

11 May 2022
Our Job no. 717539

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Rotorua 3046

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Dear Lorelle,

Re: Response to request for further information – RC 17892 – 105-107 Malfroy Road

Please find attached a response to the further information request received on 3 February 2022 in relation to the resource consent application for Contracted Emergency Housing at 105-107 Malfroy Road, Rotorua. The response to this request for further information is provided in three parts:

Part A: Request for public notification of the subject resource consent application

Part B: Response to the detailed request for further information dated 3 February 2022

Part C: Social Impact Assessment for 13 Contracted Emergency Housing (CEH) motels

I consider that this responds to your request for further information in full and as such we request that Rotorua Lakes Council continue to process the resource consent for Contracted Emergency Housing at 105-107 Malfroy Road, Rotorua.

Please do not hesitate to contact me to discuss any matters in this response.

Yours sincerely



Alice Blackwell
Senior Planner

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Part A: Request for Public Notification – Contracted Emergency Housing RC17892

On 20 December 2021, on behalf of the motel operator, Te Tūāpapa Kura Kāinga – Ministry of Housing and Urban Development (HUD) applied for resource consent from Rotorua Lakes Council to use the existing site and buildings at 105-107 Malfroy Road, Rotorua, for Contracted Emergency Housing (CEH). The context within which emergency housing operates has evolved over the last nine months, but the acute housing need has not reduced.

The Social Impact Assessment (SIA) (see Part C of this response) identifies that Rotorua has experienced a somewhat perfect storm of circumstances (Covid-19, rising costs of living, rising unemployment, shortage of affordable rental housing, rising homelessness etc) that has led to an acute housing crisis in the district. An outdated district plan and constraints to infrastructure capacity have also constrained development contributing to a shortfall of housing and shortfall in development capacity across the district. In effect, delivery of housing has not been able to match to population growth.

The response to homelessness in Rotorua is led by the Rotorua Housing Taskforce, made up of central government agencies, the Rotorua Lakes Council, and Te Arawa iwi and entails a multi-faceted programme of work. More recently, the establishment of Te Pokapū – a Rotorua Housing Hub, has helped to strengthen the assessment and placement processes for those with a housing need. Te Pokapū provides a single access point connecting whānau with the most suitable emergency housing solution. Te Pokapū also connects people with community support services if required.

In addition to immediate practical solutions, such as Te Pokapū, Rotorua Lakes Council is a specified local authority required to notify an Intensification Planning Instrument by 20 August 2022. This will essentially result in the majority of District Plan zoned residential areas in the district now applying the Medium Density Residential Standards (MDRS) that were introduced into the RMA in December 2021. The Intensification Planning Instrument will have the effect of instantly increasing District Plan enabled housing development capacity.

Significant investment by government through the shovel ready process and in delivery of public housing is underway. Further investment in stormwater infrastructure is being considered through the Infrastructure Acceleration Fund.

Notwithstanding the above, housing solutions for those in emergency accommodation take time to deliver. In the interim, CEH is a solution for families and whānau with children, young people and people with disabilities who have high housing need to stay in safe and secure accommodation while more permanent housing is found. The SIA assesses that CEH operates with social impacts ranging from very low negative to low positive impacts.

The SIA has illustrated that some in the community have concerns about emergency housing and recommends a forum for the community to ask questions and share information about the overall CEH service. It is also understood, through communications with the Council, media coverage, and engagement from Restore Rotorua, that there is a strong community interest in the CEH applications.

It is recognised that this resource consent application is being processed concurrently with 12 other resource consent applications for CEH in motels and this number of consents being considered at the same time could be a concern for some in the community. CEH provides accommodation for average of approximately 600 people, or 250 families.

Public Notification Requested

The RMA enables applicants to request public notification of their resource consent application (s95A(3)(a)).

Public notification, when it is not elected by the applicant, is either tied to the adverse effects of a proposal being more than minor or the existence of special circumstances (or both). While HUD does not consider that the adverse effects of the proposal are more than minor, nor that there are special circumstances, reflecting on the matters discussed above, including the acute housing crisis in Rotorua, the community interest in emergency housing and the changing district plan context at this time, HUD recognises that there would be some benefit in the wider community having an opportunity to participate in the decision-making process for the subject resource consent application.

HUD is hereby requesting application RC 17892 for Contracted Emergency Housing at 105-107 Malfroy Road, Rotorua, be **publicly notified**.

Part B: Response to matters raised in the Request for Further Information – 107 Malfroy Road

Please find below a response to your request for further information dated 3 February 2022 in relation to the resource consent application to use the land and buildings at 107 Malfroy Road for Contracted Emergency Housing (CEH).

Existing Occupancy of Tourist Accommodation Facilities

- 1. Each of the applications identifies the configuration of units (number of units and maximum number of occupants) and this information is used to define the existing environment baseline for comparative assessment of the intensity of the proposed Emergency Housing.*

Through discussion with the motel owner during the site visit, it was understood that for the last 2-3 years the site has been solely used for Emergency Housing for the Ministry of Social Development (MSD), and prior to that, for a further 2 years catering to both tourists and MSD Emergency Housing clients.

Please provide information on:

- How the proposed Contracted Emergency Housing differs from the sole use of the site for MSD clients (assuming this prior use was operating within the requirements of the District Plan).*
- The typical occupancy and length of stay of MSD clients prior to the motel's use as contracted emergency housing.*
- Whether or not the motel will be returning to tourist accommodation after the proposed five-year term on the resource consent expires (considering that MSD clients may or may not fall under this definition).*

How the proposed Contracted Emergency Housing differs from the sole use of the site for MSD clients (assuming this prior use was operating within the requirements of the District Plan).

The Contracted Emergency Housing (CEH) model is described fully in the resource consent application. The CEH model includes on site security, wrap around support services and contracting the entire motel for emergency housing. In addition, the CEH model is primarily for families and whānau with children, young people and people with disabilities who have high housing need.

The Ministry of Social Development (MSD) also funds emergency housing. Our understanding is that in the case of the subject site, this has been provided in the past via Emergency Housing Special Needs Grants (EHSNGs).

EHSNGs were introduced in 2016 and MSD's website describes the purpose of EHSNGs to:

“...help individuals and families with the cost of staying in short-term emergency accommodation (motels, hostels, campsites etc) if they are temporarily unable to access MSD's contracted transitional housing places.

