

Canterbury Wellbeing Index Summary 2016



Canterbury

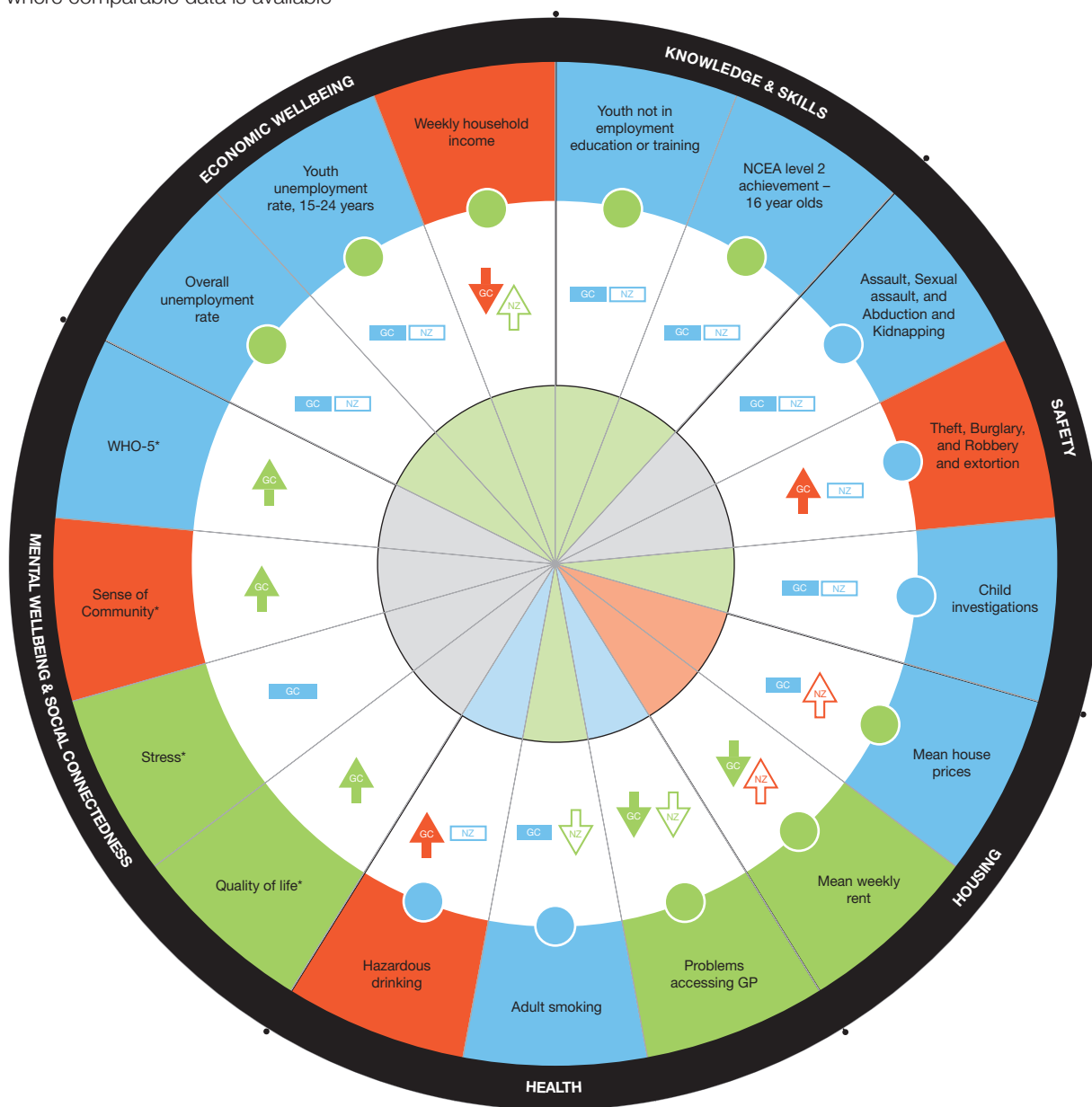
District Health Board

Te Poari Hauora o Waitaha

Changes in social recovery

Interpreting changes in greater Christchurch

- In the wheel diagram, the outer shading and coloured arrows and bars represent year on year changes (favourable, neutral, and less favourable) in greater Christchurch for each indicator, and for New Zealand where comparable data is available
- The coloured dot represents how greater Christchurch compares to New Zealand for the most recent 12 months of data
- The inner shading represents how the current situation in greater Christchurch compares to the pre-earthquake period of 2008-2010, where comparable data is available



