they were cutting back on heating, with many concerned about the impact on their children or those they cared for.

Alongside pressures from rising food and energy costs, around half of consumers reported impacts on their housing situation with higher proportions affected of those from culturally and linguistically diverse backgrounds. Many people have been pushed into or are on the brink of homelessness.

One in two people experienced mental health impacts resulting from cost of living increases. Aboriginal and Torres Strait Islander people and parents of children under 18 were all more likely to experience mental health impacts.

The research also shows that the effect of rising cost of living is gendered. Women are more frequently experiencing cost pressures and are more negatively impacted across life areas than men. They are more likely to experience family violence, along with impacts on physical health, mental health, housing and community/social connection than are men, resulting from the rising cost of living.

Eleven percent (11%) of individuals felt more at risk of family violence as a result of rising costs of living, with those most frequently affected being carers (of either children or adults with disability) where 67% identified this negative impact.

**Consumers in Tasmania generally reported more significant disadvantage and negative impacts than did Victorian consumers.** Tasmanians were 25% more likely to experience impacts on their housing situation, and more likely to experience impacts on their financial situation/security than Victorians. Tasmanians were also more likely to experience impact on their use of alcohol and

other drugs and to experience negative impact on their mental health from the rising cost of living.

The stories of consumers recount complex and highly individual circumstances where macro forces combine with personal context to produce ongoing and inescapable consequences. As a result, 71% reported that they wanted support from more than one service type, with one third needing four or more services.

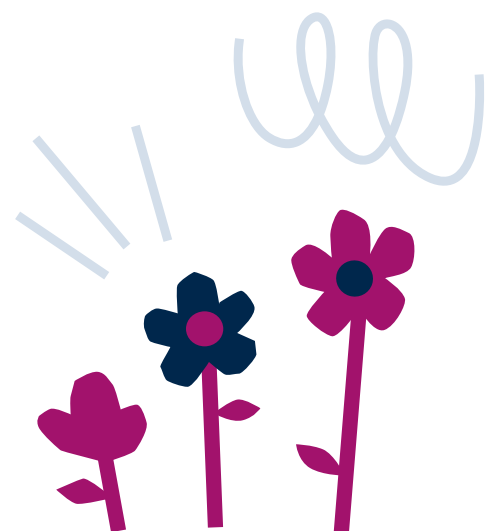
Consumers call on governments to act: to raise income support, provide affordable housing, reduce energy and fuel costs, and deliver services and supports.

“The government keeps people poor... I shouldn’t have to feel like I’m begging when I come to services for food. The government need to raise the pension – not \$20 but... \$100. The government needs to know how it makes a person feel – it dehumanises you. It’s like you are blamed, like you can’t manage your money.”

– Uniting consumer

At a basic level, some consumers note the inadequacy of services when they do seek support.

Particularly confronting is the shortage of food supplies and supports in Emergency Relief services, with pantries running bare and a lack of available food vouchers.



# Opportunities for change

Financial stress and poverty, and their resultant effects on wellbeing, are held in place by systemic levers that need to be addressed for change to occur.

## 1. Increase income support

There is now significant evidence to support the **increase of the level of income support** provided by the Commonwealth Government. Research around the effect of the Coronavirus Supplement has shown that poverty can be immediately alleviated when income support is adequate. Consumers in this study echo the call for increased levels of income support.

The design of income support also poses an opportunity for change. Consumers in this study called for **changes in income support regulations to enable greater engagement with the labour market without income support penalty**. Additionally, there is a need to review how people with disability and chronic illness are supported on income supports other than the Disability Support Pension and the adequacy of other income support types to their needs and disability-related costs.

## 2. Decrease/subsidise costs

While government has a range of levers to drive monetary policy and manage inflation, governments also utilise a range of other cost supports, such as rental assistance, energy, transport, health and childcare subsidies. Commonwealth Rental Assistance (CRA) has been found to be inadequate and in need of reform. ACOSS suggests **immediately increasing the rate of CRA by 50%** (ACOSS, 2022). A targeted review of the impact and design of subsidies in other areas is also needed, including subsidies for childcare, energy, rental, transport and health costs. These are critical strategies to address cost pressures for people on low incomes.

**Social housing, as a key mechanism in the provision of affordable housing, needs to be expanded.** There are also opportunities to review other supply side drivers, such as incentives for private landlords, law reform to protect tenants and shared equity schemes.

## 3. Strengthen the service system

**The high levels of demand for community services and the increasing levels of complexity of the circumstances of consumers requires renewed investment in the community services sector.** Increasing emergency relief resources (especially food availability), and reducing restrictions around frequency of access, is the first component of strengthening the service system to better support people experiencing negative impacts from the rising cost of living.

Beyond immediate need for food and basic aid, is a more complex issue of unmet need for supports across a wide array of key life areas including housing/tenancy, health and mental health, employment, and services to combat social isolation. However, research evidence shows that this significant demand is currently unable to be met by the community services sector, and that demand is increasing alongside rising cost of living and increased prevalence of poverty. This is a compelling logic for the strengthening of the community services sector through increased and more stable investment.

In particular, this study highlights **the potential for Emergency Services (and housing and tenancy services) to act as an entry point to a wide range of other services**, including mainstream health and mental health services.

# Introduction

Uniting Vic.Tas (Uniting) is the community services organisation of the Uniting Church in Victoria and Tasmania. For over 100 years, Uniting has worked alongside local communities in both states, delivering a broad range of services and programs in the areas of crisis and homelessness, child, youth and families, alcohol and other drugs, mental health, early learning, employment, and aged and carer services.

Consumer voice and experience are central to Uniting's service delivery and advocacy. Since its formation in 2017, which saw the bringing together of 21 organisations across Victoria and Tasmania, Uniting has worked with consumers to advocate for equitable access to services for vulnerable groups and changes to systemic issues that communities are facing.

In 2019, Uniting and the Centre for Social Impact, Swinburne University of Technology, entered a formal research partnership, with Professor Erin Wilson appointed as Uniting Chair in Community Services Innovation. The partnership was established to enable high-quality research to inform the future shape of community services and to ensure meaningful life outcomes for the people Uniting works alongside.

Following the onset of the COVID-19 pandemic, the research partnership worked together to maximise rapid data collection and analysis activities. One of these was the Consumer 'Pulse' Survey, undertaken in October 2020, at the end of Victoria's long 2020 lockdown.

The first 'Pulse' survey was piloted with 42 consumers across eight program areas of Uniting. Respondents were aged between 16 and 64 years and represented a broad cross section of demographics including people from culturally and linguistically diverse backgrounds, Aboriginal and Torres Strait Islander people and people with a disability. Consumers shared information about the things that would make the biggest difference in their lives during the time of COVID-19 lockdowns, and the extent to which they were able to access the things they needed. Consumers reported that access to services and income support was the substantial ingredient that made or would make a difference in their lives.

A second consumer 'Pulse' survey was carried out in May 2021 as reductions were being made to the various social protections that had been actioned during the pandemic. Uniting received a total of 113 responses to this survey, culminating in the publication of the No Fighting Chance report in October 2021 (Wilson et al., 2021). The research found that the COVID-19 income and tenancy supports made people's lives easier. For the first time, many didn't have to worry about how they were going to pay the rent, buy medicine or have enough to eat for themselves and their children. Consequently, withdrawal of these benefits significantly affected people's mental and physical health. People were battling a bad hand they had been dealt and they needed a fighting chance to be able to take care of themselves, their families, and to engage socially and economically within their community.

***Can't afford to live*** reports the results of the third Consumer 'Pulse' Survey focusing specifically on the impact of the rising cost of living on individuals and families across Tasmania and Victoria.





# Context

## What do we already know about the impact of rising cost of living for people on low incomes?

There has been considerable attention over recent months on the rising cost of living and how it is impacting Australian households. The Australian Council of Social Services (ACOSS) surveyed 449 income support recipients across August and September to gauge how people on JobSeeker, Youth Allowance and Parenting Payment are covering their basic costs of food, housing and energy bills. They found evidence of significant deprivation among survey respondents with people skipping medication and meals (62% respectively). Further, almost all those renting privately were identified to be in rental stress (92%) and a similarly high proportion of people (96%) reported that their inability to cover the cost of living was impacting their mental and physical health (ACOSS, 2022).

ACOSS' research echoes earlier studies which have found that when the cost of everyday essentials like food and groceries, transport, energy and health costs increase, those on low incomes are likely to feel the impacts most acutely (see for example, SACOSS Cost of Living Series, 2022). International commentary demonstrates that the rising cost of living is not a uniquely Australian problem but is affecting communities across the globe, being described in a June 2022 editorial in *The Lancet Public Health* as "an avoidable public health crisis" which has "...surpassed COVID as the number one concern for many communities" (Editorial, *The Lancet*, 2022, p.485).

Factors driving recent surges in the cost of living have been well documented and include disruptions to global food and fuel supplies, growing inflation, the global climate emergency and the Russian invasion of Ukraine. Compounding these global factors here in Australia is the effect of devastating floods and natural disasters across the north-eastern states in 2022 and stagnant wages coalescing to drive some of the largest increases in food, energy and fuel costs seen in many years (ABS, 2022).

The Australian Bureau of Statistics (ABS) monitors cost of living with reference to five household types: pensioner and beneficiary; employee; age pensioner; other government transfer recipient i.e. people receiving other types of income support; and self-funded retiree. Recent ABS data shows that over the past 12 months all Living Cost Indexes (LCI), which measure the change in the price of goods and services and its effect on living expenses across household types, rose by between 4.6% and 5.2% (ABS 2022). The annual figures showed:

- Transport was the main contributor to increases in living costs for all five household types with the price of fuel rising over 32%.
- Age pensioner households had the highest annual increase at 5.2%. This is the largest annual increase since the September 2006 quarter for age pensioner households. Food and housing make up a higher proportion of expenditure for age pensioner households compared to the other household types.

Over this same period, wages have only risen approximately 2.4% (ABS, 2022). This means that the price of goods in Australia is currently growing faster than wages and salaries.

The rising cost of living has different impacts across diverse households, family compositions and communities. Evidence shows that those on low and fixed incomes experience negative impacts across a diverse range of life areas that are compounded by the rising cost of living.

## The backdrop of poverty and housing unaffordability in Australia

Prior to the last 12 months, and the increase in the cost of living, levels of poverty in Australia were already substantial. Poverty modelling, using data from the 2020 Household Income and Labour Dynamics in Australia (HILDA) survey, found that just under 3 million people in Australia live in income poverty as defined by a poverty line of 50 per cent of median income. This means nearly 11.8 per cent of the population, including nearly 750,000 children, are currently living in poverty (Duncan, 2022). Contributing factors have been identified as including housing unaffordability across Australia and generally inadequate levels of income support.

In 2020, the Senate Community Affairs References Committee concluded its inquiry into the Adequacy of Newstart and related payments and alternative mechanisms to determine the level of income support payments in Australia (The Senate, 2020). Based on 450 submissions and witnesses, it concluded that there is:

compelling evidence that the rates of income support payments for working-age jobseekers are inadequate. Further, they impede peoples' ability to engage socially and economically within their community (The Senate, 2020, p.xvii).



This aligns with other research that identifies the base rates of income support as being below the poverty line (Saunders and Bedford, 2017). Despite legislating a permanent increase to some income support payments in March 2021, such as JobSeeker (previously Newstart), the rate of payment remains below the poverty line. The Grattan Institute advises that:

Even with this permanent increase, the new base JobSeeker payment rate of \$307 a week will be so low that it will not adequately fulfil its core function of providing a minimum, adequate income. Even at the new rate, Australia will have the second-stingiest payment for newly-unemployed people – relative to average wages – of the 37 members of the OECD, behind only Greece (Grattan Institute, 2021, p.2).

Further, the Grattan Institute (2021) calculates that the new permanent JobSeeker rate remains substantially below the relative poverty line by a margin of \$138 per week (including energy supplements), and equates to 41% of the minimum wage, or 66% of the age pension. Exploring the different depths of poverty and who is most likely to face poverty in Australia in 2022, research from the Bankwest Curtin Economics Centre found a number of populations at heightened risk of experiencing severe poverty:

Over a quarter of single parents are in poverty, with one in ten experiencing severe poverty. Single person households, those in social housing and those with a disability are most exposed to deep and persistent poverty and disadvantage (Duncan, 2022, p.27).

Housing costs, in particular the price of rent, is a large contributor to financial stress and hardship for many Australians (ACOSS, 2022). The Bankwest Curtin Economics Centre research also reveals how rising costs, particularly rising housing costs and rent increases across recent years, are having a far greater impact on those already experiencing income disadvantage (Duncan, 2022), such as those reliant on income support like JobSeeker. Their modelling reveals a 'standard' poverty line of \$453.50 per person per week once housing costs have been paid. Social Policy Research Centre (Saunders and Bedford, 2017) research previously identified the relative expenditure of households on low incomes. For single people or families with children, the cost of housing was the largest single expenditure item at between 30-50% of household income, with other major budget items being food, household goods and services, and transport.

These non-housing costs accounted for two-thirds to four-fifths of household budgets of people on low income, and more for people who are unemployed, leaving little or no income for other expenses. Recently published ACOSS research provides further evidence of how rising rental prices are compounding rent stress, with 96% of respondents in their 2022 study spending 30% or more of their income on rent (ACOSS, 2022). Further, they found almost half (48%) of survey respondents spend 50% or more of their income on rent (ACOSS, 2022).

Nationally, Commonwealth Rental Assistance (CRA) is the major form of tenancy support for low-income individuals. CRA assists nearly two thirds of low-income private renters, reducing housing stress for many, though one-third still experience moderate to very severe housing stress despite CRA (Ong et al., 2020). Additionally, 18% of low-income private renters do not receive CRA (as they are ineligible) and experience moderate to very severe housing stress (Ong, et al., 2020). The Senate Community Affairs References Committee reported that current levels of the CRA had been found to be inadequate by multiple research studies (The Senate, 2020). ACOSS recently recommended increasing CRA by 50% (ACOSS, 2022).

While different states and territories provide a range of supports for people experiencing housing affordability stress, and those at risk of homelessness, the limited availability of monetary supports does not keep pace with the demand generated by increasing housing and rental costs.

Anglicare's *Rental Affordability Snapshot* (2022) reports that:

Out of 45,992 listings, we found just eight rentals (0 percent) that were affordable for a single person on the JobSeeker payment. There was one listing (0 percent) in a share house that was affordable for a young person on Youth Allowance anywhere in the country. The most generous income support payment is the Age Pension. Yet for a couple living on the Age Pension, just 1.4 percent of rentals were affordable. Finding an affordable rental is even harder for single aged pensioners, with 0.1 percent of listings left to compete for. Many are rooms in share houses that might not be appropriate for an older person (Anglicare, 2022, p.9).

The situation was even more difficult for families:

Single parents out of work face an even more dire situation. Single parents with a child on the Parenting Payment are able to afford just 61 (0.1 percent) of the properties advertised on the Snapshot weekend. For Parenting Payment recipients with two children, this drops to 20 properties (0 percent). Single parents on JobSeeker can only afford nine of the listings on the Snapshot weekend (0 percent) (Anglicare, 2022, p.10).

Anglicare's research found working people were hardly better off. For a single person working full-time on the minimum wage, just 1.6% of rentals were found to be affordable. Even for families with two parents, each earning a minimum wage, only 15.3% of the rentals were found to be affordable (Anglicare, 2022).



This broadly aligns with research from the Bankwest Curtin Economics Centre, which identified that:

financially vulnerable people are forced to make spending decisions on really tight margins with little or no discretionary income, and that's exactly the situation facing the 1.5 million renters across the country who are experiencing poverty. It is not unusual for the poorest families to have to survive on less than \$150 per week once housing costs have been paid – that is only \$21.50 a day (Duncan, 2022, p.28).