The EHSNG pays for short-term accommodation for up to seven days at a time, with the accommodation being provided by commercial and community providers who are not contracted by MSD to deliver accommodation services. Every applicant for an EHSNG must make reasonable efforts to find longer-term secure accommodation. For most applicants, this includes applying for transitional housing and public housing.

The EHSNG payment normally does not need to be paid back, but where the household has contributed to their own housing need, the EH SNG may be made recoverable at 25% of the applicants' weekly income.”

Apart from the difference in how EHSNG and CEH motels are funded, the motel operator has advised that while the motel was being funded through MSD the onsite manager had to deal with different issues and confront clients where there were onsite incidents, such as late night visitors or partying. The motel operator commented that the make-up of the whānau groups while the site was being funded through MSD varied and the placement of such individuals and whanau groups was not well considered.

In relation to CEH, the motel operator has advised that there is support for the CEH occupants and the motel operator as the site has 24/7 security, roaming security and Housing Service Provider staff from Monday-Friday as well as emergency contact. The motel operator notes that if there are any incidents or if there are any concerns for children’s safety, motel occupants and the motel operator have better support as there is security looking after the motel and the Housing Service Provider can act immediately to provide support effectively and efficiently.

The typical occupancy and length of stay of MSD clients prior to the motel's use as contracted emergency housing.

Table 1: Typical occupancy and length of stay by MSD clients prior to CEH

| 105-107 Malfroy Rd | |
|-----------------------------|---|
| Occupancy MSD | |
| | No. of people / duration of stay |
| Typical number of occupants | 22-28 people |
| Maximum number of occupants | 35 people |
| Typical length of stay | 6 months – 1 year |
| Maximum length of stay | 2 years |

Whether or not the motel will be returning to tourist accommodation after the proposed five-year term on the resource consent expires (considering that MSD clients may or may not fall under this definition).

The subject resource consent application is for CEH. At such time that the site is no longer used for CEH, this resource consent application seeks that the site is able to revert to its previous motel use.

HUD are not seeking any additional resource consents (should they be required) in relation to the operation of a motel from the subject site, except to the extent that the motel should be able to revert to its previously approved use under resource consents granted on 7 February 1997, 11 December 1997 and the variation granted on 11 February 1998.

Current Contracted Emergency Housing Occupancy and Operations

2. We are aware that each of the tourist accommodation facilities has already been operating as Emergency Housing.

Please provide information on:

- The level of occupancy as Emergency Housing (typical and maximum number of occupants and length of stay);
- A record of any complaints received by the motel operator, service provider, MHUD, or police (both from tenants and external parties) and any responses.

The level of occupancy as Emergency Housing (typical and maximum number of occupants and length of stay)

In terms of occupancy, the Housing Service Provider uses Unit 9 for operations and there is a security office within the main reception area. These are both shown on the site plan in [Appendix 2](#). This leaves all 9 units available for emergency housing. In reality, similar to operating a motel from the site, there are times where rooms are vacant because they are undergoing maintenance or awaiting referrals.

Table 2: Capacity and Occupancy Numbers at 105-107 Malfroy Road

| 105-107 Malfroy Road | | |
|--|-----------------------|-----------------------------|
| Capacity | | |
| No. of units for Emergency Housing | | 10 |
| HSP No. of units | | 1 |
| Max No. of occupants in CEH onsite (as stated in RC Application) | | 39 |
| Occupancy | | |
| | No. of units occupied | No. of people in CEH onsite |
| 15 Dec 21 | 9 | 10 |
| 7 Feb 22 | 9 | 12 |
| 30 Mar 22 | 8 | 11 |
| 27 Apr 22 | 8 | 12 |

The length of stay varies based on multiple factors, including private circumstances and availability of long-term housing options. Rotorua’s average length of stay in emergency housing, across all motels, is 22 weeks. There are also instances of whānau staying for less than one week in CEH.

A record of any complaints received by the motel operator, service provider, MHUD, or police (both from tenants and external parties) and any responses.

We have sought information from Emerge Aotearoa, the motel operator, HUD and the Council to investigate whether there have been any complaints in relation to the operation of CEH from the subject site. We have relied on the findings of the SIA (see **Part C** of this response) in relation to police feedback, which involved a stakeholder interview with police and reporting on crime statistics in the locations where CEH operates. We are not aware of any complaints from external parties (such as neighbours) since the site has been operating for CEH purposes.

Part of the role of the housing service provider is to effectively manage any incidents that occur onsite, this includes recording the incident and taking any immediate action that may be necessary. Incident records outline any consequences and mitigation. Incidents are different to complaints and generally relate to a matter that requires the input of on-site management. Emerge Aotearoa has a documented complaints and incident recording process – attached at [Appendix 1](#).

Proposed Emergency Housing Occupancy and Operations

3. *We note your provided within the application an example of occupancy for a week in December 2021. You stated there were 10 people staying across 9 units (inclusive of children under 18 months). The application states “Contracted Emergency Housing... is primarily for families and whānau with children, young people and people with disabilities. In some instances, this will include other vulnerable individuals such as Kaumātua and Kuia (i.e. elderly), however, these will be the exception only, and so the vast majority of occupants will be families and whānau with children”. The occupancy rates for the week of December appears to show more individuals staying than families. Please provide information on whether or not the typical occupants will fall within the description provided in the application.*

The reality of allocating CEH is that rooms and motels are allocated based on what best suits the needs of the whānau or individual being placed in emergency accommodation. Based on the occupancy numbers we have provided it appears that there are more individuals staying in CEH on the subject site than there are larger whānau groups. We note that this does not mean the situation will not change in the future and we also note that this is not the overall trend across all CEH motels in Rotorua.

4. *The occupancy stated in the applications is the maximum sleeping capacity provided under the current tourist accommodation use. The levels of occupancy appear to be very high and do not appear to reflect likely occupancy.*

Please provide information on the applicant’s criteria for assessing suitable occupancy levels for families living in emergency housing having regard to sleeping space and living space.

