AUSTRALIA’S COMMUNITY SECTOR AND COVID-19
Supporting Communities Through the Crisis
An Australian Community Sector Survey Special Report
September 2020
Acknowledgements

We would like to extend our deepest appreciation to the 744 community sector workers and leaders who generously shared their experiences and perspectives by completing the survey. We would also like to thank ACOSS, the COSS network, and Community Sector Banking for their excellent support, including in distributing the survey to members and networks.

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Executive Summary

This report provides information about the state of Australia’s community service sector during the COVID-19 pandemic. It is based on survey data collected in July 2020 from 744 community sector workers around Australia. Respondents included 201 frontline practitioners, 264 leaders of organisations (CEOs and senior managers) and 279 staff in other roles. The survey explored the ways community sector workers are experiencing the crisis; the changing circumstances and patterns of demand that services are confronting; and the ways the sector is responding to the high levels of poverty, social disadvantage and inequality in the community in the context of the pandemic.

Findings reflect the deep commitment of Australia’s community sector to its communities, and to rising to meet the challenges of COVID-19. However, organisations are operating in contexts of converging crises and constraints. The pandemic has placed significant unanticipated costs on organisations, at a time of funding loss and urgent need. Prior to the pandemic in 2019, workers reported rapidly escalating levels of need in the community associated with housing and cost of living pressures, and inadequate rates of income support (Cortis and Blaxland, 2020). These pressures reflect the very high levels of poverty that governments allowed to accumulate over decades (Davidson et al, 2020). For many communities, poverty and disadvantage were exacerbated in early 2020, as bushfires swept through large parts of the country, followed shortly by the coronavirus pandemic.

Survey findings provide insight into the challenges the sector has faced on multiple fronts. The need to rapidly adjust service delivery models and work practices has been exacerbated by lack of dedicated support, following years of systemic under-investment, resource insecurity and undervaluation. However, the sector has sustained its commitment through the complex and unpredictable circumstances of this extraordinary crisis. As one coordinator from a housing and homelessness service said:

> It is difficult work, but we want to be there. We just need adequate assistance.

Government responses have alleviated some pressure

While much more support is needed, most community sector workers and leaders welcomed the Australian Government’s provision of assistance to households in the context of the COVID-19 crisis. Increases to some income support payments via the Coronavirus Supplement, along with the JobKeeper wage subsidy, were perceived to assist some, but not all, clients and communities, and to have alleviated pressures on households and on community service systems. In particular:
• **83%** of community sector workers and leaders *reported that the JobKeeper wage subsidy* has had a **positive impact** on the clients and communities that they work with.

• **81%** of respondents *reported that the Coronavirus Supplement* has been **positive** for their clients and communities.

• **79%** of respondents reported the *waiving of fees* for families using Early Childhood Education and Care (ECEC) was **positive**.

Others however reported that these major initiatives did not impact on their clients and communities, and a very few saw them as negative, mainly because exclusions had contributed to additional inequalities in the community. Of those who did not see the Coronavirus Supplement to have positive effects on their clients, over half were in ageing, disability and carer services, which support groups typically excluded from receipt of the supplement.

Indeed, the community sector is enormously impacted by the exclusions of key populations from government support systems. As well as meeting the needs of income support recipients who did not receive supplements through the crisis, sector supports have been stretched significantly by rising levels of need among people on temporary visas who are ineligible for income support, and casual workers ineligible for JobKeeper.

**New support needs and increasing demand**

Despite government responses to the crisis, community sector workers have observed a rapid influx of new groups requiring support, and increased need among existing clients and communities.

• **77%** of all respondents reported their *service had experienced changes* in clientele, issues or needs **due to the COVID-19** pandemic. **Changes in clients and needs were more commonly reported** by workers in **migrant and multicultural services (94%)**, and among workers providing **financial support and counselling (84%)**.

• **Three in five workers (61%)** reported that the **overall level of demand** for the main service they were involved with **had increased since March 2020**. Increased demand was reported by more than three quarters of respondents in migrant and multicultural services; legal, advocacy and peak body services; and Aboriginal and Torres Strait Islander services.

• **Over half of respondents (54%)** had seen increases in the numbers of clients their service was supporting. In **migrant and multicultural services, 86%** of respondents *reported increased numbers* of clients.
• **58% reported decreases** in numbers of volunteers actively engaged in their service.

Many respondents observed high levels of stress, anxiety and confusion in their communities alongside new and intensified needs arising from the crisis, relating to job loss, mental health, housing and family support. Community sector workers described how populations not previously engaged with services have required assistance to navigate income support and service systems for the first time, and to obtain practical support, including information, advice, and financial relief.

**The sector has rapidly adjusted service delivery**

Australia’s community sector has rapidly adjusted its service delivery methods to sustain operations during the pandemic, and to continue to address inequality and disadvantage. Responses underline the agility and responsiveness of services and the workforce:

• **96% of respondents** reported that their organisations shifted at least part of their service from face-to-face service delivery to other modes.

• **24% of respondents** reported that their entire service shifted from face-to-face delivery to other modes.

• **89% of workers** experienced some change to their working arrangements. Most frequently this was a change in their location of work: 77% of respondents reported working remotely due to the crisis.

Social distancing requirements meant that organisations were implementing massive, unanticipated and costly organisational change at the same time that workers were trying to respond to changes in community need for support as a result of COVID-19. This worker explained how this was playing out in colleagues’ lives:

I see colleagues who are exhausted and burned out, they have had to juggle work, home schooling, closed daycares, ageing parents, adapt to major changes in their work, home and personal lives and all the while having the vulnerable in the community lean heavily on them for support, information and assistance. (Practitioner, Child, youth and family service)

**Impact on income and funding**

Despite the sector’s adaptability, organisations are operating under intense pressure. Many are finding it difficult to sustain their operations.
• Over a third of leaders (36%) said their organisation’s financial position had worsened through the crisis. A similar number (38%) said it had remained steady through the crisis, while a quarter of leaders (26%) said it had improved. Leaders of larger organisations were most likely to report a worsening financial position.

• Most leaders reported that government funding for their organisation had either not changed or had increased as a result of the COVID-19 crisis. However, organisations have experienced widespread loss of commercial and philanthropic income:
  • 57% have lost investment income.
  • 46% reported having lost public or corporate donations.
  • A third (33%) reported loss of grants or donations from philanthropic foundations.
  • A quarter (26%) have lost income from individualised funding (NDIS and home care packages).
  • Half (50%) have lost income from other commercial sources (e.g. retail).
  • Two in five (41%) said the capacity of their service to meet contracted deliverables had decreased since March 2020.
  • 35% of organisations said their organisation had drawn on financial reserves in response to the crisis.

Organisational responses to financial pressure

In response to the pressures that organisations are anticipating in coming months, many have made difficult decisions relating to their workforce.

• 31% reported their organisation had introduced a freeze on staff recruitment.

• 21% of leaders reported that their organisation had reduced fulltime equivalent (FTE) staffing levels.
• More than half of leaders (54%) reported their organisation applied for JobKeeper, and of those who received it, 40% said they expect to need to reduce staffing levels when the support ceased. If leaders’ expectations are realised, around 21% of organisations will experience job cuts upon cessation of JobKeeper.

Financial outlook

Leaders’ outlooks for the next twelve months are mixed, and many specified that the position of their organisation was contingent on whether and how COVID-19 was managed in coming months and the extent to which governments stepped up to support the sector. At the time of the survey, 28% of leaders expected their organisation’s finances to decline further in the next year. However, higher proportions of organisations receiving JobKeeper expected their finances to decline (36%), compared with those not receiving the payments (19%).

In their comments, leaders described considerable uncertainty associated with funding insecurity:

Our increased funding is all very short term and ending in or before June 2021. Our general financial outlook continues to be bleak. (CEO, Housing or homelessness service)

The additional complexity of need in the community during COVID-19, coupled with a need to develop new models of service provision, and to cover increased costs associated with staff and volunteers who were unable to work when sick or in quarantine, all came on top of existing funding challenges. Leaders were concerned about their capacity to meet community need both now and through future stages of the pandemic.

Given the grave concerns about community outcomes post-COVID supplements and rent moratoriums it would be good to know that Government is watching the situation and is willing to increase support to the agencies offering emergency relief and crisis support should the need increase dramatically (Team leader, Financial support and counselling service)

Increased financial pressure anticipated from cessation from Equal Remuneration Order (ERO) funding

The uncertain financial outlook was exacerbated for many by the potential loss of Equal Remuneration Order (ERO) funding. Of the 111 leaders whose organisations currently receive an ERO supplementation, 69% said they would face increased financial pressure when the Commonwealth’s ERO supplementation funding program ends, and
over half (55%) said staff number or hours would be reduced, and there
would be reduced service provision. For example,

Without the ERO, our calculations are that EFT and KPI will be
reduced by up to 40%. There is no option, the government must
bring this supplement into base contract funding. Can you imagine
the impact of cuts to 40% of homelessness, mental health, AOD,
families, counselling, carer services - it simply is not an option - not
when these services are going to be needed more than ever. (CEO,
Ageing, disability and carer service)

Relationships with governments

The survey also highlights the value of partnership approaches in the
 crisis response. For some respondents, the pandemic had brought about
 an opportunity to work in closer partnerships with government, and
 many (but not all) felt the contributions of their organisations have been
 valued through this period:

- **44%** reported that government has sought their advice on responses to the
  COVID-19 crisis.
- **Almost 3 in 5** reported that government provided support by adjusting
  contracted deliverables.
- **53%** reported that government increased funding flexibility, such as
  allowing rollover or repurposing of funds.

However, experiences across levels of government and agencies differed.
There were concerns that smaller organisations had not been well
engaged, and uncertainty about whether improved ways of working
would be sustained.
What needs to change during COVID-19 and beyond

When asked what support is needed to help the sector respond to COVID-19, responses were wide ranging, and driven by concerns about the communities they serve as well as the capacity of the community sector and its workers to continue to work in the context of COVID-19.

Maintain higher levels of income support and JobKeeper

Respondent underlined the need to maintain higher levels of income support and JobKeeper payments for community members. These were seen to be providing essential support to individuals and families, alleviating poverty and reducing pressures on communities and the community sector.

Address community needs, including needs of excluded groups

Community sector workers commented on the need to recognise increased complexity of need in the community and to urgently address the exclusion of large groups of people from Australia's social safety net, including people on temporary visas such as people seeking asylum, international students, and casual workers who do not qualify for JobKeeper under current arrangements.

Prioritise housing affordability

Maintaining housing affordability, via mortgage and rent relief and tenancy protections, were also highlighted as important for keeping people safely housed through the crisis and beyond, along with increased investment in social housing.

Waive or reduce mutual obligation requirements

Others pointed out that circumstances of the pandemic, including high unemployment and the very low number of jobs available, exacerbated the need to waive or reduce mutual obligation requirements for jobseekers.

Support community organisations to adapt

Comments also focused on issues relating to community organisations’ operations, including providing support for organisations to develop and embed new models of service provision; ensuring flexibility in
contractual requirements; and improving working conditions and worker wellbeing. Funding security, and continued support to cover the Equal Remuneration Order are also needed to ensure sector capacity.

Recognise sector contributions

Underpinning these issues is a need for recognition of the community sector’s role, with many arguing for meaningful acknowledgement from governments of the community sector’s knowledge, experience and contributions in responding to Australia’s social and economic needs through the crisis.
1 About the Research

This report provides insight into the status of Australia’s community sector during July 2020, a period in which the sector grappled with the significant health, social and economic consequences of the COVID-19 pandemic, and rapid changes in policy and service delivery. The research was undertaken to help understand:

- the demands Australia’s community sector is confronted with in the context of the multifaceted crisis;
- the ways the sector is responding and adapting to emerging circumstances in the operating environment; and
- community sector workers’ and leaders’ needs and priorities for coming months.

The COVID-19 pandemic has generated an ongoing health, social and economic crisis, the consequences of which are yet to become fully apparent. However, circumstances have quickly and clearly highlighted longstanding weaknesses in Australia’s social safety net, and an operating environment that has failed to fully realise the community sector’s contributions and value. Prior to the pandemic, poverty and inequality were at very high levels comparative to OECD countries. Newstart (later renamed JobSeeker Payment), Youth Allowance and Rent Assistance had not increased in real terms in 25 years, and 1 in 8 adults and 1 in 6 children were living below the poverty line (Davidson et al, 2020). In the Australian Community Sector Survey conducted late in 2019, community sector workers reported feeling they were working against the tide, without the support needed to address escalating needs in the community associated with affordability, housing and cost of living issues, and inadequate rates of income support (Cortis and Blaxland, 2020). In many parts of the country, drought has persisted for many years, leaving rural communities struggling, and for many communities, hardship was exacerbated by further disaster as bushfires swept through large swathes of the country in the summer of 2019-20.

The report underlines the important contribution the community sector is making through the crisis period, but also the challenges faced by a sector strained by years of challenges including resource insecurity and undervaluation. It shows how government responses to COVID-19, including the increase to JobSeeker Payment, Youth Allowance and related payments through the $550 per fortnight Coronavirus Supplement and the JobKeeper program, appear to have provided some temporary relief to households, and to community services. The report indicates some initiatives introduced in the context of the pandemic are seen by community sector workers and leaders as positive developments that are making a difference to clients and communities, and that should be more fully embedded and sustained. However, the findings underline the need for more focused consideration and support for Australia’s
community sector, as it navigates challenges of rapidly shifting demand, transformed service delivery models, loss of some revenue streams, and changes to work practices and modes of connecting with clients and communities. The report provides an opportunity to take stock of strengths and challenges as community organisations contend with these challenges, to help build capacity for effective adaptation and response.

1.1 Method

The research was developed as an initiative of the Australian Community Sector Survey (ACSS), a partnership between ACOSS and the COSS Network supported by Community Sector Banking, with research undertaken by the Social Policy Research Centre. Survey questions were developed to capture staff and managers’ perspectives on a range of issues relating to how clients, communities and community sector workers were faring in the context of COVID-19, and sector challenges and priorities for the coming months. Questions included perceptions about changing patterns of need in communities; the impact of Australian government initiatives including the Coronavirus Supplement and provision of JobKeeper wage subsidies; and how community sector work had changed in the context of the pandemic. Additional questions were asked of organisational leaders (CEOs and senior managers) about the financial impacts of the crisis and organisation-level responses. Many questions were posed as closed survey questions, while others were asked as open questions requiring text-based comment, enabling respondents to share their experience and ensuring the survey captured issues that could not be anticipated in questionnaire design.