The onset of COVID provided a test case of the effect of increased income support and the delivery of tenancy and housing support measures on levels of poverty in Australia. In 2020, during COVID, the number of people living in poverty fell following the introduction of COVID support measures such as the Coronavirus Supplement. According to research commissioned by the Australian Council of Social Services, the Coronavirus Supplement reduced poverty sharply for those on income support, with rates of poverty among people in households on JobSeeker falling by four-fifths between 2019 and 2020 (Davidson, 2022). Drawing on ABS data, the research reports the proportion of those who regularly had trouble paying household bills declined from 15% to 9%, with the proportion who relied on emergency relief agencies falling from 14% to 9% (ABS, 2021 cited in Davidson, 2022). The Coronavirus Supplement played a decisive role in not only reducing financial stress but in improving health and wellbeing for many reliant on government income support (Davidson, 2022; Wilson, Sama and Johnson, 2021). In a study by Klein et al. (2021), respondents reported significant benefits flowing from receipt of the Coronavirus Supplement such as being able to meet basic needs (by eating well and managing health), improvements related to mental health and engagement in the labour market.

However, the withdrawal of Coronavirus income and tenancy supports meant many individuals and families were pushed back into severe financial hardship and poverty (ABS, 2021; Davidson, 2022). Recent research by ACOSS and the University of NSW tracked data on inequality and poverty across the 'alpha' and 'delta' waves of the pandemic,<sup>1</sup> each accompanied by a distinct set of government interventions related

to income support. This research found that 'the legacy of the two pandemic experiences is likely to be higher inequality and poverty than beforehand, despite remarkable progress in reducing both in 2020' during the first wave of lockdowns (Davidson, 2022, p.8).

Overall, there is evidence that the experience of poverty resulting from inadequate levels of income support has negative impacts on individuals, including 'the inability to afford daily basic essentials, elevated risk of homelessness and detrimental effects on their physical and mental health' (The Senate, 2020, p. xvii-xviii). In their 2022 publication, *How JobSeeker and other income support payments are falling behind the cost of living* (ACOSS, 2022), ACOSS highlighted a significant level of food deprivation with rising grocery costs forcing people to compromise their nutrition with 62% eating less or skipping meals. Additionally, more than half (57%) were shortening or taking fewer showers due to energy costs, 7 in 10 were reducing their use of heating and 70% of those who regularly use a car were struggling with fuel costs (ACOSS, 2022, p.3).



<sup>1</sup> During the alpha wave of the COVID-19 pandemic, JobKeeper Payment and Coronavirus supplement were introduced, alongside increases to the maximum rent assistance payment. Income support responses during the delta wave were less substantial and have now been phased out.



These findings are particularly concerning when considered in the context of a body of research which considers the longer-term implications of living in poverty (see for example Knifton and Inglis, 2020). As summarised by the Bankwest Curtin Economics Centre:

... people who face persistent poverty are more likely to experience psychological distress, and the longer the time in poverty, the worse the mental health impacts are. Those who were in poverty for at least five of the last ten years are 3 times more likely to suffer acute mental stress compared to people who have never experienced poverty. The psychological trauma from years in poverty rises more steeply for women than for men in most age cohorts and family settings (Duncan, 2022, p.10).

## The gender gap in experiences of cost of living pressures, financial hardship and poverty

Experiences of poverty are shaped by many factors with one of the most marked being that of gender (Duncan, 2022). A recent study found the gender gap in poverty being more pronounced for young women and women approaching retirement (Duncan, 2022). In particular:

Single women aged 55 and over who live in private rental accommodation are particularly exposed to financial hardship, with two thirds experiencing income poverty (Duncan, 2022, p.27).

Duncan (2022) explored the challenges faced by single parents, particularly single mothers, and by women across their lives. He found over a quarter of single parents in Australia are in poverty, with one in ten experiencing severe poverty, which the study defined as income comprising 30% less than the average wage.

The experience of single parents, in particular single mothers, has been documented elsewhere by Bowman and Wickramasinghe (2020) who found that many single mothers are skipping meals so their children could eat, that they lacked sufficient nutritious food, were unable to buy meat, and relied on food vouchers and food banks to feed their family. Families headed by a single mother lived in insecure, low-quality housing and had little choice or agency over the housing they could afford (Bowman and Wickramasinghe 2020).

Nieuwenhuis and Maldonado (2018) identify the triple bind of single-parent families being caught between inadequate employment, resources and social policies (Nieuwenhuis and Maldonado, 2018) which keep them trapped in poverty.

Overall, there is significant evidence that women, particularly single mothers and older women, experience significant deprivation with household income levels providing little opportunity to save for an emergency; heating and cooling becoming a luxury and being forced to go without food in order to provide meals for children and other dependents (Bowman and Wickramasinghe, 2020).

As Duncan concludes:

Our research shows that poverty has a greater and more persistent impact on the health and wellbeing of women, their economic security, and their ability to safely participate in our community as equals. Women are also more likely to take on caring roles and responsibilities that are further impeded by poverty. Raising children and young people or caring for ageing parents becomes dramatically harder with poverty – and the knock on impacts to the wellbeing of others is increased (Duncan, 2022, p.69).

This context sets the scene for understanding the experiences of people on low incomes seeking support from Uniting services in mid-2022, amidst the rising cost of living.



# Purpose of this research

In this context of significant financial stress, Uniting sought to hear directly from consumers of Uniting services about the impact on them of the rising cost of living.

The research sought to understand:

1. What was the impact on the lives of consumers, if any, of the rising cost of living?
2. What are the current needs of consumers?
3. What would make the biggest positive difference to the lives of consumers now?

Uniting is committed to using this evidence to advocate for changes that will make a difference in the lives of consumers so that people do not live in poverty.



# Research methods

Uniting consumers across 15 emergency relief sites in Victoria (13) and Tasmania (2) were invited by staff and volunteers to complete a survey (Appendix 1) asking about the impacts of the rising cost of living. Surveys were also distributed via two housing and tenancy programs, two meals programs (one in metropolitan Melbourne and one in regional Victoria) and a metropolitan alcohol and other drug treatment program.

## Survey construction

The survey had 19 questions, four of which required extended free text response. The survey was based on the previous Consumer 'Pulse' Surveys, designed as short, rapid surveys to identify consumer needs and the things that would make the most difference in their lives. In addition to the 'Pulse' survey questions, consumers were also asked to identify the areas of impact of cost of living pressures, how these pressures had changed over the past 12 months, and changes in spending as a result.

One question was based on the Klein et al. (2021) study of recipients of the Coronavirus Supplement. The Uniting cost of living survey (Question 11) adapted the items of the Klein et al. (2021) scale (Question 7) that detailed the areas of life that had been impacted by the focus topic. Using this scale in this study, and in previous Consumer 'Pulse' Surveys, provides a mechanism to compare the impacts on life of a range of financial situations or interventions, and compare their effects.

## How data was collected

The survey was open for three and a half weeks from 8 August to 31 August 2022.

Data was collected online through the Survey Monkey platform and via paper-based forms which were later entered manually by the project team. The survey link was shared via email or using a QR code on a flyer distributed via, or displayed at, services depending on the most appropriate method for each site. Flyers with project information and a QR code and survey link were also packaged up and delivered with food parcels direct to consumers from a number of sites. Paper copies of the survey were also made available for consumers to self-complete where they did not have access to a smartphone or data credit to complete online.

Project and research staff at Uniting attended emergency relief and meals programs on seven occasions throughout the collection period to complete surveys face-to-face with consumers who wished to participate and preferred to talk directly to someone rather than self-complete. Approximately half of all respondents completed the survey in person with a Uniting staff member, volunteer, or member of the Uniting research/project team.

While initial invitations were targeted to Emergency Relief services, project staff employed a snowball method of recruitment across program areas at numerous Uniting sites, with the survey open for completion by any person who had accessed a Uniting service in July or August and self-identified as experiencing cost of living pressures.

## How data was analysed

One hundred and twelve (112) survey completions were analysed by Centre for Social Impact researchers. Data included both quantitative and qualitative responses. Qualitative data came from free text answers provided by consumers across a range of questions on the survey including the four main open text questions, as well as further details provided to accompany answers of 'Other' in the remaining questions. For each question where this occurred, these responses were organised according to themes. In some cases, the themes or categories were provided from other sources (for example, from previous Consumer 'Pulse' research). In other cases, the themes were identified from the content of the information provided (i.e. inductively), and the data grouped under these themes. This enabled this data to also be analysed quantitatively, seeking to establish the frequency of themes.

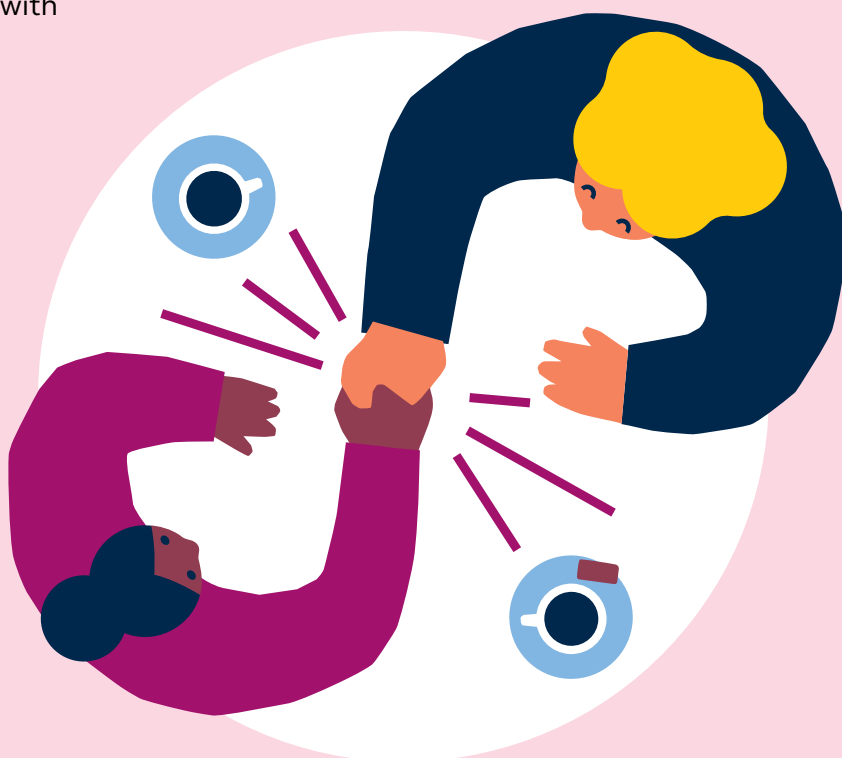
Data was entered into a statistical software package (SPSS) that allowed comparison of answers across different cohorts or response types. For example, this allowed us to identify the respective impact of rising cost of living on consumers with different income types or family size.

Overall, we sought to understand the story of consumers, the impact on them of rising cost of living, and their current needs, by drawing inferences across the data set. Case studies throughout the report were developed from selected individuals' survey responses and organised into narrative form with pseudonyms assigned.

## Limitations

The data was collected from consumers seeking support predominately from emergency relief services. As such it is skewed to the characteristics of this cohort and is not intended to be representative of consumers attending other services. Instead, the research sought to be opportunistic in targeting service areas where the rising cost of living was likely to be highly relevant to consumers. We sought to find out about the impacts on those on lower-than-average incomes as these are some of the most vulnerable individuals and households to any changes in the rising cost of everyday essentials.

The impacts and experiences of consumers reflect the context at the time of surveying across August 2022. It is possible that views would change over different time periods, possibly getting worse or better depending on the wider economic context and their own personal circumstances within it.





# Characteristics of research participants

A total of 112 adults provided answers in the survey, though not all completed every question. Twenty-eight consumers in Tasmania completed surveys, and 84 in Victoria.

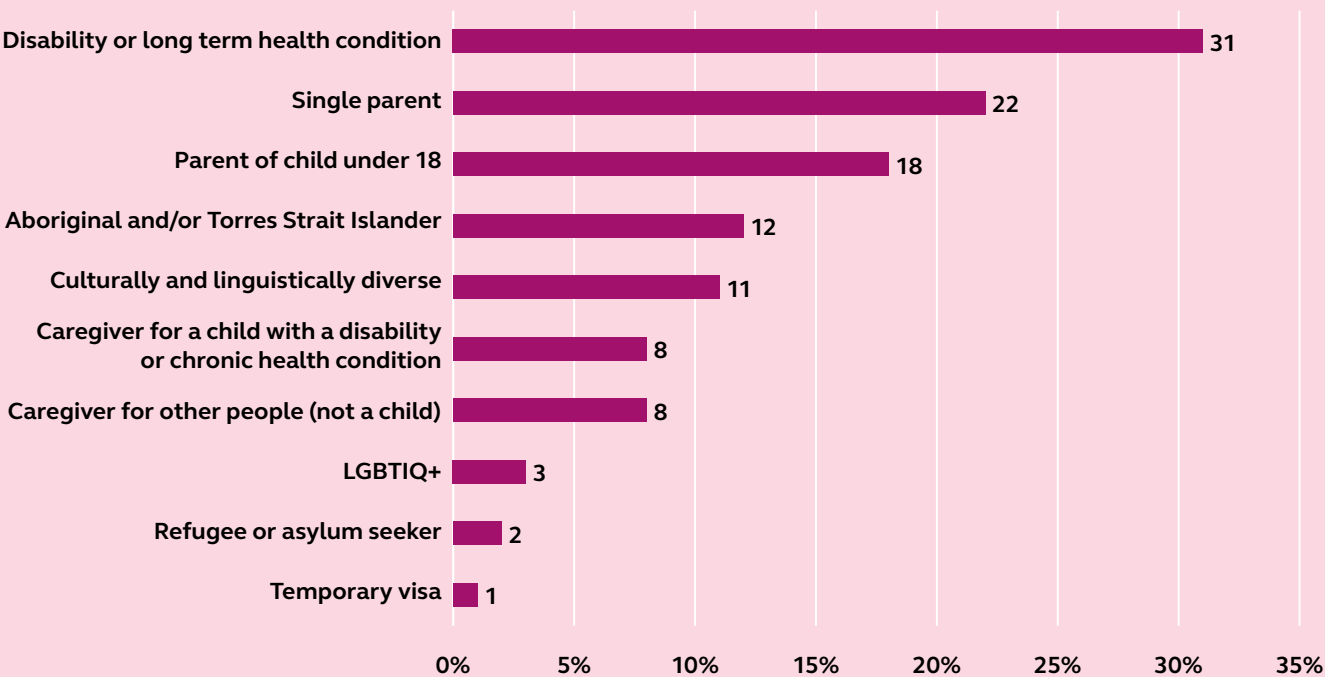
There was relatively even representation from women (40%) and men (41%), with one person nominating as non-binary and the remainder choosing not to provide an answer. There was a wide mix of respondents aged between 15 and over 70 years of age. Two thirds of respondents were aged under 50, with most of these in the 40-49 age group (33%). However, one third were aged over 50 years of age.

Consumers represented a broad cross section of cohorts with around one third (39%) being parents or carers of children, and 22% of the total

cohort being single parents. Almost all parents had children under 18 years (comprising 18% of all respondents). Almost one third of respondents (31%) identified as a person with a disability or long term health condition, with four of these also caring for a child with a disability. Eight percent (8%) of consumers had a caregiver role for adults and eight percent (8%) had a caregiver role for children with disability or chronic health condition. (Table 1) Carers were comprised relatively evenly of both women and men, across a wide age range 20-69 years.