As discussed above (see Table 2) the actual occupancy in terms of the maximum number of people on the site is far lower than the number of people that is theoretically possible if every bed was filled to its maximum capacity. The reality of operating the CEH from the site is that it is similar to the reality

of operating a motel; where rooms require maintenance and there are times when rooms are awaiting referrals. Furthermore, all available beds in a unit may not be used by the individual(s) allocated that unit, as the family size may be smaller than actual theoretical capacity of the unit.

In terms of criteria for assessing suitable occupancy at 105-107 Malfroy Road, those whānau who end up in CEH go through a two-step process to ensure the CEH best suits their needs:

1. **Te Pokapū** assesses the potential CEH occupant and manages the initial referral of whānau to emergency housing, whether that be to a motel that accepts EHSNGs or CEH.
2. **Emerge Aotearoa** (Emerge) assesses the referral from Te Pokapū and before whānau are allocated to a room a staff member from Emerge will triage that whānau. This includes considering operational needs of that whānau (such as accessibility, outdoor space / room suitable for children) as well as their history with Emerge in terms of whether that whānau have been in a motel managed by Emerge before and any relevant incidents. A family will only be allocated to a room that can hold the capacity of the family, Emerge will not place a family in a room that is not adequate in bed availability or size.

If that whanau is not the right fit for the accommodation available, they will be directed back to Te Pokapū to be allocated to another provider.

5. *The short length of stay is given as a reason for accepting a lower standard of on-site amenity to that required for long term residential activities. (i.e. private space, privacy). We previously sought information from you to better understand the maximum length of stay in CEH. Your response was that length of stay is highly variable.*

Please provide information on the average length of stay and the range of length stay to enable consideration of the merits of allowing a lower standard of on-site amenity.

Across all emergency housing, the average length of stay in is 22 weeks, the typical length of stay is 2-3 months and the maximum length of stay is 19 months.

Across all CEH motels, there are 16 whānau and five individuals that have been in CEH since 1 July 2021 (i.e. from when motels were first contracted by HUD). The shortest length of stay in CEH is three days.

6. *During the site visit, the owner advised that there is private open space available at the rear of units 7-10.*

Please confirm whether private open space is available at the rear of units 7 through 10 and update the site plan accordingly.

Private open space is available to the rear of units 7-10 and the updated site plan is attached at [Appendix 2](#).

7. *Community housing provisions are referred to in the application to establish the permitted baseline for the application. The definition of Community Housing in the District Plan excludes "...facilities where the movement of residents is legally restricted".*

Please advise what measures will be used to avoid residents being placed in CEH who are the subject of legal restrictions on movement. The District Plan does not set out the nature of restrictions. We consider that this includes people currently subject to:

- *Bail*
- *Home detention;*
- *Probation;*
- *Supervision;*
- *Restraining orders;*
- *Protection orders;*
- *Compulsory treatment orders.*

Unless this issue can be satisfied, the emergency housing activity is unlikely to fit within the terms of the District Plan definition of "community housing", regardless of whether the number of persons on site at any one time otherwise satisfies the definition.

If the Emergency Housing includes people who are the subject of legal restrictions on movement, further assessment of the effects of the activity, including social effects, will be needed to support the application, together with an analysis of the extent to which District Plan definitions apply to the proposal.

The applicant accepts that the proposal does not fit within the definition of 'community housing' as this definition has a maximum number of 8 people able to reside on the subject site. The primary purpose of the CEH on the subject site is to provide emergency accommodation to whānau with high housing need.

The District Plan does not specify what is meant by "...movement of residents is legally restricted". While we appreciate the Council's reason for attempting to further clarify this, we note that the list provided does not reflect our understanding of what might reasonably fall within this definition. In our view, the list provided is casting the net more broadly than the definition otherwise intends. For example, we note that 'protection orders' are orders that provide an applicant with a legal shield *from* the attentions of the violent person, therefore relate to victims and should not be included in the list above. It is our understanding that 'Supervision' relates to a scenario where an individual lives in the community but may be subject to ongoing rehabilitation programme(s) and/or monitoring.

It is our understanding that all people under the care of the Department of Corrections have standard conditions placed on their sentence or order under the Sentencing or Parole Act 2002. In most cases offenders are required to inform their probation officer of their address and inform their probation officer if they intend to change their address. The sentence conditions also stipulate that they are not

to reside at an address that a probation officer has advised them not to reside at. Sentences also often include a condition that they have to live as directed by their Probation Officer. This condition exists to ensure that a Probation Officer assesses an address to determine suitability for a person to reside at, taking into account public safety and risks. If needed a person's Probation Officer may have the authority to tell them not to reside at a specific address. Whilst a Probation Office may direct a person to reside at a specific address, a person can choose to provide an alternative address. The Probation Officer would assess the alternative address and if the alternative option was acceptable, the person would be approved to live at the alternative address.

In our view, residents in CEH choose to be there, irrespective of whether or not they are also subject to conditions as a result of offending. As such it is also our view that these residents are free to leave CEH if they choose to and relocate to an alternative approved address.

In any case, we understand that less than 1% of the population in CEH, would fall into the above categories. Housing Service Providers are working with appropriate agencies to ensure the right support is wrapped around anyone in any of these categories. These are far from the "norm" and, as part of its role, Te Pokapū aim to ensure the best service outcomes are at the heart of the assessment and referral to CEH, other motels or the person's whānau.

A Social Impact Assessment (SIA) has been prepared in relation to the use of CEH in Rotorua and is attached at **Part C** of this response to the Council's request for further information. The Social Impact Assessment has found that, in the most part, social impacts from the 13 CEH motels in Rotorua range from very low negative to low positive. The SIA acknowledges that CEH motels are a symptom of social issues within the community, rather than the cause. In relation to the resource consent for Contracted Emergency Housing, the SIA states (page 3):

"Therefore, we consider that not allowing contracted emergency accommodation to be consented and therefore operating would not improve the current social changes experienced within Rotorua and may result in further negative social change particularly for vulnerable members of the community.

Therefore, it is important to consider how to minimise potential impacts of emergency housing on the surrounding community. In our opinion contracted emergency housing does this. Contracted emergency housing separates emergency housing use from the provision of tourist accommodation and improves the care of whānau and vulnerable adults in emergency housing. The operating model aims to reduce potential impacts on the neighbours and local community through its management of the sites."