	Direction of change in greater Christchurch for the most recent 12 months compared to the previous 12 months	Direction of change in New Zealand for the most recent 12 months compared to the previous 12 months	Greater Christchurch in comparison to New Zealand	Greater Christchurch compared to the pre-earthquake period
FAVOURABLE The change is considered to be favourable				
NEUTRAL Either there was no change or the significance of the change is unknown				
LESS FAVOURABLE The change is considered to be less favourable				

*For these indicators from the Canterbury Wellbeing Survey, the arrows and bars represent the change from the September 2015 survey to the April 2016 survey. The outer shading represents the overall trend of change from September 2012 to April 2016, rather than the year on year change. No New Zealand or pre-earthquake comparison is available.

Canterbury Wellbeing Index 2016

An overview

Overall

As the greater Christchurch region moves beyond the fifth anniversaries of the 2010 and 2011 earthquakes, there are many signs of progress in the community's recovery.

The majority of residents report a high overall quality of life and this has improved over time. Specific earthquake-related stressors have diminished overall over time, although some persist and others re-emerge in response to events such as aftershocks. Similarly, the positive impact of the earthquakes on community connectedness has diminished to some extent over time.

Residents are seeing tangible signs of progress in terms of access to new and repaired facilities, and rebuilt and repaired private dwellings.

The rebuild has generated substantial economic growth, and increased training and employment opportunities, which are reflected in employment and education data. However, there are some recent declines in the rates of improvement of such measures, for example youth unemployment and household income, which may be related to the slowing of rebuild-related economic growth.

The health system has responded to the ongoing challenges of high demand (particularly for mental health services) and reduced capacity (for example, a reduction in acute hospital beds), and services have been adapted and extended over time to meet these challenges.

Housing pressures remain a key stressor with some households still living in damaged or temporary accommodation, or continuing to negotiate settlement of their insurance claims. However, both rental and sales data indicate that some pressures have eased in the area of housing affordability over the last year, with an overall decrease in both rents and house sales prices.

Much is still to be done to regenerate greater Christchurch. Recovery is different for different population groups, which may be defined. For example in terms of where people live, their ethnicity, income, whether they are home owners or renters, or the status of their insurance claim. These differences may relate to pre-existing vulnerabilities, to specific impacts of the earthquakes, or to a combination of the two.

However, the overall picture for the last year is a positive one, with noteworthy increases in indicators relating to access to facilities and subjective wellbeing. As the earthquake recovery continues, ongoing efforts need to be made to identify emerging social trends and to monitor equity to inform the actions of local and national agencies.

Summary highlights

Knowledge and skills

Against a backdrop of considerable disruption, learners in greater Christchurch are achieving good academic outcomes. Early childhood education participation has been consistently higher than the national average since before the earthquakes. At the secondary school level, NCEA Level 2 or higher pass rates for 16-year-old students have been consistently higher than pre-earthquake pass rates with an overall pass rate for greater Christchurch of 66 per cent in 2009 compared to 75 per cent in 2015 (compared with 62 per cent and 73 per cent nationally). In Christchurch City, pass rates generally increased over time from 66 per cent in 2009 to 75 per cent in 2015. In 2015 the Waimakariri District pass rate was 76 per cent and Selwyn District students achieved a pass rate of 81 per cent.

In 2015, total intakes of tertiary students at Christchurch-based institutions remained 25 per cent down on 2010. When compared with 2014, international enrolments increased (15 per cent) in 2015 while domestic enrolments were down 14 per cent.

The proportion of young people aged 15–24 years who are not in employment, education or training (NEET) in greater Christchurch peaked after the February 2011 earthquakes at 16.8 per cent in March 2011. However, as young people in greater Christchurch have taken advantage of rebuild opportunities, the NEET rate has decreased overall and at March 2016, the greater Christchurch rate was 7.4 per cent, compared with 13.2 per cent across New Zealand. While the greater Christchurch NEET rate remains well below the national rate, the post-earthquake decrease appears to have levelled off and it will be important to watch this indicator in coming years.

