Identifying the non-structural impacts of the 2010-2011 Canterbury earthquake sequence on the Hurunui District

A disaster is a sudden, calamitous event that causes serious disruption of the functioning of a community or a society causing widespread human, material, economic and/or environmental losses that exceed the ability of the affected community or society to cope using its own level of resources – United Nations
Terms of Reference

1. Identify non-structural impacts of the earthquakes on the Hurunui District
2. The report is to include stakeholder identification and engagement strategies
3. The report is limited in scope to the effects on the Hurunui District
4. The draft report to be completed by May 31, 2013.

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“After the February earthquake our son in law and his cousin...were called in to assist with re-establishing communications for the police, and another young friend served with St John. We are very proud of them for risking their lives to help others during the aftershocks and of their young wives who stayed behind caring for their children.” – Rae Graham, Waipara
Hurunui District Council Community Development Program: Earthquake Survey 2013

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1.0 Executive summary

“We are dealing with many more cases of anxiety, depression and social isolation, particularly in the Hurunui District, but we don’t have the resources.”

The Canterbury Earthquake Recovery Authority (CERA) is the agency leading and coordinating the recovery of greater Christchurch following the September 2010 and February 2011 earthquakes. The area over which CERA has responsibility was defined under the Canterbury Earthquake Recovery Act 2011 using council boundaries rather than geographic impact. CERA covers greater Christchurch, which under the Act includes the Selwyn and Waimakariri Districts.

It is less commonly recognised that the Hurunui District, Canterbury, also experienced earthquake damage, with 3,400 building claims and about 200 land claims lodged with the NZ Government Earthquake Commission (EQC). The Hurunui simultaneously became a host community for people fleeing the CERA zone, particularly following the 22 February 2011 quake. This report identifies some of the non-physical impacts of the earthquakes on the Hurunui District, including the methods used to identify and survey stakeholder groups.

“Christchurch was our city, too, and it feels like our heart has been ripped out.”

Christchurch is the geographical, functional, and emotional heart of Canterbury, an area that stretches well outside the boundaries of CERA. Being a part of Canterbury, following the February 22 earthquake the Hurunui District lost many familiar and vital economic, social, cultural, recreational, educational, and welfare services that greater Christchurch provided.

The study reveals that following the earthquakes many service providers already under economic pressure to scale back their activities were drawn from the Hurunui to the CERA zone. A sudden and simultaneous influx of internally displaced people into the Hurunui increased pressure on local educational and health care facilities—some of which were already marginal—and to a lesser extent affected the social structure and dynamics of the district. Hurunui residents affected by the quakes were excluded from a range of services and assistance grants. Crucially, because it falls outside the CERA zone, the Hurunui District was also excluded from processes to determine the needs of the district and measures to address these needs; for example, the CERA wellbeing survey to, ‘Investigate a range of ways in which people have been affected by the earthquakes’ and the Canterbury District Health Board (CDHB) and Mental Health Foundation All Right? campaign to, ‘Ensure wellbeing is at the heart of [Canterbury’s] recovery’.

“EQC were very rude and unhelpful ... they don’t care about us living here.”

Some Hurunui District residents did not claim for earthquake damage because EQC inspectors informed them they were outside the CERA zone. Many others made no claims because they felt others were ‘worse off’. These ‘lack of entitlement’ feelings were and still are compounded by guilt, particularly where friends or family living in the CERA zone are regarded as worse off, leading to an unwillingness to complain or to seek advice or help. This is a common theme, reinforced by an absence of requests for assistance from health care providers, validating the flawed circular reasoning inadvertently created by CERA’s management boundaries: the Hurunui was not affected by the earthquakes, ergo it is not affected by the aftermath and is therefore not entitled to assistance.

1 All quotes in inverted commas are from the Hurunui District earthquake surveys.
2 Information provided by EQC originally stated there were ‘in excess of 400’ claims; the figure was updated subsequent to this report being released and has been amended in this version.
3 Thanks to the All Right? campaign co-ordinator this is now being rectified.
“It’s like we don’t even exist to the Canterbury District Health Board.”

Many in the Hurunui District were indeed unaffected or developed sound coping strategies in response to the earthquakes. Displaced people who have chosen to remain in the district are for the most part happy with their new life in welcoming and supportive rural communities. But this is not the case for many others, both existing residents and new arrivals, whose quality of life has been severely compromised. Research and evidence gathered for this report unequivocally shows that trauma and stress, when left untreated results in a higher cost to individuals, the community, and social service providers. These costs are both economic through reduced productivity, and social through increased alcohol and drug abuse, bullying, family violence, relationship breakdown, and suicide. Amongst some new arrivals to the areas and particularly amongst the unusually high elderly population in the Amberley Ward, there is also a sense of isolation, vulnerability, and reduced confidence.

Recommendations

• Greater assistance from and recognition by the RCPHO of the issues currently being faced by medical clinics.

• Greater funding for existent but under-resourced social services mandated to service the Hurunui

• Greater empowerment of and more investment in rural community organisations, for example trusts, to identify and respond to local needs rather than centralising core services in urban areas where economies of scale result in rural areas being sidelined

• Specific needs are in the area of drug and alcohol intervention, elderly services particularly in the Amberley Ward, and crucially, mental health care services including pre-emptive campaigns. Failure to address this soon will ultimately place an unsustainable cost-burden on health care, social service, and welfare systems. Ultimately the community as a whole will suffer

• Government-level recognition of the critical role played by host communities following disasters

• Further research be undertaken to develop adequate preparation and appropriate response strategies for communities that fall outside politically-defined management boundaries such as those used by CERA

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The Canterbury Earthquake Recovery Act 2011 (CERA)


4 Interpretation

1) In this Act, unless the context otherwise requires,—

council means the Christchurch City Council, the Canterbury Regional Council (Environment Canterbury), the Selwyn District Council, or the Waimakariri District Council

greater Christchurch means the districts of the Christchurch City Council, the Selwyn District Council, and the Waimakariri District Council, and includes the coastal marine area adjacent to these districts
2.0 Introduction

“Everything that was familiar to us has gone.”

The Canterbury Earthquake Recovery Authority (CERA) is the agency leading and coordinating the recovery of greater Christchurch following the September 2010 and February 2011 earthquakes. The area over which CERA has responsibility was defined under the Canterbury Earthquake Recovery Act 2011 using council boundaries rather than geographic impact. CERA covers greater Christchurch, which under the Act includes the Selwyn and Waimakariri Districts (Fig 1).

It is less commonly recognised by organisations and government agencies outside the district that the Hurunui also experienced earthquake damage, with 3,400 building claims and about 200 land claims being lodged with the EQC. The district simultaneously became a host community for internally displaced people fleeing the CERA zone, particularly following the 22 February 2011 quake sequence. More widespread and arguably more damaging is the emotional trauma that continues to impact people living in the district, both those who lived in Hurunui prior to the quakes, and internally displaced people who remain either by choice or because they feel they have no alternative. The damage cause by the quakes to the physical environment—the land and built environments—in the Hurunui is to a large extent being quantified through the Earthquake Commission (EQC) and insurance providers, while rural impacts have been surveyed by Canterbury University.