Material in the report was collected over a three week period during July 2020. The distribution methodology was based on that used in the Australian Community Sector Survey 2019 (Cortis and Blaxland, 2020). This involved distributing the questionnaire via ACOSS and the COSS network to member organisations and networks. Further information about the method is in Appendix A. The research methodology was approved by UNSW Australia Human Research Ethics Committee (HC190646).

1.2 Respondents

In total, 744 community sector workers provided completed responses, including 264 organisational leaders (CEOs or senior managers) who comprised 36% of the sample. Almost a quarter of respondents were from NSW (23%); 61% were based in a capital city; and 78% were women. Most respondents (56%) had worked in the community sector for 10 years or more. Around one fifth (21%) worked in very small organisations (with less than 10 staff) while 38% were in large organisations (with 100 or more staff). A fifth of respondents (21%) said the main service system they were involved with was child, youth and family services, while 17% were involved with health-related services and 12% were involved in delivering ageing, disability and care services. Further information about survey respondents is in Appendix B.
To understand community sector experiences of COVID-19 and its mixed impacts, it is important to recognise the highly complex context in which community organisations have been operating in during 2020.

For several months prior to the outbreak of COVID-19, the community sector in the eastern states and South Australia in particular had grappled with the impacts of the 2019-20 bushfires (see Section 2.1). Furthermore, at the time the survey data was collected in July 2020, the community sector had felt the effects of the social and economic policies governments had introduced in response to the crisis, including significant interventions by the Australian Government such as payments to many households to alleviate financial pressures of job loss.

As shown in Section 2.2, a number of Australian government responses were seen positively by community sector workers and leaders, including the Coronavirus Supplement, which represented a major, albeit temporary, increase in the rate paid to people receiving Jobseeker Payment, Youth Allowance and other related payments, and was observed to be alleviating very high levels of financial stress among people on the lowest incomes in Australia.

At the same time, however, the exclusion of significant population groups from the expansion of supports was observed to be exacerbating poverty, increasing the pressure on the sector as new groups of clients required urgent supports (Section 2.3). In addition, community services were undertaking massive processes of organisational change as they transformed their mode of service delivery to reduce possibilities for virus transmission (Section 2.4).

## 2.1 The 2019-20 bushfires

In the months prior to the outbreak, many community services were working in the aftermath of disaster, namely the 2019-20 bushfires. Among survey respondents, two in five (39%) said their organisation was working with communities affected by the fires. Not surprisingly this had a strong geographic component, as shown in Figure 2.1, such that in NSW and the ACT, 59% and 57% of respondents said their organisation was working with fire affected communities.

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The impacts of the fires through the period of COVID-19 are reflected in several comments left by participants in the survey. For example:

Compounded trauma through bushfire, now COVID, means the whole community is suffering and mental health is everyone’s business. (CEO, health-focused service)

Trauma services were focused on bushfires previously, now it is both the bushfires and COVID (Administration worker, child, youth and family sector)

COVID has seriously impacted our ability to deliver the face-to-face recovery activities needed by bushfire-affected communities and households; it’s been like trying to drive with the hand-brake on full! (CEO, Community-based service)

The support networks that were strong after the fires are no longer there. Isolation and fear during COVID-19 has left people alone to deal with trauma (Co-ordinator, child, youth and family sector)

Another explained the extensive unfunded work with affected communities, who trusted community organisations to provide leadership and support:
Like many other communities across Australia, since early 2019 our community has been impacted by drought then bushfires and now COVID-19. Our Centre has been constantly involved in community disaster recovery efforts since November 2019 with no end in sight... Yet we are not funded for this work nor is it really recognised...Some of us have been on the ground in our communities for a very long time and are trusted by our communities to provide leadership and support during times of crisis and disaster more than any other service. (CEO, Community-based service)

2.2 Expanded protections for some groups

As well as being shaped by the fires, respondents’ experiences and perceptions in the survey are shaped by government responses to the COVID-19 crisis, including significant financial support that some, but not all, clients and communities were able to access. Indeed, after decades of advocacy highlighting the neglect of Australian governments to ensure income support payments covered basic needs, the pandemic provided impetus for the Australian government to increase rates of JobSeeker Payment, Youth Allowance and other related payments in April 2020, through a temporary Coronavirus Supplement, due to reduce in September 2020. In addition, mutual obligation requirements for people on relevant income support payments were suspended temporarily, and the JobKeeper wage subsidy sought to address the social and economic impacts of the crisis, along with early access to superannuation for people experiencing financial hardship, and the waiving of fees for families using early childhood education and care. Additional initiatives were introduced by state and territory governments.

Figure 2.2 shows community sector workers’ perspectives on the impact these responses were having on the clients and communities their services were working with:

- 81% of respondents perceived the Coronavirus Supplement for those receiving Jobseeker and other relevant income support payments was having a positive effect on the clients and communities they served.
- Almost three quarters (72%) saw the suspension of mutual obligation requirements as positive.
- 83% saw the JobKeeper wage subsidy to have a positive impact on clients and communities.
- 79% of respondents reported the waiving of fees for families using ECEC was positive, although 19% said it had no impact (presumably as it was not used by populations the service worked with).
• Perspectives on early access to superannuation were more mixed: less than half (47%) saw this to be positively impacting the clients and communities they served.

Breakdowns by respondents’ main service type are in Appendix C. Supplementary Data (see Figure C. 1 to Figure C. 5). Importantly, of those who did not see the Coronavirus Supplement to have positive effects on their clients, over half were in ageing, disability and carer services, which support groups typically excluded from receipt of the supplement. Relatively low proportions of workers in migrant and multicultural services also saw it as positive, reflecting exclusions for the client groups they are focused on.

Figure 2.2 Perspectives on the impact of government responses on clients and communities served

Survey respondents attested to the positive impact the Coronavirus Supplement had on community sector clients and communities. A number reported reduced financial stress for their clients. For example:

Extra payments for COVID 19 meant people could pay for accommodation and eat! (Team leader, Housing and homelessness service)

The doubled JobSeeker payment has meant that, for the first time in years, very low-income single mothers have been able to buy new
winter clothes, replace broken whitegoods, repair cars etc. (Project officer, Child, youth and family service)

[Income support] supplements and waiving of fees and requirements have allowed those who have recently lost work to focus on maintaining some stability in their family home with the ability to afford to pay for basic living needs. (Practitioner, Community development organisation)

Reduced poverty and financial stress for people on Newstart (now Jobseekers), who number around 20% in our community. (CEO, Community development organisation)

The two lump sum payments [for income support recipients] have had a positive effect (Project officer, Legal, advocacy or peak body)

As mentioned above, perspectives on early access to superannuation were more mixed. Some respondents commented on how access to superannuation was materially beneficial to clients and communities, while others were concerned about long term impacts. These divergent perspectives are reflected in the following comments:

With the superannuation money, many families have purchased vehicles which has enabled them to drive out bush to homelands during corona and to be safe from large gatherings of people and to be away from lots of drunk people. It has provided an additional opportunity for independence. (Co-ordinator, child, family and youth service)

While the access to superannuation scheme may have immediate benefits to some, the young people involved in our network are deeply concerned about the long-term impacts this will have on their generation’s financial stability. (Project officer, legal, advocacy and peak body)

The following section shows that while key government initiatives were considered to be positive by many survey participants, changes made were not considered sufficient to fully stem the increased demand and increased complexity faced by the community sector in the context of the pandemic.

However, while government initiatives were positively received, they were not sufficient to fully stem the increase and greater complexity in the demands on the community sector in the context of the pandemic.
2.3 Exclusions from Australia’s social safety net

As well as being impacted by the fires and government initiatives, community sector workers and leaders highlighted how Australia’s community sector has needed to provide supports to key population groups who were excluded from Government supports like JobSeeker Payment, Medicare, the Coronavirus Supplement and JobKeeper. Many of those surveyed faced increased demand for services from groups excluded from income support payments, including JobSeeker. Those groups impacted included people seeking asylum and refugees:

Asylum Seekers are unable to access the Australian social safety net or JobKeeper. As a group they are disproportionately impacted by COVID-19 and have been experiencing homelessness and mass unemployment. (CEO, Migrant and multicultural service)

People seeking asylum are left more vulnerable than ever before. Their employment prospects are worse and many of them who had part time and casual work now come to rely completely on charitable support for their basic needs (housing, food, medical). For those with young children, it is extremely concerning. (Team leader, Migrant and multicultural services)

Similarly:

Changes in clientele - more visa holders and New Zealand citizens - who have been put out of work and cannot access Jobseeker or JobKeeper (CEO, Community based or community development organisation)

Greater need identified for migrant, temporary visa and CALD cohorts. (Project officer, Legal, advocacy or peak body)

Most people on temporary visas are ineligible for these initiatives. The only positive for this group would be to access their superannuation and many people do not have adequate savings in their super. (Senior manager, Migrant and multicultural service)

While respondents mostly pointed to the exclusion of overseas born people from income support payments and the JobKeeper wage subsidy, some also noted the exclusion of others, primarily people with disability and carers, from income support initiatives, which was working to increase hardship and exacerbate inequalities. Respondents stated, for example:

The exclusion of the Disability Support Payment and Carers payment from receiving the Coronavirus Supplement has severely disadvantaged our members. (Project officer, Legal, advocacy or peak organisation).

The supplement and JobKeeper payments had a negative impact as they were not available to people on carers payment or disability support payment and thus created an inequity. (CEO, Ageing, disability and carer service)
Unpaid family carers have carried a significant role during COVID-19 in keeping vulnerable people safe and through this keeping the community safe and flattening the curve. They have done so at significant personal cost and with little to no recognition from the government or community. They did not receive on-going increased financial payments yet experienced increased costs and the need to resign from employment to keep households safe. (CEO, Ageing, disability and carer service)

The expanded safety net was also seen to perform poorly for young people, particularly due to high rates of casual employment:

The temporary supplements and payments have lifted some young people out of poverty, positively impacting their physical and mental health, and allowing them to feel safer and more stable. However, many young people missed out on JobKeeper because they were employed casually for less than a year. There were also cases of employers refusing to apply / pay JobKeeper entitlements. There were young people who were not entitled to income support, because they are considered dependent on parents, or they are international students or temporary visa holders. Finally, young people who had taken a gap year to work and save money to move away for tertiary education have now lost their jobs and may also lose their ability to access youth allowance when they study as they have not earned enough in their gap year to be considered independent. (CEO, child, youth and family service)

Ineligibility of under 12 months service for JobKeeper support of casual jobs was an alarming deficiency - it had a conspicuous and severe impact on younger casual workers. (Policy officer, Legal, advocacy or peak body)

Together, the issues of the fires and the introduction of financial supports that excluded many groups provide a helpful backdrop for understanding the community sector’s diverse experiences of changing levels and patterns of need and demand.

2.4 Remote service delivery and working from home

At the time the survey was distributed, most areas of Australia were experiencing the easing of restrictions introduced from March to prevent the spread of the virus, although residents of Melbourne were experiencing their second ‘lockdown’ period due to further outbreaks of the virus that proved difficult to contain. The lockdowns were directed by state governments, and required that everyone who could work at home, do so. In some jurisdictions restrictions involved remote learning for school children, which meant that families needed to stay home to care for their children. In response to these requirements, community
sector organisations substantially restructured their work and staffing arrangements. Nearly all respondents said that their organisation had moved away from face-to-face delivery for at least some part of their services, and four in five reported that some part of their service could not be delivered at all (see Section 4.1). As a result, organisations re-arranged their staffing, such that a third or organisational leaders said they redeployed staff, a third said they had less work for casual workers, and a third said they had instituted a freeze on staff recruitment (see section 5.1). Three-quarters of respondents to the survey said they, personally, had worked from home as a result of COVID-19 (see Section 6.1).

Working from home requirements meant that organisations were implementing massive organisational change at the same time that workers were trying to meet new community need for support as a result of COVID-19. This context highlights enormous complexity in all aspects of community sector work during this time: in community need; in service delivery adaptations; and in the day to day work arrangements for staff. Comments from respondents detailed later in the report (including in section 4.2), show the stress that this combination of challenges caused for many.
3 Demand for community services in the context of COVID-19

3.1 Reported change in demand

Survey respondents were asked to think about the main service they were involved with as an employee, and to indicate whether they had observed increases or decreases in aspects of demand since Australian governments commenced their public health and economic responses to COVID-19, in March 2020. Figure 3.1 shows that in the four months since March:

- Three in five survey respondents (61%) observed that the overall level of demand for their service had either increased (40%) or increased significantly (21%), whilst 18% had seen a decrease (explored in Section 3.1).

- Three quarters of respondents (76%) reported that complexity of need among service users involved in their main service had either increased (54%) or increased significantly (22%) since March, and only 3% said it had decreased.

- Over half (54%) reported some increase in the numbers of clients their service was supporting, and 47% said there were increases in the numbers of clients their service was unable to support.

- Almost three in five (58%) observed decreases in the numbers of volunteers actively engaged in their service; and

- Two in five (41%) said their service’s capacity to meet contracted deliverables had decreased since March 2020.