As such based on the findings in the SIA, the CEH model, where there is no mixing of tourists with emergency housing occupants and with dedicated wrap around support services, may help to improve the social change experienced in Rotorua over the past few years.

8. *Emergency Housing activities require provision of compliant accessible parking under the Building Code. Please show this on the site plan.*

See updated site plan attached at [Appendix 2](#).

9. Emergency Housing activities provide for on-site Social and Support workers, and a programme facilitator. Please describe/indicate where this service will be provided on the site. Where this service operates out of a motel unit, this restricts its use as a unit used for CEH. Please, accordingly, update the number of units and maximum occupants on-site.

The Housing Service Provider (Emerge Aotearoa) use Unit 9 and a small security space adjacent to the reception area – see [Appendix 2](#). Unit 9 can accommodate up to three people and while in use by the Emerge Aotearoa the theoretical maximum capacity at 105-107 Malfroy Road is reduced to 36 people.

10. Please provide records of any consultation undertaken with the owners and occupiers of sites in the vicinity of the application site.

No consultation has been undertaken with neighbours, although the motel operator has commented that they communicate with the neighbours from time to time and these neighbours have the motel operators personal phone number should they have any concerns or need to make contact.

11. Please provide an outline of processes for dealing with complaints received by the motel operator, service provider, MHUD, or police (both from tenants and external parties) and responses.

The HSPs onsite management team / security is the first port of call for any immediate response to disruptions, both internal and external. When applicable, the appropriate response will be engaged (e.g. noise control, Police or other emergency services). All onsite staff are trained and are familiar with the complaints procedure. Complaints that are considered high risk are management by the North Island Housing Manager. All other complaints are dealt with by a team leader. All complaints are dealt with by someone independent of the complaint itself.

The onsite management team keep an accurate and comprehensive record of any incident/complaint and what the response is/was. These are escalated to the appropriate level, whether that be provider management, Te Pokapū, HUD or other. Where possible, disturbances are dealt with quickly, or prevented before becoming a notifiable event.

Please find attached at [Appendix 1](#) the Emerge Client Complaints Policy and Procedure.

Notification

12. Council has received more than 100 written complaints from members of the public on the topic of emergency and transitional housing, prompted by recent community awareness of the Wylie Court Transitional Housing application. For reasons of privacy, we are unable to provide the actual complaints to you. However, we have prepared a summary report on the complaints, which is

attached. Almost all of these complaints request that applications for emergency and transitional housing should be publicly notified. This is for range of reasons, including claims that the activities are:

- *not appropriate on sites with services and amenities designed for tourists, not families and children;*
- *causing increased anti-social behaviour and crime in the locality;*
- *detracting from Rotorua's reputation, attractiveness and capacity as a tourist destination;*
- *attracting homeless people into the City from other places, and placing greater pressure on social infrastructure.*

The complaints constitute anecdotal evidence of adverse effects at site, neighbourhood and city levels that we need to respond to directly in the notification assessment. To assist this, please provide any further responses to the above matters. This might include empirical evidence on these issues if available. It would also be helpful if this included information regarding actual and potential cumulative effects, including the locations of all existing and planned transitional and emergency housing in the city, including that provided as part of the Government's COVID response. We have a general understanding of this, but reliable information from an informed source is needed

HUD takes concerns about CEH from the Rotorua community seriously and this is reflected in the decision by HUD to commission a SIA and to publicly notify this application (see **Part A** response).

As explained in the **Part A** response, there is an acute housing crisis in Rotorua, particularly for affordable rental housing. Contracted Emergency Housing is not seen as a long term solution to housing those in need, moreover it is an immediate short term solution to ensure that those who do not otherwise have access to safe and secure accommodation, have somewhere to stay.

Using motels for permanent housing is not the end goal and it is accepted that motels are not always going to be able to provide the residential amenity standards that one could expect from a standalone dwelling. However, there are numerous examples throughout New Zealand where families with children live comfortably in apartment style housing which is more akin to the style of accommodation provided in a motel. More specifically, in the case of the subject site, each unit has a private outdoor space and there is also ample central green space for whānau to enjoy.

It is acknowledged that there is a narrative in the community that the number of people living in emergency housing in Rotorua has been driven by people from other parts of New Zealand moving to Rotorua to be placed in emergency accommodation. In response to these concerns, the Ministry of Social development has undertaken extensive research into where those in emergency housing in Rotorua are from. This research has found, that of the 1,121 people who entered emergency housing in Rotorua in 2021:

- 778 (69%) were already living in the Rotorua TLA one month before entering emergency housing

-
- 208 (19%) were living in one of the neighbouring TLAs one month before entering emergency housing, where often the supply of emergency housing is limited
 - 135 (12%) came from other TLAs across New Zealand or had an unknown address one month prior to their stay in emergency accommodation.

This research from MSD suggests that the vast majority of people in emergency housing in Rotorua are from Rotorua, from nearby towns, or are coming back to Rotorua to be with family after a period away.

Social Impact Assessment (SIA)

In relation to the social impacts of the proposal, BECA has undertaken a comprehensive SIA and this is attached at **Part C** of this response. The SIA assessed the impact of all 13 CEH motels on relevant domains of social concern (such as 'way of life' and 'tourism character') which were identified following extensive research including telephone surveys, letter drops inviting comment from those who live close to CEH and stakeholder interviews.

Overall, the SIA found that the social change experienced in the Rotorua community would have occurred without the CEH motels and that operating CEH motels is not the cause of these social issues. We acknowledge that as identified in the SIA, there is potential for site specific effects from CEH motels depending on characteristics such as location, neighbours, prior use of the motel, proximity to other emergency accommodation, physical layout and condition of property, number of on-site occupants and management at each CEH site. However, we also note that (as outlined in the SIA pg 52) *"removing the contracted emergency accommodation option (e.g. were it not to be consented) would not improve the current social changes experienced within Rotorua and may result in further negative social change, particularly for vulnerable members of the community."*

It is accepted that at times, the operation of CEH could have a social impact on the surrounding neighbours and community. However, if CEH did not exist, this would simply push the homelessness problem somewhere else, rather than solve it. Without CEH, whānau may be forced to live in more vulnerable and less stable housing conditions.

The subject resource consent application is seeking consent for a fixed duration, to allow time to improve the supply and accessibility of affordable housing in Rotorua.