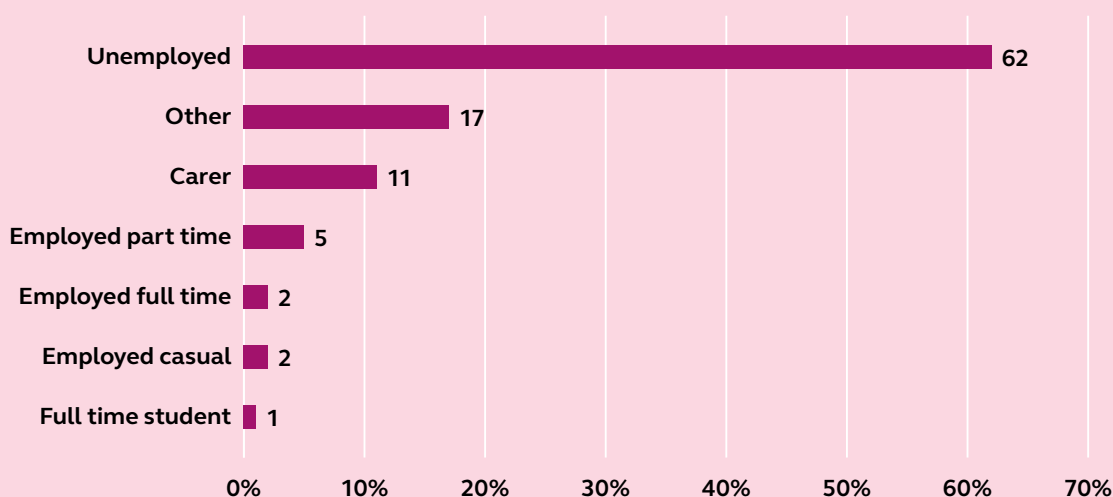
Twelve percent (12%) of the group surveyed were Aboriginal and Torres Strait Islanders. The group surveyed included people from culturally diverse backgrounds (CALD) (11%), temporary visa holders (1%), refugees and asylum seekers (2%) and people identifying as LGBTIQ+ (3%).

Table 1. Participant characteristics



Note: Respondents nominated against multiple categories so Table does not sum to 100%.

**Table 2. Employment status of respondents**

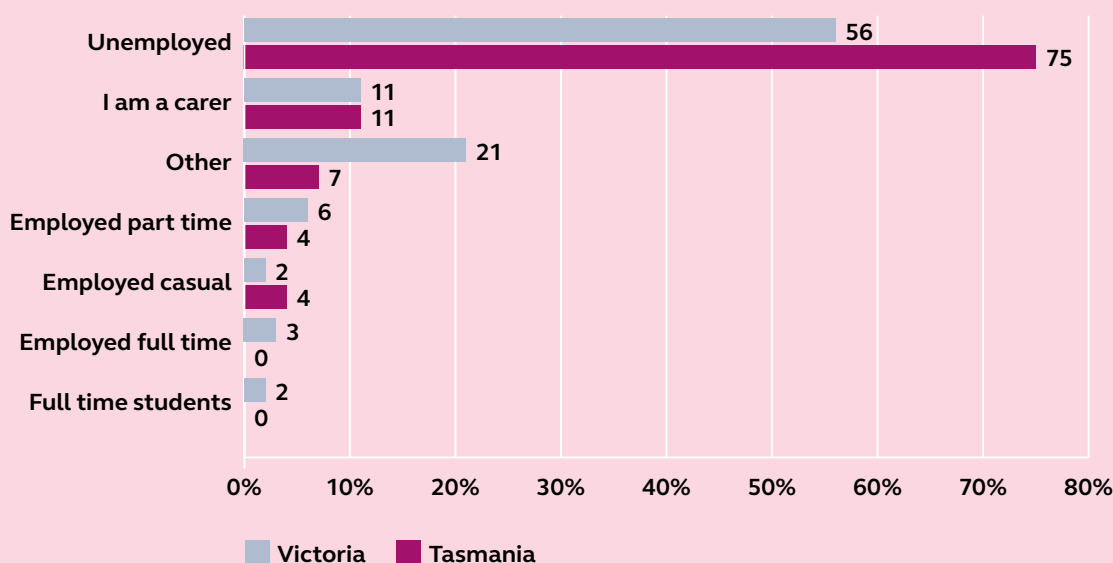


Respondents were predominantly unemployed (62%) (Table 2). Only nine (9%) of consumers reported having any kind of employment, with most of these employed part time or casually. Women were more likely to be employed or studying than men, with equal proportions employed in full time or casual roles, but with significantly higher proportions of women in part time roles than men (four times more prevalent). People from culturally and linguistically diverse backgrounds and Aboriginal and Torres Strait Islander people reported higher frequencies

of unemployment (83% and 77% respectively) than those not of these groups (59%). Similarly, people with a disability experienced lower levels of employment in all categories, and a higher frequency of unemployment (71%).

Respondents in Tasmania are experiencing higher levels of unemployment (75%) than those in Victoria (56%). None of the Tasmanian consumers who are in the workforce have full time employment nor are they full time students. (Table 3).

**Table 3. Comparison of employment rates of respondents across Tasmania and Victoria**



# Findings

## The impact of rising cost of living

### The change in cost of living pressures over the last 12 months

Ninety-four respondents assessed the change in the level of impact of rising cost of living by comparing to 12 months previously (Table 4). Overwhelmingly, respondents reported that the cost of living pressures, and their ability to afford basic things, had gotten markedly worse. Twenty-seven percent (27%) reported that they were in crisis (with 17% moving into a crisis state over the last 12 months), while 31% reported things were a lot worse than 12 months ago.

## The pressure points of rising cost of living

Consumers reported multiple pressure points resulting from rising cost of living (Table 5). Concerningly, the most frequently reported pressure point was that of food and groceries, reported by 92% of all respondents. This was a pressure point for more Tasmanian consumers than Victorian, with 96% of Tasmanian’s reporting this issue compared to 89% of Victorians. Pressure from rising cost of energy bills was reported by two thirds of respondents (66%) with more than half (55%) reporting pressure from rising costs of fuel and petrol. Likewise, cost increases related to housing were pressure points for more than 50% (rental and mortgage rate increases). Almost half of respondents (47%) identified rental increases as a pressure point, with this being a more frequent pressure point for 57% of Tasmanians compared to 42% of Victorians.

Table 4. Level of impact of rising cost of living

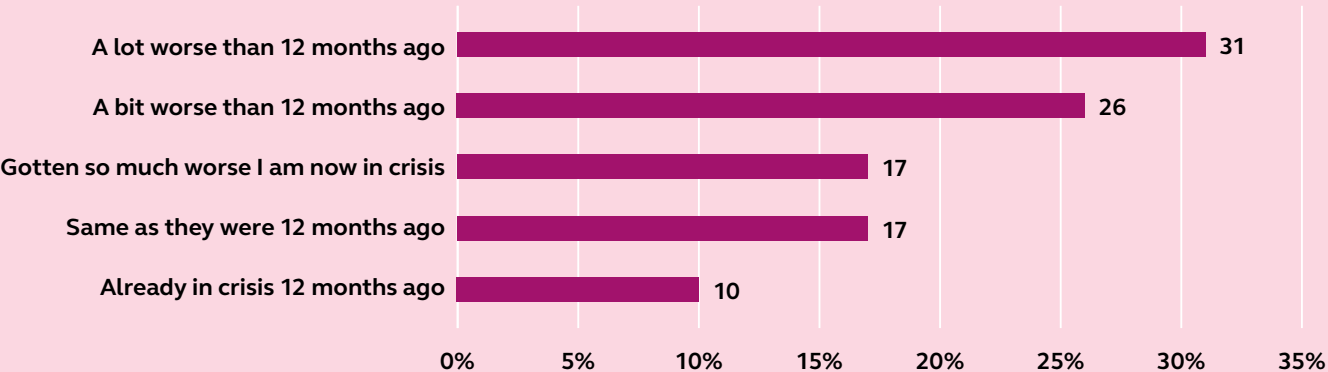
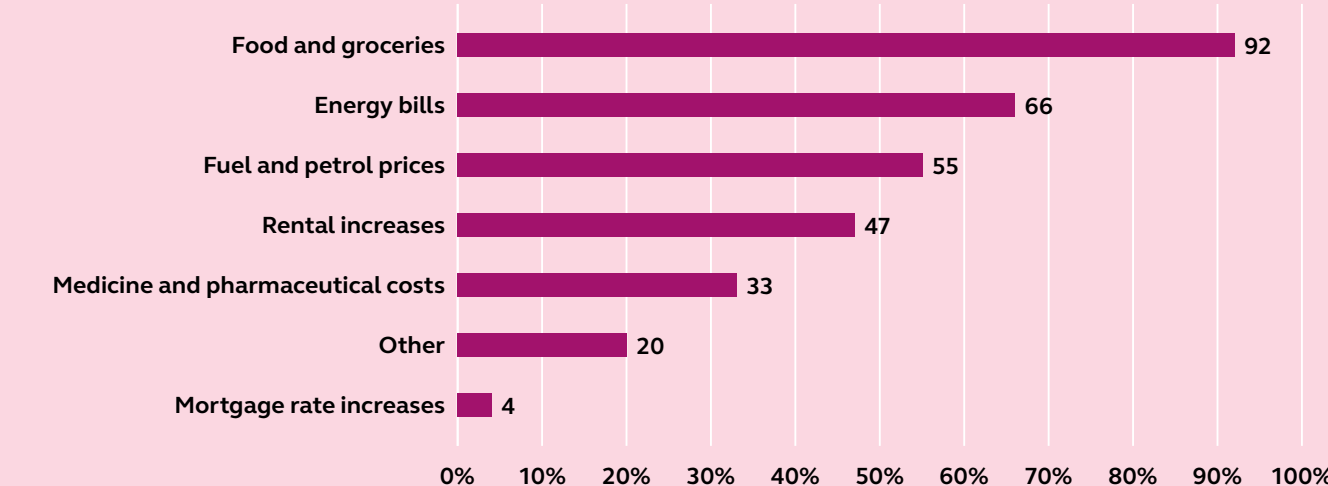


Table 5. Pressure points of rising costs

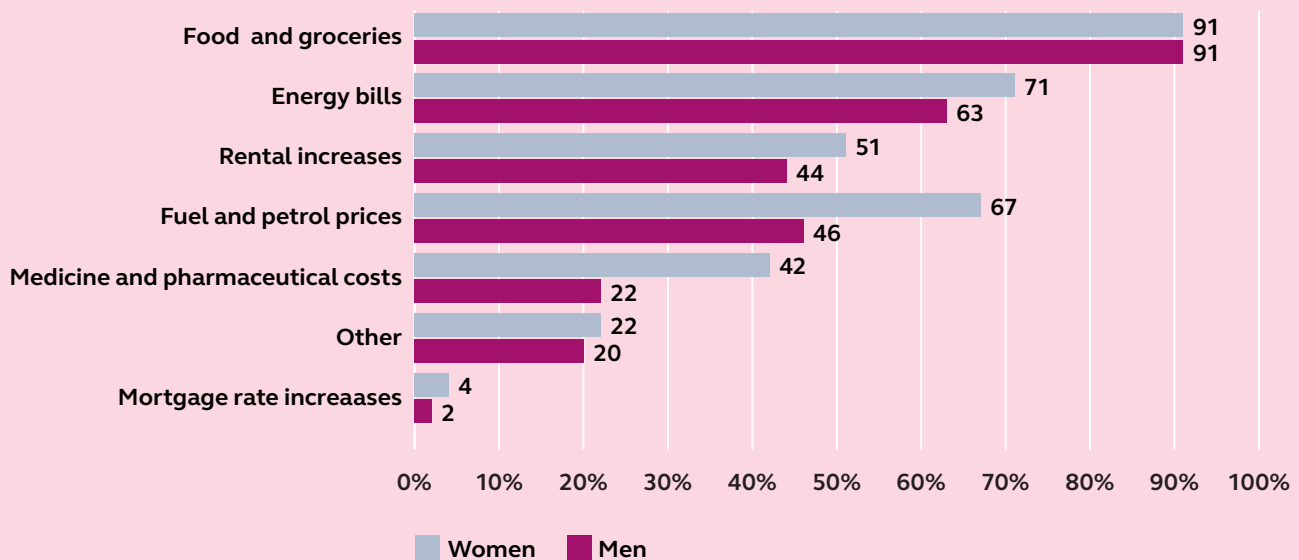


There are key differences in how the pressures of rising cost of living are experienced by women and men (Table 6). Women are more frequently experiencing pressure in all areas compared to men, except for food and groceries where both women and men are equally experiencing pressure (91% of both genders). In particular, fuel and petrol prices, and medicine and pharmaceutical costs are far more frequent pressure points among women than men.

The experience of cost of living pressures also varies by age (Table 7). Consumers aged 15-69 years most frequently identified food and groceries as a pressure point. Those 70 and over

most frequently reported pressure in relation to energy bills. By contrast, younger people aged between 15 and 19 most frequently identified food and grocery increases, followed by rental increases as pressure points. In particular, the impact of rental increases appeared to hit hardest for younger aged consumers, with 65% of those aged 20-29 years identifying this pressure point. The frequency of the impact of rising rents decreased by age across the cohorts, for example with 54% of 30-39 years identifying this, and 22% of 60-69 years. However, the sample sizes in some age cohorts (e.g. 15-19) is very small so these trends should be considered indicative, with further research needed.

**Table 6. Pressure points of rising costs by gender**



**Table 7. Pressure points of rising costs by age**

	15-19 years	20-29 years	30-39 years	40-49 years	50-59 years	60-69 years	70 years +
Fuel and petrol prices	0%	53%	69%	65%	29%	56%	60%
Energy bills	0%	35%	77%	77%	59%	78%	100%
Food and groceries	100%	88%	100%	97%	88%	89%	60%
Rental increases	100%	65%	54%	45%	47%	22%	20%
Mortgage rate increases	0%	6%	0%	3%	6%	0%	0%
Medicine and pharmaceutical costs	0%	12%	54%	42%	24%	33%	40%
Other	0%	12%	7%	16%	30%	56%	20%

■ Top frequency ■ 2nd Top frequency



The individual circumstances of consumers greatly shape the experience of cost pressures. Several consumers highlighted the impact of cost pressures on keeping a pet; others noted changes in their health circumstances that had led to increased allocation of income to this.

*"I recently had a fall in the CBD and injured my shoulder. I need financial assistance as the doctors are trying to charge me for medical costs."*

*"I have no money. I'm on the DSP and all my money goes to my two dogs."*

For some, cost pressures came as a single, overwhelming shock.

*"I have a \$800 gas bill I can't pay."*

Others noted that their living circumstances limited their ability to deal with cost pressures, keeping them locked into a cycle of spending on food that was more expensive.

*"I don't drive and I need to use taxis. I have a carer who buys my groceries and I cook them but it's mostly McCains meals so I can just microwave them but they aren't cheap."*

*"When you are homeless you tend to buy more take away. I don't have anything to cook with."*

The vast majority of consumers reported cost pressures in more than one category. More than one third (38%) reported pressure in four or more areas, with 77% reporting more than one pressure point.

*"Cannot afford house repairs. I will sometimes go without my medication due to price."*

*"Having to borrow money for petrol to put in my car so that I can get to GP and health appointments. I am in rent arrears but... I am on a payment plan with my housing provider. What happens when you can't afford things is that it impacts your quality of life. I go to a drop-in hub 5 days a week and when I can't get there because I don't have petrol, I get depressed."*

*"Our rent has increased, my car is not running well, one of my children has required unplanned medical expenses and increased education costs due to needing a specialised education setting not available at a public school."*

*"I'm on a limited amount on DSP... I have to buy necessities – I need laundry powder. I need shampoo. I like cordial but that has gone from \$3-\$5 so I can't afford that now. I am on two medications not on the PBS and I had to pay \$45 for those so sometimes I don't have enough money... I can't even put money aside for electricity... You know when you are struggling, the first thing you take money from is your rent."*





## Case Study

**Alia\* is a single parent with a disability, with three children 5-17, all with a disability.**

Alia is in her 40's and is on a Carer payment. Two of her children are currently NDIS participants, the third child needs to be assessed, and Alia has had no time or energy to apply for the NDIS for herself despite having a significant mental health condition that leaves her unable to function. Things have gotten a lot worse for Alia in the last 12 months where the combined affect of a marriage breakup, and rising costs of living pressures have left Alia with two big

worries: 'feeding my kids and keeping a roof over their heads'. Alia is cutting back expenditure in every area of life including food, getting behind on rent and bills, not buying medications and cutting back on therapy for her children, cutting back heating and all social and children's activities like school excursions. Alia can no longer buy gifts or drive to visit her family. She identifies that a wide range of services would make a difference if she could access them including health and mental health services, financial services and emergency relief, and housing/tenancy support services.