3.2 Reported change in clientele, issues and needs

Figure 3.2 shows that 77% of all respondents reported seeing changes in clientele, issues or needs due to the COVID-19 pandemic. However, there were higher proportions of respondents in some sub-sectors who reported changes in clients and needs. Changes were especially apparent among respondents focused on migrant and multicultural services (94%), and those providing financial support and counselling (84%). This likely reflects the exclusion of temporary migrants from government supports and the expanded number of clients needing supports in migrant and multicultural communities, along with increased need for financial support in the context of job loss and uncertainty.
### Figure 3.1 Changes observed since March 2020 (%)

- **Overall level of demand (n=725)**
  - Increased significantly: 21%
  - Increased: 40%
  - Stayed the same: 21%
  - Decreased: 12%
  - Decreased significantly: 6%

- **Complexity of need among service users (n=701)**
  - Increased significantly: 22%
  - Increased: 54%
  - Stayed the same: 21%

- **Numbers of clients our service is supporting (n=680)**
  - Increased significantly: 14%
  - Increased: 40%
  - Stayed the same: 27%
  - Decreased: 14%
  - Decreased significantly: 4%

- **Numbers of clients our service cannot support (n=584)**
  - Increased significantly: 9%
  - Increased: 38%
  - Stayed the same: 44%
  - Decreased: 7%

- **Number of active volunteers (n=492)**
  - Increased significantly: 10%
  - Increased: 32%
  - Stayed the same: 32%
  - Decreased: 26%

- **Ability to meet contracted deliverables (n=675)**
  - Increased significantly: 10%
  - Increased: 46%
  - Stayed the same: 32%
  - Decreased: 9%

### Figure 3.2 Proportion of respondents who noticed changes in clientele, issues or needs due to the COVID-19 pandemic, by service type

- **Migrant & multicultural services (n=17)**
  - Increased significantly: 94%

- **Other/multiple service type (n=26)**
  - Increased significantly: 96%

- **Financial support & counselling (n=45)**
  - Increased significantly: 84%

- **Employment, education & training (n=32)**
  - Increased significantly: 81%

- **Legal, advocacy & peaks (n=81)**
  - Increased significantly: 80%

- **Community development (n=70)**
  - Increased significantly: 79%

- **Child, youth & family services (n=152)**
  - Increased significantly: 76%

- **Health-related services (n=129)**
  - Increased significantly: 76%

- **Aboriginal & Torres Strait Islander Services (n=21)**
  - Increased significantly: 71%

- **Housing & homelessness (n=70)**
  - Increased significantly: 70%

- **Aging, disability & carers (n=89)**
  - Increased significantly: 70%

- **All (n=732)**
  - Increased significantly: 77%
### 3.3 Diverse experiences of demand

When asked about the capacity of their main service to meet demand since March 2020, 19% reported ‘always’ being able to meet demand, 50% reported ‘usually being able to meet demand, 22% said ‘sometimes, while 8% said ‘rarely’ and 2% said ‘never’ (Data provided by main service type is in Appendix C, see Figure C.6). However, these proportions obscure the very high levels of complexity shaping changing patterns of demand for community services in the context of the pandemic, which are more accurately depicted using respondents’ comments. Workers’ comments show the complex mix of dynamics experienced in the sector, and high levels of concern about surges in demand expected to occur when income support supplements and JobKeeper ends.

To capture respondents’ experiences, the survey asked respondents to comment on levels or patterns of demand affecting their service, and any changes in clientele, issues or needs that they had noticed. The majority of survey participants (over three quarters) provided a response to one or both questions. Descriptions of changes in demand were complex and multifaceted. Demand was described as having increased enormously for some services, with the number of clients increasing, along with the complexity of their needs. Others worked in services which experienced a decline in demand, in some cases because of the impacts of shutdowns. Importantly, many respondents noted that their clients did not require so much assistance as a result of expanded government supports, such as the Coronavirus Supplement which had increased resources provided to many low income households.

#### 3.3.1 Expansion of the client base

Large numbers of respondents reported that levels of demand for services had increased, and that in addition to their existing clients presenting with greater need, services had experienced an influx of new people requiring assistance. New clients included those who had lost employment or had reduced income and those who were not eligible for any or some forms of government assistance, including temporary residents. Typical comments were:

- Demand for food hampers has doubled. (CEO, Housing and homelessness service)
- Different clients accessing international, eg university students needing food. (Team leader, Community development organisation)

Respondents were finding that some increased demand was coming from people who had not required assistance in the past, but who had lost employment due to the coronavirus crisis:

- There are more clients seeking financial assistance who previously
had never sought welfare assistance (CEO, Community development organisation)

I’ve seen a higher need for food and income support, in particular from those who have not accessed these supports previously. There is a higher need for support to navigate government systems. (Project officer, Community development organisation)

There are changes to demographics of new referrals - an increase from ‘middle class’ suburbs (CEO, child, youth and family service)

We have experienced a wider client base seeking information regarding social security entitlements (Project officer, Legal, advocacy or peak body)

### 3.3.2 Increased complexity and need resulting from COVID-19

Many observed their communities to be experiencing much greater stress as a result of the pandemic. Heightened anxiety, fear and confusion were seen to contribute to additional demands on services. For example:

- There is increased emotional distress of parents and children served by our service. Anxiety and depression related to lock down and pervasive fear of infection. (Practitioner, Child, youth and family service)

- People have been scared... They have felt that they have been ‘forgotten’ and ‘ignored’ by government in the response to COVID, and ‘left to die’. (CEO, Housing and homelessness service)

- More anxious and isolated clients; we can’t see them face-to-face so there are limitations on what we can do for them; clients getting worse because they’re not seeing us and avoiding going to their doctors. (Practitioner, Health related service)

- Children staying home made the services heavily strained, more people needed to address needs that would be supported at school. (Team leader, Child, youth and family service)

- Many more young people with anxiety and disengaged from school. (Coordinator, Child, youth and family service)

- Increase in drug use, increase in family breakdown, decrease in homelessness (visible on the street), decrease in transport, increase in child protection, increase in youth self-harm, increase in unemployment, decrease in emergency relief. (CEO, Child, youth and family service)

Respondents described greater need for support services as a result as community members struggle to adapt to the added pressures of...
life during a pandemic of increased mental ill-health; increased use of alcohol and other drugs; higher levels of gambling and more frequent incidence of family and domestic violence. As a result, many participants felt that the complexity of need among clients had increased. Typical comments included:

We have seen increased drinking and drug use, poorer mental health, increased isolation, [people finding it] harder to access medical or other supports, increase in gambling/misuse of family funds, disengagement from school. (Practitioner, Child, youth and family service)

I have noticed a lot of the incidents of family and domestic violence are a result of COVID-19, ie financial strain, loss of work, family being home together all the time. (Practitioner, Child, youth and family service)

There is an increased complexity in issues. (Team leader, Child, youth and family service)

Clients have more complex issues around depression, anxiety and isolation. (Team leader, Financial support and counselling)

Another explained:

Demand remained the same for existing clients however we experienced an increase in new enrolments. Case management became more complex and the clinical team had to increase their workload to ensure the same standard of care was provided via telehealth/tele practice. (Senior manager, Ageing, disability and carer service)

3.3.3 Challenges meeting demand in the context of COVID-19

In making comments in relation to demand for their services, many respondents highlighted the challenges they faced in meeting demand, and the factors driving this. Some mentioned they were affected by disruptions to other services in their networks or schools, for example:

Access to vulnerable clients who we normally access through our in-schools program has become difficult due to school program restrictions and/or students not returning to school. (Practitioner, employment, education and training)

We have gone online with some of our services. Because we work with a number of other community service organisations and other agencies, we have not been able to fulfil some of our program obligations because other services also closed or limited. (CEO, health related service)

Lack of volunteers also arose as an issue
Meeting demand has also been challenging due to lack of volunteers (most of our volunteers are in the at risk category so could no longer come in to assist delivery of essential services such as in our medical program, food program, housing program). (CEO, migrant and multicultural service)

Some noted the need for support to meet need, for example:

We need more resources if we are going to have a chance of meeting community need. (CEO, Legal, advocacy or peak body)

Another respondent described how the confluence of factors impacting on the service and making it difficult to meet demand. They observed:

A lot of newly unemployed people who have never needed food relief/charity support before. Also, the number of international students, temporary visa holders and seniors accessing food relief has increased dramatically. At the same time, 20% of the frontline food relief agencies have closed and the approximately 100 corporate volunteers we rely on everyday are no longer available. Furthermore, due to panic buying, securing food donations was increasingly difficult and we struggled to maintain our supply chain. (Project officer, Financial and emergency relief service)

For others, increased challenges were associated with closures of state and territory borders, as this made it especially difficult to deliver services and supports for some organisations:

COVID-19 restrictions and closing of borders to remote communities has made it hard to deliver timely services...now as we are coming out and borders are opening there is confusion and apprehension. (CEO, Legal, advocacy or peak body)

[Child protection authorities] removed child to another state where the border is closed to our client. (Practitioner, Legal, advocacy or peak body)

Working with Aboriginal families that were displaced due to border restrictions has seen an increase in family violence due to overcrowding in existing family households. (Team leader, Housing and homelessness service)

In addition to those providing services to clients and communities, additional pressures and increased complexity also affected peak bodies and advocacy organisations, who needed to interpret rapidly changing circumstances and provide information, advice and guidance to both the sector and to government. As some explained:

We’re a peak body - we’ve had a huge increase in the sector’s reliance on our services and advocacy. (Project officer, peak body)
Due to constantly changing situation, services relied on us for up-to-date information from Govt. And also providing feedback/issues to government. (Team leader, Legal, advocacy or peak body)

We provide policy advice to government, and their needs have changed significantly. Faster turnaround, more practical solutions, more blue sky thinking is being requested. (Senior manager, Legal, advocacy or peak body)

### 3.3.4 Temporary falls in demand

Increases in demand and the complexity of need, and the difficulties of meeting demand in the context of pandemic, were strong themes. However, some participants also described periods during which their service had been unable to operate due to the restrictions introduced to halt the spread of the virus. Respondents pointed out that this meant services were not available when they were needed. For example:

As the Neighbourhood House was required to close over the period, there has been little ability to meet the demand of any clientele. (Management committee member, Community based or community development service)

At a time when demand was greatest, government regulations closed community centres. We needed to be open, and while we would have followed all physical distancing rules etc. The blanket closure hurt us, our reputation within the community, and our ability to deliver newly needed services. (Administrator, Community based or community development service).

Other respondents said that, although their service was able to continue to operate, demand had fallen during lockdown periods. Respondents explained:

Demand slowed to 0 new referrals to my service either side of Easter (April/May). We receive referrals via GPs and there was a 50% drop in GP presentations at the same time. June brought with it more people back doing face-to-face appointments (with us and their GPs), and referrals have increased dramatically. (Practitioner, Health related service)
For many, a ‘quiet’ period was relatively short-lived, with demand growing again, for example:

It was initially quiet for the month of April, but demand has increased significantly since then. We have a waitlist for advocacy which is up to 8-10 people at the moment, which is a lot considering the small size of our organisation. (Case worker, Ageing, disability or carer service)

Some attributed the decrease in demand their service had experienced to the improved financial support for people receiving income support:

Possible dip in demand could be because of the JobSeeker supplement - less financial distress, less family violence, less legal problems. (CEO, Legal, advocacy or peak body)

Many however anticipated demand would increase significantly once the COVID-19 safety nets provided by government were removed or reduced, for example:

I don’t expect the increase in demand to be fully seen until government relief reduces. Increases to JobKeeper and JobSeeker are supporting people better than normally, but once these cease I expect demand to sharply rise. (CEO, Child, youth and family service)

Demand is expected to increase when government & industry assistance phases down. Expecting higher demand as banks end hardship terms. (Practitioner, Child, youth and family service)

We work with rough sleepers who have not as yet been negatively affected by COVID-19. We are more likely to see an increase in rough sleeping if the additional funds for JobSeeker and JobKeeper cease and people from the private market lose their accommodation. (Practitioner, housing and homelessness service)
4 Rapid changes in service delivery

4.1 Remote delivery

As an indicator of the extent of change in service delivery, the survey asked respondents to indicate roughly how much of their service had shifted from face-to-face service delivery to other modes of delivery (e.g. telephone or online delivery). The data attests to substantial changes in the ways the sector is delivering services, underlining the agility and responsiveness of services and the community sector workforce in the context of COVID-19. Figure 4.1 shows that:

- 96% of services have made a shift from face-to-face service delivery to other modes for at least part of their service. Only 4% of respondents reported that ‘none’ of their service had shifted.

- 24% of respondents reported that their entire service had shifted from face-to-face delivery to other modes, while a further 40% reported this was the case for ‘most of their service.

Figure 4.2 provides further detail on those services shifting from service delivery. This shows that respondents whose main service was in the category of ‘legal, advocacy and peaks’ were most likely to report a shift from face-to-face service delivery, with 47% reporting all of their service had shifted, and a further 41% reporting most of their service had done so. High proportions of child youth and family services also made the shift, with 71% saying they had shifted all or most of their service. Those focused on delivering ageing, disability and carer services, and Aboriginal and Torres Strait Islander services were less likely than others to report having shifted ‘all’ or ‘most’ of their service away from face-to-face delivery.