This report seeks to identify and quantify some of the non-structural impacts on the Hurunui District of the >26,0000 quakes since September 2010 that have struck Canterbury. It was driven by anecdotal evidence that large numbers of internally displaced people moved into the district, affecting educational and health care facilities, utilities and public assets, and the social structure and dynamics of the area, while service providers already under economic pressure to scale back their activities were drawn from the Hurunui to post-quake higher needs areas defined under CERA.

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What’s in a name?

The term ‘internally displaced’ is used in this report to describe what are colloquially referred to as ‘earthquake’ or ‘environmental refugees’. The OECD describes an environmental refugee as, ‘a person displaced owing to environmental causes, notably land loss and degradation, and natural disaster.’ The UNEP describes them as, ‘those people who have been forced to leave their traditional habitat, temporarily or permanently, because of a marked environmental disruption [natural and/or manmade] that jeopardized their existence and/ or seriously affected the quality of their life.’ Both organisations also refer to ‘refugees’ as those who leave their country. Thus, the 11,000+ people who left Christchurch for Australia following the quakes may be referred to as ‘environmental refugees’ if they left as a direct result of the quakes, whereas those who remained in New Zealand are more correctly referred to as ‘internally displaced’. For the purposes of this report, people who fled Christchurch to the Hurunui, regardless of the type of accommodation they moved into—holiday home, rental property, friends or family—are all regarded as internally displaced.

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4 There were four major earthquake sequences beginning 4 September 2010 (12351 quakes), followed by the 22 February sequence (7923 quakes), 13 June 2011 (3981 quakes) and 23 December (2057 quakes) www.christchurchquakemap.co.nz.
To develop a quantified understanding of the nature and scale of changes to the Hurunui District, an online survey, telephone and face-to-face interviews were undertaken to determine the effect of the quakes on residents and service providers, the movement of people into the district, and the concomitant effects on them and the services and the communities into which they moved. The methodology used to identify and engage stakeholders groups is included in this report.

The purpose of the report is to inform planning and response strategies across all sectors, and may assist residents of the Hurunui to understand how their district was affected. To ensure transparency this report has been made available to service providers and the public.

Fig 1. The Canterbury Region. The area bounded by CERA (blue) includes the greater Christchurch area as defined under the CERA Act 2011: Selwyn and Waimakariri Districts and Christchurch City. The Canterbury earthquake sequence, now in excess of 27,000 quakes, is centred in the CERA zone. The Hurunui District (orange) lies immediately to the north.
3.0. Research parameters

The impact of the earthquakes on the physical environment—the land and built environments—in the Hurunui is being quantified through the EQC, CERA, and insurance providers. In addition to the physical damage directly attributable to the quakes, evidence suggests there was and continues to be social/cultural, economic, and environmental impacts. While recognising there are strong feedback relationships between the physical damage, social, economic (public and private) and environmental factors, this report primarily focuses on the social impacts of the earthquakes and their aftermath. As there is a considerable cause and effect relationship between these parameters, the term ‘non-structural’ impacts is used throughout this report.

3.1 Non-structural impacts

“People and families have been dislocated from their usual support networks; isolation is a major problem.”

Anecdotal evidence from the six wards in the Hurunui District: Amberley, Cheviot, Glenmark, Hanmer Springs, Amuri, and Hurunui, suggested that the movement of an unknown number of internally displaced people into the Hurunui District altered the social dynamics and increased social pressures at home, work, and in educational environments. For example, households taking in family and friends, schools taking in more students, fewer jobs available. This is not merely a matter of increased numbers. Research shows that the sudden influx of stressed and traumatised people who have no clearly defined time frame when or if they might leave the district or what their futures might hold, places severe psychological as well as physical burdens on virtually all aspects of the host community. This is exacerbated when the host community itself is also suffering direct emotional and psychological impacts and in some instances physical damage. Moreover, the longer displaced people remain in a state of uncertainty the less likely they will be able to adapt to their changed circumstances or see a way ahead.

Many displaced people as well as existing residents are unaccustomed to relying on government or social services, or external aid. Displaced people in particular are unlikely to recognise themselves as stakeholders in the future of the Hurunui District when they have no vision of their own futures. This in turn places additional stress burdens on people with whom they are in day-to-day contact, from the school playground to the workplace. Research indicates this leads to an increase in stress-related illnesses and concurrent reduced productivity, increased domestic violence and breakdown of relationships, and suicide, resulting in an overall reduced sense of wellbeing and quality of life in affected communities5.

A second impact relates to service providers mandated and/or funded to service North Canterbury. Evidence suggests that many providers already under economic pressure to scale back their activities partially or fully withdrew from the Hurunui to service regions covered by CERA: Waimakariri and Selwyn Districts and Christchurch City. While economies of scale certainly explain this to some degree, there is also a prevalent perception that the Hurunui District was and remains largely unaffected by the quakes and their aftermath. Where social services and health care providers regard the Hurunui as part of ‘North Canterbury’, evidence from the Hurunui is folded into the general ‘North Canterbury’ statistics, however the focus remains firmly centred on those parts of North Canterbury that fall within the scope of CERA: the Waimakariri District.

In October 2012, CERA published a Wellbeing Survey in partnership with Christchurch City Council, Waimakariri District Council, Selwyn District Council, Canterbury District Health Board, Te Runanga o Ngāi Tahu, and the GNS Natural Hazards Research Platform to: ‘Investigate a range of ways in which people have been affected by the earthquakes. That included looking at the prevalence and causes of stress, quality of life, social connectedness, satisfaction with the recovery and any positive impacts people may

5 See for example Gordon (2012).
be experiencing.\textsuperscript{6} By virtue of being located in the Selwyn District, residents of Arthur’s Pass for example were identified as stakeholders and thus eligible to take part in the survey. Although some four hundred claims from Hurunui ratepayers were lodged with the Earthquake Commission\textsuperscript{7}, and as a host community it took in an indeterminate number of internally displaced people, the Hurunui District was excluded from the survey. Moreover, existing residents of the Hurunui District were not entitled to the full range of grants and benefits afforded to areas covered by CERA. For example, Hurunui residents were unable to apply for the 2010 Relocation Grant (up to $2,750) to move out of damaged homes in green zones while intending to move back in once repairs are undertaken\textsuperscript{8}. This is relevant to tenants and uninsured property owners in the Hurunui whose properties were damaged.