Economic wellbeing

The work involved in the residential, commercial, and horizontal infrastructure repair and rebuild is contributing to employment opportunities and to economic growth. Prior to the earthquakes, the unemployment rate in greater Christchurch was tracking upwards but typically remained lower than the national unemployment rate. Between the pre-earthquake period (two years to March 2010) and the year to March 2016, the unemployment rate dropped by 26 per cent overall in greater Christchurch (to 3.2 per cent) compared with a 5 per cent increase across New Zealand (to 5.9 per cent). Over the same period, the unemployment rate for young people aged 15–24 in greater Christchurch dropped by 42 per cent, compared with a 2 per cent increase across New Zealand.

Household Labour Force Survey data suggest that young people are gaining employment opportunities from the rebuild and recovery. In March 2016, the unemployment rate for young people aged 15–19 years in greater Christchurch, was 11.2 per cent, compared with a pre-earthquake (March 2010) rate of 27.1 per cent and a national rate of 23.4 per cent. In the same month, the unemployment rate for young people aged 20–24 years in greater Christchurch was 5.8 per cent, compared with a pre-earthquake rate of 6.2 per cent (March 2010) and a national rate of 10.5 per cent. As with the NEET rates, the decrease in unemployment rates for greater Christchurch appears to have levelled off more recently.

Median gross household income is the dollar amount whereby half the households have an income above that amount, and half the households have an income below that amount (data are 'equivalised' based on household composition). Greater Christchurch had a 24 per cent increase in median weekly household income between the pre-earthquake period (of 2008 to 2010) and 2014 compared with a 14 per cent increase across New Zealand. The majority of the increase for greater Christchurch (\$228 of a total \$283) occurred between 2012 and 2014. In 2015, however, median weekly income dropped by three per cent for greater Christchurch from \$1409 to \$1361, while it continued to grow nationally.

Housing

Alongside an increasing proportion of settled earthquake dwelling claims, both rental and sales data indicate that housing affordability pressures have eased over the last year.

By the end of the first quarter of 2016, 140,202 of the approximately 141,917 property claims under the EQC cap had been settled, as had 19,998 of the 25,753 over-cap claims lodged with private insurers. This is a total of 160,200 properties, representing 95.5 per cent of the approximately 167,670 properties with earthquake dwelling claims in greater Christchurch.

Greater Christchurch experienced substantial increases in mean house sale prices between 2010 and 2015, however between March 2015 and March 2016, house sales prices decreased across most areas of greater Christchurch. In the areas that saw increases in mean house prices, growth had slowed substantially. The post-earthquake increase in mean weekly rent in greater Christchurch slowed in 2015, with mean weekly rent decreasing overall in the year to June 2016. This decrease coincides with and

Housing

may have been influenced by the steady decrease in the estimated number of households displaced due to residential repairs and rebuilds as EQC and insurance claims are settled. As at April 2016 greater Christchurch rent levels were below the national level and third to Auckland and Wellington.

Access to social housing has improved, with 93 per cent of Christchurch City Council housing units habitable in January 2016 and 99 per cent of Housing New Zealand Corporation units habitable at February 2016.

Health and wellbeing

Keeping well and having access to health services

The proportion of Canterbury respondents reporting excellent, very good, or good self-rated health in the 2014/15 New Zealand Health Survey (NZHS) was 87.5 per cent compared to 90.8 per cent in 2006/07 and 2013/14. There was no statistically significant difference between proportions of Canterbury respondents and all of New Zealand respondents reporting excellent, very good, or good self-rated health in 2014/15.

Total numbers of acute medical admissions have been increasing over time and have a seasonal pattern of increases in the winter months. Previous research has found that there was a statistically significant fall in the seasonally adjusted admission rate after the February 2011 earthquake from 6.59/1000 people to 5.83/1000 people (a lower age-standardised acute medical admission rate than nationally).

With respect to primary care, for the 2014/15 year, the proportion of respondents from the Canterbury DHB region who reported that they were unable to get an appointment at their usual medical centre within 24 hours (12.8 per cent) was statistically significantly lower than the national proportion of 16.8 per cent. Despite small changes over time, access to general practice services in Canterbury appears generally similar to access nationally.