The survey also asked respondents how much of their service could not be delivered at all. As shown in Figure 4.3, 82% reported that at least part of their service could not be delivered at all. However, it was more common that either ‘some’ (39%) or ‘a little’ of the service could not be delivered (31%).
Figure 4.1 Respondent reports of how much of their service had shifted from face-to-face delivery (%, n=738)

Figure 4.2 Respondent reports of how much of their service had shifted from face-to-face delivery, by main service type
4.2 Comments on service delivery responses

In the comments left in the survey, respondents reflected on their experiences of service delivery in the context of the pandemic, providing insight into the nature and extent of adjustment. Several comments related to the transition to remote modes, reflecting how services sought to ensure connections with clients were maintained:

We increased tele-health services to ensure access during times of isolation for our consumers with chronic health conditions that required addressing. We also implemented a call centre strategy providing telephone calls to our vulnerable consumers ensuring they had access to food, supplies and support during isolation. (Senior manager, Aboriginal and Torres Strait Islander service)

We created virtual playgroups in place of face-to-face as well as online communities of families with young children. (CEO, Community based or community development organisation)
Others described shifting the emphasis within their service to meet changing needs and circumstances, for example:

Our community based groups ended for most of the time, only returning this week. The need for in home supports increased as clients were isolated from social connections/peers etc. Without some support in home during isolation their mental health would have been even more affected. (CEO, Ageing, disability and care service)

We had to cease our day respite program and activities where we usually provide a meal to those attending [so] we used our kitchen, staff and knowledge to set up a meal service where meals could be purchased for $5.00. This was expanded to provide meals to those in financial hardship to provide a free meal, cost covered by donations from community members. (CEO, Community based or community development organisation)

In some cases, the transition to remote service delivery was considered successful:

Our organisation found that by delivering some programs remotely (eg group programs online) we were able to reach some clients we would not have reached in face-to-face delivery, and also form partnerships with organisations that are not located near us. (Practitioner, Child, youth and family service)

The adaptability of the sector and the work that it did was fantastic. (CEO, community development services)

The region’s community-based social services sector demonstrated agility, responsiveness, and relentless commitment to serving the local community. (Staff member in a multi-service context)

Many however described challenges arising for clients in the adjustment process, including issues of access and inequalities with which the service needed to contend:

Whilst many people have moved to telehealth there is a huge disparity for those who do not have access to phones internet for financial, infrastructure and technical skills reasons e.g., Aboriginal clients, rural and remote clients, young people (who interestingly are resistant to online treatment - though they will connect by phone). (CEO, health related service)

Some described heightened concerns about clients in the context of new service delivery methods:

Client were more anxious. They felt isolated and were unsure how they would cope with remote counselling. (Practitioner, Health related service)
Increased anxiety re: COVID-19 in addition to already existing mental health problems. A small amount of anxiety around Telehealth (online therapy) for people unfamiliar with technology or limited credit or internet access or adequate bandwidth. The occasional client declined online therapy and preferred to go without. (Practitioner, Health related service)

Sometimes in the provision of legal advice, face-to-face appointments are required. In the initial phase of COVID, all legal advice was given by phone. This worked for most of our clients, but was hard for others. (CEO, legal, advocacy and peak)

Many also raised issues about the transformation process, and the time and organisational capacity available to support the process in a context of uncertainty

We needed to develop new ways of working in a short time frame - involves staff training and supervision. (Team leader, Child, youth and family service)

My organisation doesn’t have IT capacity for workers to work remotely. Some staff could have moved to remote working to reduce the number of people in the office space at any one time, if IT capacity existed. (Practitioner, Child, youth and family service)

In addition, the uncertainty of the pandemic made it difficult to plan or adapt to changing needs and ways of working:

With uncertainty it is extremely challenging to plan, expand or employ. (CEO, Child, youth and family service)

It is very unclear what the outlook of any organisation will be in the short term. My organisation is expecting for the worse but trying to reinvent itself to a new way of working. A very tough job with no additional resources. (CEO, Employment, education or training service).
5 Leaders’ perspectives on workforce measures and impacts

5.1 Workforce measures taken in community sector organisations

Leaders indicated the workforce measures that had been taken in their organisation. The most common was the redeployment of staff, reported by 36% of CEOs and senior managers. In addition, a third reported a loss of work for casual staff (32%), and 31% reported a freeze on staff recruitment. Almost as many observed additional unpaid overtime (28%), reduced requirements for staff to take leave (25%) and job losses or contract non-renewal (20%).

Figure 5.1 Leaders’ reports of workforce measures taken in their organisation (n=261)

![Bar chart showing workforce measures taken in community sector organisations]

5.2 Changes in staff numbers

Organisational leaders (CEOs and senior managers) were asked to indicate whether staff numbers in their organisation had changed in response to the pandemic. While 62% reported maintaining FTE staffing levels and 14% reported levels had increased, 21% of leaders reported that their organisation had reduced FTE levels (Figure 5.2). A breakdown according to the size of organisations is shown in Appendix C, Table C.4. This indicates larger organisations were most likely to report reducing staffing levels due to the pandemic.
5.3 JobKeeper and the community sector workforce

Leaders were asked if their organisation had applied to receive payments for staff under the Australian Government’s JobKeeper wage subsidy scheme. Of the 263 leaders who answered the question:

- More than half (54%) reported their organisation applied for JobKeeper, 43% said they did not, and 3% were not sure.

- Of those in organisations that did not apply for JobKeeper, 62% said this was because their turnover didn’t drop to the required amount, 21% said they didn’t need the wage subsidy, 11% said they didn’t employ eligible staff; and 3% said there was too much administration.

- Of those in organisations that did apply for JobKeeper, 97% received it for at least some staff, while 3% said they did not receive it for any staff. Over a third (37%) received it for over 80% of staff. This is shown in Table 5.1.

- Of the 138 leaders in organisations that received JobKeeper (52%), 40% said they expected to need to reduce staffing levels when the support ceased, while 38% did not, and 23% were unsure. By contrast, the Australian Bureau of Statistics data indicates that two in five (42%) of Australian businesses were accessing available business support measures such as wage subsidies, and 13% expected to reduce their workforce when these measures end (ABS, 2020).
• If these leaders’ expectations are realised, around 21% of community sector organisations will experience job cuts upon cessation of the Jobkeeper wage subsidy.

Figure 5.3 Proportion of leaders whose organisation applied for JobKeeper (n=263)

Table 5.1 Approximate proportion of staff JobKeeper was received for (n=142)

<table>
<thead>
<tr>
<th>Approximate proportion</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>No staff</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>Less than 20% of staff</td>
<td>10</td>
<td>7</td>
</tr>
<tr>
<td>Approximately 20 to &lt;40%</td>
<td>10</td>
<td>7</td>
</tr>
<tr>
<td>Approximately 40 to &lt;60%</td>
<td>16</td>
<td>11</td>
</tr>
<tr>
<td>Approximately 60 to &lt;80%</td>
<td>22</td>
<td>16</td>
</tr>
<tr>
<td>More than 80% of staff</td>
<td>53</td>
<td>37</td>
</tr>
<tr>
<td>Not sure</td>
<td>27</td>
<td>19</td>
</tr>
<tr>
<td>All</td>
<td>142</td>
<td>100</td>
</tr>
</tbody>
</table>
5.4 Comments on JobKeeper and the community sector workforce

Organisational leaders were given an opportunity to provide additional comments about the impact of JobKeeper on their organisation. Note that most respondents answered this question prior to the Australian Government’s (2020) announcement on 21 July regarding the extension and reduction of JobKeeper payments.

Many reported that JobKeeper had been critically important at a time of great difficulty for their organisation. Some noted that JobKeeper had provided a buffer, allowing their organisation to adapt to new ways of working and new needs in the community.

JobKeeper has been vital for keeping staff and maintaining organisational capability. (CEO, Legal, advocacy or peak body)

It has been a key survival component. If not for JobKeeper, we would have had to stand down many staff members without pay. (CEO, Ageing, Disability or Carer service)

JobKeeper enabled us to retain all staff - which helped us turn our business around from face-to-face to 100% online. (CEO, Employment, education and training provider)

JobKeeper has allowed us to recruit an additional casual case worker to meet the increased demand for our services. (CEO, migrant and multicultural service)
One respondent described the benefits of JobKeeper in detail, outlining the complexity of pressures within their organisation and the relief that staffing did not need to be one of these:

It has been very helpful for us because it relieved the financial pressure whilst we were dealing with keeping the doors open to maintain essential services for the most vulnerable people in our community. It has been a very stressful time for the organisation and our team members who have been dealing on a daily basis with highly anxious community members... Being able to guarantee we could pay the staff whilst we managed frontline services as well as supporting several staff during incidents of staff illness (and subsequent COVID testing, self-isolation whilst awaiting results etc) has really helped us to keep the wheels on the bus... especially as we lost many of our volunteers as a result of the pandemic including most of our older volunteers. (CEO, community based or community development organisation)

Some expressed concern about operating without JobKeeper in the future:

We had all qualifying staff on JobKeeper, we expect to close when JobKeeper ends or before. (CEO, Employment, education and training service)

We have been able to keep some contracted staff to meet increased demand. This will stop once JobKeeper ends and we will need to cease employing these extra staff. (CEO, Housing and homelessness service)

We will not be able to sustain staff wages once JobKeeper is finished. This will impact about 3 staff members and will reduce our ability to take on new trainees. (CEO, child, youth and family service)

Several respondents answered this question following the Australian Government’s announcement that JobKeeper would be gradually reduced starting in September 2020, and expressed concern about the impact of those plans.

With the reduction in JobKeeper funding our organisation will decline financially between now and the end of the financial year. (CEO, Ageing, disability and carer service)

If we weren’t receiving JobKeeper, we would have had to make some decisions about our staffing levels. I have concerns about the proposed extension of JobKeeper – with the reduced amounts and increased testing, we are likely to have to let some staff go in the coming months. This is a shame as it takes a long time to train our staff up to meet the requirements of their roles. (CEO, Ageing, disability and carer service)
6 Staff perspectives on workforce impacts

In addition to asking CEOs and senior managers for their overview of workforce impacts in their organisation, the survey asked staff themselves about the changes they had experienced (Section 6.1), and how they were feeling about different aspects of their job (Section 6.2) including their retention plans, which could be compared with data collected in 2019.

6.1 Changes to working arrangements

Respondents were asked whether particular workforce changes relating to hours, pay, role or location applied to them personally, as a result of the coronavirus crisis. The vast majority (90%) indicated there had been some change to their working arrangements. Over three quarters of respondents (77%) said they had worked remotely (see Table 6.1). Working remotely (or working at home) was a less common response to the crisis among staff outside the capital cities: whereas 81% of those in capital cities said they worked remotely, fewer in regional areas did so (73%), and less than half did so in remote areas (48%).

Other changes to working arrangements are shown in Table 6.1. Three in 10 (29%) had worked unpaid overtime, and 18% said they received JobKeeper. Almost one in 10 said they had reduced their hours, and the same number said they had taken paid leave they hadn’t planned to take, while 2% took unpaid leave.

Table 6.1 Proportion of staff who experienced changes to their working arrangements (n=734)

<table>
<thead>
<tr>
<th>Change to working arrangement</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>I worked remotely (worked at home)</td>
<td>562</td>
<td>77</td>
</tr>
<tr>
<td>I worked unpaid overtime due to the crisis</td>
<td>214</td>
<td>29</td>
</tr>
<tr>
<td>I received JobKeeper whilst continuing to work</td>
<td>131</td>
<td>18</td>
</tr>
<tr>
<td>I reduced my hours</td>
<td>68</td>
<td>9</td>
</tr>
<tr>
<td>I took paid leave I hadn’t planned to take</td>
<td>64</td>
<td>9</td>
</tr>
<tr>
<td>I moved to a different role</td>
<td>55</td>
<td>8</td>
</tr>
<tr>
<td>I took unpaid leave</td>
<td>18</td>
<td>2</td>
</tr>
<tr>
<td>I was stood down (with or without JobKeeper)</td>
<td>8</td>
<td>1</td>
</tr>
<tr>
<td>My employment was terminated</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Other change to my working arrangement</td>
<td>79</td>
<td>11</td>
</tr>
<tr>
<td>None of these, I continued working without changes to hours, pay, role or location</td>
<td>72</td>
<td>10</td>
</tr>
</tbody>
</table>

Supporting communities through the crisis
Those who indicated other changes to their working arrangements gave examples focused on increases in working hours to adjust service delivery, respond to needs associated with COVID-19 (including staff mental health), or cover for loss of volunteers. Others described taking on new roles or responsibilities including those associated with the pandemic; working at home on a rotating basis; being required to work in the office; losing paid hours; and working additional unpaid overtime.

Comments throughout the survey reflected the pressures experienced by many staff, who described feeling very high levels of stress, relating both to their work and to the impacts the COVID-19 crisis was having on their personal lives. One described, for example:

[It’s been] enormously stressful as a worker, trying to manage new ways of working, additional workload and trying to balance family responsibilities, working across two organisations that had different responses, learning new programs, systems and the technological challenges. I am still recovering from the stress. (Practitioner, health related service)

I see colleagues who are exhausted and burned out, they have had to juggle work, home schooling, closed daycares, ageing parents, adapt to major changes in their work, home and personal lives and all the while having the vulnerable in the community lean heavily on them for support, information and assistance. I would like to see real genuine thanks. (Practitioner, Child, youth and family service)

Some also pointed to gaps in workforce supports for community sector workers relating to the pandemic, including for paid leave:

While I awaited the result of a COVID-19 test I was told my leave had to be annual leave as I was not sick. Now we know some infected people don’t have symptoms. I think sick leave would be more appropriate. (Practitioner, health related service)

Gap for casual workers who presented at work with symptoms and had to isolate but were tested negative for COVID. I lost 10 days of work. (Practitioner, community development service)
6.2 Perspectives in 2019 and 2020

Figure 6.1 compares workers’ perspectives on key aspects of their work, in July 2020, and in 2019, based on the ACSS data collected in October-November 2019.

Based on this comparison, the sample in 2020 was either more positive about their work and working conditions than in 2019, or expressed similar perspectives as in 2019, although any comparison needs to be made cautiously due to different sample sizes and composition (see Figure 6.1). Responses were similar in 2019 and 2020 in terms of the proportions worried about the future of their job, and the proportion who agreed they felt emotionally drained. Slightly more agreed they are under pressure to work harder in their job (66% in 2020 compared with 58% in 2019). Respondents were, however, more positive about staffing levels and pay than in 2019. Two in five (42%) agreed there were enough staff to get the work done in 2020 compared with 28% in 2019, which may reflect improved resourcing for some, and drops in demand in others. In addition, 61% were positive about their pay compared with 51% in 2019, perspectives likely shaped by observations of the external environment, shaped by an unfolding recession and high unemployment.

Figure 6.2 shows the proportion of staff who said they planned to remain in their role, for organisational leaders, practitioners and those in other roles. Again, this is likely shaped by perceptions of employment prospects in the wider economy. Figures were fairly similar in 2019 and 2020. However, among practitioners / frontline workers, while 59% reported intending to remain in their role in 2019, in the 2020 sample this figure was 69%. The proportion intending to move to other organisations, or to leave the community sector altogether, was lower in 2020 for all groups.
Figure 6.1 Community sector workers' perspectives on their work, 2019 and 2020

- There are enough staff in my service to get the work done
- I receive decent pay for the work that I do
- I worry about the future of my job
- I feel emotionally drained from my work
- I feel under pressure to work harder in my job

- Strongly agree
- Agree
- Neutral/not sure
- Disagree
- Strongly disagree
Figure 6.2  Where respondents plan to be working in 12 months, 2019 and 2020

<table>
<thead>
<tr>
<th>Role</th>
<th>2019</th>
<th>2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>CEO or senior manager</td>
<td>79%</td>
<td>79%</td>
</tr>
<tr>
<td>Practitioner/frontline work</td>
<td>59%</td>
<td>69%</td>
</tr>
<tr>
<td>Other role</td>
<td>66%</td>
<td>68%</td>
</tr>
<tr>
<td>All</td>
<td>67%</td>
<td>72%</td>
</tr>
</tbody>
</table>

- **Current role**
- **Different role in current organisation**
- **Another community sector organisation**
- **Another organisation (not in community sector)**
- **Planning to retire/leave the workforce**

Note: In the 2019 Australian Community Sector Survey, data was collected in October-November. In 2020, data was collected in July.
7 Funding and financial outlook

Organisational leaders were asked about their organisation’s financial position, including how their organisation’s overall financial position had changed as a result of COVID-19 (section 7.1); whether and how each broad funding source had changed (Section 7.2); what measures organisation had taken in response (section 7.3); and their financial outlook for coming months (Section 7.4).