In February 2013 the Canterbury District Health Board (CDHB) launched the ‘All Right?’ social marketing campaign to ‘ensure wellbeing is at the heart of our [post earthquake] recovery’\textsuperscript{8}. The ‘All Right?’ campaign was designed as a result of a phone survey throughout Christchurch, Selwyn and Waimakariri Districts. When contacted, the CDHB initially could provide no explanation why the Hurunui District, a ward in its district affected by the earthquakes, was excluded. It was ultimately determined that the campaign was designed to target only the area covered by CERA, and limited funding was available. When the campaign organisers were informed of the preliminary results of this report, they responded quickly and are now working with WellBeing North Canterbury to deliver the campaign to the Hurunui.

### 4.0 Methodology

The only data available to map the movement of people into the district following the September and February earthquakes comes from enrolment statistics (Fig 2), Work and Income (WINZ) beneficiary statistics, and school rolls. All are of extremely limited value in estimating changes to the population, for several reasons:

- Displaced people were unlikely to give priority to registering as voters, especially when no elections were imminent
- Not all displaced people intend(ed) to remain in the Hurunui
- Not all displaced people were or became beneficiaries of WINZ
- Some displaced people who were or became beneficiaries of WINZ identified their permanent home to be inside the CERA zone
- Some displaced people registered as ‘no fixed abode’
- The statistics for electoral rolls and WINZ do not capture all children under 18
- School rolls before the earthquake do not reflect the number of under 18s who regard Hurunui as home, but were boarding in Christchurch. Similarly, the abrupt increase in school enrolments after the February 22 quake reflected a mix of boarding students returning home and internally displaced students enrolling for the first time. All school rolls returned to near normal within weeks

The short-term movement of large numbers of people into the district is born out by the brief change in school rolls throughout the district. Census data available later this year will provide a more accurate picture of the Hurunui District population and demographics.


\textsuperscript{7} New Zealand Red Cross 2013 Canterbury Earthquake Recovery Update February 2013.

\textsuperscript{8} cdhb.govt.nz/communications/media/2013/130225.htm.
4.1 Identifying relevant stakeholders

Stakeholders must be enabled so that they can engage in meaningful dialogue.9

The term ‘stakeholder’ refers to individuals, groups, organizations, and societies that have an interest or investment in something that may be affected by a decision or action10. The ‘action’ in this case is the Canterbury earthquakes and their aftermath. Because of the scale of the disaster, it could be argued that virtually all government agencies in New Zealand and the districts outside Canterbury that took in internally displaced people could be regarded as stakeholders. However under the terms of reference of this report they are not regarded as relevant stakeholders. Relevant stakeholders are defined as:

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10 See for example Mitchell, Agle and Wood 1997; Ramirez 1999.
4.1.1 Group A: Providers

“Some students and staff are still traumatised.”

Service and infrastructure providers included council, emergency services, education providers, local medical services, government social and medical services that normally service the Hurunui District, and NGOs. Many of these representative stakeholders were not based in the District prior to the earthquakes and/or are not based in the District at the time this report was compiled. These stakeholders were clustered into seven sub-groups:

1. Council: customer service, roading, water, tourism, civil defence, rubbish/recycling, building, amenities and special projects, environmental services, Youth Council, and libraries
2. Schools
3. Health care services including external and internal providers
4. Social service providers
5. NGOs and charitable groups such as Lions
6. Police
7. Real estate agents. While these are businesses rather than service providers per se, they offer insight into the movement of people into the district and housing needs

4.1.2 Group B: Residents

**Group B1:** people who normally lived in the Hurunui District prior to the earthquakes and are still living in the District. All people in this group, of all ages, are regarded as relevant stakeholders.

**Group B2:** Internally displaced people who have moved into the Hurunui District temporarily or permanently as a direct result of the quakes and their aftermath. They may already have owned property, for example holiday homes; they may be renting, living with friends, family, in camping sites, or they may be in newly built or purchased homes. All people in this group, of all ages, are regarded as relevant stakeholders.

Service providers (Group A) living in the Hurunui District belong to both groups.

4.2 Research limitations

These were identified prior to undertaking the survey.

4.2.1 Stakeholder obstacles

4.2.1.1 Some stakeholders were unable to provide relevant information.

**Group A: Service providers**

- Some providers were unable to quantify changes in demands for their services specifically in the Hurunui, as the district falls under the ‘North Canterbury’ umbrella, dominated by the assumed greater needs areas inside the CERA zone
- Some providers taxed beyond normal limits to serve areas physically impacted by the quakes unintentionally disregard the needs of the Hurunui because they perceived areas outside the CERA zone to be ‘essentially unaffected’
- Some providers were aware the Hurunui District was affected, however economies of scale dictated the need to concentrate their services in more centralised areas in the CERA zone
- Some providers were physically impacted by the quakes to such an extent they were unable to function correctly. In some instances data was permanently lost or new data not recorded as staff simply ‘got on with critical jobs’ rather than worrying about paperwork
• Most providers do not keep records of demands for services they cannot fulfil and/or referrals to other agencies or providers

4.2.1.2 Not everyone recognises themselves as stakeholders, while those who do so may not have had the capacity to register themselves as such

Residents Group B1
• Migrant workers (predominantly agricultural) who may have been burdened by language barriers, cultural factors, or a sense of not having a ‘stake’ in the future of the district

Residents Group B2
• Undecided about remaining in the district
• Intend to leave the district but have no capacity to do so; ie, they cannot envisage a future

4.2.1.3 Some stakeholders may disregard the validity of other stakeholders
Some in Group A disregard the needs of Group B on the assumption that Group B was not greatly impacted by the quakes. Real estate agents in Group A, for example, have a commercial interest in presenting a positive view of properties or areas they represent.

Some in Group B1 regard some in Group B2 as having no valid claim to the future of their community or the district as a whole. As these two groups were not directly engaging with one another to make a group decision, this is not regarded as an obstacle except where, for example, landlords or primary tenants might disregard displaced family/friends living with them as stakeholders, and may not give them a voice on the survey.

4.2.2 Time constraints
The data needed to be collected by early April in order to collate the material and complete the final report by the end of the funding period June 2013.

4.2.3 Cost
There was no specific budget to conduct the research; rather it fell under the general community development budget. With limited resources it was not possible to contract the survey to a third party organisation such as Neilson, undertake door-to-door data collection of data from Groups B1 and B2, or for more than one person to collect and collate data and complete the report.

4.2.4 Accessibility
Not everyone in the Hurunui District has access to the Internet. Some were unwilling to complete an online survey, or wanted more information.

4.2.5 Timing of the survey
As the survey was conducted at the same time as the 2013 Census, there was a risk of survey fatigue.

4.3 Representivity – overcoming stakeholder obstacles
The advertising and survey were designed to target a wide range of stakeholders enabling them to tell their ‘earthquake story’ whether or not they felt they had an investment in the future of the Hurunui (Fig 3). In order to capture the largest number of respondents, the survey was conducted in the Near Year after all schools and most businesses and the public service sector had returned to work. Letterbox drops
were made the same week as the second anniversary of the earthquakes. The survey was advertised and initiated prior to the 2013 Census.