*\*This case study has been compiled from survey data. Some details such as names have been changed to respect the privacy of the people featured. The photo accompanying this story is for illustrative purposes only. It is not a photo of the people featured in the case study.*

# Changes to spending

The main strategy adopted by consumers to reduce their spending was to cut back on food and groceries (Table 8). Of the four strategies used by more than half of respondents, three focus on reducing food purchase. Eighty percent (80%) of respondents report that they are buying fewer groceries, with 59% buying less meat, and 53% buying less fruit and vegetables. A further 41% (just under half) report that they are skipping meals, even when cooking for others. Those skipping meals are almost wholly parents (mostly single parents) and people with a disability.

*“Buying medication means I have to come here [Emergency Relief service] for food. I look for things that are discounted, not what I want to eat. I love tomatoes but they are too expensive. I love lettuce but can’t afford that at the moment. I come here and there is a lot of pasta and rice but I have digestion issues so I can’t eat that. It’s really hard when you don’t have a choice about the food*

*you receive. Food vouchers would help, especially when you have allergies. I inherited three birds and I have to pay for bird seed and kitty litter for their tray. That adds up too.”*

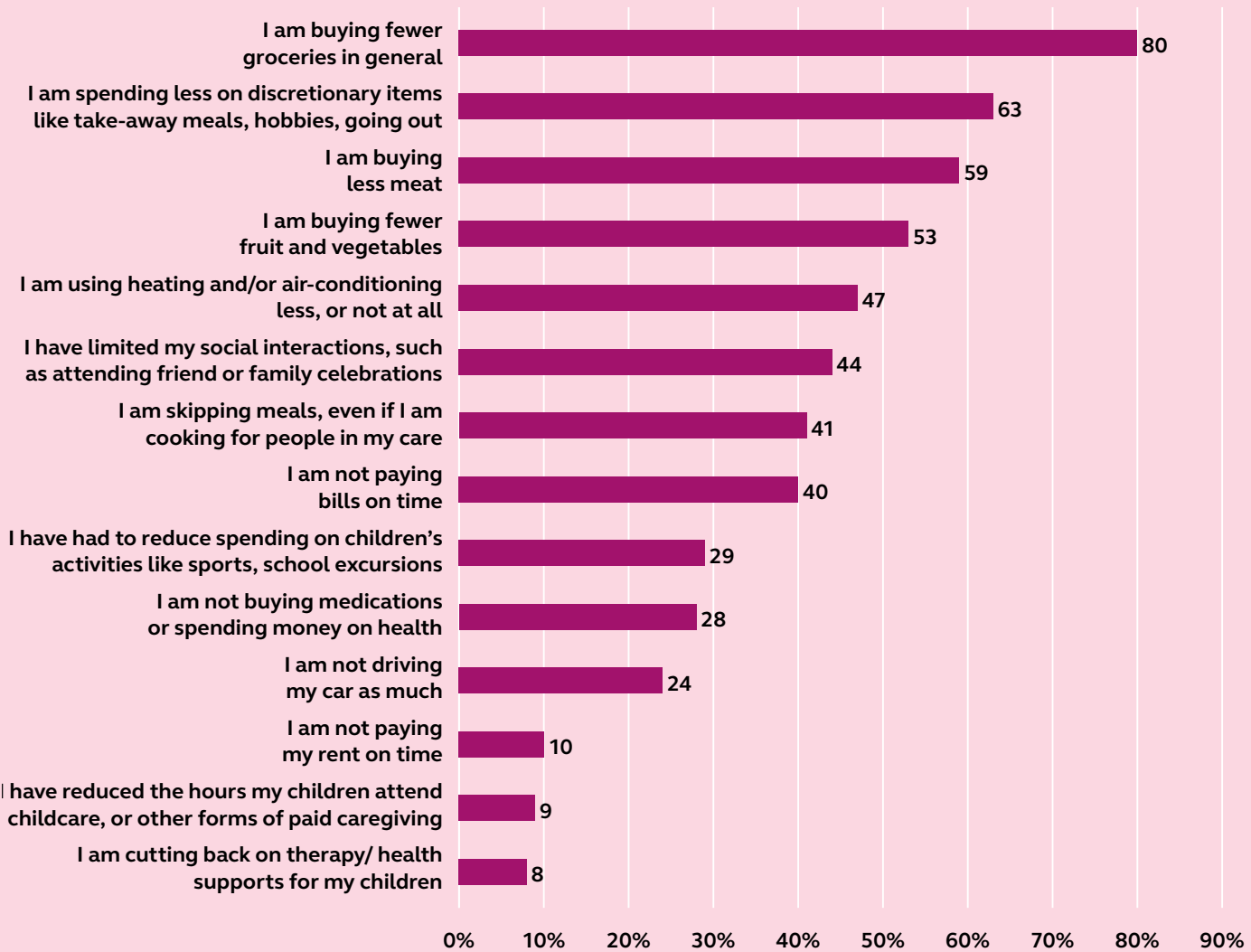
Consumers have also reduced the activities that keep them connected to family and community. Sixty-three percent (63%) have reduced their discretionary activities (like going out), and just under half (44%) have reduced social interactions (including family celebrations), with 29% also reducing children’s activities (like sports and school excursions).

*“We no longer can really afford extras. My children are having to continue missing out on things, simply because I have to buy food.”*

*“[I] won’t go out for meals or coffee. Increas[ing] social isolation.”*

*“I was going swimming but the membership cost \$31 per fortnight. I can’t afford it. Being able to have something in my life. I felt so good swimming, but I can’t afford it.”*

Table 8. Changes to spending





Almost half (47%) identified that they were cutting back on heating.

*"I am using blankets to keep warm rather than gas. I have got high interest loans to fill the gap but now I have to pay them back. Everything is going up at the same time. Fruit and vegetables are going up and my income is the same."*

*"It's uncomfortable and freezing in winter. My gas bill went from \$75 to \$200."*

*"Not able to use heating during winter as you have to make a choice between heating and paying bills."*

These cut backs are severe, in many cases, and take a significant toll on individuals and family members. Several mothers spoke of the extraordinary stress and fear they live in due to cost pressures and precarious income when one unexpected or unplanned cost can tip a family into crisis:

*"Fear of becoming homeless is an ongoing thing. If our rent is increased, we won't be able to afford it and we have literally no fall-back option in terms of having anywhere to stay. Also, my car is overdue for work and is running very badly (very old) and I can't afford to get it fixed at the moment. Once it breaks down, I'll be unable to get to work because I'll not have enough time to travel by bus to drop the kids off at school then get to work in time, then back again at the end*

*of the day in time to collect the kids before after school care closes. This is a massive stress and a ticking time bomb. Usually, I would have enough to pay for the car however I've needed to push it back due to emergency healthcare and alternative education related costs for my eldest child who is currently suffering severe mental health issues, resulting from the COVID lockdown."*

Another mother spoke of the cutbacks and difficult decisions being made on a daily basis:

*"There are some days that I can't go out in the car due to the cost. We can't afford to have the heater on at night. We use blankets and our house has damp. We can't afford to use the electricity at night. We have to use torches at night instead of turning the lights on. The kids can't have baths any more. I've had to limit everyone to having 5-minute showers."*

The child accompanying this parent, provided their own response, explaining how this level of cut backs impacts them:

*"I don't like using the torch at night because sometimes I crash into things. Last night I bumped my knee."*

However, for some consumers, they have no capacity to further reduce spending:

*"My budget was already so tight that there is little excess to trim away."*







## Case Study

Jim\* is a Victorian man in his 60's with a long term health condition.

He has found things harder since his income changed from Carer Payment to JobSeeker, as he no longer cares for his brother. For Jim, cost of living pressures are a bit worse than they were 12 months ago. He feels fortunate to 'have a roof over my head' and can earn a little money or a meal by doing gardening and other household tasks for neighbours. Nonetheless, Jim is feeling the effects of rising energy, food and grocery prices, including an \$800 gas bill he can't pay. He has stopped using gas for heating and is using blankets

to keep warm, but the other issues he can't manage as easily: 'I have got high interest loans to fill the gap but now I have to pay them back. Everything is going up at the same time. Fruit and vegetables are going up and my income is the same.'

Ideally, he wants to be able to get a part time job that pays wages on a weekly basis. While he has used emergency relief services several times this year, he is not allowed to access it again until the new year (due to service caps). On top of help with food, he would like support to increase his social connection and overcome isolation.

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## Areas of impact of rising cost of living

The vast majority of consumers reported impacts across multiple areas (Table 9), with only 14% listing just one area of impact, with more than one in three (38%) reporting impacts on five or more areas. Around three quarters of consumers reported that the rising cost of living had an impact on their financial situation and security (78%) and their ability to eat well (70%). Negative impacts on the ability to eat well were more frequent for those over 40 years of age, particularly for those in the age brackets of 40-49, where 84% reported negative impact on eating well, and seniors over 70 years of age, where 80% reported impact on eating well.

*“I have a serious heart condition and I worry all the time about the lack of vegetables and fruit I’m eating and the nutrition I’m losing from that.”*

*“We always have barely anything in the fridge and pantry.”*

*“Being unable to provide and eat properly.”*

The impact on mental health was the third most commonly reported impact, by 59% of people, meaning one in every two people were experiencing mental health impacts resulting from cost of living increases. Negative impact on mental health was particularly frequent among parents of children under 18 (85% noted this impact), and Aboriginal and Torres Strait Islander people (77%).

*“[The most significant impact is on] my mental health, I feel like a failure as a parent because I can’t afford to care for my children.”*

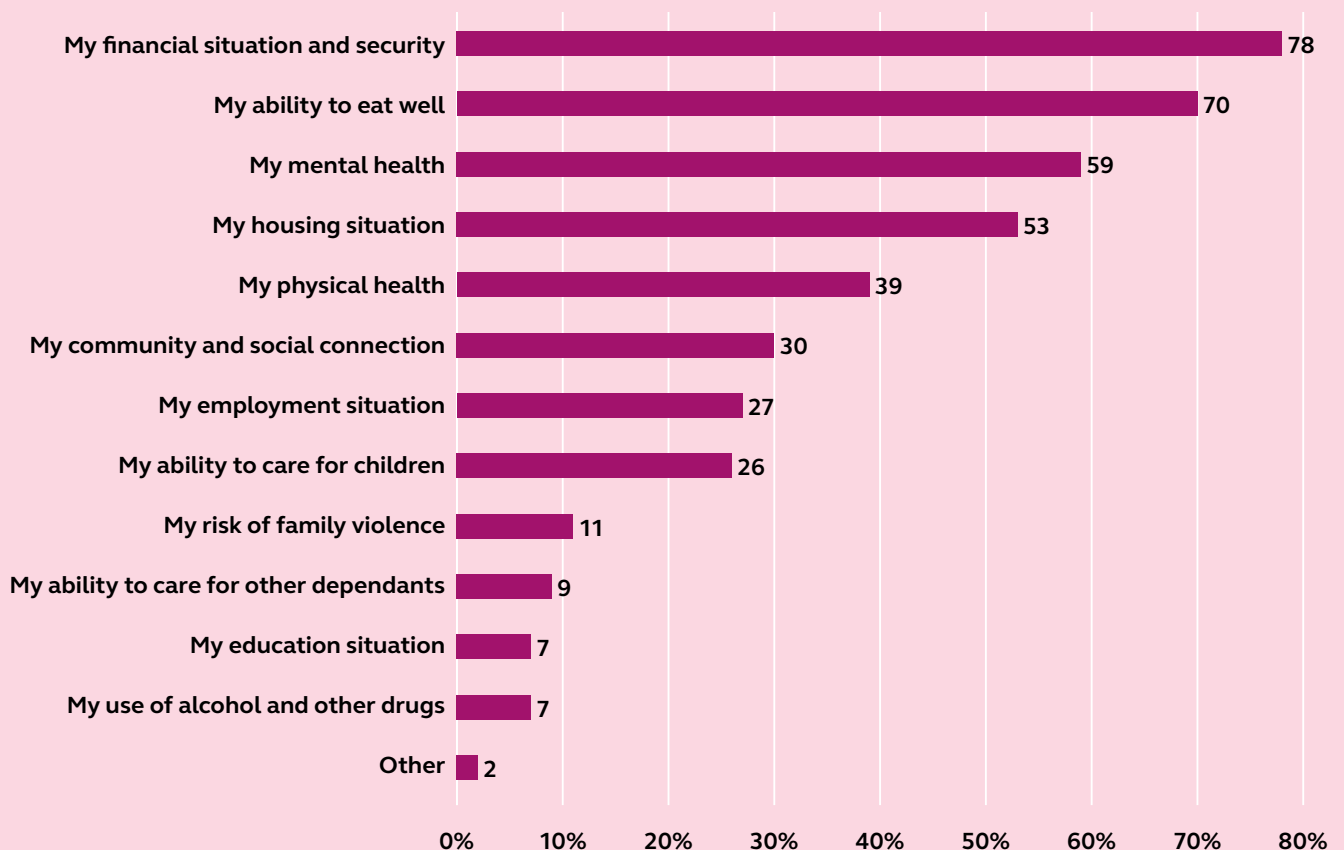
*“Rent and fuel costs. I have no self worth. I don’t want to be homeless for over three years.”*

*“I’m very stressed all the time.”*

*“The uncertainty of where things are going is impacting my mental health.”*

*“My, and my 12- and 15-year-old kids’, mental health.”*

**Table 9.** Areas of impact of rising cost of living





Similarly, somewhat more than half of respondents (53%) identified impacts on their housing situation, with people from culturally and linguistically diverse background experiencing this as a far more common issue, with 83% of this cohort noting this as a negative impact. Consumers talked both about the impact of being forced into or being unable to get out of homelessness due to high costs of accommodation, and also explained the cumulative impact of being unable to afford house repairs, which in turn affected other areas of life.

*“My house needs repairs and has holes in walls and floorboards that mean it’s freezing in winter. No hot water and cannot afford to have it fixed.”*

*“I can’t afford to live anywhere and rent when I get \$300 a week. I’ve lost a few kilos even though I try to eat well. You do have your days when you think ‘I give up.’”*

*“It’s made me homeless.”*

Around one third of respondents identified impacts on physical health (39%) and their community and social connection (30%).

*“I’ve been struggling and when I don’t have food, I start to lose weight and don’t have energy. You feel depressed. I sleep a lot. I have health issues.”*

*“Having to say no to social offers and people have stopped asking me to go out, even just for a coffee or tea.”*

*“I can’t afford to go [out] anyway, sleeping and feel depressed, warmer to stay in bed.”*

Another consumer spoke of the lengths they go to in order to hide the level of hardship they currently face from their friends and family:

*“I don’t go for coffee or to the movies with my friends because I can’t afford it. Sometimes I say yes [to going to a café] but I tell my friends I am not hungry...I don’t eat because I can’t afford to buy food. Sometimes I sneak a tea bag in my handbag and ask the waiter for a hot water. Then I sneak the tea bag in the hot water so I can drink tea with my friends.”*

*“Having to say no to social offers and people have stopped asking me to go out, even just for a coffee or tea.”*

Significantly, more than a quarter (27%) noted that the cost of living was impacting their employment situation with many talking about the significant barriers to finding and sustaining employment when struggling financially:

*“When they [Centrelink] ask me are you looking for jobs I say “I am surviving. That is my job”. Some days I don’t know if I am going to shower or eat. Then you go to a job appointment and they are paying people under the minimum wage. I never had anxiety until I was older. I want a job but how can I find a job when I’m homeless and just surviving.”*

Caring capabilities, of both parents’ ability to care for children and carers’ ability to care for dependants, were impacted for 26% and 9% respectively.