Wellbeing is also influenced by a wide range of environmental, social, and behavioural risk factors, such as smoking and obesity. The prevalence of tobacco smoking is slowly declining in Canterbury. Results from the NZHS show that the rate of adult smoking (at least monthly) in the Canterbury region decreased from 18.4 per cent in 2006/07 to 13.1 per cent in 2014/15 (16.6 per cent nationally). Similarly, NZHS results indicate that the proportion of Canterbury young people aged 15–24 years who currently smoke at least monthly has declined from 18.6 per cent in 2006/07 to 10.9 per cent in 2014/15, although this decline is not statistically significant. These data are also consistent with Census data, which have shown that the proportion of daily smokers in Canterbury has decreased from 18.8 per cent in 2006 to 14.5 per cent in 2013.

The NZHS also reports obesity data, and these indicate that the prevalence of obesity in Canterbury decreased from 30.7 per cent in 2012/13 to 25.7 per cent in 2014/15 (30.7 per cent nationally), slightly higher than the 2006/07 prevalence of 24.3 per cent.

Mental wellbeing

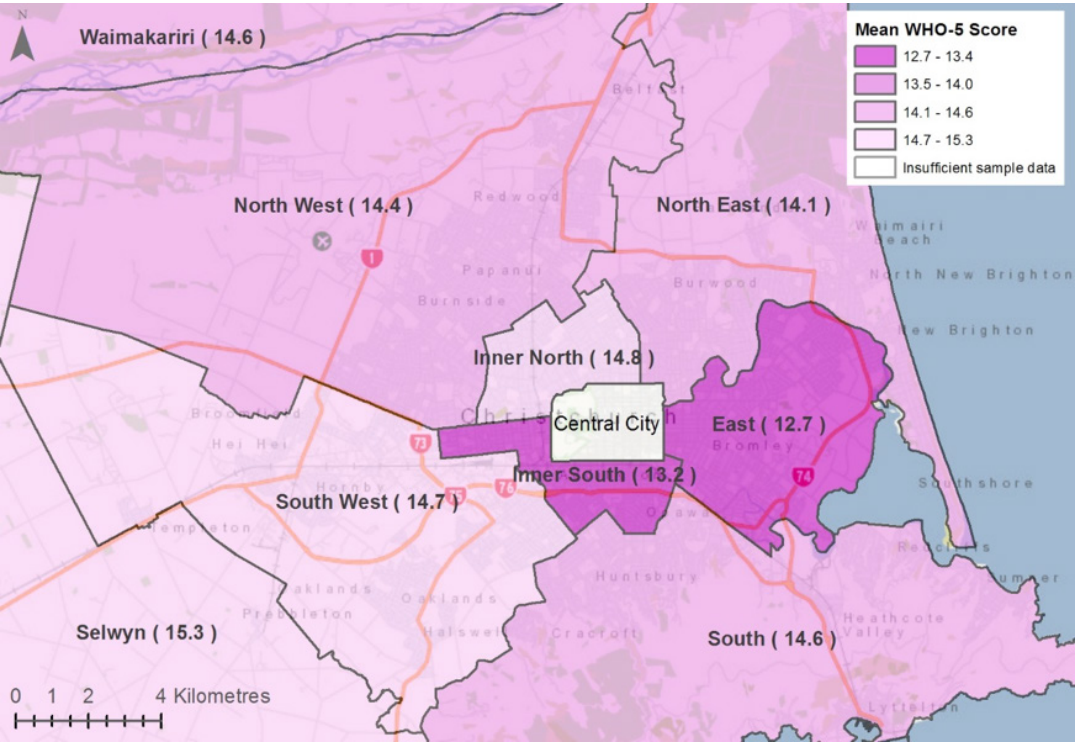
International evidence indicates that people's psychological and social recovery can take between five and ten years after a major disaster. In greater Christchurch there is evidence that many groups remain impacted by the earthquakes and the multiple stressors that have emerged since.

Eight in ten (82 per cent) of those surveyed in the latest Canterbury Wellbeing Survey (April 2016) rate their quality of life positively (23 per cent rate it as extremely good, while 59 per cent rate it as good). This is a statistically significant increase since September 2015 and continues the statistically significant upward trend that has been evident since September 2012. Some 5 per cent rate their quality of life poorly (4 per cent as poor and one percent as extremely poor), which is consistent with previous surveys.