**Group A:** Interviews were conducted in person where possible or by phone and in some instances email. Prior to conducting the survey, each respondent was informed of the purpose of the survey. They were advised that a copy of the report would be publically available, the results could be used to inform their respective organisations, potentially leading to improvements in services, and the data and results may provide material for further research.

**Groups B1 and B2:** Respondents were invited to use the computers and in some instances free Internet access through the district libraries. Librarians and volunteers actively promoted the survey and assisted people in completing it online. The Community Development Advisor spoke to groups and organisations to explain the importance and purpose of the survey, and was available at all of the district libraries on several occasions throughout February and March at times and dates advertised in all local newsletters including school newsletters, on the Hurunui District Council home page banner, and through letterbox drops (Fig 3). In many cases people did not wish to do ‘a survey’ but to provide information in one-on-one interviews and discussions during the survey period.

The survey, both online and in interviews, was designed to give people a voice, potentially releasing emotions and frustrations. It was anticipated that in some instances the survey might prove cathartic by helping to consolidate and identify vague or ill-formed irritations and frustrations. This could have positive or negative ramifications. The positives include: recognition of problems previously unidentified, resulting in individuals/families actively seeking help and ultimately leading to a better outcome. Negatives include: triggering emotions that had been successfully sublimated.

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**Fig 3. Advertisements appeared in the Hurunui News in consecutive issues throughout the duration of the survey, in local community papers including school newsletters, and in letterbox drops. Dates and times where the community development advisor would be present in local libraries or service centres was included, such as this example used in Hanmer Springs.**
5.0 Survey questions

5.1 Group A Service Providers

It was established prior to the survey that respondents were able to answer on behalf of their organisation and either worked for their organisation prior to the earthquakes or were able to provide both pre- and post-earthquake data.

**Question 1.** Following the February earthquake, did your organisation experience an increase in demand for its services?

**Question 2. (If yes)** Did your organisation have sufficient resources to deal with this increase in demand?

**Question 3. (If no)** Do you feel your clientele/students/customers were disadvantaged in any way because of this lack?

**Question 4. (If yes to Question 2)** What resources did you need?

**Question 5.** Is your organisation currently experiencing a greater demand on services than prior to the earthquakes?

**Question 6. (If yes)** Do you have sufficient resources to deal with this increase in demand?

**Question 7. (If no)** Do you feel your clientele/students/customers are disadvantaged in any way because of this lack?

**Comments.**

5.2 Groups B1 and B2 Residents

The online survey channelled respondents into two groups. **Fig 4** maps the question types and targeted groups.
6.0 Results

6.1 Group A: service providers

“We have sufficient in Waimakariri but virtually no representation in the Hurunui. We are dealing with many more cases of anxiety, depression and social isolation, particularly in the Hurunui District, but we don’t have the resources.”

Eighty-four organisations were contacted; 77 responded and/or were able to provide data. The data from the closed questions cannot be read out of context to the open question answers and comments. Each sector provided quite different sets of data in response to the same questions. These are not directly comparable other than to assess the overall resiliency and capacity of each sector.

“There are a large number of elderly moving to Amberley, but we have no funding for volunteer in-home visits. There is also a shortage of funding for other key services and staff to service the Hurunui.”
6.1.1 Council

Aside from the library in Hanmer Springs, where resources were rapidly depleted council services were minimally affected and all services have now returned to normal. A more detailed report will be presented to Council.

6.1.2 Schools

Generally speaking, all schools in the district responded rapidly and with extraordinary resiliency in the face of an abrupt and sudden increase in student numbers.

- Enrolments swelled between 20-80%, declining to near normal within weeks. While most schools received support from the Ministry of Education, other such as Leithfield and Waikari ‘went it alone’. Waikari, for example, with a roll of less than 50, is out of pocket tens of thousands of dollars. Other schools were overfunded because a large number of people fled the CERA zone following the February 22 quake, and schools’ annual budget is calculated based on student numbers at 01 March.

- Some staff and students experienced and still experience ongoing stress and emotional trauma and the CDHB has not always responded adequately.

- Some parents and teaching staff do not feel entitled to assistance given that others in the CERA zone are worse off.

- Omihi School lost its staffroom and men’s toilets, which posed an immediate and ongoing dilemma for the male headmaster of a primary school.

- An increase in roll numbers may have been regarded as beneficial to some smaller schools that might otherwise be headed for closure due to falling numbers.

- There were some misgivings from parents of existing students that this would be detrimental to their children, academically and socially, as many new arrivals were not accustomed to rural living. This has been referred to as anticipated anxiety. Schools actively engaged new arrivals and while there were some issues, most reported the experience proved educational for both new and existing pupils.

6.1.3 Medical services

It is outside the scope of this report to outline the complex and overlapping roles between the medical and social services, particularly in the area of mental health care. The intermediary organisation between the Canterbury District Health Board and clinics in the Hurunui is the Rural Canterbury Primary Health Organisation (RCPHO). While the RCPHO offered assistance immediately after the earthquakes and were able to provide, for example, a doctor for Hanmer Springs clinic soon after the February 22 quake, most clinics and medical centres coped by, “…making do using our own local resources”.

- The greatest impact was in Hanmer Springs where a large number of internally displaced people fled, particularly following the February 22 quake, resulting in: “…rapidly depleted medical supplies of all kind, which could not be resupplied; we desperately needed a courier service from suppliers other than Christchurch—we needed a helicopter drop. Staff were stressed, regular patients missed out entirely; we needed and still need point of care testing such as blood services. We have the capability but we don’t have the funding.”
• The bulk of internally displaced people have since left Hanmer Springs; currently there is a 5% increase in registered patients.

• All other wards experienced a slight increase in demand for services immediately following the 22 February quake. By and large this has returned to normal however it should be noted that ‘normal’ in many instances is marginal.

• The gap continues to widen between needs versus provision, in all wards to different degrees, exacerbated by insufficient recognition and support from the RCPHO. In terms of mental health care in the Hurunui, responses by the RCPHO to survey questions were as follows:

  “There is no increase in demand for services in North Canterbury.”

  “Our previous involvement was in relation to Latin American dairy workers and isolation; that has now been taken up by local groups. Things have gone quiet in North Canterbury. We have had no referrals from Hurunui clinics; we have been totally involved in South Canterbury.”

  “The biggest issue in the Hurunui, which is ongoing, is the dislocation from people’s usual support services including familiar friends and family support as well as institutional support. People are making poor decisions to move to isolated areas based on fear of quakes and loss of homes, unable to afford anything closer to Christchurch or Kaiapoi.”

  “There’s always been stress in communities; the earthquakes are just something for people to blame.”