*“I have changed my energy usage because it is so expensive.... but having my child in a cold house worries me.”*

*“Unable to buy necessities for my newborn baby.”*

Every respondent (18 individuals) who was either a parent of a child with disability or carer of an adult with disability additionally identified impacts of cost of living related to use of alcohol and drugs.

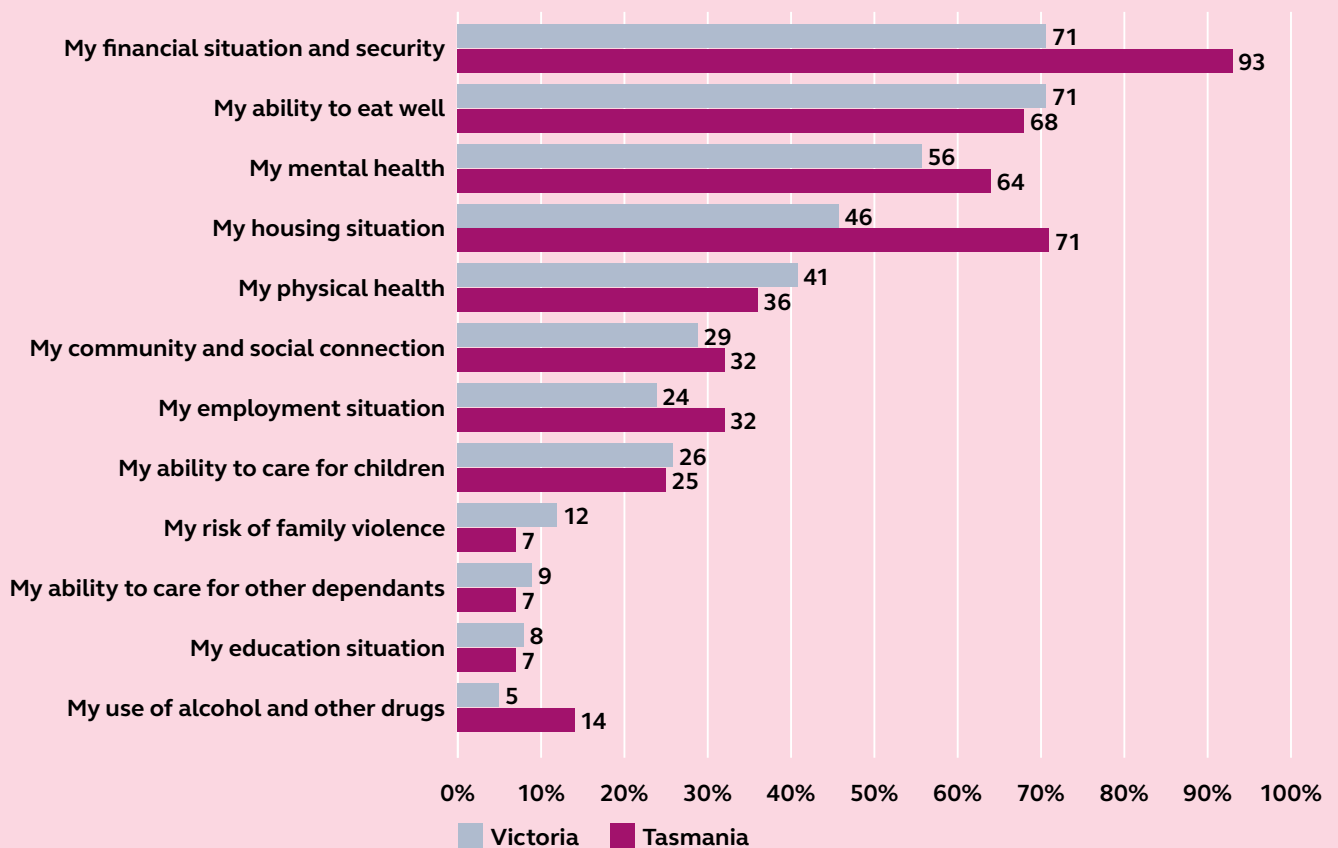
Eleven percent (11%) of individuals felt more at risk of family violence as a result of rising costs of living, and again the groups most frequently affected were carers (of either children or adults with disability), with 67% of both groups identifying this negative impact.

Women are more negatively impacted across all life areas except one (financial situation) than men. They are 18% more likely to experience family violence resulting from costs of living rises than are men, 16% more likely to experience physical health impacts, and 12% more likely to experience impacts on mental health, housing and community/social connection.

Being employed does not appear to be a protective factor from the impacts on life areas of the rising cost of living. While the sample is small (and skewed given the cohort is comprised of those seeking community service support), employed people more frequently identified impacts of rising cost of living across most areas as compared to those who are unemployed, except in the areas of housing and use of alcohol and other drugs.

Consumers in both Tasmania and Victoria appeared to have relatively common experiences in regard to impact on life areas (Table 10). However, in two key areas Tasmanians reported a far higher frequency of impact: financial situation and security, and housing situation. Tasmanians were 25% more likely to experience impacts on their housing situation than Victorians, and 22% more likely in regard to financial situation/security. In addition, Tasmanians were 9% more likely to experience impact on their use of alcohol and other drugs and 8% more likely to experience mental health impacts from the rising cost of living.

**Table 10.** Areas of impact of rising cost of living comparing Tasmania and Victoria



A woman with dark hair and glasses is looking down at a white piece of paper she is holding. She is wearing a black t-shirt. The background is blurred, showing what appears to be an indoor setting with some furniture.

## Case Study

Sana\* lives in Tasmania. Sana is in her 30's and is experiencing significant impacts of cost of living on all aspects of life, particularly her housing.

She receives the Disability Support Pension but wants to find work. However, her ability to find work is impacted by her tenuous housing. As Sana explains, she is 'getting squeezed out of the rental market. I can't compete with people with jobs, and I can't improve my education situation without a house'. Rising costs are

having an impact on many areas of Sana's life – she has reduced her spending on fruit, vegetables and groceries in general and is skipping meals. Sana can't afford to drive her car as much. Sana's housing situation, general financial situation and security, and her physical and mental health have all been impacted by increasing pressures from rising costs. She has also limited her social activities. Her situation is deteriorating, and she would like support from a wide range of services relating to family violence, housing, employment, education, health and mental health, and social connection.

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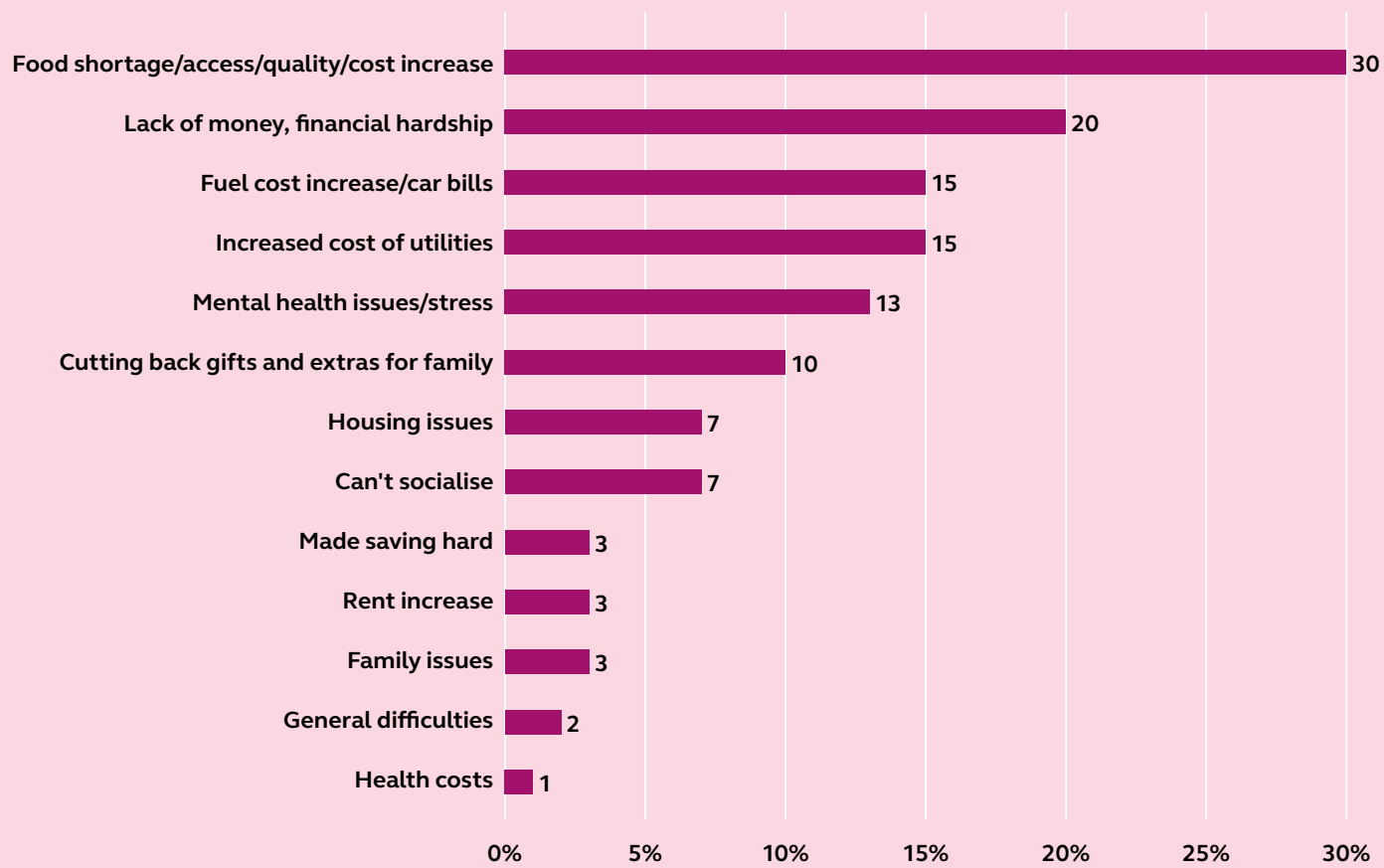


Overall, the impacts of rising cost of living have a significant impact on both individuals and family members, reaching across a wide array of basic needs. As one consumer described it, echoed by many others:

*“It’s everything, I can’t just give you one thing, it’s everything.”*

Food and lack of money/financial hardship were the two areas of most significant impact on consumers (Table 11), reported by 30% and 20% respectively (of those who provided answers to this question (n=87). Both women and men identified these as the top two impacts affecting their lives.

**Table 11.** Most significant impact on rising cost of living



# Case Study

Jos\* identifies as a non-binary single parent, and is in their 30's.

Jos has two children aged 10 and 17, with one with a disability. The family receives a Parenting Payment and Jos is also looking for work. In the last 12 months, cost of living pressures have gotten worse, with Jos accessing supports from emergency relief, financial wellbeing and crisis support. Jos' current gas bill is \$500 a month, and Jos

desperately wants a new heating solution. Jos has been forced to buy fewer groceries for the family, cut back on children's activities like sports and school excursions, and heating. Overall, rising cost of living is impacting Jos' ability to eat well and care for their children, along with Jos' physical and mental health, employment situation, and the education and social connection of all the family.

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Impacting factors were diverse by age, with 30-39 year olds identifying mental health issues and stress as the most significant impact, and 60-69 year olds identifying increases in utilities costs leading to reduced energy use (e.g. for heating).

In the words of one consumer, the impacts of this system of entrenched poverty was ‘dehumanising’:

*“The government keeps people poor - they think they are helping people get out and get to work but I can’t work. People on the DSP need to live - how is \$10 a week going to help? I shouldn’t have to feel like I’m begging when I come to services for food. The government need to raise the pension - not \$20 but why don’t they think of raising it \$100. The government needs to know how it makes a person feel - it dehumanises you. It’s like you are blamed, like you can’t manage your money. Some services want you to go to a budget course if you turn up too many times... It’s dehumanising. It dehumanises you when you can’t afford food and have to go to organisations for food and food vouchers.”*

## Current Needs

### Services sought

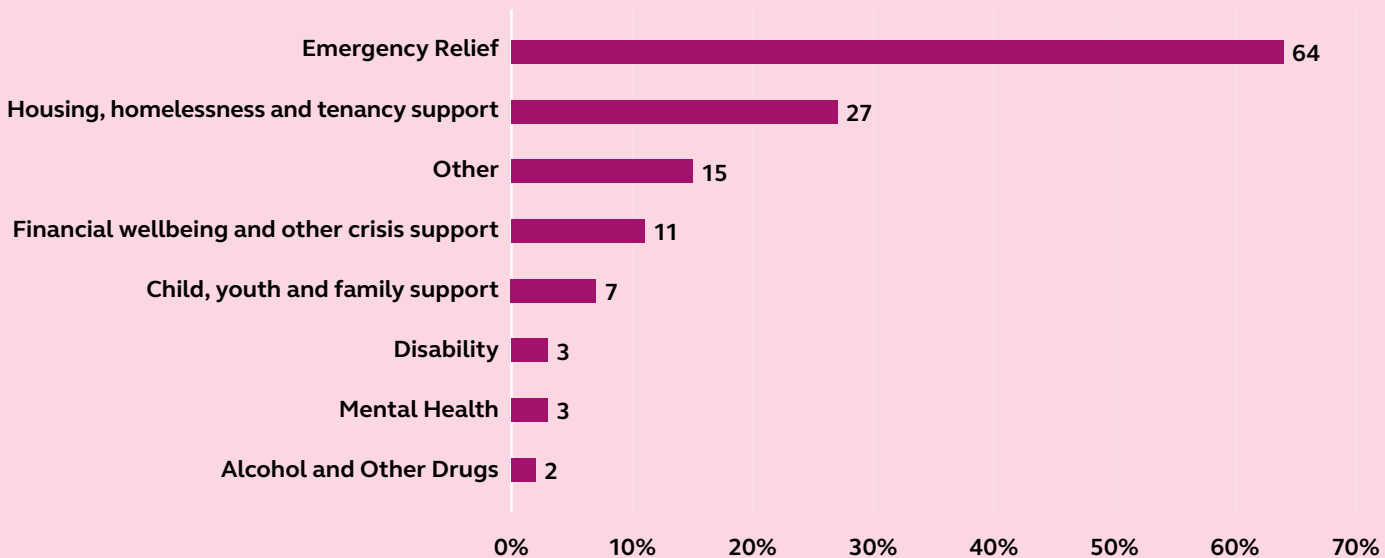
The main service being sought by consumers at the time of completing the survey (Table 12) was that of Emergency Relief, with 64% of all consumers, both unemployed and employed, seeking this kind of support. Though the sample

is small, a high proportion of those with jobs were hoping to access Emergency Relief, with 100% of those employed full time or as a casual worker, and 80% of those employed part time seeking this service. For those employed full time, while they had needed support during the past 12 months, this was their first attempt at service access in that period. 100% of respondents in Tasmania were seeking to access Emergency Relief, while only half (52%) of Victorian consumers were seeking this service

The other main area of demand was housing, homelessness and/or tenancy support (27%), with some consumers seeking to access both Emergency Relief and housing support. Eleven percent (11%) of consumers were seeking to access financial wellbeing and other crisis support. A small proportion of consumers sought access to child, youth and family services (7%), disability services (3%), mental health services (3%), and alcohol and other drugs services (2%). Of those who reported they were accessing ‘other’ services (15%), the majority were accessing food and meals programs.

While most (81%) were seeking support from one service type, 12% sought the support of two service types and 7% were seeking support from three or more service types.