Just under three quarters (73 per cent) of April 2016 Canterbury Wellbeing Survey respondents have experienced stress at least sometimes in the past 12 months that has had a negative effect on them (a result which has been showing a significant gradual downward trend since the earthquakes – 80 per cent in September 2012 to 73 per cent in April 2016). However, one in five (21 per cent) say that they experience this stress most or all of the time (up from 19 per cent in April 2015 but not statistically different).

Map 1 shows that there are geographic differences in wellbeing across greater Christchurch (as measured by the WHO-5 scale, a widely used tool for assessing self-reported emotional wellbeing). The WHO-5 produces a raw score ranging from 0 (lowest level of wellbeing) to 25 (the highest level of wellbeing). Mean WHO-5 scores in April 2016 were lowest (indicating relatively lower wellbeing) in the Inner South and East and highest in the Inner North, South West and in the Selwyn District.

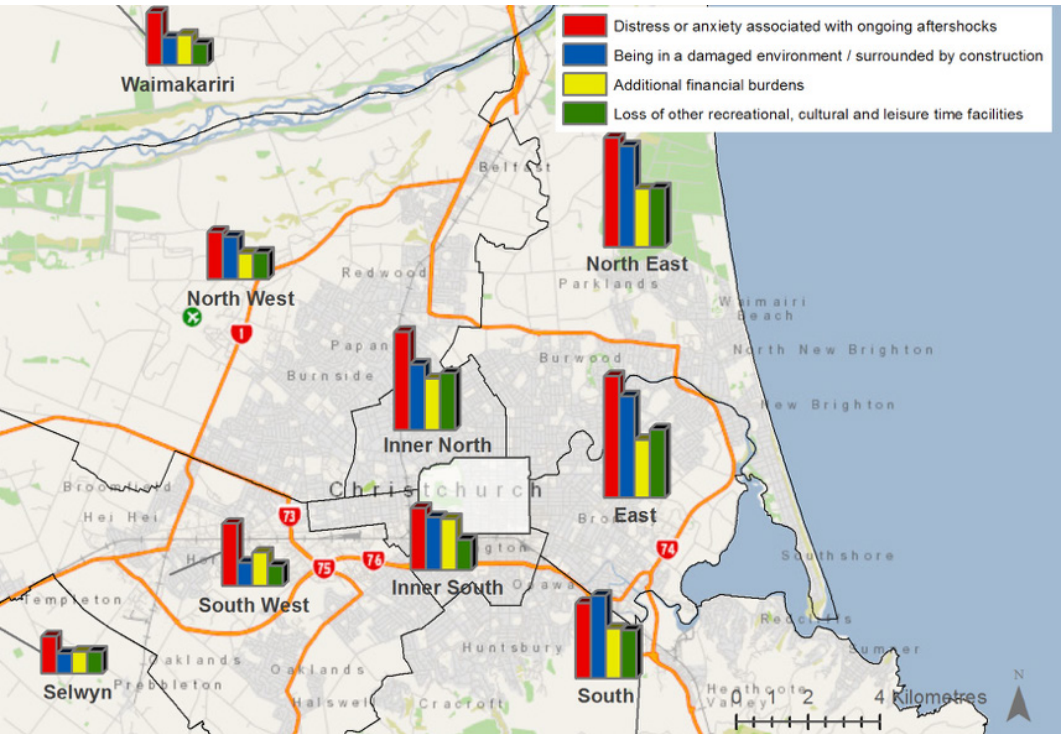
Map 1 Mean WHO-5 score by geographic area, April 2016, zoned by residential address



The overall mean WHO-5 score for greater Christchurch showed a small but statistically significant increase between September 2015 and April 2016.

Map 2 displays the prevalence of the ‘top four’ stressors reported by Canterbury Wellbeing Survey respondents in April 2016, specifically: stress or anxiety associated with ongoing aftershocks, being in a damaged environment and / or surrounded by construction work, additional financial burdens, and loss of other recreational, cultural and leisure time facilities. There are geographic differences between the impacts of these issues on people living in different parts of greater Christchurch. In general, a higher proportion of people living in the North East and East have reported being impacted by the top four negative issues, followed by the Inner North, South and Inner South. In general, a lower proportion of people living in the West of greater Christchurch have reported being impacted by the top four negative issues.