6.1.4 Social services

Quantitative data does not tell the entire story because telephone inquires, referrals to other agencies, and an inability to service all calls and referrals are not always recorded (see the final point in 4.2.1.1 Some stakeholders were unable to provide relevant information). This is particularly true for those organisations whose offices were destroyed in the earthquakes. Individuals worked out of their vehicles, responding to needs without necessarily recording data. In some instances data has been permanently lost. This has prevented a direct comparison between the pre-and post-quakes demands on their services, and current demands. The consensus amongst virtually all agencies is that they have too few resources and the need is growing. For example, Wellbeing North Canterbury, which serves as an umbrella organisation for several but by no means all North Canterbury services, stated:

  “Services are stretched especially in the Hurunui. We are in need of a vehicle to reach that area, a full time drug and alcohol intervention worker, and could do with two more social service workers.”

Providers are acutely aware of the insidious nature of stress and family wellbeing issues, where those in need are often unlikely to actively seek direct assistance or advice, and where the early indicators for stress, particularly in rural communities, often go unnoticed. The Mental Health Foundation, which is currently running the ‘All Right’ campaign, are underfunded and under-resourced to service the Hurunui; the focus remains centred on the CERA zone. They are acutely aware of an increase in call for services from other host communities including Ashburton and Timaru, both of which experienced physical damage from the quakes, and Nelson and the West Coast. Like the Hurunui, all of these communities have taken in internally displaced people.
The most pressing needs are drug and alcohol, aged care services including funding to train local volunteers, and crucially, a growing need for additional mental health care services in areas outside the CERA zone.

6.1.5 NGOS and volunteer organisations based in the Hurunui

While there was a small increase in demand initially, this quickly tapered off until demand is now less than pre-quotas. Potential volunteers are frustrated by government regulations that deem them untrained and therefore unsuitable to assist in their own communities.

"Wish we had more capability to help but many people wanting to volunteer unwilling to begin training only to be told they are not suitable."

In effect they are key community resources that have largely been sidelined.

6.1.6 Police

As an organisation the police are experiencing chronic shortfalls in resources, and while members of the force were amongst front-line responders in the CERA zone, they have not been offered counselling or support. In Culverden, the only 4x4 vehicle was taken to Christchurch, leaving the rural community without a key asset.

In terms of crime, some wards experienced an increase following the earthquakes, however this was due almost entirely to transients and short-term arrivals. In Amberley for example, a 30% increase in crime was attributed to just one transient family. This does not mean to downplay the impact on the community. In Hanmer Springs, reported crime dropped immediately after the quakes, with subsequent spikes attributed almost entirely to transients with “too much money from earthquake payouts, spending it on alcohol”. Some wards continue to experience drug and alcohol problems.

There are (on average) daily reports of family violence from the Hurunui District.

6.1.7 Real Estate Agents

Real estate agents substantiate what is commonly understood: there is a severe shortage of housing in the district to accommodate the needs of renters and buyers alike.

In Hanmer Springs, there was an initial ‘kneejerk’ reaction from potential buyers who viewed it as an alternative to living in Christchurch. Enquires did not turn into sudden demand for sales, however, as within months people began to realistically appraise the option of living in Hanmer Springs and commuting to Christchurch. This is also reflected in demand for holiday rentals, which showed a temporary blip that soon declined to normal or near normal for the time of year. While some Hanmer Springs agents now report enquires are ‘quieter than they have been for 30 years’, others are seeing a spike in enquires for investment properties and ‘bolt-holes’ from Christchurch-based developers, builders, and people in the building industry looking to spread their investment portfolio.

In coastal areas potentially affected by liquefaction such as Amberley Beach and Leithfield Beach, purchasing property is mostly a lifestyle consideration that appears to outweigh known and potential concerns (including tsunamis and beach erosion). Insurance, while it can be more difficult to obtain, is ‘not insurmountable’. The trend amongst people from the CERA zone is that these areas are within
reasonable commuting distance of work and therefore a previous holiday rental may be viewed as a realistic permanent home.

6.2 Group B

The online survey provided quantitative data from closed questions and qualitative data from open-ended questions. While the quantitative data gave useful information in terms of demographics, the qualitative data was the most informative in terms of the non-structural impacts of the earthquakes; that is, the effects, both positive and negative, on people’s lives.

Where they survey was conducted by the community development advisor in libraries and service centres, participants frequently expressed gratitude that ‘someone was finally taking notice of the issues in our district’. There were numerous instances where people did not want to undertake the survey but did wish to talk about their experiences, particularly as a group. This almost always led to a discussion about their situation and experiences, often ending with comments such as, ‘I feel so much better knowing I’m not the only one who feels this way.’

These sessions proved particularly valuable in gathering information that might otherwise not have appeared in the online survey, including reasons why some questions were skipped or not answered.

6.2.1 Employment

In both groups, several respondents stated they or other members of their household lost jobs or places of work due to the quakes. One respondent is still unemployed. One lost their (Christchurch based) tourism business and is living on “…our small holding until we retire”. All others have since found jobs or returned to their original jobs or workplace.

6.2.2 Ward demographics

Two hundred and twenty three households responded to the online survey, of which 217 currently live in the district. Of these, the largest number of households (62%) were in the Amberley Ward and the smallest (3.8%) were in Hanmer Springs Ward (Fig 5). Four households did not specify their ward. Based on face-to-face surveys this may be because new arrivals to the district are unsure of ward boundaries. There is also confusion in distinguishing the Hurunui Ward from the Hurunui District. This may explain why a relative large percentage stated their household is the Hurunui Ward.
6.2.3 Resident demographics

One hundred and sixty two (75.93%) respondents lived in Hurunui District prior to the earthquakes (Group B1) while 39 (24.07%) respondents moved to the district following the earthquakes (Group B2) (Fig. 6). A significant number (61 people) declined to answer this question. Based on face-to-face surveys and interviews, there were several reasons for this:

- There was a strong desire amongst residents who do not live in the Hurunui District full time, but who own holiday homes or baches in the area, particularly around Amberley and Leithfield Beaches, to undertake the survey
- Several respondents stated they spent around 50% of their time between Christchurch and Amberley and regarded both as their normal place of residence
- Some moved to the district between earthquakes, and were uncertain how to answer
- Some declined to state either way. During group discussions and face-to-face interviews it was revealed that some did not wish to be identified as ‘new arrivals’ or ‘outsiders’
  - Some in this group identified themselves as returning residents, either having grown up in the district or with strong familial ties, returning to the ‘family home’
6.2.4 Household demographic

Fig 7 shows how household demographics have changed since the earthquakes. Closer examination of the raw data indicates a significant reduction in the 60-69 age group is reflected in part in by this age group entering the 70+ group since 2010, rather than a movement out of the area. Generally, household populations dropped slightly in wards except Hanmer Springs and Amberley Wards, where there has been an overall increase in the number of people and generations living in each household.