**Table 12.** The service or support currently being sought from Uniting

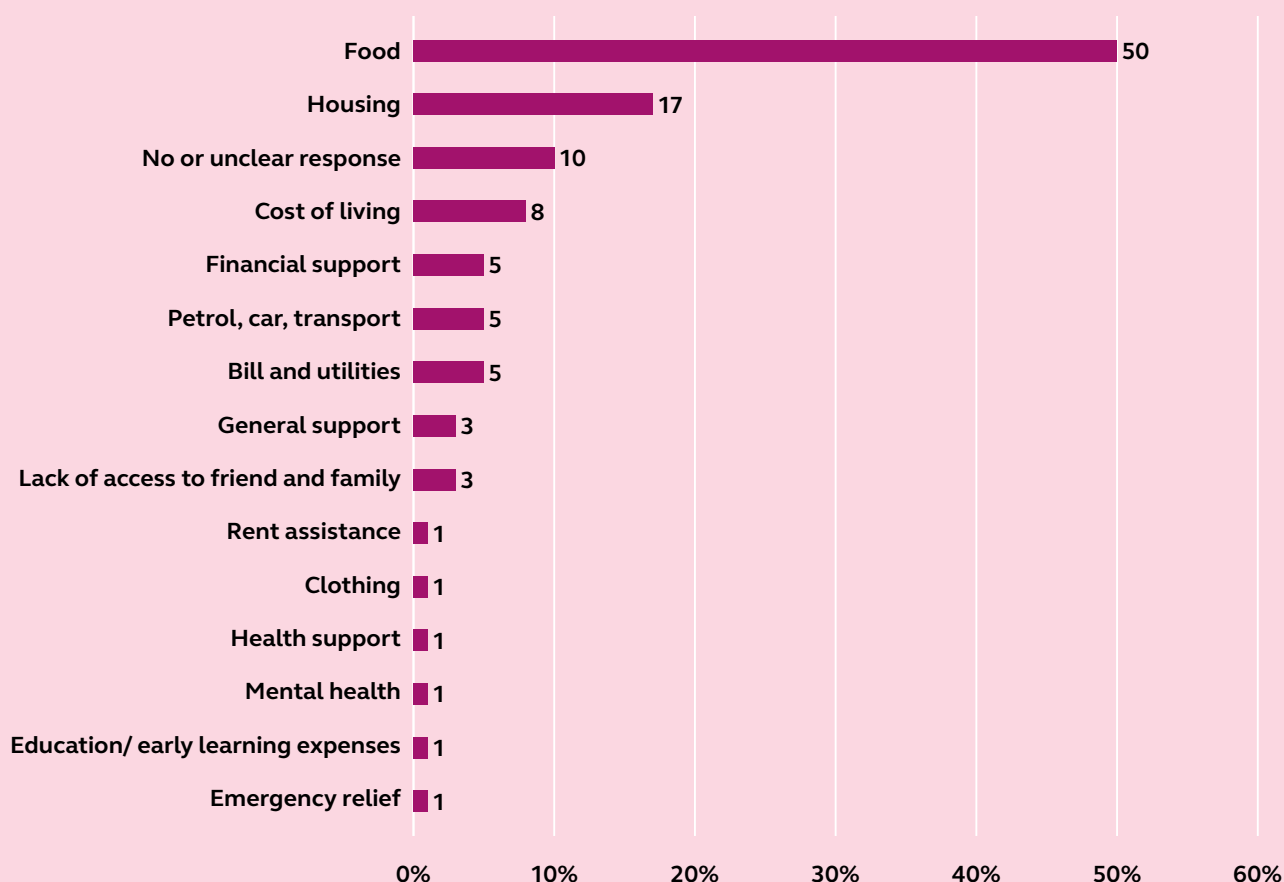


Note: Due to some consumers seeking support from multiple services, the table sums to more than 100%.



## Primary reason for seeking support from service currently

**Table 13.** Primary reason for seeking support



Note: Due to some consumers seeking support from multiple services, the table sums to more than 100%.

Food was the most prevalent issue identified by half of consumers, and the number one reason for accessing the service across every age cohort (Table 13).

*“Struggling with food for six with one income.”*

*“Access to food is limited on my own budget. I can’t afford to get everything I need.”*

*“I am down to one tin of beans.”*

*“Fresh vegetables are expensive and the food bank helps me so much.”*

*“For food - it’s got a lot worse out there.”*

*“Food. I come to you guys for everything. I need gas [petrol] today. Any little bit of food helps. I feel grateful that services are there. I know it’s heartbreaking for staff too because you don’t have a lot of food to give. It’s not just people on a pension, it’s everyone... Even with [food] vouchers, the [service] down the road used to give a \$50 voucher but now that’s reduced to \$20.”*

Eight percent (8%) commented specifically on the rising cost of living, noting multiple pressures at once:

*“Can’t afford cost of living, food etc and the bills then on top of the school fees, kinder fees etc.”*

*“I’m a single mother with four children. Not working at the moment and the payment I receive is not enough to pay bills, pay house [rent] and everything is so difficult with the increase of everything.”*

Social isolation was also noted by a small number, and is an issue more prevalent in those over 70 years of age.

*“Meals and the company. Something to eat and someone to chat to. I live alone.”*

While consumers were united by some common experiences, particularly in relation to the cost of food and housing, each individual also had specific contexts that added difficulty to their ability to manage financially:

*“Food. I have a child with a long-term health condition and children with other needs - the cost of medicine alone - for my child with Type 1 diabetes who had a cold this week, it costs \$17 to buy the special sugar free cough medicine.”*

## History of service use

Most consumers had sought support from services previously in the past 12 months, with most accessing Emergency Relief services (66%) and 30% accessing housing, homelessness and tenancy services. Of these, most (90%) had accessed services within the last six months, and 79% within the last 3 months. This pattern of repeat service use was also apparent across service types, with three quarters of consumers (75%) accessing two or more services over the past 12 months. More than a third (38%) had sought support from four to six services in the past year.

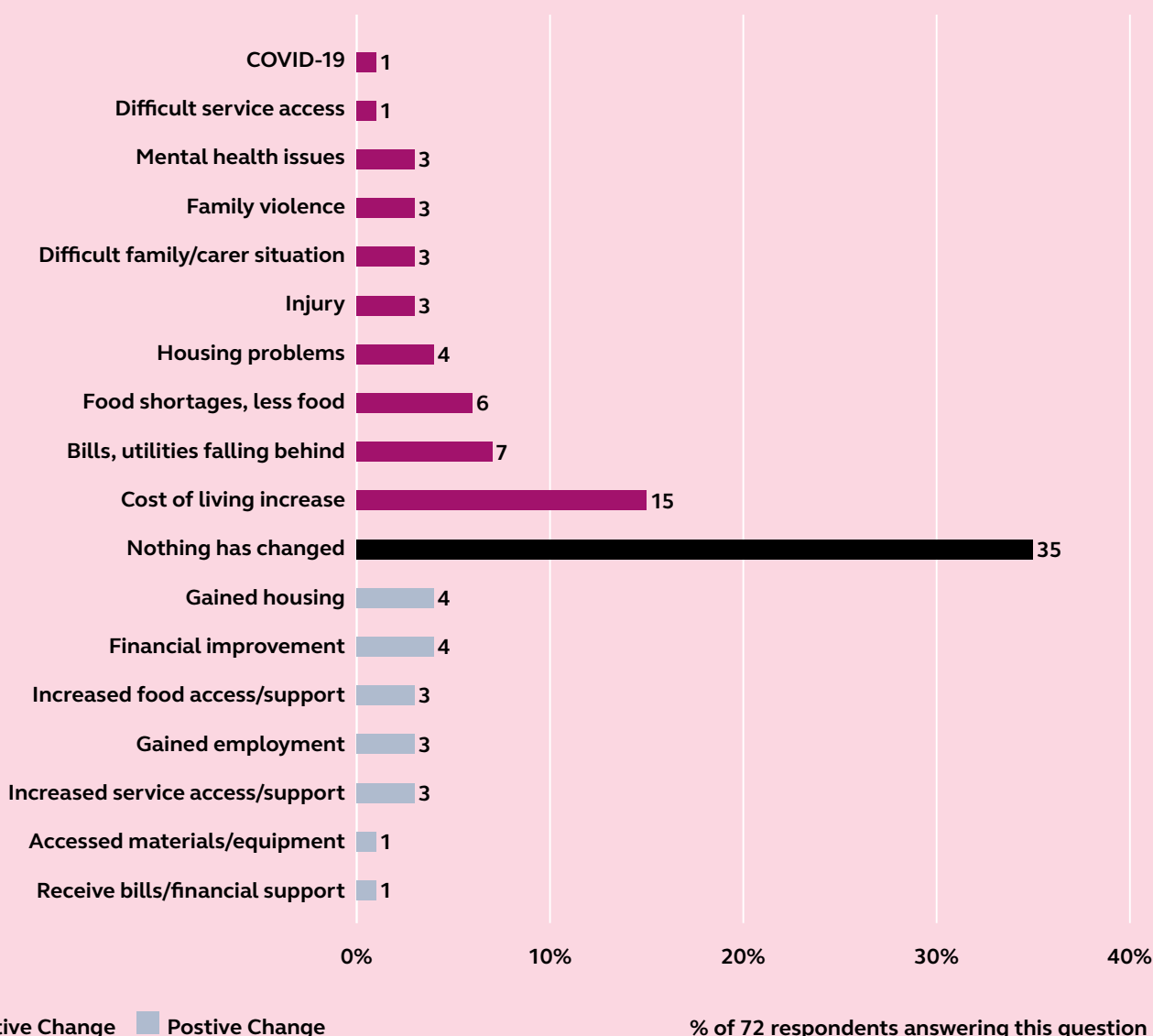
Given that most consumers had sought support from a service recently (i.e. within the last 3-6 months), it is not surprising that for slightly more than one third (35%) nothing had changed in their situations since last gaining support (Table 14). Not all consumers provided an answer to explain any change since the last service receipt. Those who

identified negative change included fifteen percent (15%) who identified the cost of living increase, 7% who mentioned falling behind on bills and utilities, and 6% who noted experiencing a reduction in food. Women identified an increase in housing issues, and were also disproportionately affected by food shortages and cost of living rises.

Some consumers noted improvements since their last service access, including finding housing (4%, mostly men), financial improvement (4%, more women than men) and getting a job (3% equal numbers of women and men).

Sixteen percent (16%) of consumers were new to the service system. Of these, approximately one in ten people (9%) had previously needed support but had not accessed it. A further 7% had experienced life changes that were presenting issues for which they had not needed or sought support from services in the last 12 months.

**Table 14. Things that had changed since last service use**





# Making a difference

## The number one thing that would make a difference

Consumers were asked to nominate the number one thing that would make a difference in their lives right now (Table 15). Not surprisingly, one in five consumers (20%) focused on increased income or money and, linked to this, 15% identified employment or work experience.

*“Lower living costs or higher Centrelink payments.”*

*“Increased pension, allow pensioners to work and not be penalised.”*

*“Increased carer payments, more money in general.”*

*“To have my license back and to get a part-time job. I wish I could read and write.”*

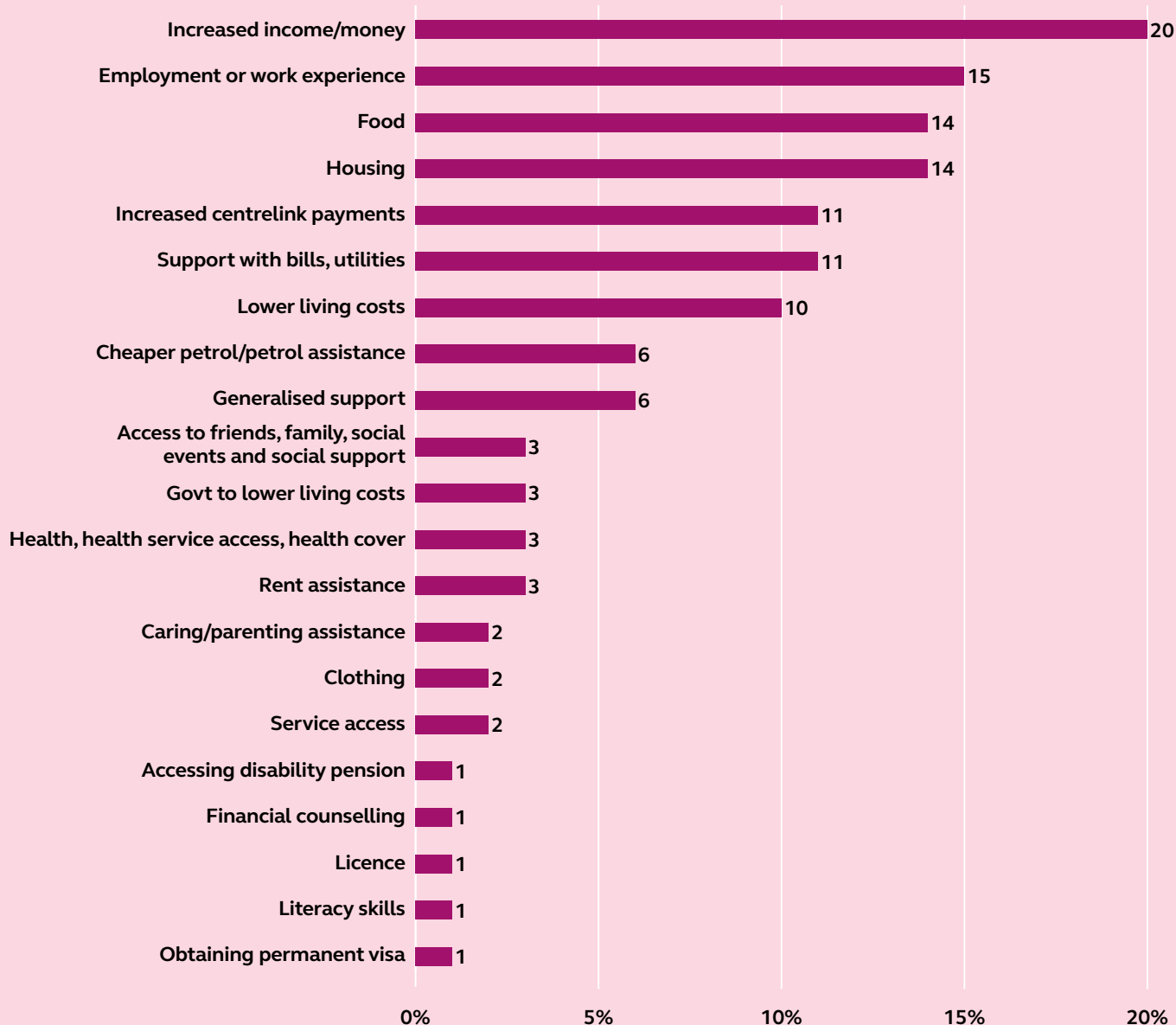
*“Part-time job with weekly money – not fortnightly. I would like to work part-time again.”*

*“Securing long term employment. Then I would be able to buy more fresh meat and food and other luxuries.”*

A parent spoke of the bind they are in trying to juggle employment, childcare availability and rental costs exceeding half of their income:

*“What would help is more money - I can’t work more than I am and be any better off. My earning capacity is capped at how much before and after school care is available. If I work full time hours, I earn the same as I do now on part time hours (after costs considered/ including childcare*

**Table 15.** The number one thing that would make the biggest positive difference right now.



costs) but because I can't just put my hand up for weekend work or work that finishes past 4pm (because I can't leave the kids alone at home) there is literally no way I can earn more than I do now, and my income is only \$800 per week for myself and 2 children and rent is over half of this (and we rent the cheapest place we could find)."

For another mother, her ability to engage in more hours of paid employment is limited by availability and costs of childcare:

"What would help is more money, I would be over the moon to be able to earn more myself if I could but there is a cap to what I am able to earn because my earning capacity is at the mercy of the only childcare option I have which means I can only work a certain number of hours a week before it caps. A substantial increase in rent assistance would really move us out of this hopeless situation."

Fourteen percent (14%) of consumers identified that either food or housing would make the biggest difference, repeating their concerns expressed previously in the survey.

"Not worrying about having enough food."

"The cost of food needs to go back down. It forces you to go to multiple services just to get enough food. I come here later in the day but the food is all gone by then, the pantry is empty."