7.1 Change in financial position

Figure 7.1 shows leaders’ reports of the change in their organisation’s financial position. Among all organisations, 38% said their financial position stayed about the same, and around a quarter (24%) reported it had either improved or improved significantly. However, together, 36% said their financial position had either worsened (26%) or worsened significantly (10%). Relatively high proportions of leaders in larger organisations reported their financial position had worsened significantly (16% compared with 6-7% among smaller organisations).
7.2 Changes in funding sources

Figure 7.2 shows leaders’ reports of changes since the outbreak of COVID-19 in levels of funding from government, philanthropic and commercial sources.

- **Government sources:** Most leaders reported that funding levels from government had either not changed or had increased. A little over one in 20 (6%) experienced a decrease in funding from the Australian government, and around the same proportion (5%) reported a decrease from state or territory sources. 41% of leaders reported an increase in funding from either Australian government or state government sources since the outbreak of COVID-19, and the financial outlook of this group was more positive than others (see section 7.4).

However, more organisations reported loss of commercial and philanthropic income.

- **Philanthropic sources:** Nearly half (46%) reported they had experienced a loss of donations from public or corporate sources, and a third (33%) had lost grants or donations from philanthropic foundations.

- **Commercial sources:** More than half (57%) had experienced loss of investment income. A quarter (26%) reported a loss of income from individualised funding (NDIS and home care packages), although 17% had gained income from these sources. Half (50%) had lost income from other client-based fees or charges, and 48% lost income from other commercial sources (e.g. retail).
Figure 7.2  Proportion of leaders who reported changes in funding levels

Australia's community sector and COVID-19

<table>
<thead>
<tr>
<th>Source(er, n)</th>
<th>Decreased a lot</th>
<th>Decreased</th>
<th>Stayed the same</th>
<th>Increased</th>
<th>Increased a lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australian Government (n=197)</td>
<td>5%</td>
<td>56%</td>
<td>31%</td>
<td>8%</td>
<td></td>
</tr>
<tr>
<td>State or Territory Government (n=208)</td>
<td>5%</td>
<td>64%</td>
<td>30%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants/donations from foundations (n=176)</td>
<td>15%</td>
<td>18%</td>
<td>39%</td>
<td>23%</td>
<td>5%</td>
</tr>
<tr>
<td>Donations from the public or corporate sources (n=163)</td>
<td>19%</td>
<td>27%</td>
<td>36%</td>
<td></td>
<td>15%</td>
</tr>
<tr>
<td>Individualised funding (NDIS and home care packages) (n=109)</td>
<td>23%</td>
<td>58%</td>
<td>16%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other client-based fees or charges (n=144)</td>
<td>15%</td>
<td>35%</td>
<td>42%</td>
<td></td>
<td>8%</td>
</tr>
<tr>
<td>Investment income (n=122)</td>
<td>24%</td>
<td>33%</td>
<td>41%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other commercial sources (eg member fees, sales, rent, retail) (n=157)</td>
<td>21%</td>
<td>27%</td>
<td>46%</td>
<td></td>
<td>4%</td>
</tr>
</tbody>
</table>

- Decreased a lot: %
- Decreased: %
- Stayed the same: %
- Increased: %
- Increased a lot: %
7.3 Measures taken by organisations

In response to financial pressures on organisations, the most common measure leaders reported taking was to develop new ways of working that improve service delivery (73%). In addition, many sought funds from external sources:

- A little over half said they actively sought funds from government (53%).
- Almost 3 in ten (28%) said they sought funds from philanthropy.
- 10% reported seeking funds from a commercial source.
- 8% sought funds from an auspicing organisation.

However, only 18% said they successfully obtained a new source of funding.

Over a third (35%) said their organisation had drawn on financial reserves, and 3% applied to a financial institution for credit. The vast majority of leaders (92%) indicated that at least one of the measures listed had been taken. Those who indicated other responses included negotiating rent reductions on leased premises, ceasing commercial services, developing a social enterprise, pausing some projects, redundancies and restructuring.

Figure 7.3 Responses to the crisis (% n=262)
7.4 Financial outlook

Leaders have mixed outlooks for their organisation for the next year. While 36% of leaders expect their outlook to stay the same, 23% reported it would improve somewhat and the same proportion reported it would decline somewhat. 5% each reported improvement and decline would be ‘substantial’ (Figure 7.4). Figure 7.4 also shows how the financial outlook is worse for those organisations receiving JobKeeper payments. For this group, 36% expected their finances to decline (either somewhat or substantially) in the next year, compared with 19% of those not receiving JobKeeper. Further, 23% of those receiving JobKeeper expected their finances to improve in the next year compared with 33% of those not receiving the payments.

Figure 7.4 Leaders’ expectations about how their organisation’s financial outlook will change from July 2020 to June 2021, by JobKeeper status (n=262)

Figure 7.5 and Figure 7.6 show that leaders of organisations that reported increases in government funding since the outbreak of COVID-19 were both less likely than others to report their financial position had worsened through the crisis (Figure 7.5), and more likely than others to have a positive financial outlook (Figure 7.6).

Figure 7.7 provides a breakdown by main service type, which shows that those whose main service type was ageing, disability and carers were most likely to expect to see improvements in their organisation’s finances. Those in the financial counselling and employment service category were split, with 31% expecting finances to improve and 44% expecting to see deterioration. Many child, youth and family services (38%) also expected to see declines in their finances over the next year.
Figure 7.5 Leaders reports of how organisation’s financial position changed since the outbreak of COVID-19, by whether or not government funding increased.

Figure 7.6 Leaders expectations of how organisation’s financial outlook will change in the next year, by whether or not government funding increased.
Figure 7.7  Leaders’ expectations about how their organisation’s financial outlook will change from July 2020 to June 2021, by main service type (n=262)

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Improve substantially</th>
<th>Improve somewhat</th>
<th>Stay the same</th>
<th>Decline somewhat</th>
<th>Decline substantially</th>
<th>Not sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ageing, disability &amp; carers (n=47)</td>
<td>9%</td>
<td>38%</td>
<td>30%</td>
<td>11%</td>
<td>11%</td>
<td></td>
</tr>
<tr>
<td>Financial &amp; employment services (n=19)</td>
<td>5%</td>
<td>26%</td>
<td>26%</td>
<td>32%</td>
<td>11%</td>
<td></td>
</tr>
<tr>
<td>Legal, advocacy &amp; peaks (n=33)</td>
<td>27%</td>
<td>48%</td>
<td>18%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health related services (n=28)</td>
<td>4%</td>
<td>21%</td>
<td>46%</td>
<td>18%</td>
<td>4%</td>
<td>7%</td>
</tr>
<tr>
<td>Community development (n=21)</td>
<td>24%</td>
<td>52%</td>
<td>14%</td>
<td></td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Child, youth &amp; family services (n=66)</td>
<td>6%</td>
<td>15%</td>
<td>29%</td>
<td>36%</td>
<td>12%</td>
<td></td>
</tr>
<tr>
<td>Other service types/multiple services (n=24)</td>
<td>21%</td>
<td>21%</td>
<td>21%</td>
<td></td>
<td>13%</td>
<td>25%</td>
</tr>
<tr>
<td>Housing &amp; homelessness (n=24)</td>
<td>4%</td>
<td>13%</td>
<td>46%</td>
<td>21%</td>
<td>4%</td>
<td>13%</td>
</tr>
<tr>
<td>All (n=262)</td>
<td>5%</td>
<td>23%</td>
<td>36%</td>
<td>23%</td>
<td>5%</td>
<td>8%</td>
</tr>
</tbody>
</table>

Note: The category ‘Other service types’ includes migrant and multicultural services, and Aboriginal and Torres Strait Islander services. Due to low numbers of respondents in each category these could not be separately reported.
7.5 Comments on financial outlook

When asked to reflect on their organisation’s financial outlook and the factors affecting it, it was clear that it is difficult for many organisational leaders to assess their futures in the context of the COVID-19 pandemic. Several commented that their outlook was difficult to predict and was contingent on the spread of the virus:

Really depends on what happens with COVID. (CEO, Ageing, disability or carer organisation)

If we see another surge of COVID-19, I would change my answer [to the previous question] to potentially decline somewhat. (CEO, Ageing, disability or carer organisation)

Our income beyond June 2021 is not at all certain. (CEO, Legal, advocacy or peak body)

Others expressed some short-term confidence, but were concerned about their status in late 2020 or in 2021, in part due to the short term nature of extensions to government contracts.

Our increased funding is all very short term and ending in or before June 2021. Our general financial outlook continues to be bleak. (CEO, Housing or homelessness service)

Our contract expired in June 2020, but we were only renewed for 9 months. We normally get 3 year contracts. (Senior manager, Legal, advocacy or peak body)

Most of our government contract have only been given 12 month extensions which has decreased security for our staff in their contracts. This has caused two staff to leave (out of 70 staff) to take offers of longer employment opportunities. (CEO, Child, youth and family service)

The organisation has received numerous one off funding from funders as a result of COVID-19. These funds are time limited and are not recurring hence the financial position will decrease in the next financial year. (CEO, Child, youth and family service)

Some mentioned that they had benefited from increases in government funding during 2020, but were concerned about the future.

Extra government funding has only been one-off to be spend within 20-21 year. All surpluses for this financial year 19-20 will be recouped by government and not rolled over. This is contradictory. Also spending the extra funds should not be rushed and time frames should be lengthened to really enhance delivery. (CEO, Child, youth and family service)
Whilst it has improved for this financial year - my Board holds grave concerns in the coming out years on ability to attract a similar level of funding in times of tightened State and Federal budgets - it could turn to famine. (CEO, Ageing, disability and carer)

Alternative funding sources were also challenging to maintain, including fundraising from philanthropy. As one explained:

I feel that the financial impact of COVID-19 will be felt more acutely post December 2020. We are most worried about income next year. We do not receive any Federal Government funding and rely on fundraising. Therefore, as the country goes further into a recession then our income projections decrease. (CEO, Migrant and multicultural service)

Fundraising/social enterprise is critical to maintaining service levels and meeting KPIs. I expect donations and social enterprise demand to decrease as a result of the recession. This may mean reduction in services in 2021. I also expect the recession to increase service demand. (CEO, Child, youth and family service)

Philanthropic funding for the financial year 2021 and beyond is very unclear. (CEO, Employment, education or training service)

The outlook for our organisation (high reliance on fundraising) is uncertain. Definitely hit by COVID-19 and we have a deficit budget this financial year. Should C-19 see wave two it will further impact our revenue streams. (CEO, health related service)

Some also commented on the disruption to their commercial sources, for example:

Expected drop in op shop income due to the new wave of the pandemic, substantially if stage four is initiated. Organisation investments dropped significantly and not likely to improve any time soon. (Senior manager, housing and homelessness service)

We don’t expect our client contributions to pick back up to the levels they were prior to this pandemic. With the second wave coming through Sydney we have already seen a large drop off in demand again. (CEO, Ageing, disability and carer service)

The important source of funds to survive the downturn is our largest revenue source - which is events. The events will not be coming back soon (CEO, Legal, advocacy or peak body)

Only a few made comments that their organisations’ finances had not been noticeably affected in 2020.
We have not been greatly impacted due to the nature of the services we deliver, so have been in a fortunate position throughout the crisis to date. (CEO, Health related service)

Our organisation is lucky that we are block funded, and COVID-19 did not impact the flow of funding into the organisation. (CEO, Health related service)

Comments also reflect that the continuity of COVID-related supports are key to sustaining the community sector through the crisis, especially given the increased costs the pandemic placed on organisations (as well as affecting income).

The requirements for physical distancing in the workplace have meant that our current offices are inadequate to accommodate our staff and client needs, so we need to invest in renting and fitting out a second site, however capital investments are not permitted in our funding and we are expected to magically fund these additional business costs. (Senior manager, child, youth and family service)

With the reduction in JobKeeper funding our organisation will decline financially between now and the end of the financial year. (CEO, Ageing, disability and carer service)

Significant improvement this year. Dramatic funding cliff next year as all COVID funds are 12 months only. (CEO, legal, advocacy and peaks)

7.6 Cessation of ERO funding

A further financial issue facing the sector is the cessation of government funding to help implement the equal remuneration order made by the Fair Work Commission in 2012 for the social and community services (SACS) industry. When asked if their organisation received any supplementation from a government funder to help cover the ERO wage increases, 45% of organisational leaders said they did, 32% said the organisation did not, and 23% were unsure.

The 111 leaders who said their organisation received supplementation were asked how they thought their organisation would be impacted when supplementation funding for Commonwealth funded programs ends. Results are shown in Figure 7.6. 69% said they would face increased financial pressure, and over half (55%) said staff number or hours would be reduced, and there would be reduced service provision.
Figure 7.8  How organisations will be impacted by cessation of supplementation funding for the Equal Remuneration Order (% n=111)

The survey asked organisational leaders to comment on how the cessation of SACS ERO supplementation funding would affect their organisation or the sector overall. As this CEO of a large organisation providing a wide range of services stated with anger and despair:

It will grind NGOs into the ground, cause disintegration of place-based collaboration while we are swamped with spin about collective impact and the need to work smarter not harder. Competition will grow for reduced resources. Service quality will decline, and loyal, qualified, hardworking and skilled social services staff will go work in mines where they can earn $80k per annum. Shows utter contempt for the original intent of the FWA ruling and a lack of planning and foresight by Government at all levels. (CEO, multi-stream types)

Around half of those who responded said that it they would need to rearrange their budgets reducing service delivery and/or staffing.