Appendix 1 – Complaints Procedure



Client Complaints Policy and Procedure

Client Complaints P & P

Whakamana



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Ako



Manaaki



Whakawhanaunga



Client Complaints P & P

Whakamana



This policy applies to/ E Pā Ana Tenei Kaupapa Here Ki:

All Emerge Aotearoa kaimahi / employees, volunteers, students and contractors and people/clients / whanau supported by our services.

We need this policy because/ Kei Te Hiahia Tatou Ki Tenei Kaupapa Here Na Te Mea:

To ensure the rights of people accessing services and their family/whanau when making a complaint, are understood, respected and upheld and any learnings from the complaint investigation used to improve and develop services and the organisation.

Ako



Policy/ Ngā Kaupapa Here

A complaint may be made at any time, verbally or in writing.

All situations which include allegations of criminal behaviour or abuse must be recorded as a complaint and follow the investigation process.

Service delivery to the person accessing services will not be adversely affected by making a complaint.

Complaint documentation will not be stored on the client record.

All complaints will be managed in a systematic way as required by legislation, sector standards and as outlined in this document.

Manaaki



Complaints that require notification to HealthCert will be processed using the approved [template](#) accessed on MOH website *Notifying an incident under section 31*

Complaint process time frames will be strictly adhered to.

Investigations will be led by the District/Operations Manager not directly named in the complaint.

Investigations and written responses are supported by Lived Experience Partners (LXP) and Quality.

Information from complaints will be analysed for service improvements in partnership with the Quality and Lived Experience Teams and disseminated to relevant services at National and Regional meetings.

Whakawhanaunga



Service Improvement measures will be implemented, and actions documented in the Quality section of Team Meeting Minutes.

Monitoring of improvements and organisational learning will be measured by client surveys and Lived Experience Partner service visits. Feedback from Lived Experience Partners will be provided to Senior Managers who will monitor corrective actions.

Professional Practice

Whakamana



Tamariki and Rangatahi

An external support person for tamariki (children) and rangatahi (young people) will be identified on entry to the service (e.g. VOYCE, Social Worker)

All tamariki and rangatahi and their advocates will be informed and have information available on how to make a complaint.

Procedure/ Ngā Whakahaere

Ako



Receiving and Acknowledging Complaints

All situations which include allegations of criminal behaviour or abuse must be reported to the Regional manager and the appropriate authority at the earliest opportunity, recorded as a complaint and follow the investigation process.

Written complaints and documented verbal complaints will be sent to the Quality team to be recorded in the electronic system within that working day and forwarded to the District Manager and the Lived Experience Partner.

Verbal complaints will be recorded at the time and will be checked with the person raising the complaint that the record is correct.

In some cases, people may be reluctant to formally complain, or will make a complaint and then ask that no action be taken. In these cases, staff should explain that it is our policy to use this feedback as a learning opportunity to improve our services and thank the person for bringing the issue to our attention.

Manaaki



Investigation of Complaints

Within five working days

The District /Operations Manager will:

- Decide the risk rating and how the complaint will be investigated/resolved using recommended complaint investigation guidelines
- Send a letter acknowledging the complaint / valuable feedback. Inform the person raising the complaint of the complaint process and thank them for bringing it to our attention
- Include our process, expected timeframes and that we may need to communicate with the person to gather further information
- Keep the Regional Manager and National Managers Health and Disability/Housing and Lived Experience Partner informed of the complaint and updated on the progress of the complaint investigation.

Whakawhanaunga



Within 20 working days of the complaint being lodged

Client Complaints P & P

The complaint will be investigated and resolved. If for any reason more time is required, the complainant will be sent an update with the new expected timeframe for an outcome by day 10. Updates will be provided at least monthly should any extension be required.

Investigation may include meeting or communicating with the person making the complaint to gather further information. They will have been informed of this in the acknowledgement letter.

During the investigation, consideration will be given to the Emerge Aotearoa values, the Code of Health and Disability Consumer Rights, Health Information Privacy Code, Health & Safety in Employment Act, or any other contractual or legislative requirement that may apply.

The Investigator will ensure the complaints register/system is updated with details of the investigation and the investigation will be concluded, giving enough time to respond to the person making the complaint within 20 working days from receipt of the complaint.

All documentation including the investigation process will be filed with Quality Assurance and is accessible on request to the Quality Team by District/Operations Managers, Line 3 or above.

Complaints Risk Rating

| | |
|-----------------|--|
| High | Client's needs not met resulting in harm |
| Moderate | Client's needs not met with impact on positive client experience |
| Low | Client's needs only partially met with minimal negative impact on client experience |

Low risk complaints can be resolved in a meeting with the person raising the complaint including:

- Acknowledging the complaint in writing
- Informing them of their right to advocacy
- Offering to meet, and if the person wants to meet negotiating a time, place and participants of the meeting
- Using our values to learn from the issue and discussing at team meetings and regional meeting to share the learning and prevent reoccurrence
- Include cultural support and/or interpreter support as required

Client Complaints P & P

Whakamana



Moderate complaints process includes:

- Acknowledgement of the complaint in writing
- Providing information on advocacy and HDC
- Preferably negotiating a face to face meeting time and place with the person raising the complaint at a time and place the person is comfortable with
- Consider cultural support and/or interpreter support

High Risk Complaints process includes

- Notifying Regional Manager, who will escalate as required
- Acknowledgement of the complaint in writing
- Providing information on advocacy and HDC
- Preferably negotiating a face to face meeting time and place with the person raising the complaint
- Include cultural support and/or interpreter support as required
- If required, reporting the complaint to HealthCert and/or the DHB/ funder.

Ako



Review of documentation

Lived Experience Partner and Quality Assurance review the content of the final response letter which will include:

- Details of the results of the investigation and whether it has been upheld or could not be substantiated
- Details of how any improvements will be implemented and timeframes
- Evidence that the complainant has been consulted and is satisfied with the outcome
- Information on the appeal process

Manaaki



Where the investigation is not concluded within 20 working days, a written update to the progress of the investigation and a reason for the delay will be provided to the person raising the complaint by day 10, with an expected timeframe for the investigation to be completed. Monthly updates will be provided at a minimum should there be any further delays.