"To be given permanent or temporary accommodation, a roof over my head to call home."

"Having something that's affordable in a housing sense so I can get a job."

"Getting a permanent visa and government housing or disability housing."

Overall, many of the items mentioned contribute to either increased finance (such as increasing Centrelink payments, rent assistance, accessing the Disability Support Pension) or decreased costs (lower living costs, cheaper petrol). Access to services and supports was also noted by some, along with other forms of support from family and friends and for carers.

One person summed up the wish to no longer have to make choices between basic necessities:

"[The number one thing would be an] increase in wages, \$20 more would be something. You pay rent, you buy groceries and you freeze. OR You buy groceries, you turn on the heater and you don't pay rent."

However, there is a significant difference between women and men in relation to this question. Women selected increased income/money as the number one thing that would make a difference, followed by a set of fundamentals such as housing, food, and support with bills and utilities. By contrast, men selected employment as the number one thing that would make a difference, followed closely by increased income/money.

A similar distinction is found across age cohorts, with each age cohort selecting a different 'number one' thing as making the biggest positive difference (Table 16).

**Table 16.** The number one thing that would make the biggest positive difference by age group

Age cohort	(Most prevalent) Number one thing	% of age cohort selected
15-19 years	Increased Centrelink payment	100%
20-29 years	Housing	29%
30-39 years	Employment or work experience	31%
40-49 years	Increased income and money	23%
50-59 years	Increased income and money	29%
60-69 years	Cheaper petrol/petrol assistance	33%
70-79 years	Increased income and money	20%
	Government to lower costs	20%
	Support with bills and utilities	20%

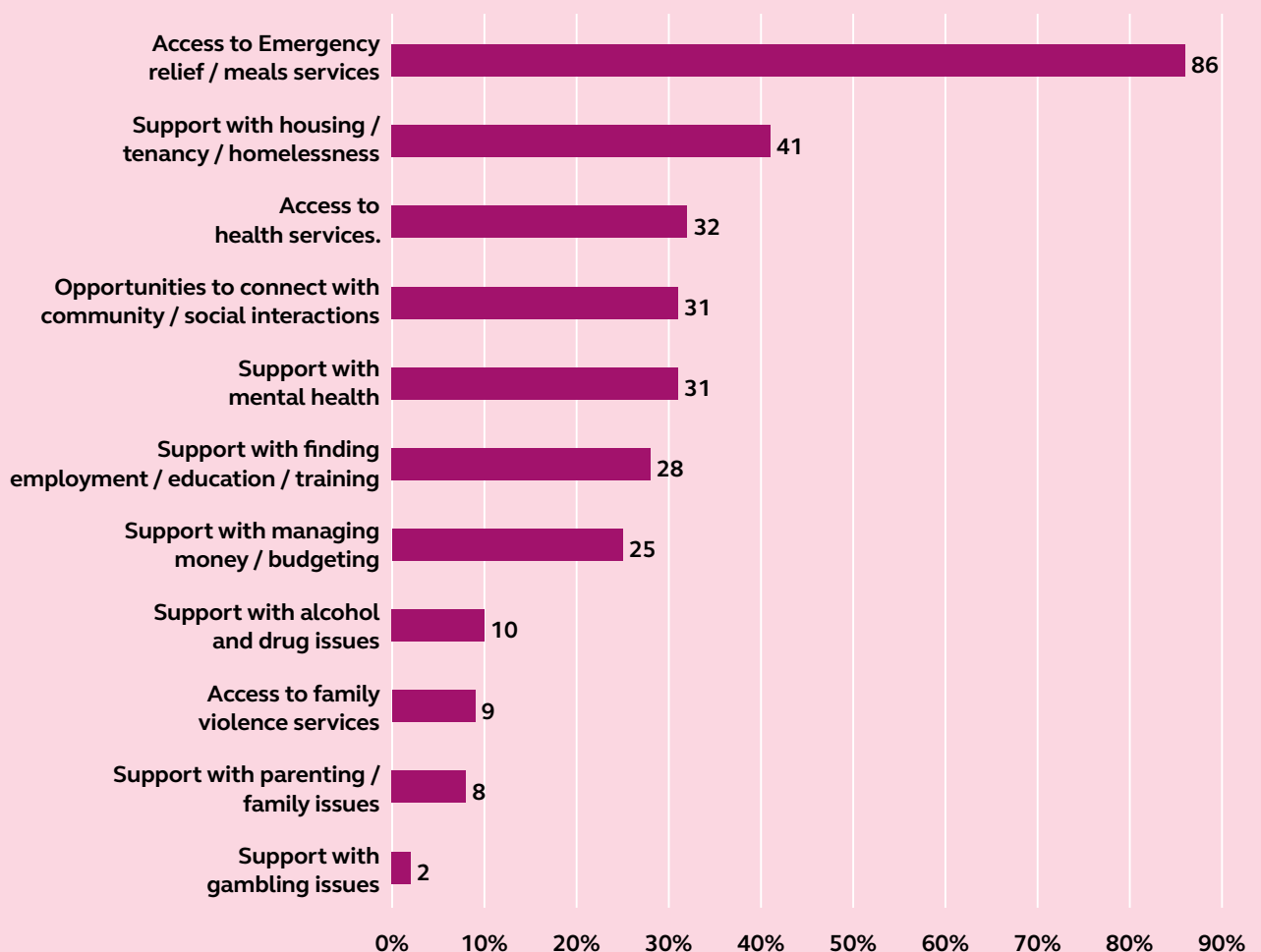
## Services that would make a difference

Consumers were also asked to identify the services that would help make a positive difference (Table 17). While it was to be expected that Emergency Relief would be the prevalent response (by 86% of all consumers), given both the needs identified and the cohort of consumers sampled (including those attending Emergency Relief services), a range of services were nominated here by consumers. These include housing and tenancy support services (41%), health services (32%), services that support

community connection (31%), and mental health services (31%) – issues that have been previously identified in the survey data.

The majority of consumers identified more than one service, with only 29% nominating only one service. 33% identified four or more services as being able to make a positive difference. This speaks to the complexity of the contexts and issues facing consumers, as articulated in the situation for one consumer (next page).

**Table 17.** Services that would make a positive difference





## Case Study

**Inna\* is a woman in her 40's with three children aged between 5 and 17.**

Inna has a culturally diverse background and identifies as LGBTIQ+. She receives a Disability Support Pension in recognition of her complex health conditions including an Acquired Brain Injury, PTSD and a physical injury. In the last 3 years, she has been homeless and now is sleeping in her car. There are issues in caring for her older child (15 yrs) who has been couch surfing at her ex-partners, despite experiencing domestic violence. Over the past 12 months, things have gotten so much worse that she is now in crisis with the situation affecting her eating, her physical and mental health, her use of alcohol and drugs and her social

connection. She has no further room to modify her spending, Inna identified a need for five services, including:

- Access to Emergency relief/meals services
- Support with housing/tenancy/homelessness
- Access to health services
- Support with mental health
- Opportunities to connect with community/social interactions,

She feels access to permanent or temporary accommodation would be the support that would make the most difference.

*\* This case study has been compiled from survey data. Some details such as names have been changed to respect the privacy of the people featured. The photo accompanying this story is for illustrative purposes only. It is not a photo of the people featured in the case study.*



Compared to men, women more frequently identified that services would be helpful (Table 18). Double the percentage of men than women thought alcohol and drug services would be useful, and also more men felt that support with connecting with community or having social interaction would be helpful. By contrast, only women identified that support from family violence services would be helpful. Family violence services were particularly sought by single parents and people from culturally and linguistically diverse backgrounds.

Services that offered support with managing money or budgeting were more frequently sought by Aboriginal and Torres Strait Islander consumers, and those from culturally and linguistically diverse backgrounds.

Services offering support with mental health were highly identified by LGBTIQ+ consumers (67%), carers of adults (56%) and Aboriginal and Torres Strait Islander people (54%).

A number of consumers also commented on their need for other service types including:

*“Legal support, driver education support, language classes.”*

*“My debt being wiped from 8 months without Centrelink.”*

*“Needing a bulk bill doctor for chronic severe issues.”*

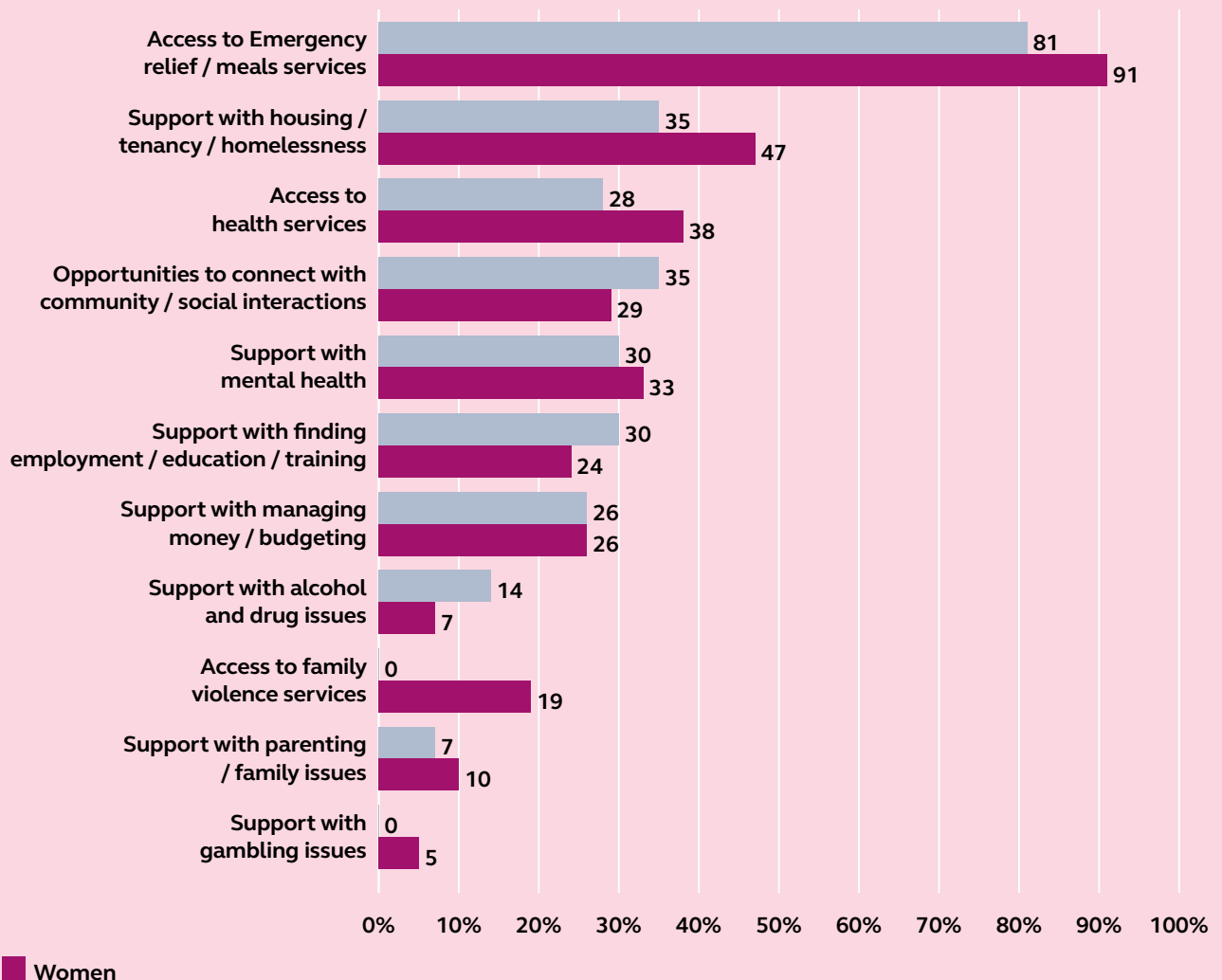
*“Having someone to talk to. I do have a counsellor here that I can talk to which is good.”*

*“Support with finding employment. I am a qualified chef and waiting for my police check to come through.”*

While specialist services clearly were considered to offer beneficial supports related to specific issues experienced by consumers, throughout the data several noted the importance of the general safety net that services provided through the connection to other individuals who cared about their circumstances:

*“I think Uniting makes the most positive difference for me. You need to know that somebody is there and I know I can always come in here.”*

**Table 18.** Services that would make a positive difference – comparing responses by gender





# Discussion

The rising cost of living in Australia follows a period of economic downturn resulting from the pandemic, exacerbated by a series of natural disasters. Various reports have identified ‘a magnification of disadvantage and struggle that has been experienced by communities that were already on the periphery’ along with a new wave of people seeking support from community services, many for the first time (Cortis and Blaxland, 2021, p.10). Data from this Uniting Cost of Living survey highlights the impact of the rising cost of living in 2022, demonstrating the severe and, in some instances, catastrophic impacts on low-income individuals and their families. Importantly, this data further evidences a repeating and growing trend that some have called a ‘tsunami’ of need (Cortis and Blaxland, 2021, p.9), with individuals and families experiencing a year on year compounding of economic and personal crisis.

The data is based on a cohort of Victorians and Tasmanians who, in the main, were already struggling financially prior to the recent cost of living rises. While three quarters of the sample had accessed two or more services for support over the past 12 months, cost of living rises have pushed consumers into, or further into, crisis in this period. As a result, 16% had found themselves seeking support when they had not done so before. While the survey sample was largely comprised of people who were unemployed, many with caring roles (as parents or carers of adults with disability or illness), it also included a small cohort of people who were employed. Unfortunately, even employment was not a protective factor for those in this sample.

This research provides evidence that the rising cost of living is deepening financial and housing insecurity, and impacting health and mental health, and social isolation. The front line of impact is food. Ninety-two percent of all consumers reported pressures on food affordability resulting from cost of living increases, and cutting back on food and groceries was the most frequently cited strategy used by all. Seventy percent (70%) reported an impact on their ability to eat well, with parents, carers and people with disability all reporting that they would skip meals even if cooking for others. This finding echoes that from a survey conducted by ACOSS of 449 income support recipients during July and August 2022 where 62% reported eating less or skipping meals (ACOSS, 2022).

Alongside pressures from rising food costs, consumers reported pressures from the cost of energy, fuel, housing and health costs including medications, again echoing findings from ACOSS (2022). The rising cost of energy bills was reported by two thirds of respondents and almost half identified they were cutting back on heating (71% reporting this in the ACOSS, 2022 study), with many worried about the impact of this on their children or those they cared for. Around half identified impacts on their housing situation, with this deeply affecting people from culturally and linguistically diverse backgrounds, and with many examples across the whole cohort of people having been pushed into or on the brink of homelessness. Such findings are not new and reinforce a series of studies identifying an expanding housing crisis of affordable housing in Australia (for example, Cortis and Blaxland, 2022, 2021; Pawson, 2021; Saunders, Naidoo and Wong, 2022; SGS Economics and Planning, 2022; Wetzstein, 2019).

One in two people experienced mental health impacts resulting from cost of living increases, supporting other research on the deleterious impacts of poverty on the mental wellbeing of individuals (Duncan 2022) and the increasing unmet need for mental health supports across all groups in the population (Cortis and Blaxland, 2021). Aboriginal and Torres Strait Islander people and parents of children under 18 were all more likely to experience mental health impacts. The rising cost of living reaches into all areas of life and is almost never experienced in a single area with one in three consumers experiencing negative impacts in five or more areas of their lives.

The research also shows that the effect of rising cost of living is gendered, adding to literature highlighting the disproportionate impact of poverty on women (Duncan, 2022), and for single mothers in particular (Bowen and Wickramasinghe 2020; Bessell, 2022). Data from this study shows that women are more frequently experiencing cost pressures and are more negatively impacted across life areas than men. They are more likely to experience family violence, along with impacts on physical health, mental health, housing and community/social connection than are men, resulting from the rising cost of living. The multidimensional aspects of women’s experience means that as single parents, women

living with disability or elderly women, these circumstances layer additional levels of negative impact of rising costs of living on top of gender.