With the loss of this funding and the Portable Long Service Leave coming in these will be two additional costs that will need to be budgeted for, taking away from front line delivery. (CEO, Child, youth and family service)

Without the ERO, our calculations are that EFT and KPI will be reduced by up to 40%. There is no option, the government must bring this supplement into base contract funding. Can you imagine the impact of cuts to 40% of homelessness, mental health, AOD, families, counselling, carer services - it simply is not an option - not when these services are going to be needed more than ever. (CEO, Ageing, disability and carer service)
It will be devastating; we will have redundancies and reduced services. (CEO, Housing and homelessness service)

Due to lack of growth funding in our child youth and family sector for some years, real operational costs are increasing so without ERO we will reduce service levels yet again. (CEO, Child, youth and family service)

Most of the remainder of participants, like the organisational leader quoted above, spoke of the probable impact of losing SACS ERO Supplementation on staffing and employment conditions. This is ripping millions out of the sector and negatively affecting older females’ likelihood of retaining or obtaining work. (CEO, Health related service)

In a sector whose annual increases already don’t keep up with inflation, the loss of supplementation to cover the costs of the higher wages due to the ERO would be devastating to our organisation. Overall, if this funding is not met, we will lose approximately one eighth of our funding, meaning at least one of our six part time staff (3.2FTE) will lost their job. (CEO, Legal, advocacy or peak body)

The impact of SACS ERO Supplementation reaches beyond those organisations funded by the Australian Government. Some, who also or primarily relied on state and territory government funding, additionally commented on the impact of the Australian Government decision on funding SACS ERO, or those of their local jurisdictions.

With the Northern Territory Government not offering any increase in funding for the wages increase, the only options are to reduce spending and save with in the program...Losing the Commonwealth top up would be another blow to the organisation. (CEO, Health related service)

While it will not affect us directly, as we do not receive Commonwealth government funding, it is likely that demand for our services will increase as other, Commonwealth-funded organisations have to cut back services. (CEO, Child, youth and family service)

Finally, one participant pointed to the particular importance of SACS ERO Supplementation in the climate of the coronavirus pandemic.

We already run strict budgets for program delivery, and we would not be able to absorb these additional pressures on top of COVID. (Senior manager, Child, youth and family service).
8 Relationships with Government

CEOs and senior managers, along with team leaders and coordinators, were asked about the experience of their service with respect to engaging with government in the context of COVID-19.

As shown in Figure 8.1, the largest group were generally positive about relationships with government: 44% agreed or strongly agreed government had sought their advice on responses to COVID-19. The same proportion (44%) agreed with the statement “Government has valued our advocacy through this period”. However, many also disagreed with these statements (35% and 23% respectively, see Figure 8.1).

Many respondents were also positive about the flexibility government had provided to adjust contracted deliverables or to allow funding to be repurposed. Almost three in five (58%) agreed or strongly agreed with the statement “Government supported us by adjusting contracted deliverables or KPIs” and 17% disagreed. More than half (53%) agreed with the statement “Government supported us by increasing funding flexibility e.g. allowing us to roll over or repurpose funds”, although 17% disagreed. Responses by jurisdiction are provided in Appendix C, see Table C. 5 to Table C. 8.

In their comments, some respondents were very positive about how the government and community sector were working together:

- We were offered flexibility on a state government grant to use for COVID related support for clients if we needed to. (Senior manager, ageing, disability and carer services)
- It actually looked something like the partnership these contracts often purport to be. (Co-ordinator, child, youth and family service)
- Flexibility in contract negotiations has been really valued among our members and we hope this continues into the near future. (Senior manager, legal, advocacy and peaks)

Some mentioned specific examples:

- The ACT Government has been amazing in providing rent relief to organisations and tenants, as well as additional grants into the homelessness sector to meet existing need. They also provided great flexibility with our deliverables to allow us to transform our services during this time to keep operating. (CEO, Ageing, disability and carer organisation)

- The Queensland government has been very supportive of our organisation. This has enabled us to be flexible and responsive in our service delivery while maintaining service continuity and achieving the required service outputs. (CEO, Child, youth and family service)
Others noted variability in responsiveness across levels of government and services, for example:

Government response has varied between services, but generally State government more flexible than Commonwealth. (CEO, Child, youth and family service)

NSW Government was considerably more responsive to calls for sector support than the federal government who were very unresponsive and disengaged. (CEO, Legal, advocacy or peak body)

One section of our state government allowed us flexibility in meeting KPIs and maintaining our funding while another larger section forced us to meet KPIs and actually provided a directive with our peak body support to make our programs online and or develop procedures to move digitally. This is not always possible if you do not have the resources. (Coordinator, Community based or community development organisation)

However, some pointed out that smaller organisations were not necessarily well engaged with government:

I feel as a small organisation we were not provided with much help and were in a position where we had to fight with the bigger agencies to get any assistance from the funding they received, it would have been better to share funds to all agencies. (CEO, Housing and homelessness service)

Small not for profits that work at the grassroots of community adversity were not contacted for feedback on the current and expected impacts of the government relief packages. (CEO, Child, youth and family service)

Volunteer-based organisations also felt their voices were excluded and needs left unmet:

Government’s failure to respond to requests for financial support for volunteer-based charitable organisations. Focus was solely on organisations with large numbers of paid staff. (CEO, Child, youth and family service)

Total failure by government to consider the plight of volunteer-based organisations during COVID. (CEO, Child, youth and family service)
Figure 8.1  Agreement with statements about relationships with government

- **Govt has sought our advice on responses to COVID-19 (n=388):**
  - Strongly agree: 8%
  - Agree: 36%
  - Neutral/unsure: 33%
  - Disagree: 5%
  - Strongly disagree: 5%

- **Govt has valued our advocacy through this period (n=388):**
  - Strongly agree: 5%
  - Agree: 14%
  - Neutral/unsure: 32%
  - Disagree: 12%
  - Strongly disagree: 15%

- **Govt supported us by adjusting contracted deliverables (n=363):**
  - Strongly agree: 14%
  - Agree: 44%
  - Neutral/unsure: 25%
  - Disagree: 12%
  - Strongly disagree: 5%

- **Govt supported us by increasing funding flexibility eg allowing us to rollover or repurpose funds (n=353):**
  - Strongly agree: 14%
  - Agree: 39%
  - Neutral/unsure: 30%
  - Disagree: 12%
  - Strongly disagree: 5%
9 Sustaining the sector

At the conclusion of the survey, respondents were asked, ‘To help the sector respond to COVID-19, is there any support you would like to see from Government, philanthropy, business, the finance sector, or from within the community sector itself?’ Responses were wide ranging, and driven by concerns about the communities they serve as well as the capacity of the community sector and its workers to continue to work in the context of COVID-19.

9.1 Support for community members

9.1.1 Income support and JobSeeker

Many respondents expressed concern about the removal of the Coronavirus Supplement because it would negatively impact clients and communities. Many spoke of the benefits that increased levels of income support have brought to members of the community, but also, indirectly, to the community sector. This is because people receiving income support payments, who had previously relied on community sector support for many of their needs, had higher incomes after the Coronavirus Supplement was paid, and so had much less need for community sector assistance.

- Keep the original increased COVID financial assistance (raise to Newstart/Jobseeker). Anecdotally this had the single most positive impact to mental health outcomes for the people I support. (Practitioner, Health related service)
- I think the government needs to raise the rate of Newstart permanently - I’m sure it’s been a huge buffer for households. (Project officer, Housing and homelessness service)
- I would like Government to retain Jobseeker (including full COVID supplement) so as to reduce pressure on community sector services (e.g. foodbanks, emergency relief). (Project officer, Legal, advocacy or peak body)

Given the positive impact of the Coronavirus Supplement, when thinking about the future needs of the sector, many respondents were also concerned about a reduction or termination of the supplement, observing that lower rates of income support would lead to greater demand on the community sector.

- Continue current levels of welfare support. If not we will see an increase in demand which will be difficult to meet, particularly in the mental health field. (CEO, Ageing, disability and carer service)
- Continued government support through increased Centrelink eligibility and payments is essential for our clients and communities. Without it, the burden that will fall onto the community sector will be
too great and the system will collapse. (Team leader, Child, youth and family service).

Ensuring people have adequate incomes to live a decent life is a key way to support the sector, and avoid increased demand for community services such as emergency relief, [and support] people’s mental and physical health. Before COVID-19 funding was not adequate to meet demand in most areas. Some Government responses to this crisis have meant that the sector has finally been able to meet that underlying demand. This supports need to continue to ensure we can meet existing need as well as need created by the COVID-19 pandemic. (Project officer, Legal, advocacy or peak body)

9.1.2 Preventing homelessness

In addition, some respondents identified mortgage and rent relief as providing an essential buffer to community members, keeping them safely housed through difficult financial times.

We need advocacy for the initiatives to continue, and for the four key factors that are keeping people out of financial crisis and homelessness (JobKeeper, Jobseeker, rent moratorium and bank loan reprieves) to continue for at least another 6 months. (CEO, Ageing, disability or carer service)

Provide support with mortgage/ rent relief to keep people who are currently in private housing off the streets. For some this won’t be enough, and we need social/ affordable housing for those people who can’t stay in private housing. (Practitioner, Housing and homelessness service)

The Commonwealth government must continue to provide unemployment payments & other forms of income support to ensure we do not have a massive rise in homelessness. (Project officer, Housing and homelessness service)

Like the respondent cited above, many called for government investment in social housing.

Government ... should seriously look at expanding social housing as a stimulus to keep people in employment. (Team leader, Housing and homelessness service)

Sustained and ongoing Federal and State investment in social housing and affordable housing to address housing stress and precarity and better safeguard people against a poverty trap. (Project officer, Ageing, disability and carer service)

INVEST IN SOCIAL HOUSING!!! (Senior manager, Housing and homelessness service)
9.1.3 Respond to specific areas of need in the community

Many particular groups were specifically identified as needing additional support during COVID. This included people ineligible for any government support, such as newly arrived migrants, refugees and people on temporary protection visas, and international students, people on working holiday visas and casual workers who do not qualify for JobKeeper.

A look into visa holders... who cannot return home for whatever reason, not being able to receive any financial support from the government during this unfortunate time. (Board member, Legal, advocacy or peak body)

Extension of JobKeeper and expansion to include casuals and temporary visa holders. (Project officer, Legal, advocacy or peak body)

Yes, I would like to see supports extended to those who have missed out - international students and other temporary visa holders, permanent residents serving waiting periods, casual workers, workers in the university sector and in the arts. (Policy officer, Legal, advocacy or peak body).

Young people and people with disability were also identified as facing particularly uncertain futures.

We need funding for more youth workers (and youth-focused social workers, community workers etc) - across youth and health services, schools, sporting organisations, etc - to help address the fallout of COVID-19 and ensure this is not a ‘lost’ or ‘scarred’ generation. (CEO, Child, youth and family service)

The exclusions have disproportionately affected young people, many of whom work casual jobs and often do not stay for long periods with one. (CEO, Child, youth and family services)

There should be more support for workers with disabilities; as there will be more competition for jobs now and they may be even more disadvantaged/overlooked; even if it is unintentional. (Practitioner, Child, youth and family service)

We need more permanent positions with reduced hours and/or traineeships provided for people with disability. (Practitioner, Ageing, disability and care service)

In reflecting on the future impact of Jobseeker, some also argued that ‘mutual obligation’ requirements should be waived or reduced for recipients, not only during the pandemic, but into the future.
The federal government needs to maintain a higher level for JobSeeker payments and scrap unrealistic obligation requirements. (CEO, Child, youth and family service)

[There should be] less mutual obligation during a recession and ongoing. (Project officer, Community based or community development organisation)

Others noted that new recipients of income support needed support when navigating Centrelink systems and requirements, and that current community sector services could not meet this need.

There needs to be a significant increase in funding to community legal services which provide assistance to people who have a problem with Centrelink. (CEO, Legal, advocacy and peak body)

Others commented on the growing need to for support and advice to small businesses that are struggling to remain open and to continue employing their staff.

Support for small business to keep afloat and to keep staff employed. (Practitioner, Financial support and counselling)

The number of small businesses contacting our service for assistance with commercial tenancy issues as a result of COVID-19 has increased significantly as have small business enquiries about the steps to follow when facing possible bankruptcy (sole traders) and insolvency (companies)... Many small businesses lack the funds to engage professional insolvency / bankruptcy professionals in the private sector. (Practitioner, Financial support and counselling)

I would like to see free legal support for small businesses. They don’t qualify for general legal aid and the majority don’t qualify for farm legal aid. (Practitioner, Financial support and counselling)

9.2 Maintaining employment and JobKeeper

While the survey asked organisational leaders a specific open-ended question about JobKeeper, the question at the end of the survey provided others with a chance to discuss this payment. Many took up the opportunity, with leaders reiterating their support for JobKeeper here. Participants identified JobKeeper as an essential support both for community members and for the community sector, as it was maintaining people’s livelihoods when businesses and the community sector could not operate as usual. Respondents called for JobKeeper to be maintained:
Maintain JobKeeper beyond September and until the economy and job availability improves significantly. (CEO, Community based or community development organisation)

Government to retain JobKeeper at initial rate - to secure as many jobs and businesses as possible. (Policy officer, Legal, advocacy or peak body)

There needs to be ongoing support for those on JobKeeper that cannot return to work. (Practitioner, Financial support and counselling service)

Extension of JobKeeper both in terms of timeframe and to include the whole NGO/charity sector (our organisation is too large in terms of revenue). (Project officer, Child, youth and family service)

Given widespread growth in unemployment, respondents felt a responsibility to maintain community sector jobs, and even employ additional staff, both to meet community need, and to engage unemployed workers.