Map 2: The four most prevalent stressors reported by Canterbury Wellbeing Survey respondents by geographic area, April 2016, zoned by residential address



Mental wellbeing

There has been a 21 per cent increase for the 18-64 year age group in those accessing mental health services from the 12 months prior to the February earthquake (February 2010 to January 2011) to the most recent 12 months of data (April 2015 to March 2016). For the 0-17 year age group, there has been a 27 per cent increase in those accessing mental health services from the 12 months prior to the February earthquake (February 2010 to January 2011) to the most recent 12 months of data (April 2015 to March 2016). For all age groups combined, for the most recent year of data, the year to March 2016 compared to the year to March 2015, 1.3 per cent fewer clients accessed mental health services.

For the period from 2011 to 2015 total scores on the Health of the National Outcome Scale (or HoNOS, which measures both number and severity of symptoms) on admission for those attending community mental health services have been higher in Canterbury than nationally. Higher HoNOS scores indicate higher levels of symptoms, distress, and dysfunction associated with mental health difficulties, while lower scores indicate fewer symptoms or severity.

Safety

In greater Christchurch, the New Zealand Police recorded a significant fall in total crime in the year following the September 2010 earthquake. There are likely to be many reasons for this initial reduction in criminal behaviour, and total crime patterns in greater Christchurch now appear broadly similar to New Zealand overall.

Reported monthly victimisation data from Statistics New Zealand for assault, serious assault, and abduction and kidnapping show no obvious trend of increasing or decreasing victimisations for the period July 2014 to May 2016 (the most recent data available). However, for theft and burglary victimisation data, there appears to be an increasing trend in greater Christchurch.

Monthly proceedings data for assaults from Statistics New Zealand for the period from July 2014 to May 2016 highlight two points: that the 15-24 year age group accounts for the highest number of proceedings, and that the number of proceedings then decreases with each increase in 10-year age band. There are no apparent trends over time during the relatively short time period of the data.

Assaults in dwellings (a category that primarily includes incidents of family violence) have shown a different pattern from assaults in public places. Overall in greater Christchurch there was a 20 per cent increase in dwelling assaults between the two years to December 2009 and the 2014 year. Nationally there was a 4 per cent increase over the same period. Similarly, when comparing the pre-earthquake period to the 12 months to June 2014, child investigations (notifications requiring further action which are generated by concerns about child abuse, or the behaviour of a child or young person) increased by 11 per cent, compared with a 3 per cent increase across New Zealand. However, child investigations have shown a decreasing trend since 2013 in Canterbury and across New Zealand.

Social connectedness

People's connections to their communities are important, particularly in recovery after disaster. Ninety seven per cent of respondents to the April 2016 Canterbury Wellbeing Survey indicated that they have 'someone to turn to'. Family (91 per cent) and friends (66 per cent) continue to be the most common forms of support that residents use in times of need. However, since September 2012, the proportion of Canterbury Wellbeing Survey respondents feeling 'a sense of community' (agree or strongly agree) has trended downwards to below 50 per cent at April 2016. This decline (from 55 per cent in September 2012 to 49 per cent in April 2016) is statistically significant.

In April 2016, only 32 per cent of those living in the East reported a sense of community, compared with 58 per cent in the South (down from 39 per cent and 64 per cent respectively, in September 2015). Residents of Selwyn and Waimakariri districts continue to feel a stronger sense of community than people living in Christchurch City.

About the Canterbury Wellbeing Index

Why do we need the Canterbury Wellbeing Index?

The Canterbury Wellbeing Index was developed by the Canterbury Earthquake Recovery Authority (CERA) with the support of multiple agencies to track the progress of the social recovery in greater Christchurch. Indicators are used to identify emerging social trends and issues to enable agencies to respond in a timely way. The Canterbury Wellbeing Index is also prepared to provide the greater Christchurch community with accurate and comprehensive information about the social recovery. With the disestablishment of CERA in April 2016, social recovery monitoring was inherited by the Ministry of Health and delegated to the Canterbury District Health Board (Canterbury DHB), which is now responsible for producing the Canterbury Wellbeing Index and Canterbury Wellbeing Survey (formerly the CERA Wellbeing Survey).