Closer inspection of the raw data in Amberley Ward, which dominates the trends in the data by virtue of being 62% of respondent households, suggests there are three primary reasons for this trend:

- Shortage of housing everywhere; younger people (20-29) returned to the family home
- Waiting for EQC settlement or house to be built
- Prefer the security of being together (particularly those with children and the 70+ age group)

![Fig 7. Changes to household demographics following the earthquakes](image)

6.2.5 Group B1 people living in the district prior to the earthquakes and still living in the district

A large percentage of Group B1 who felt they were unaffected by the quakes were less likely to respond, potentially biasing the data.

While the magnitude of physical damage was not as widespread in the Hurunui, the majority of respondents who made claims were either very or extremely unhappy with EQC. Through the online survey and in community meetings, it appears that those who were happy or satisfied with EQC made claims immediately following the September 2010 quake. The data on this is very limited and largely anecdotal, however.
Emotional and psychological impacts were and in many cases continue to be deep and wide ranging, compounded in some instances by financial concerns and ongoing dealing with EQC. The loss of Rangiora as a market hub has come as a secondary blow to some sectors.

“EQC disregarded damage to our home told us Hurunui was not affected. The assessor was dismissive of us.”

“After initial contact in 2011 [from EQC], have heard nothing since, no letter, no phone call, nothing.”

“We realise others were much worse off, and we’d need to wait our turn. Would have been good to have had some personal communication (not just the general newsletter which didn’t really tell us anything) about what was to happen, and a time framework.”

“I understand others have priorities.”

“We didn’t put in a claim because we could fix the damage ourselves and others were far worse off. We’ve just had the house painted and it looks fantastic.”

- There were 3,400 building claims and about 200 land claims
- Some did not claim for damages because they do not feel morally entitled
- Some were told by EQC inspectors they were not entitled because they are outside the CERA zone
- Most are more aware of community spirit
- Most feel the district has shown resiliency
- Most feel the district has changed in some ways, and the majority either have either no opinion about this or regard these changes as positive
- Initial concerns about internally displaced people moving to the area centred around an increase in the size of classes in schools, increase in pressure on already over-taxed resources, services, and supplies including fuel, food, and medical services. This was followed by concerns about security, theft, and vandalism
- Those that feel the changes to the district in the last two years have been negative, are largely concerned with
  - Additional road traffic, particularly on unsealed roads, often ignoring speed limits such for example at Leithfield Beach
  - Dilution of the sense of community in Amberley
  - Increased fear of personal safety (particularly amongst the elderly and those living alone)
  - Increased fear of theft and vandalism, particularly theft in rural areas

Just over 44% responded ‘yes’ to the survey question, ‘Do you feel the quality of you lives has changed in any way since the earthquakes?’ While many felt they were personally unaffected, in one-on-one interviews, discussions with community groups, and in some online replies this statement was frequently qualified by ‘but’. These ‘but’s’ revolve around the following interlinked themes, mostly connected to the February 22 quake:

- Unsatisfactory dealing with EQC; most but not all respondents were satisfied or happy with their insurance providers
- Were present in Christchurch when the February quake struck; still traumatised
- Lost friends and/or family members in the quake
- Children at home left wondering if parents/siblings in Christchurch were dead
- Fear that children/siblings boarding in Christchurch schools and/or parents working there may not come home
• A powerful sense they don’t matter as much as people living inside the CERA zone, compounded by guilt because they are not as badly off
• Family or friends still living in ‘third world conditions’ evokes strong feelings of sympathy, guilt, and an unwillingness to complain about their own earthquake related issues
• Financial concerns
• Fear of an approaching winter while living in a damaged home
• Reduced access to medical care in Christchurch due to lack of parking and inability to navigate unfamiliar streets, compounding anxiety about seeking medical help for other issues
• Fear of closing front doors at night, fear of being alone, less confidence, more arguments with family members, less certainty about the future, greater stress-induced secondary medical conditions
• The desire to move forward tempered by the inescapable knowledge that another large earthquake could strike at any moment

“Very upset all the time because nothing is happening with my home. My friends are all elderly and they are upset and nobody seems to care. We have no support or help from health care they don’t understand about mental health. I worked in mental health for years and the situation with the elderly here [in Amberley Ward] is bad and that makes me unhappy and upset. There does not seem to be any positive future.”

“Longer to get anywhere; more traffic; more difficult to get onto main road; not many safe opportunities to overtake; changed medical services [in Amberley] (not necessarily attributable to the earthquakes).”

“I feel very nervous all the time about lots of things.”

“I’m worried about my daughter and grandchildren and the effects on their lives. Some have ongoing medical conditions, others out of work. Affects my outlook on life and this worsens my own medical concerns. Hard to remain positive when everything is crashing down around you.”

The few positive responses to this question include:
• Greater self-reliance and resiliency and/or the need to be prepared for disasters. In some cases the need to have a ‘bolt-hole’, for example a second home in Hanmer Springs
• Greater sense of community and need to look out for one another
• Where people actively sought out mental health care, they were very pleased with the outcome
• More work opportunities

“We always go to bed ready to leave the house at short notice, keep food in store and extra water in the pantry.”

“Mental Health Service through a local doctor and Hilmorton Hospital were brilliant.”

“Excellent support, service, and counselling from the Red Cross.”

“Availability of work has dramatically increased.”
6.2.6 Group B2: Internally displaced people who moved into the Hurunui District following the earthquakes

“The world we knew has disappeared.”

- 95% moved to the Hurunui as a direct or indirect result of the earthquakes
- Most expressed gratitude for the way they were welcomed into the community
- 13.5% moved because housing was affordable
- 8.1% moved because accommodation here was all that was available
- 10.9% found work in the Hurunui or Waimakariri Districts
- 10.8% retired here
- 83.78% wish to stay while 10.81% are unsure

“The counselling I received once I [arrived in the Hurunui] helped me totally. I have turned my whole life around for the better.”

“Don’t get any help from anybody at all. The whole system is a con.”

“Red Cross and WINZ were excellent in providing initial financial support that took some of the stress away from being out of our home, school, community. It allowed us to recover more quickly as we could leave the area and had some mental space, and time, to decide what to do next. EQC have been very difficult to deal with.”

“My partner tried the Wins office in Kaiapoi after 22 Feb Quake left him stranded in Christchurch, to no avail.”

“The rudest I have ever been treated in my life by WINZ in Kaiapoi.”

To the question, ‘Do you feel the quality of your lives has changed in any way since the earthquakes?’ 86.49% responded ‘yes’.