Increased funding so more people can be employed and/or hours increased where appropriate. (Practitioner, Health related service)

Greater funding so we can employ more staff to effectively do our task and reduce demands on volunteers. (Board member, Employment, education or training provider)

9.3 Support for the community sector

Another large group of participants discussed the particular needs of the community sector during the COVID-19 crisis. Overwhelmingly, they identified funding as a critical support for the sector. These calls for funding come from a sector that is perpetually stretched. For example, in the 2019 ACSS survey (Cortis and Blaxland, 2020), respondents spoke of challenges due to short term, inflexible funding, with which they struggled to provide appropriate levels of support to community members or to pay staff appropriately. The additional complexity of need in the community during COVID-19, coupled with a need to develop new models of service provision, and to cover increased costs associated with staff and volunteers who were unable to work when sick or in quarantine, all came on top of these existing funding challenges. They were concerned about their capacity to meet community need both now and through future stages of the pandemic.

More funding to community sector organisations. Our staff struggle to get the work done in allocated hours and often do extra in their own time to meet demand. (Project officer, Community based or community development organisation)
Given the grave concerns about community outcomes post-COVID supplements and rent moratoriums it would be good to know that Government is watching the situation and is willing to increase support to the agencies offering emergency relief and crisis support should the need increase dramatically. (Team leader, Financial support and counselling service)

The community sector needs financial support to continue to provide services without volunteers. (Policy officer, Health related service)

Enough funding to reach all the clients who are still not able to attend the playgroups and parenting groups we are funded to run. The need is still there for vulnerable families to connect...many of these clients do not use online link ups and are really missing the contact. (Coordinator, Community based or community development organisation)

We need ongoing funding to be able to employ at least two additional full time domestic and family violence women’s counsellors to meet the level of demand in our community. (CEO, Child, youth and family service)

At the same time, other sources of funding have become more scarce, and so there is greater need for government funding.

Considerable increase in funding to meet demand, plug the donations and social enterprise shortfall and allow for a private video counselling option. (CEO, Child, youth and family service)

The inability to conduct fundraising events, and a lack of capacity to adapt and introduce ‘virtual’ fundraising initiatives due to the high workload demands of COVID, we are going to be significantly impacted on our projected fundraising and philanthropy targets in the next 18 months. (Senior manager, Child, youth and family service)

Some argued that businesses and philanthropic funders needed to offer greater levels of financial support to community organisations during this time, that there needs to be greater certainty around this funding.

Grants from philanthropy and business that provide for core costs. (Project officer, Legal, advocacy or peak body)

Funding from philanthropic and finance sectors would be welcome but needs to be ongoing not just short-term help. (Senior manager, Financial support and counselling service)

More support from philanthropy and the corporate sector to help us improve male lives and health. (Board member, Health related service)

Philanthropy seems to have halted existing funding opportunities (many, after submissions had been prepared!) and many have either postponed this funding or reallocated funding to COVID-specific...
measures - but as we have continued to deliver essential services throughout and in fact had to increase staffing numbers to cope and be prepared in case of an outbreak, we have not been eligible to apply for these funds. (Senior manager, Child, youth and family service)

Others called on businesses to offer in-kind supports to their local communities:

Businesses to provide mentoring for those who are unemployed to develop skills. This does not have to be paid, initially. (Team leader, Migrant and multicultural service)

I would like more support from local business for donations of materials to local schools so that they could participate in practical projects in schools and the community. (Practitioner, Employment, education and training provider)

With regard to government funding, in a pandemic climate of great uncertainty and change, participants called for this source of funding to be long term and secure, so that community sector organisations can plan for ongoing provision of community support.

Long term funding arrangements, a lot of us have lost our contracts but the need to help young people is not going away and will be around for quite a while after the pandemic, we need to make sure we can address those needs by being able to employ people long term. (Coordinator, Child, youth and family service)

We need longer term government contracts to provide stability/confidence. (CEO, Community based or community development organisation)

More long term funding for financial counsellors. Every year I have to close cases and get ready to close service until the next funding round. The stress can be very overwhelming. (Practitioner, Financial support and counselling service)

Others noted that operating in the everchanging context of the COVID-19 pandemic, meant that contractual requirements need greater flexibility than usual.

Be flexible with funding, as long as outcome is achieved outputs should be flexible. Key performance indicators need to be adaptable to change. (Senior manager, Child, youth and family service)

There needs to be flexibility about deliverables and funding, as some tasks decreased during COVID19 due to social distancing and health restrictions, but other tasks increased or were more time consuming with staff working from home. (Coordinator, Health related service)
9.3.1 Employment conditions, workplace stress and burnout

A number of respondents pointed to the particularly challenging experience of working in the community sector during the pandemic. They felt that, more than ever, employment conditions for sector workers needed improving. While raising issues around adequate pay and career trajectories, they particularly discussed a need to alleviate some of the stresses these workers have faced.

All of us (peaks included) are working beyond capacity and cannot meet every demand from the sector, no matter how worthy or needed. We are all similarly under-resourced, and committed, but have to slow down or burn out. (Policy officer, Legal, advocacy or peak body)

I would like to see more recognition and support for front-line workers and the very challenging role they fulfil with additional access to clinical supervision, training and support and a more positive overall focus at a high level for the work that we do. (Practitioner, Financial support and counselling)

Staff would cope better with the high demands of their job if they could take more leave. Although there is an apparent agreement that unpaid leave is allowed, it is rarely agreed. (Practitioner, Child, youth and family service)

Apart from financial support, there is a need for psychological and emotional support for workers in the community sector. (Board member, Community development organisation)

I have found the experience to be incredibly emotionally draining, exhausting but unable to take a break due to the ongoing demand for support to the staff and the organisation. There is also a relenting pace happening for information, and response that is a real challenge for very small organisations to maintain. I do worry about my own capacity, burn out and stress and that of my sector peers. (CEO, Health related service)

Our organisation is run by volunteers and yet our service is seen as essential - the expectation on us to provide a full-time, professional service never wavered despite an increase in demand on our time and services which has not waned. Our staff need to be paid!! (Coordinator, Child, youth and family service)

9.3.2 Recognition and collaboration

Finally, many participants in the survey wrote that they wished there was greater recognition of the contributions of the community sector workforce. They felt this would help sustain the sector through the COVID-19 pandemic.
Like the health sector, there has been an increase in demand on workers in community sector. I would like acknowledgement by government of the support provided by the sector and their willingness to respond, adapt and continue service delivery in difficult and challenging times. (Team leader, Financial support and counselling service)

Some argued for recognition in the form of meaningful acknowledgement from governments that the community sector has important knowledge, experience and insights into Australia’s social and economic needs at this time.

Both levels of government need to value the knowledge and expertise in the Sector in establishing economic recovery pathways, and the value of the community sector in rebuilding the economy. (Team leader, Legal, advocacy or peak body)

They need to have conversations with those who are providing services on the ground to the community. There is an expectation that our sector will fulfil many of the roles that government or business do not want and have the expectation that the community sector will provide services funded on the smell of an oily rag. (CEO, Legal, advocacy or peak body)

State and Federal governments need a Community Cabinet. We have seen in Victoria with the lockdown of the towers, the great risks in not involving the community more... I was involved in the HIV/AIDS pandemic response and the manner of government /community/ health working together was absolutely the winning ticket. (Policy officer, Child, youth and family service)

There needs to be better recognition and deeper understanding of what the sector does; why it is important; and the calibre of its workforce - so that it is more highly valued and considered as part of the solution in government strategies. (Senior manager, Health related services)
Conclusion

This report has explored the impact of the 2020 COVID-19 pandemic on Australia’s community service sector. 744 community sector workers from around the country completed the online survey in July 2020. Overwhelmingly, their responses point to an extremely challenging time for the sector, in which the complexity of working to address inequality and disadvantage has increased substantially. At the same time that the complexity of need in the community has increased, organisations have needed to implement significant changes to service delivery and in their workplaces in order to stay safe during the pandemic.

The community sector stepped into the COVID-19 crisis after an already very challenging start to the year. In October 2019, when the sector was previously surveyed, respondents were already feeling stretched and under-resourced for the work they did to support communities which they said were experiencing growing poverty and complexity of need (Cortis and Blaxland, 2020). Then, many parts of the country were caught in the widespread bushfires of the summer of 2019-20. In July 2020, two-fifths of respondents said their organisation was working with communities affected by the bushfires, and this was the case for more than half of the organisations based in NSW and the ACT. At the same time, Government guidelines on operating in the COVID-19 pandemic resulted in a massive reorganisation of service delivery, away from face-to-face towards more remote delivery models. 96% of respondents said that at least some part of their organisation had moved away from face-to-face delivery and 89% of respondents experienced changes in their working arrangements.

Most respondents to the survey said that the Australian Government’s initiatives to provide economic support during the COVID-19 pandemic had been positive for some of the people in their communities. Four of out of five respondents said that JobKeeper had been positive for clients and communities they work with, and the same proportion said the same of the Coronavirus Supplement for income support recipients. However, concern that key groups, including people on temporary protection visas and casual workers ineligible for JobKeeper, in the community were experiencing acute poverty because they were not eligible for these supports was common. Many were concerned about future reductions of JobKeeper and the Coronavirus Supplement, expecting that this would place more members of the communities they serve in poverty.

Despite the benefits brought by government initiatives, a majority of respondents said that complexity of need among people who use their services had increased (76%) and nearly two-thirds said that levels of demand had increased since March 2020. Comments from respondents in the survey pointed to high levels of stress in the community due to the challenges and uncertainty of COVID-19, leading to an escalation of mental health difficulties, domestic and family violence and alcohol and
drug misuse. At the time of writing, these challenges appear likely to be exacerbated due to the unfolding crisis in Victoria, and the reintroduction of restrictions in through late July and August 2020.

The survey findings attest to the intense pressures under which community sector organisations have been operating through early 2020. While government funding has generally stayed steady or increased, organisational leaders reported that funding from other sources has reduced for many organisations. Two out of five organisational leaders said they were less able to meet their contracted deliverables since the start of the pandemic in March 2020. They adapted by drawing on financial reserves, making staffing changes and applying for JobKeeper if they were eligible. They appreciated government offering flexibility with contracted deliverables (58%) and additional funding flexibility (53%).

Organisational leaders valued being asked for advice by government during the COVID-19 crisis (44%). Certainly, respondents to the survey had many suggestions on what was needed into the future to sustain the community sector. Firstly, they would have the Australian Government maintain current levels of JobKeeper and Coronavirus Supplements, as support for the community during economic adversity reduces pressure on the community sector. In this vein, many also suggested that groups currently excluded should become eligible for support under the social safety net. Others said the community sector needed support for the enormous organisational change and challenges to staff wellbeing they had experienced during such a difficult time.

The findings of this survey of the community sector during the COVID-19 pandemic, shows a workforce that cares deeply about the communities with which it works. Respondents have described a period of much complexity, unpredictability and challenge, through which the community sector has worked to support community members in the face of an extraordinary crisis. As one coordinator from a housing and homelessness service said,

It is difficult work, but we want to be there. We just need adequate assistance.
References


Appendix A  Outline of survey method

Like the 2019 Australian Community Sector Survey, this snapshot of the sector during COVID-19 was designed to capture information based on the experiences and perspectives of community sector staff and leaders. Survey design was informed by the Australian Community Sector Survey, observation of trends and initiatives associated with COVID-19, and sector input about priority issues and information gaps. As for ACSS 2019, within the COVID-19 survey, a separate module of questions was embedded for organisational leaders only, using display logic. Additional questions for leaders related to issues for the service overall, such as changes in revenue sources and workforce issues in the context of COVID-19, which may not be apparent to other staff.

The survey was conducted online using Qualtrics. As there is no national list of all relevant community sector organisations from which to draw a sample, we sought to reach respondents via COSS members, peak bodies, websites and relevant social media, to ensure the widest possible reach. The COSS network were asked to share the survey with organisations in their network, and to distribute the link to staff. In addition, we sought to encourage participation by offering an incentive in the form of an opportunity to go into the draw to win one of three $100 shopping vouchers. The survey method was approved by the University of New South Wales Human Research Ethics Committee. Response analysis is in Appendix B.
# Appendix B  Response analysis

## Table B. 1  Respondents’ role and jurisdiction

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## Table B. 2  Respondents’ locations

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### Table B. 3 Main service type

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<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ageing, disability and carers</td>
<td>91</td>
<td>12.2</td>
</tr>
<tr>
<td>Health related services</td>
<td>129</td>
<td>17.3</td>
</tr>
<tr>
<td>Child, youth and family services</td>
<td>153</td>
<td>20.6</td>
</tr>
<tr>
<td>Housing and homelessness</td>
<td>71</td>
<td>9.5</td>
</tr>
<tr>
<td>Legal, Advocacy and Peaks</td>
<td>83</td>
<td>11.2</td>
</tr>
<tr>
<td>Financial and employment services</td>
<td>77</td>
<td>10.3</td>
</tr>
<tr>
<td>Community development</td>
<td>71</td>
<td>9.5</td>
</tr>
<tr>
<td>Other service type / multiple service types</td>
<td>69</td>
<td>9.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>744</td>
<td>100</td>
</tr>
</tbody>
</table>

### Table B. 4 Size of organisation (number of staff)

<table>
<thead>
<tr>
<th>Size of Organisation</th>
<th>n</th>
<th>%</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very small: Less than 10 staff</td>
<td>157</td>
<td>21.2</td>
<td>21.2</td>
</tr>
<tr>
<td>Small: 10 to &lt;20 staff</td>
<td>127</td>
<td>17.2</td>
<td>38.4</td>
</tr>
<tr>
<td>Medium: 20 to &lt;50 staff</td>
<td>95</td>
<td>12.9</td>
<td>51.3</td>
</tr>
<tr>
<td>Large: 50 to &lt;100 staff</td>
<td>78</td>
<td>10.6</td>
<td>61.8</td>
</tr>
<tr>
<td>Very large: 100 or more staff</td>
<td>282</td>
<td>38.2</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>744</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

Note: Includes staff who were part time, casual and full time. Head count (not FTE)