Appeal Process

If the person raising the complaint appeals the outcome of the complaint investigation the Regional Manager will consider involving an external reviewer, discuss options with the National Manager, and will:

Whakawhanaunga



Client Complaints P & P

Within one week

Consider the need for further investigation by:

- Gathering information from the investigator of the complaint
- Reviewing the related documentation

Contact the person who raised the complaint to:

- Clarify what the person is not happy with
- Offer to meet to discuss and gather more information
- Keep the National Manager informed

Decision is made to close the complaint

The Regional/Operational Manager informs the person raising the complaint of the decision in writing.

If the decision is **accepted** the complaints register / system is updated and the complaint is closed.

If the decision is **not accepted** and the person raising the complaint is not satisfied the Regional/Operational Manager:

- Advises the person that they may refer the complaint to the Health & Disability Commissioner or The Privacy Commissioner
- Reinvestigates the complaint
- Advises Quality Assurance of the outcome to update the complaint register

Service Improvement Process

Service improvement begins with thorough, respectful investigation of all complaints and feedback that includes a responsive approach to all parties and an understanding of their worldview.

The identification and development of corrective action plans where a complaint is upheld is logged on the Complaints register by Quality Assurance for national review of trends and improvements.

Services will be supported by their Line Managers to learn from all feedback and complaints by reviewing root causes of complaints and resulting improvements.

Monthly – Service Manager/Team Leader

- Discuss at team and client/whanau meetings to identify trends and documents service improvement measures.
- Provides feedback to Quality Team

Whakamana

Ako

Manaaki

Whakawhanaunga

Client Complaints P & P

Whakamana



Two Monthly – District/Operational Manager

- Discuss at District and/or Regional Leadership meetings to identify service improvement measures
- Provides feedback to Quality Team

Three monthly – Quality Team

- Identifies area(s) of service improvement(s) resulting from learning from complaint(s)
- Assess the effectiveness of improvement measures taken
- Update the complaints register
- Provides update to Quality Governance Group

Ako



Six Monthly – Quality Team

- Complete trend analysis
- Monitors and reports implementation of service improvements
- Analyses effects of service improvement measures (refer Quality Improvement Framework)
- Provides update to Quality Governance Group
- Client Complaints Recording Process

Definitions/ Ngā Whakamāramatang

Manaaki



- Client or person using the service can also be identified as; people, tangata whaiora, whaiora, whānau, service user
- A complaint is:
 - Any expression of dissatisfaction about services providedDissatisfaction with the conduct of a staff member/ student placement/ contractor/ management of Emerge Aotearoa
- A complaint may be made:
 - Directly from a service user their family/whānau.
 - Through the Health and Disability Commissioners office.
 - Through the Privacy Commissioners office.
 - By a member of parliament.
 - Through Consumer Advocates.
 - By a service provider.
 - By a member of the public.
- Feedback is an observation, remark or expression of opinion about aspects of the service/organisation that could be improved. A person will in the first instance be informed of their right to make a formal complaint.

Whakawhanaunga



Client Complaints P & P

- Where the person identifies they do not want to make a complaint their comments may be formally recorded with the person's knowledge on the **Compliments Feedback and Suggestions form 180A107** and submitted to their line Manager and Quality Assurance for recording on the National Feedback Register.
- The same timeframes will be followed for investigation and response to feedback as a formal complaint. Corrective Actions will be documented in the quality section of team meeting minutes.
- Anonymous complaints – people lodging a complaint or feedback may prefer to be anonymous. Investigations will occur within the limitations caused by the anonymity and the limitations will be acknowledged in any documentation.
- NOTE: Where a person's life is at risk, criminal behaviour or court proceedings are involved anonymity may not be possible.
- Family/Whānau – includes but is not limited to carers, guardians, significant other/s, friends, etc.

See also/ Etahi Atu Tirohanga

- Health and Disability Services Standards, 8134:2008
- Health and Disability Commissioner Website - <http://www.hdc.org.nz/>
- HDC Complaints processes
- Open Disclosure policy and procedure
- Incident Reporting policy and procedure

Whakamana



Ako



Manaaki



Whakawhanaunga



Appendix 2 – Site Plan





| Legend | | |
|----------------------|------------------|--------------------|
| 105-107 Malfroy Road | Accessible route | Shared open space |
| Entry/Exit | Managers unit | Private open space |
| Carparks | Security office | Utilities |
| Accessible carpark | Units | |

All measurements are approximate and subject to survey.



Imagery sourced from: LINZ Data Services
 Property boundaries sourced from Land Information NZ. Crown Copyright reserved. Property boundaries accuracy: +/-1m in urban areas, +/-30m in rural areas.
 Coordinate System: NZGD 2000 New Zealand Transverse Mercator
 Datum: NZGD 2000 // This map was produced with ArcGIS Pro (Esri).

105-107 Malfroy Road
 Emergency Accommodation



Te Tūāpapa Kura Kāinga
 Ministry of Housing and Urban Development

PREPARED BY JK Bellamkonda DATE 5/05/2022 SHEET 1 OF 1

TPG REF 717539 A3 Scale 1:150

0 4.5 Metres

Part C – Social Impact Assessment



Contracted Emergency Housing in Rotorua

Social Impact Assessment

Prepared for Ministry of Housing and Urban Development

Prepared by Beca Limited

9 May 2022



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Appendix A – Summary of Contracted Emergency Housing Motels

Appendix B– Literature review

Appendix C – Media Review


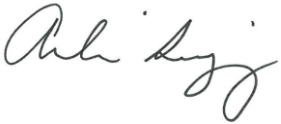
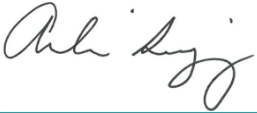
Appendix D – Survey Summary

Appendix E – Community Feedback Summary

Revision History

| Revision N° | Prepared By | Description | Date |
|-------------|---------------------------|---|-----------------------------|
| 1 | Jo Healy and Paige Rundle | Draft for client review | 13 th April 2022 |
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| | | | |
| | | | |

Document Acceptance

| Action | Name | Signed | Date |
|--------------|---------------------------|---|--------------------------|
| Prepared by | Jo Healy and Paige Rundle |  | 9 th May 2022 |
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| Approved by | Amelia Linzey |  | 9 th May 2022 |
| on behalf of | Beca Limited | | |

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This report has been prepared by Beca on the specific instructions of our Client. It is solely for our Client's use for the purpose for which it is intended in accordance with the agreed scope of work. Any use or reliance by any person contrary to the above, to which Beca has not given its prior written consent, is at that person's own risk.