- Most but not all regard this as positive move into a much less stressful environment with a significantly improved quality of life.
- This improvement has often been tempered by one of more factors such as:
  - reduced income
  - increased transport costs
  - isolation
  - schools with fewer resources and limited curriculum
  - disconnected from previous support mechanisms
  - being bullied into compliance by government bodies
  - continued frustration with EQC

“Awesome Insurance company… EQC - totally incompetent…reimbursed the wrong person and then accused my bank of taking the money. Fighting them came at a cost as the stress was enormous. I gave up my job, sold, and moved to [a rural town in the Hurunui].”

“My son could not adapt to entering Canterbury Uni classes after the quake… He failed his first year. (He was the top student in his final school year in his school).”

11 Not necessarily institutional or organisational, rather they include family, friends, neighbours, workmates, schoolmates, social and community groups, and familiar commercial and recreational service providers.
“[Hurunui is] unbelievably expensive area to stay in. Very high rates with virtually zero services. Stupid regulations with zillions of stupid laws that make no sense. Probably just the first stages of a truly Communist country.”

“An improvement it’s fantastic.”

“Yes, improved, living rurally in Hurunui is better than suburban Christchurch.”

“BIG improvement. We don’t feel the shakes any more, the sense is more focussed on other things (people out here don’t start conversations with talk about the latest aftershocks!) and the roads are smoother!”

“We have moved away from both family and friends although many of them have also had to move to other areas as well. I get very lonely at times and sometimes feel depressed and anxious.”

“In a positive way. We’ve gone through a lot but we feel deep inside how lucky we all are!”

“In a very good way, we love the area and how friendly everyone is, and everyone has been very eager to help us.”

“We don’t take things for granted like we used to. Always have cell phones charged up, spare fuel, always keep pantry full of food in case of emergencies.”

“Wait time for services such as dental nurse, doctors, specialists, special education re children etc is delayed by about 18 months.”

7.0 Discussion

The purpose of this report was to collect data in order to map and analyse the non-structural impacts of the earthquakes on the district. At the beginning is a quote that encapsulates the findings so well that it bears repeating:

A disaster is a sudden, calamitous event that causes serious disruption of the functioning of a community or a society causing widespread human, material, economic and/or environmental losses that exceed the ability of the affected community or society to cope using its own level of resources.12

7.1 Defining earthquake affected areas

“A lot of damaged property in the Hurunui District.”

The Canterbury Earthquake Recovery Act 2011 was a legislative response to a natural disaster. The area covered by CERA was defined using council boundaries as a management tool. In so doing it effectively excluded areas that were also, by the above definition, affected by the same natural disaster. The disaster in these areas was not as large or as headline grabbing, but on an individual as well as organisation level it was nonetheless very real for sectors both within the Hurunui District and organisations mandated and/or funded to service the district. Losses exceeded the ability of some, albeit not all people, schools, and medical clinics to cope using their own resources.

This highlights a fundamental flaw in using district boundaries rather than physical geographic assessments as management tools to determine the degree to which an area is affected by a natural disaster.

External and often centralised providers that people in the district would normally turn to for assistance such as social service and health care providers, were based in the CERA zone and overwhelmed by a disaster of greater magnitude.

This highlights the flawed assumption that centralising key services under the guise of optimising them is both cost effective and socially sustainable. In reality this makes them and the rural communities they service more vulnerable because it disempowers them. By the above definition it sets them up for disaster.

“We are capable but we don’t have the funding.” – Hanmer Springs Medical Centre

For some in the Hurunui the disaster is ongoing, and it’s wearing them down. Nevertheless they have been informed, either directly or through their exclusion from processes designed to assist those in the CERA zone, that they have not been affected. Because the Hurunui is outside the CERA zone, it was administratively excised from being regarded as an earthquake-affected area. Once this occurred, the mindset of external providers followed the same circular reasoning: the Hurunui is not inside the CERA zone, ergo, the Hurunui was not affected by the earthquakes.

7.2 Impacts on the Hurunui District

People in urban communities have certain expectations that a wide range of readily accessible services will be available to them when needed. Consequently they are more likely to actively seek out these services when needed. Rural communities are made up of smaller decentralised populations. Economies of scale mean fewer services separated by greater distances. This leads rural communities to develop greater self-reliance—at least in the short term—to natural disasters. An understated pride comes with that attribute but this can also work against them, causing them to suppress or ignore their needs: ‘we country people are bred tough and therefore we won’t seek help unless we’re dragged into it kicking and screaming’.

The Hurunui District is a largely rural community. People living in the district have been informed either directly or sublimely through many mechanisms—friends, family, colleagues, the media, government, and NGOs—that people in the CERA zone are in greater need. Some feel the added weight of helplessness and distress on behalf of friends and family who are ‘living in third world conditions’ and/or are ‘financially devastated’. This compounds their feeling of guilt, reinforced by the belief they do not have a right to complain because they are not ‘in the zone’. To seek help would take from others who are more deserving. And so their needs are sublimated. They don’t make the call to whatever 0800 number has been set up to offer assistance, reinforcing and validating the belief amongst some service providers that the Hurunui was not affected. This may be further biased by the propensity of some service providers to fold Hurunui data into generic ‘North Canterbury’ data. This risks leading to a flawed assumption that earthquake-related issues arising from ‘North Canterbury’ have originated from the Waimakariri District, because this was the only North Canterbury District (as defined by CERA) to be affected by the earthquakes. This is a critical issue for the Hurunui, particularly when it comes to funding services to this district. Certainly, Hurunui specific-data most likely exists, but there’s no guarantee the decision-makers will see it.
On the positive side, the majority of people and organisations in the Hurunui were largely unaffected or were able to cope using their own or external resources. This is also true for many people who moved here from the CERA zone:

“Built new house in [Amberley Ward], friendly caring community. A council in touch with its people (totally opposite to W.D.C., who appear to ‘fight’ their people). Semi rural atmosphere, cleaner environment (no graffiti, rubbish etc.)...LOVE IT!!”

“Things have really improved for us. Our business is going well, we are earning good money, we have built our own home.”

This is also true for the Council and most but not all schools. Many individuals and families have learned to cope using a variety of mechanisms and resources, and are ‘just getting on with it’.

“We are not ‘happy’ with the way things are for us now, we are just getting on with it; no other choice.”

Some internally displaced people find it difficult to adapt to the absence of services, reduced options in the school curriculum, fewer jobs, and greater (and hence more costly) distances to travel for services.

A note of caution: according to leading psychologists (recognised by CDHB in their ‘All Right’ campaign) the third year following a disaster is the most psychologically dangerous\(^{13}\). We are now in the third year. Residents of communities of less than 2,500 are more likely to experience higher levels of stress than even that of farmers, which are already recognised to be at higher risk of depression and suicide than those living in cities\(^ {14}\). No single community in the Hurunui has a population that exceeds 2,500 people. Amberley, the largest town, had only 1,302 people before the earthquakes\(^ {15}\). While it is growing, it has not doubled in size.