The Canterbury Wellbeing Index has been published annually since June 2013. Current and past results can be accessed in full at www.cph.co.nz/your-health/canterbury-wellbeing-index/

How was the Canterbury Wellbeing Index developed?

In late 2011, CERA convened a series of meetings with representatives of 28 agencies to identify the social indicators that should be tracked through the recovery. Expert advice was received through the literature review of international best practice “Designing indicators for measuring recovery from disasters”, undertaken by Canterbury DHB.

Administrative and survey data from multiple agencies are requested and collated to form the basis of the indicators in the Canterbury Wellbeing Index. Where possible, indicators are tailored to the greater Christchurch boundaries comprised of Christchurch City, and the Selwyn and Waimakariri districts.

In addition, the six-monthly Canterbury Wellbeing Survey was developed to provide recovery focused data on the wellbeing of the residents of greater Christchurch. It forms a significant part of the Canterbury Wellbeing Index. Draft indicators are subjected to peer review

and quality assurance processes, and agencies responsible for the indicators review the content prior to public release.

The Canterbury Wellbeing Index is a collaborative project across many government and non-government agencies: Action on Smoking and Health; Canterbury District Health Board; Canterbury Earthquake Temporary Accommodation Service; Child, Youth and Family; Christchurch City Council; Creative New Zealand; Department of Corrections; Department of Internal Affairs; Department of Labour; Earthquake Commission; Electoral Commission; Energy Efficiency and Conservation Authority; Environment Canterbury; Housing New Zealand Corporation; Ministry of Business, Innovation and Employment; Ministry of Civil Defence and Emergency Management; Ministry of Culture and Heritage; Ministry of Education; Ministry of Health; Ministry of Justice; Ministry of Pacific Island Affairs; Ministry of Social Development; New Zealand Police; Pegasus Health; Selwyn District Council; Sports Canterbury; Sports New Zealand; Statistics New Zealand; Te Pou; Te Puni Kōkiri; Te Rūnanga o Ngāi Tahu; and Waimakariri District Council.

What happens in response to the trends identified in the Canterbury Wellbeing Index?

Emerging trends and issues identified through the Canterbury Wellbeing Index are used to inform decision-making by the greater Christchurch Urban Development Strategy; intersectoral Psychosocial Governance Group; Psychosocial Committee; and government and non-government agencies to protect and promote the wellbeing of the greater Christchurch community. In addition, Canterbury Wellbeing Index data is used across agencies to plan the delivery of the psychosocial services under the Community in Mind psychosocial strategy for greater Christchurch.

Methodological considerations

The selection and presentation of measures in the Canterbury Wellbeing Index is informed by the international indicator literature. In order to meaningfully

consider both any impact of the earthquakes on any given measure, and the current wellbeing of the greater Christchurch population, time series are presented from prior to the earthquakes to the present, national comparisons are presented where feasible and statistical significance testing (95 per cent confidence intervals or trend analysis, for time series) is noted where it has been provided with data. Important known influences on measures are also noted in the text to aid interpretation.

Some data sources are available only periodically (for example, Census data) or may be discontinued (for example, when a survey has been ceased). Similarly, time series may be broken when an agency's method of collecting and / or reporting its data is altered to the extent that comparisons prior to and after this change are no longer valid. In addition, comparability can be affected by subtle differences in methodology, either over time or between surveys. All such instances are noted and discussed in the relevant sections.

The Index provides a comprehensive picture of the wellbeing of greater Christchurch. While focused on the impact of the earthquakes on wellbeing, attribution (the factors influencing or driving any given measure) is complex and varies over time and between measures. While the role of the earthquakes is discussed where appropriate, the Index serves as a current snapshot in time of the wellbeing of the greater Christchurch community, irrespective of the factors driving the data.

Future direction

As the Canterbury Wellbeing Index continues to develop, greater emphasis will be placed on factors that shape or influence health and wellbeing and the distribution (and impact of such distribution) of these factors across different population groups. This shift in emphasis will focus on ethnicity and socioeconomic status in the first instance and will require ethnicity and socioeconomic deprivation breakdowns of key measures, using methods such as age standardised rates (where relevant) and statistical significance testing. This work will be prioritised, and implemented incrementally.