### Table B. 5 Size of organisation (income) (organisational leaders only)

<table>
<thead>
<tr>
<th>Size of Income</th>
<th>n</th>
<th>%</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under $50,000</td>
<td>3</td>
<td>1.1</td>
<td>1.1</td>
</tr>
<tr>
<td>$50,000 to &lt;$250,000</td>
<td>7</td>
<td>2.7</td>
<td>3.8</td>
</tr>
<tr>
<td>$250,000 to &lt;$500,000</td>
<td>25</td>
<td>9.5</td>
<td>13.3</td>
</tr>
<tr>
<td>$500,000 to &lt;$1 million</td>
<td>39</td>
<td>14.8</td>
<td>28.1</td>
</tr>
<tr>
<td>$1 million to &lt;$5 million</td>
<td>78</td>
<td>29.7</td>
<td>57.8</td>
</tr>
<tr>
<td>$5 million to &lt;$10 million</td>
<td>27</td>
<td>10.3</td>
<td>68.1</td>
</tr>
<tr>
<td>$10 million or more</td>
<td>66</td>
<td>25.1</td>
<td>93.2</td>
</tr>
<tr>
<td>Not sure</td>
<td>13</td>
<td>4.9</td>
<td>98.1</td>
</tr>
<tr>
<td>I prefer not to say</td>
<td>5</td>
<td>1.9</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>263</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>
### Table C.1  Staff who reported that the overall level of demand for their service had increased, decreased, or stayed the same since March 2020, by main service type

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Increased significantly</th>
<th>Increased</th>
<th>Stayed the same</th>
<th>Decreased</th>
<th>Decreased significantly</th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ageing, disability and carers (n=89)</td>
<td>17%</td>
<td>29%</td>
<td>33%</td>
<td>15%</td>
<td>7%</td>
<td>100%</td>
</tr>
<tr>
<td>Health related services (n=127)</td>
<td>21%</td>
<td>44%</td>
<td>25%</td>
<td>9%</td>
<td>1%</td>
<td>100%</td>
</tr>
<tr>
<td>Child, youth and family services (n=152)</td>
<td>15%</td>
<td>45%</td>
<td>22%</td>
<td>13%</td>
<td>5%</td>
<td>100%</td>
</tr>
<tr>
<td>Migrant and multicultural services (n=16)</td>
<td>56%</td>
<td>25%</td>
<td>13%</td>
<td>0%</td>
<td>6%</td>
<td>100%</td>
</tr>
<tr>
<td>Aboriginal and Torres Strait Islander services (n=21)</td>
<td>33%</td>
<td>43%</td>
<td>10%</td>
<td>10%</td>
<td>5%</td>
<td>100%</td>
</tr>
<tr>
<td>Housing and homelessness (n=69)</td>
<td>29%</td>
<td>38%</td>
<td>17%</td>
<td>13%</td>
<td>3%</td>
<td>100%</td>
</tr>
<tr>
<td>Legal, Advocacy and Peaks (n=81)</td>
<td>27%</td>
<td>49%</td>
<td>17%</td>
<td>5%</td>
<td>1%</td>
<td>100%</td>
</tr>
<tr>
<td>Employment, education and training services (n=31)</td>
<td>26%</td>
<td>39%</td>
<td>10%</td>
<td>7%</td>
<td>19%</td>
<td>100%</td>
</tr>
<tr>
<td>Financial support and counselling (n=45)</td>
<td>22%</td>
<td>13%</td>
<td>18%</td>
<td>22%</td>
<td>24%</td>
<td>100%</td>
</tr>
<tr>
<td>Community development (n=69)</td>
<td>13%</td>
<td>42%</td>
<td>17%</td>
<td>16%</td>
<td>12%</td>
<td>100%</td>
</tr>
<tr>
<td>Other service types / multiple service types (n=25)</td>
<td>24%</td>
<td>56%</td>
<td>12%</td>
<td>4%</td>
<td>4%</td>
<td>100%</td>
</tr>
<tr>
<td>All (n=725)</td>
<td>21%</td>
<td>40%</td>
<td>21%</td>
<td>12%</td>
<td>6%</td>
<td>100%</td>
</tr>
</tbody>
</table>
Table C. 2  Staff who reported that complexity of need among service users had increased, decreased, or stayed the same since March 2020, by main service type

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Increased significantly</th>
<th>Increased</th>
<th>Stayed the same</th>
<th>Decreased</th>
<th>Decreased significantly</th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ageing, disability and carers (n=87)</td>
<td>12%</td>
<td>46%</td>
<td>36%</td>
<td>6%</td>
<td>1%</td>
<td>100%</td>
</tr>
<tr>
<td>Health related services (n=121)</td>
<td>26%</td>
<td>51%</td>
<td>23%</td>
<td>0%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>Child, youth and family services (n=150)</td>
<td>21%</td>
<td>59%</td>
<td>17%</td>
<td>3%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>Migrant and multicultural services (n=15)</td>
<td>53%</td>
<td>40%</td>
<td>7%</td>
<td>0%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>Aboriginal and Torres Strait Islander services (n=21)</td>
<td>29%</td>
<td>57%</td>
<td>5%</td>
<td>10%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>Employment, education and training (n=28)</td>
<td>39%</td>
<td>54%</td>
<td>4%</td>
<td>4%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>Housing and homelessness (n=67)</td>
<td>16%</td>
<td>55%</td>
<td>24%</td>
<td>3%</td>
<td>2%</td>
<td>100%</td>
</tr>
<tr>
<td>Legal, Advocacy and Peaks (n=76)</td>
<td>24%</td>
<td>59%</td>
<td>16%</td>
<td>1%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>Financial support and counselling services (n=45)</td>
<td>29%</td>
<td>38%</td>
<td>20%</td>
<td>11%</td>
<td>2%</td>
<td>100%</td>
</tr>
<tr>
<td>Community development (n=66)</td>
<td>9%</td>
<td>67%</td>
<td>23%</td>
<td>2%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>Other service types / multiple service types (n=25)</td>
<td>24%</td>
<td>52%</td>
<td>24%</td>
<td>0%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>All (n=701)</td>
<td>22%</td>
<td>54%</td>
<td>21%</td>
<td>3%</td>
<td>0%</td>
<td>100%</td>
</tr>
</tbody>
</table>
### Table C. 3  Staff who reported change in the number of clients their service was supporting, since March 2020, by main service type

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Increased significantly</th>
<th>Increased</th>
<th>Stayed the same</th>
<th>Decreased</th>
<th>Decreased significantly</th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ageing, disability and carers (n=87)</td>
<td>7%</td>
<td>40%</td>
<td>32%</td>
<td>16%</td>
<td>5%</td>
<td>100%</td>
</tr>
<tr>
<td>Health related services (n=117)</td>
<td>17%</td>
<td>40%</td>
<td>27%</td>
<td>12%</td>
<td>3%</td>
<td>100%</td>
</tr>
<tr>
<td>Child, youth and family services (n=152)</td>
<td>10%</td>
<td>43%</td>
<td>30%</td>
<td>16%</td>
<td>2%</td>
<td>100%</td>
</tr>
<tr>
<td>Migrant and multicultural (n=15)</td>
<td>33%</td>
<td>53%</td>
<td>0%</td>
<td>7%</td>
<td>7%</td>
<td>100%</td>
</tr>
<tr>
<td>Aboriginal and Torres Strait Islander services (n=20)</td>
<td>10%</td>
<td>55%</td>
<td>25%</td>
<td>10%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>Employment, education and training (n=29)</td>
<td>21%</td>
<td>35%</td>
<td>24%</td>
<td>14%</td>
<td>7%</td>
<td>100%</td>
</tr>
<tr>
<td>Housing and homelessness (n=67)</td>
<td>24%</td>
<td>42%</td>
<td>21%</td>
<td>12%</td>
<td>2%</td>
<td>100%</td>
</tr>
<tr>
<td>Legal, Advocacy and Peaks (n=62)</td>
<td>11%</td>
<td>47%</td>
<td>32%</td>
<td>1%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>Financial and employment services (n=45)</td>
<td>18%</td>
<td>18%</td>
<td>29%</td>
<td>18%</td>
<td>18%</td>
<td>100%</td>
</tr>
<tr>
<td>Community development (n=62)</td>
<td>7%</td>
<td>37%</td>
<td>26%</td>
<td>23%</td>
<td>8%</td>
<td>100%</td>
</tr>
<tr>
<td>Other service types / multiple service types (n=24)</td>
<td>25%</td>
<td>42%</td>
<td>21%</td>
<td>4%</td>
<td>8%</td>
<td>100%</td>
</tr>
<tr>
<td>All (n=680)</td>
<td>14%</td>
<td>40%</td>
<td>27%</td>
<td>14%</td>
<td>4%</td>
<td>100%</td>
</tr>
</tbody>
</table>
Figure C. 1  Proportion of respondents who reported the Coronavirus Supplement for JobSeeker and other income support payments was having a positive impact on clients and communities, by main service type (n=610)

Figure C. 2  Proportion of respondents who reported JobKeeper payments were having a positive impact on clients and communities, by main service type (n=595)
Figure C. 3 Proportion of respondents who reported suspension of mutual obligation was having a positive impact on clients and communities, by main service type (n=537)

- Legal advocacy and peaks (n=59): 86%
- Financial support and counselling (n=36): 83%
- Other/multiple service type (n=20): 80%
- Aboriginal and Torres Strait Islander Services (n=14): 79%
- Health-related services (n=89): 75%
- Housing and homelessness (n=59): 75%
- Employment, education and training (n=23): 74%
- Child, youth and family services (n=112): 73%
- Migrant and multicultural services (n=14): 64%
- Community development (n=52): 64%
- Ageing, disability and carers (n=59): 42%
- All (n=537): 72%

Figure C. 4 Proportion of respondents reporting early access to superannuation for people experiencing financial hardship was having a positive impact on clients and communities, by main service type (n=441)

- Employment, education and training (n=12): 58%
- Other/multiple service type (n=14): 57%
- Financial support and counselling (n=36): 56%
- Housing and homelessness (n=46): 50%
- Child, youth and family services (n=96): 50%
- Health-related services (n=77): 48%
- Ageing, disability and carers (n=57): 44%
- Community development (n=35): 43%
- Migrant and multicultural services (n=14): 43%
- Legal advocacy and peaks (n=42): 41%
- Aboriginal and Torres Strait Islander Services (n=12): 25%
- All (n=441): 47%
Figure C. 5 Proportion of respondents who reported temporarily waiving fees for families using ECEC was having a positive impact on clients and communities, by main service type (n=540)

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Proportion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other/multiple service type (n=20)</td>
<td>95%</td>
</tr>
<tr>
<td>Aboriginal and Torres Strait Islander Services (n=17)</td>
<td>94%</td>
</tr>
<tr>
<td>Legal, advocacy and peaks (n=52)</td>
<td>89%</td>
</tr>
<tr>
<td>Employment, education and training (n=23)</td>
<td>87%</td>
</tr>
<tr>
<td>Financial support and counselling (n=38)</td>
<td>84%</td>
</tr>
<tr>
<td>Child, youth and family services (n=121)</td>
<td>81%</td>
</tr>
<tr>
<td>Housing and homelessness (n=52)</td>
<td>79%</td>
</tr>
<tr>
<td>Health-related services (n=92)</td>
<td>78%</td>
</tr>
<tr>
<td>Community development (n=52)</td>
<td>77%</td>
</tr>
<tr>
<td>Ageing, disability and carers (n=59)</td>
<td>59%</td>
</tr>
<tr>
<td>Migrant and multicultural services (n=14)</td>
<td>43%</td>
</tr>
<tr>
<td>All (n=540)</td>
<td>79%</td>
</tr>
</tbody>
</table>
Figure C.6  Respondents’ perception of the ability of their main service to meet demand since March 2020

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Always</th>
<th>Usually</th>
<th>Sometimes</th>
<th>Rarely</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial support and counselling (n=45)</td>
<td>40%</td>
<td>53%</td>
<td>7%</td>
<td>16%</td>
<td>5%</td>
</tr>
<tr>
<td>Health related services (n=129)</td>
<td>23%</td>
<td>54%</td>
<td>27%</td>
<td>13%</td>
<td>4%</td>
</tr>
<tr>
<td>Housing and homelessness (n=71)</td>
<td>23%</td>
<td>34%</td>
<td>27%</td>
<td>13%</td>
<td>4%</td>
</tr>
<tr>
<td>Ageing, disability and carers (n=89)</td>
<td>22%</td>
<td>52%</td>
<td>20%</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>Other/multi-service types (n=28)</td>
<td>21%</td>
<td>50%</td>
<td>18%</td>
<td>7%</td>
<td>4%</td>
</tr>
<tr>
<td>Child, youth and family services (n=153)</td>
<td>16%</td>
<td>47%</td>
<td>26%</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Employment, education and training (n=31)</td>
<td>13%</td>
<td>35%</td>
<td>39%</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Migrant and multicultural services (n=16)</td>
<td>13%</td>
<td>44%</td>
<td>51%</td>
<td>13%</td>
<td></td>
</tr>
<tr>
<td>Community development (n=70)</td>
<td>11%</td>
<td>57%</td>
<td>26%</td>
<td>4%</td>
<td></td>
</tr>
<tr>
<td>Legal, advocacy and peaks (n=81)</td>
<td>10%</td>
<td>56%</td>
<td>21%</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Aboriginal and Torres Strait Islander Services (n=6)</td>
<td>5%</td>
<td>67%</td>
<td>14%</td>
<td>14%</td>
<td></td>
</tr>
<tr>
<td>All (n=734)</td>
<td>19%</td>
<td>50%</td>
<td>22%</td>
<td>8%</td>
<td></td>
</tr>
</tbody>
</table>
Table C. 4  Whether full time equivalent (FTE) staff numbers in the organisation had changed in response to the COVID-19 crisis (n=244)

<table>
<thead>
<tr>
<th>Maintenance of FTE staffing levels</th>
<th>Less than $1 million</th>
<th>$1 to &lt;$5 million</th>
<th>$5 million or more</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maintained FTE staffing levels</td>
<td>51</td>
<td>68.9%</td>
<td>50</td>
<td>64.9%</td>
</tr>
<tr>
<td>Increased FTE staffing levels</td>
<td>8</td>
<td>10.8%</td>
<td>15</td>
<td>19.5%</td>
</tr>
<tr>
<td>Reduced FTE staffing levels</td>
<td>13</td>
<td>17.6%</td>
<td>12</td>
<td>15.6%</td>
</tr>
<tr>
<td>Not sure / not applicable</td>
<td>2</td>
<td>2.7%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>All</td>
<td>74</td>
<td>100.0%</td>
<td>77</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

Australia’s community sector and COVID-19
Supporting communities through the crisis