Following the survey and research complied for this report; a medical practice manager was asked if they were seeing signs of stress in the community. The answer was a resounding, “Yes!” When asked how this was showing up clinically, the manager was unable to articulate. An analogy has been drawn to catching thick smoke with a butterfly net. You can see it, you know it’s there, but it’s very difficult to define.

Stress often only manifests through aberrant social behaviour such as bullying, alcohol and drug issues, relationship breakdowns and family violence, and reduced quality of life. It does not always manifest as specific health conditions that lead to a trip to the local doctor or clinic. It is these issues, not a statistical absence in referrals to mental health care services, or calls on the various earthquake and mental health care hotlines, which will, left unaddressed by a shortfall in proper support of primary health care practitioners and rural social services, ultimately lead to secondary and often less visible disasters.

Research by Canterbury University in rural areas (primarily but not exclusively in the CERA zone) shows that rather than decreasing over time, stress is the greatest challenge for both farming and non-farming (businesses) over the long term (Figs 8 and 9). Social workers based in towns sixty or a hundred kilometres away have little understanding of the contextual needs of different rural settings. Even when their services are requested, providers such as Wellbeing North Canterbury lack funding, qualified personnel, and transport to reach these areas regularly if at all. Referring those in need to centralised places in town brings with it additional stresses. They do not always have the time or wherewithal to

\(^{13}\) For example Gordon (2012).

\(^{14}\) For example Hoyt et al (2010).

\(^{15}\) 2006 Census data.
navigate the unfamiliar landscape of post-quake Christchurch and locate expensive parking often a kilometre or more from the hospital. One survey respondent suffered an angina during such a walk.

Lack of funding is also true for organisations that service the elderly population, such as Aged Concern and Alzheimer’s New Zealand that assists families and caregivers as well as those with dementia. Given the disproportionately high population of elderly people in the Hurunui, particularly Amberley Ward, this is of great concern.

**Fig 8. Challenges affecting farm recovery following the Canterbury earthquake sequence (from Whitman, 2013).** Stress is a major component both in the short and significantly, increases in the long term.

**Fig 9. Challenges affecting non-farming recovery following the Canterbury earthquake sequence (from Whitman, 2013).** Again, not the significant increase in stress long term.
“We had a huge influx of campervans to Waiau of which a lot stayed. Local stores and gas stations almost and/or did run out of supplies as they waited on supply trucks to arrive via Chc (I think it took a week at which they had to travel SH1 then Leader Rd). For local shearing contractors and their workers, it could’ve been disastrous had it not been for them talking with their preferred gas suppliers to reserve some of the petrol for their vans in order to continue to send their workers out shearing.

Also of concern, particularly amongst the elderly and low income earners, is the prospect of another winter living in a broken home that has been assessed as not affected by the earthquakes, or not assessed at all. Buckled floors and crooked steps pose a ‘one mis-step away from a broken hip’ potential personal disaster leading to costly medical services.

A positive aspect of the survey revealed that the Hurunui District might have greater capacity that was realised, to respond to short-term local needs following a disaster. For example, organisations such as the Lions may have been in a position to offer some assistance when Hanmer Springs Medical Centre needed ‘a helicopter supply drop’. Yet this also highlights the shortfalls in the current system of not maximising local capacity.

This could be addressed in all wards through robust community-led development programmes that place greater emphasis on connecting existing community groups. Community groups that are aware of each other’s roles in the community maximise their effectiveness by preventing ‘doubling up’ of services and events run on the same day, and competition for resources, which could in many instances be shared.

In a community with a low population such as exists in the Hurunui District, there is an exceptionally high degree of political awareness. The recent removal of the phase ‘well being of the community’ from the Local Government Act has deeply concerned many, for their wellbeing has already been severely compromised. Members of the local government have wide and deep ties, often generational ties to the community they represent, and the wellbeing of their community is at the forefront of their minds. There is a perception that that has now been legislatively compromised. This emphasizes the need to focus local resources into community-led projects rather than depending on council to develop community projects.

7.3 Summary

In sum, the survey shows that the effects on people displaced by the earthquakes who have moved to the Hurunui District has not be factored into the government response. This is particularly apparent in—

- Amberley Ward where relatively cheaper housing has and continues to attract an elderly population disconnected from their usual support mechanisms. The negative impacts of this cannot always be quantified through social and medical service providers
- Hanmer Springs Ward where health care facilities and staff could not adequately deal with the sudden influx of internally displaced people

Social service providers and NGOs dependent in part on government and/or CDHB (RCPHO) funding are under-resourced and cannot properly service the Hurunui District. Specific shortfalls are in the provision of alcohol and drug intervention, mental health, and aged care services in the Hurunui District, particularly in Amberley, and funding to train local volunteers. There are strong indications this shortfall is getting worse.

While most individuals and families have either been unaffected by or have coped with the aftermath of the earthquakes, many are not. This is exacerbated by feelings they don’t matter as much as those within the CERA zone. This is further compounded by the belief they have no (moral) right to complain or seek help. This is most notable amongst the elderly and those who have moved to the district and have been cut off from their previous support mechanisms.
8.0 Recommendations

It is recommended that:

- Greater recognition and assistance by the RCPHO of the issues currently faced by medical clinics
- Greater funding for existent but under-resourced social services providers mandated to service the Hurunui
- Greater empowerment of and more investment in rural community organisations, for example trusts, to rapidly identify and respond to local needs rather than centralising core services in urban areas where economies of scale result in rural areas being sidelined. This is particularly crucial following a disaster, to ensure an adequate and cost effective response in the short term and rapid and cost effective recovery long term. This is born out by recent research in other earthquake-affected rural communities

- Specific needs are in the area of drug and alcohol intervention, elderly services particularly in the Amberley Ward, and crucially, mental health care services. Failure to address this soon will ultimately place an unsustainable cost-burden on health care, social service, and welfare systems. Ultimately the community as a whole will suffer
- Government-level recognition of the critical role played by host communities following disasters
- Further research be undertaken to develop adequate preparation and appropriate response strategies for communities that fall outside politically-defined management boundaries such as those used under the Canterbury Earthquake Recovery Act 2011

Finally, whatever shortcomings there may be in terms of services, they stem from policy and institutional frameworks. These shortcomings are magnified when key ‘people’ services are centralised in larger urban environments. Many dedicated individuals in these organisations are passionate about rebuilding the lives and communities shattered by the Canterbury earthquakes. It is often very difficult under those circumstances to pause and reflect. They have done an amazing job—and that needs to be recognised—and lessons are being learned. To ensure a truly sustainable future those lessons now need to be applied. The current approach is not sustainable because it sidelines the role that community organisations play in response and recovery. As research from Canterbury University shows, community development in these areas is crucial:

- Community driven events
- Socializing events in peacetime as well as after an event to—
- Strengthen networks leading to stronger and ultimately more resilient rural communities

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16 Chan (2013).
17 Whitman (2013).
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