Diverse impacts are felt across age groups, highlighting the way cost of living pressures manifest in different cohorts and in complex ways. Similarly, geography also shapes the experience of cost of living impacts. Consumers in Tasmania generally reported more significant disadvantage and negative impacts than did Victorian consumers. Tasmanians were 25% more likely to experience impacts on their housing situation, and are more likely (22%) to experience impacts on financial situation/security than Victorians. Tasmanians were also more likely to experience impact on their use of alcohol and other drugs and to experience mental health impacts from the rising cost of living.

The stories of consumers recount complex and highly individual circumstances where macro forces combine with personal context to produce ongoing and inescapable consequences. Consumers call on government to act: to raise income support, provide affordable housing, reduce energy and fuel costs, and deliver services and supports. These are seen to also support consumers' ability to gain and maintain employment. At a basic level, some consumers note the inadequacy of services when they do seek support. Particularly confronting is the shortages of food supplies and supports in Emergency Relief services, with pantries running bare and food vouchers being reduced.

The majority of this cohort was seeking access to Emergency Relief services, and one third identified a need for four or more services that could help make a difference in their lives (a similar level of service need to that found in the Uniting cohort in 2021 [Wilson et al. 2021]). Overall, only 29% identified a need for only one service type. The increasing prevalence of people facing complex issues, requiring multiple service responses, has been documented in other research and linked to the ongoing consequences of COVID-19 on society as a whole (Wilson et al., 2021; Muir et al., 2021; Cortis et al., 2021). Individuals reported a growing despair with no identified pathways out of crisis, and even crisis services, such as Emergency Relief, having inadequate levels of support available.



# Opportunities for change

There are three key directions for change to which the experiences of consumers in this study point. These directions rely on addressing the systemic levers that create situations of poverty, and on strengthening the systemic response to need via expanding the services available to consumers.

## 1. Increase income support

There has been mounting evidence to increase the level of income support provided by the Australian Commonwealth Government across all income support categories, with particular focus on the rate of JobSeeker and Parenting Payments (ACOSS, 2022; Bradbury and Hill, 2021; Coates and Cowgill, 2021; The Senate, 2020). There is now a substantial body of research evidence to show the significant impact on both poverty rates and on wellbeing when income support is lifted to Coronavirus Supplement levels (for example, Davidson, 2022, and related reports in the series; Klein, 2021). Research around the effect of the Coronavirus Supplement has shown that poverty can be immediately alleviated. The solution is incontestable: of all measures, increases in income support actually reduce inequality (Davidson, 2022). Consumers in this study echo the call for increased levels of income support.

The design of income support also poses an opportunity for change. Consumers in this study called for changes in income support regulations to enable greater engagement with the labour market without income support penalty. This research shows that inadequate levels of income

support, compounded by the dramatic rise in cost of living, is now structuring people into unemployment despite their desire to work. Low levels of income support function as a structural impediment to employment when they cause levels of poverty that adversely affect health, the acquisition and maintenance of stable housing, and reduced transport access compounded by penalties that reduce income support based on any salary earned, as reported here. Additionally, the high number of people with disability and chronic illness in receipt of JobSeeker, Carer or Parenting payments, generally a lower level of payment than the rate of the Disability Support Pension (DSP), is also an opportunity for reform. Studies estimate that the proportion of people with a disability or chronic illness in receipt of Jobseeker has grown by 28% in the past 15 years, as eligibility for the DSP has narrowed (Bradbury and Hill, 2021). Consumers with disability in this study were frequently not receiving the DSP, despite identifying loss of function and related increased health and transport costs, and were struggling to care for themselves, and frequently others, on low levels of income support.

## 2. Decrease/subsidise costs

While government has a range of levers to drive monetary policy and manage inflation, governments also utilise a range of other cost supports, such as rental assistance, energy, transport, health and childcare subsidies. The inadequacy of Commonwealth Rental Assistance (CRA) has been the topic of research and the target for reform proposals. Among a range of reform options, Ong et al. (2021) explore ways to better target the CRA, including to those renters experiencing higher housing stress. More recently, ACOSS suggests immediately increasing the rate of CRA by 50% (ACOSS, 2022). Other areas of subsidy have also been the topic of research and

suggestions for reform. For example, research into the prevalence and impact of energy poverty among aged pensioners in Australia, identifies both that they are more at risk than self funded retirees and that interventions such as energy concessions or the provision of funding to support energy efficiency upgrades are important mediators of cost (Fry, Farrell and Temple, 2021). In general, the range and scope of subsidies and similar measures is broad, encompassing initiatives by all levels of government. A targeted review of the impact and design of subsidies for childcare, energy, rental, transport and health costs is a critical element of addressing the needs of people on low incomes.

While subsidies for low income people target the ‘demand’ side, that is, supporting the consumer to cover the cost of basic items, there is also a need to target the ‘supply’ side. This is the focus of much debate in regards to housing provision, including the availability of social housing. Social housing remains a key mechanism in the provision of affordable housing. Alongside initiatives to expand the provision of social housing are also opportunities to review other supply side drivers, such as incentives for private landlords and law reform to protect tenants (Ong et al., 2021), as well as mixed supply-demand side initiatives such as shared equity schemes, among others (Gurran et al., 2018).

### 3. Strengthen the service system

The high levels of demand for community services and the increasing levels of complexity of the circumstances of consumers requires renewed investment in the community services sector. Increasing emergency relief resources (especially food availability), and reducing restrictions around frequency of access, is the first component of strengthening the service system to better support people experiencing negative impacts from the

rising cost of living. Emergency Relief is already underpinned by complex charity, corporate social responsibility and some government investment. It has been creative in leveraging strategies like food recycling (food banks etc.). But there is a need to urgently intensify the focus on the mechanisms to expand the resources in emergency relief to ensure they are adequate to meet demand.

In addition, beyond immediate need for food and basic aid, is a more complex issue of unmet need for supports across a wide array of key life areas including housing/tenancy, health and mental health, employment, and services to combat social isolation. However, this significant demand is currently unable to be met by the community services sector. A longitudinal study of the for-purpose sector shows that ‘service demand continues to outpace provision capability’ with 56% of service organisations experiencing increased demand and 80% being unable to meet requests for support (Muir et al., 2021, p. 7).

Further, the community services sector has been found to suffer from ‘chronic under-investment’ with 80% of community services identifying that funding for their services does not cover the cost of delivery (Cortis and Blaxland, 2022, p.9). Cortis and Blaxland (2022) also report that the sector was finding it more difficult to source funding, and that government funding was unpredictable and short term. Clearly, in a context of both entrenched need, and with the entry of new cohorts seeking support from community services due to rising costs of living, there is a compelling logic for the strengthening of the community services sector through increased and more stable investment. In particular, this study highlights the potential for Emergency Services (and housing and tenancy services) to act as an entry point to a wide range of other services, including mainstream health and mental health services. This role requires a strategic focus in the better delivery of supports to those most in need.

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# Appendices

## Appendix 1: Survey instrument

This survey is for consumers who accessed one of Uniting's services in July/August 2022 and is experiencing impacts from the rising costs of living.

**If you received any of the above, please take some time to tell us about your experience.**

Firstly, thank you for agreeing to take part in the survey

Uniting is aware the the rising cost of living is impacting the individuals and families accessing our services.

Uniting would like to hear directly from you about the impact of these changes on you. Your input will help Uniting advocate for changes that will make a difference in your life - including a permanent increase in income support payments so that people do not live in poverty.

Your personal information will be kept confidential, and you will not be identified in any way. We value what you tell us and want to make the best use of this information. The information you provide will be shared with researchers at the Centre for Social Impact at Swinburne University of Technology to help us analyse and report results. Your information, without your name, will be kept securely for 5 years then destroyed.

We understand your time is important. The questions will take you less than 10 minutes.



Uniting staff or volunteers can ask the questions or consumers can answer the survey on their own.

**We understand that many people are struggling at the moment and we are asking you to reflect on your current situation, which may be upsetting. If you feel as though any questions in this survey are triggering for you, please reach out to Lifeline at 13 11 14 for 24 hour crisis support. If you are in a situation that is harmful or life-threatening, contact emergency services immediately on Triple Zero (000).**

**1. Which Uniting service are you seeking today?**

*Select all that apply.*

- ☐ Emergency relief
- ☐ Housing, homelessness and/or tenancy support
- ☐ Alcohol and other Drugs
- ☐ Mental health
- ☐ Disability
- ☐ Financial wellbeing and other crisis support
- ☐ Child, Youth and Family support
- ☐ Other (please specify)

**2. In what state are you accessing a Uniting service?**

- ☐ Tasmania
- ☐ Victoria

**3. What is the number one reason you are accessing this service?**

**4. In the last 12 months, have you previously received any of the following services or supports from Uniting or another organisation?**

*Select all that apply.*

- ☐ Emergency relief
- ☐ Homelessness and/or tenancy support
- ☐ Other service(s). Please specify below
- ☐ No, did not need support (go to QX)
- ☐ No, needed support, but did not access (go to QX)

*If you picked other, please specify here.*

**5. Prior to July 2022, when was the last time you accessed this service(s)?**

*Please select all that apply*

- ☐ In the last month
- ☐ 1-3 months ago
- ☐ 3-6 months ago
- ☐ 6-9 months ago
- ☐ 9-12 months ago
- ☐ more than 12 months ago

**6. If you previously accessed a service, what has changed for you since the last time you accessed this service?**

**7. What is your employment status?**

- ☐ I am employed full-time
- ☐ I am employed part-time
- ☐ I am employed as a casual worker
- ☐ I am a full time student
- ☐ I am a carer
- ☐ I am unemployed

**8. What is your MAIN source of income?**

- ☐ Wages from employment
- ☐ Government payment:
- ☐ JobSeeker payment
- ☐ Youth Allowance for JobSeeker
- ☐ Disability Support Pension
- ☐ Carer Allowance
- ☐ Carer Payment
- ☐ Age Pension
- ☐ Parenting Payment
- ☐ ABSTUDY/Austudy
- ☐ Other

*If you picked other, please specify here.*

**9. Thinking about the cost of living pressures, such as being able to afford basic things, can you tell us how this has changed for you over the last 12 months?**

- ☐ Things are about the same as they were 12 months ago
- ☐ I was already in crisis 12 months ago
- ☐ Things are a bit worse than 12 months ago
- ☐ Things are a lot worse than 12 months ago
- ☐ Things have gotten so much worse I am now in crisis.

**10. Thinking about the cost of living pressures, please select the areas that you are experiencing pressure from rising costs**

*Select all that apply*

- ☐ Fuel and Petrol prices
- ☐ Energy bills
- ☐ Food and groceries
- ☐ Housing - rental increases
- ☐ Housing – mortgage rates
- ☐ Medicine and pharmaceutical costs
- ☐ Other

*If you picked other, please specify here.*

**11. Select the areas that the rising cost of living is having an impact on:**

*Select all that apply*

- ☐ my financial situation and security
- ☐ my housing situation
- ☐ my ability to eat well
- ☐ my ability to care for children
- ☐ my ability to care for other dependants
- ☐ risk of family violence
- ☐ my use of alcohol and other drugs
- ☐ my physical health
- ☐ my mental health
- ☐ my employment situation
- ☐ my education situation
- ☐ my community and social connection
- ☐ Other (please specify)



**12. Can you tell us in which areas of your household budget (if any) you are making changes to your spending.**

*Select all that apply*

- ☐ I am buying fewer fruit and vegetables
- ☐ I am buying fewer groceries in general
- ☐ I am spending less on discretionary items like take-away meals, hobbies, going out
- ☐ I am buying less meat
- ☐ I am not paying bills on time
- ☐ I am not paying my rent on time
- ☐ I am not driving my car as much
- ☐ I have had to reduce spending on children's activities like sports, school excursions
- ☐ I am not buying medications or spending money on health
- ☐ I am cutting back on therapy/ health supports for my children
- ☐ I am skipping meals, even if I am cooking for people in my care
- ☐ I am using heating and/or air-conditioning less, or not at all
- ☐ I have limited my social interactions, such as attending friend or family celebrations
- ☐ I have reduced the hours my children attend childcare, or other forms of paid caregiving
- ☐ Other (please specify)

**13. Please tell us about the most significant impact the rising cost of living is having on you and your family?**

**14. What is the number one thing that would make the biggest positive difference to you right now?**

*This could be about the services you come to Uniting for, or something else.*

**15. What services will help make a positive difference?**

*Please select all that apply*

- ☐ Access to Emergency relief / meals services
- ☐ Support with managing money / budgeting
- ☐ Support with housing / tenancy / homelessness
- ☐ Support with finding employment / education / training
- ☐ Support with parenting / family issues
- ☐ Access to family violence services
- ☐ Access to health services
- ☐ Support with mental health
- ☐ Support with alcohol and drug issues
- ☐ Support with gambling issues
- ☐ Opportunities to connect with community / social interactions
- ☐ Other support (please provide details below)

## Some information about you.

### 16. Gender:

*Please leave blank if you would prefer not to say.*

- ☐ Woman
- ☐ Man
- ☐ Non-binary
- ☐ Self-described (please specify):

### 17. I am... years old:

*Please leave blank if you would prefer not to say.*

- ☐ 15-19 years
- ☐ 20-29 years
- ☐ 30-39 years
- ☐ 40-49 years
- ☐ 50-59 years
- ☐ 60-69 years
- ☐ 70 years and over

### 18. How many children do you have in your household?

- ☐ How many children aged 0-4 years \_\_\_\_\_
- ☐ How many children aged 5-9 years \_\_\_\_\_
- ☐ How many children aged 10-17 years \_\_\_\_\_

### 19. Select all of the below that you identify with:

*Please leave blank if you would prefer not to say or if none apply.*

- ☐ Aboriginal and/or Torres Strait Islander
- ☐ From a culturally diverse background
- ☐ LGBTIQ+
- ☐ Refugee or asylum seeker
- ☐ I have a disability or long term health condition
- ☐ I am on a temporary visa
- ☐ I am a single parent
- ☐ I have a parenting responsibility for children under 18
- ☐ I have a caregiving responsibility for a child living with a disability or chronic health condition
- ☐ I have a caregiving responsibility for other people (not a child)

## Sharing your story

Hearing directly from someone in a particular situation is a powerful way for others to understand what is going on.

If you are interested in working with us to share your story, please leave your name and contact details here and one of our team members will be in touch. This will just be a first step and you can decide not to be involved at any time.

If you do not wish to be contacted, just leave this section blank.

Name

Contact Number

Email Address

## Thank you!

We personally want to thank YOU for every second invested in our survey. Feel free to drop us a line via the website or email us at: [Advocacy@vt.uniting.org](mailto:Advocacy@vt.uniting.org). We would like to reiterate that if this survey brought up any upsetting thoughts, please reach out for support.

- Lifeline provides 24-hour crisis counselling, support groups and suicide prevention services. Call 13 11 14, text on 0477 13 11 14 (12pm to midnight AEST) or chat online.
- FriendLine supports anyone who's feeling lonely, needs to reconnect or just wants a chat. You can call them 7 days a week on 1800 424 287, or chat online with one of their trained volunteers. All conversations with FriendLine are anonymous.

If you would like to go into the draw to win one of three \$50 gift-cards, please leave your contact details below.

Your information will not be used for any other purpose than to contact you if you have won, and will be deleted on conclusion of the survey.

Name

Contact Number

Email Address



We work in solidarity with Aboriginal and Torres Strait Islander people as Australia's First Peoples and as the traditional owners and custodians of this land.

We celebrate diversity and value the lived experience of people of every faith, ethnicity, age, disability, culture, language, gender identity, sex and sexual orientation. We welcome lesbian, gay, bisexual, transgender, gender diverse and non-binary, intersex and queer (LGBTIQ+) people at our services. We pledge to provide inclusive and non-discriminatory services.

[Learn more](#)

[unitingvictas.org.au](https://unitingvictas.org.au)



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