Executive Summary

Overview

Te Tūāpapa Kura Kāinga –Ministry of Housing and Urban Development (HUD) is seeking a resource consent to contract and operate 13 motels for the purpose of emergency housing for a period of up to 5 years.

Specifically contracted emergency housing (CEH) involves:

- Contracting entire motels for the exclusive purpose of providing emergency accommodation for whānau and vulnerable individuals;
- Providing dedicated safe and secure accommodation where for whānau with tamariki and vulnerable adults separate from other cohorts; and
- Providing wrap around social support services based the needs of each whānau group.

A full description of the proposal is provided in Section 2 of the report.

Methodology

This Social Impact Assessment (SIA) evaluates the potential social impacts (positive and negative) in relation to the use of 13 motels for contracted emergency housing. The methodology is explained in full in Section 3 of the report.

This SIA investigated the existing social conditions of the environment in which contracted emergency housing would operate within (this is described in full in Section 5 and under subheadings of general social change in Section 6). The existing social conditions as of July 2021 (pre-commencement of CEH) forms the baseline from which any additional potential social impacts from the use of the motels for CEH are assessed.

The following summarises the existing social conditions that were present when CEH was established in July 2021:

- social and economic impacts arising from the wider disruption caused by the COVID 19 pandemic;
- rising costs of living;
- rising rental costs;
- ongoing and increasing housing shortages– in particular low-cost affordable housing;
- increased demand for emergency housing special needs grants (EH- SNGs) and supply of emergency accommodation;
- increased incidents of deprivation and housing vulnerability;
- aging motel stock; and
- increased reporting of social disturbance and incidents of family harm and dishonesty offences within the Fenton Street area.

Assessment

Our assessment found that CEH had the potential to impact the existing social conditions as follows (see section 3.3.1 for the description of communities assessed):

| Domain of social concern | Description of potential impact | Geographic extent | Impact of contracted emergency housing on existing conditions |
|----------------------------------|---|--|---|
| Way of life | How people move around the local community by foot | Those who move around the proximity of the sites by foot | Negligible to very low negative - <i>more likely to negatively impact when clustered with other motels supplying emergency or longer term occupancy</i> |
| Tourism Character | The impact on the tourism experience and reputation | Wider community | Negligible to very low negative – <i>more likely to negatively impact when clustered with other motels supplying emergency or longer term occupancy</i> |
| Residential Character | The impact of the CEH motels on the surrounding residential character | Neighbours and local communities (located in proximity of sites) | Very low negative |
| Community Services | How the CEH motels impact on the delivery of community services within the community. | Wider community | Low positive to negligible |
| Community cohesion and stability | How the CEH impacts how the community operates and the stability of the community. | Local and wider community | Negligible |
| Environmental Amenity | The impact of the CEH on the experience of the community environment. | Neighbours and local community within proximity of sites | Very low positive to low negative impact - <i>more likely to negatively impact when clustered with other motels supplying emergency or longer term occupancy</i> |
| Health and Wellbeing | Impacts on the health and well-being of the community | Neighbours and local community within proximity of sites | Negligible |
| Fears of safety | Impacts on sense of safety | Neighbours and local community within proximity of sites | Negligible to low positive impacts |
| Community Aspirations | Impacts on future aspirations of the community. | Local and wider community | Negligible |

This report recommends (Section 7) that further management in relation to landscaping, fencing, operational practices and communication provide opportunity to further reduce and/or enhance the above social impacts.

Overall, it was noted that CEH would largely not change the existing social conditions (improve or detract). Positive impacts were more likely where managerial inputs (improved reliability of maintenance of building and grounds, wrap around support services, operational rules, security services) resulted in improved motel conditions (including operational systems to manage the interface of CEH occupants of motels and the wider community and/or maintenance of sites). Negative impacts are more likely where the CEH motels are clustered within close proximity to other forms of emergency and transitional housing and other contracted motels, due to increased likelihood of incidents and subsequent social impacts.

The use of motels for emergency housing in our assessment is the symptom of social issues within the community rather than the cause. It is not considered that the contracting of the 13 CEH motels at the same time (noting one was 6 months later) has caused additional impacts. Of the 13 CEH motels, 11 already supplied, at least in part, emergency accommodation via EH-SNGs and therefore did not add to the overall number of suppliers of emergency accommodation. The other two sites (not previously supplying emergency accommodation) are not within the central cluster of accommodation and are in our opinion more able to be absorbed within the existing local community.

Without these CEH motels it is reasonable to consider that the demand for emergency and transitional housing would continue as evidenced by the increase in EH-SNG and public housing applications over the last few years. The majority of people in emergency accommodation in Rotorua are from Rotorua (or surrounding Districts) and these people would still need to be accommodated temporarily, as longer term more suitable housing solutions are not immediately available. Housing supply shortages indicate it will take many years to rectify. Therefore, we consider that not allowing contracted emergency accommodation to be consented and therefore operating would not improve the current social changes experienced within Rotorua and may result in further negative social change particularly for vulnerable members of the community.

Therefore, it is important to consider how to minimise potential impacts of emergency housing on the surrounding community. In our opinion contracted emergency housing does this. Contracted emergency housing separates emergency housing use from the provision of tourist accommodation and improves the care of whānau and vulnerable adults in emergency housing. The operating model aims to reduce potential impacts on the neighbours and local community through its management of the sites.

1 Introduction

1.1 Purpose and scope of assessment

Te Tūāpapa Kura Kāinga - Ministry of Housing and Urban Development (HUD) has lodged resource consent applications with Rotorua Lakes Council (Council) to contract and operate 13 existing motels in Rotorua for the purpose of providing accommodation for families and children in need of emergency housing (referred to in this report as “**Contracted Emergency Housing**” or “CEH”).

The applications are for a maximum fixed duration of five years; HUD has contracted the motels for an initial one-year period; the ongoing need for each site will be reviewed at least annually. It is anticipated that HUD will require CEH until additional Public Housing is supplied or other housing alternatives is made available. The motels will revert to traditional use as more suitable long-term accommodation options come on stream in the district.

This social impact assessment (SIA) aims to assess the potential social impacts (both positive and negative) of the use of these 13 sites for CEH. This will inform HUD of the potential social impacts and provide recommendations of appropriate strategies to avoid, remedy or mitigate potential impacts. This specialist report forms part of the resource consent application lodged with Council, providing Council with information on the potential social impacts that are likely to be realised from the operation of these CEH motels.

1.2 Assumptions and limitations

- Due to privacy issues (some people residing at CEH motels are family harm victims and for safety locations need to be anonymous where possible), the report does not explicitly identify the CEH motels. This provides some limitations and inhibits the level of specificity contained in this assessment. However, the report provides a sufficient level of detail to attribute impacts to particular sites where needed.
- The community is largely unable to discern between the various operating models of motels supplying emergency accommodation and other types of non-tourist accommodation. Therefore the community tend to refer to all motels where they assume people staying there are otherwise without secure accommodation as emergency accommodation. This is particularly so in areas where many motels supply accommodation under a range of models. For this reason information collected was often non-specific and there were limits to what our assessment could directly attribute to CEH motels. It was easier for the community to discern whether the impact was related to CEH motels where a motel was located on its own, away from others.
- Interviews and survey are relatively small sample sizes of the wider local communities and therefore the information has been cautiously considered to be indicative of potential themes within the community rather than conclusive community representation.
- The scope of the assessment is limited to matters that can reasonably be considered within the control/scope of the CEH motels. Beyond on-site operational rules and management the CEH motels do not have custodial responsibility of those residing in the motels, nor are there restrictions on residents of the CEH motels beyond stipulated operating rules.

¹ It is noted that the phrase “emergency housing in motels” is used throughout the report. This is a generic phrase to cover motels providing emergency accommodation. This may include motels that supply accommodation to people using EH-SNG’s and motels providing CEH. Where the report specifically refers to the 13 CEH motels contracted by HUD “CEH motels” is used.

- The scope of this SIA is the activity, that is the use of the motel to house people temporarily and provide support services and security in addition to current motel operations (i.e. cleaning services and site management).

2 The Proposed Activity

2.1 Background

In New Zealand, homelessness is defined as a living situation where people with no other options to acquire safe and secure housing are: without shelter, in temporary accommodation, sharing accommodation with a household, or living in uninhabitable housing (Statistics NZ, 2014). The meaning of these four categories of homeless living situations are explained further by Statistics New Zealand (2014):

- *“Without shelter- No shelter or makeshift shelter. Examples include living on the street and inhabiting improvised dwellings, such as shacks or cars.*
- *Temporary accommodation- Overnight shelter or 24-hour accommodation in a non-private dwelling not intended for long-term living. These include hostels for the homeless, transitional supported accommodation for the homeless, and women’s refuges. Also in this category are people staying long-term in motor camps and boarding houses.*
- *Sharing accommodation- Temporary accommodation for people through sharing someone else’s private dwelling. The usual residents of the dwelling are not considered homeless.*
- *Uninhabitable housing- Dilapidated dwellings where people reside”.*

Rotorua has experienced strong population growth since 2014 which has created significant pressure on the housing market (illustrated by shifts in housing costs, and large increases median rent and house prices) (Rotorua Lakes Council, 2022a). Those pressures include an ongoing shortage of affordable housing, a shortage of rental properties, and a shortage of state or community housing. All of these have been amplified by the effects of COVID-19 which has seen the need to urgently house hundreds of people who needed to safely isolate during the COVID-19 lockdown in 2020 (Rotorua Lakes Council, 2022a). Housing pressure has also been exacerbated by increasing housing costs (and increasing costs of living) as well as lower employment rates and reduced household incomes, as many industries (particularly tourism and hospitality) have been impacted by COVID-19.

Emergency Housing Special Needs Grants (EH-SNGs) were introduced in 2016 to help vulnerable individuals and families with an urgent housing need meet the cost of staying in short-term accommodation (predominantly in motels) (HUD & MSD, 2018). EH-SNGs are welfare payments that the Ministry of Social Development (MSD) makes to accommodation suppliers on behalf of clients when they cannot access accommodation and all other options available to them have been explored. EH-SNGs can be granted for up to 21 days and individual households may be accommodated within the same site for a longer period, as they can reapply for an additional grant.

Prior to 2021, formalised emergency housing through EH-SNGs was primarily supplied by motels. The motels were generally not for any specific population and did not have additional support services on-site. In March 2021, the Rotorua Housing Taskforce was established, bringing together government agencies, iwi and council to develop alternative immediate short-term solutions to improve the environment for whānau in emergency housing and the wider community, while more permanent housing solutions are delivered (Rotorua Lakes Council, 2022a). The taskforce identified and recommended a range of actions including HUD contracting suitable motels for exclusive use as an alternative provision of emergency housing service with a focus on whānau with children which were approved by Ministers Carmel Sepuloni and Megan Woods in May 2021 (Emergency Housing Fact Sheet, 2021; Rotorua Lakes Council, 2022).

2.2 Contracted Emergency Housing

Contracted Emergency Housing motels are motels that are contracted by HUD exclusively to provide emergency accommodation primarily for whānau with children. These CEH motels all have social support service providers that manage the site together with the motel operator and 24/7 security. HUD currently contracts 13 motels in Rotorua for CEH and began contracting these motels in July 2021 (with the most recent, 13th motel, being contracted in September 2021). It is noted that 11 of the CEH motels supplied emergency accommodation previously; some since April 2020 and some even earlier from 2017, 2018 and 2019. The motels selected for CEH (based on the suitability of their attributes and motel operator's willingness and attitude toward whānau) are intended to be used for CEH over the next 1-5 years. Afterwards, the sites are expected to return to their long-standing use; providing tourist accommodation. Over this period, demand for emergency housing is expected to have reduced – as more suitable long term accommodation options become available for residents in the Rotorua District.

2.2.1 Eligibility and referral process

Until December 2021, MSD referred clients directly to the social service providers contracted at each motel. In December 2021, Te Pokapū - the Rotorua Housing Hub became operational. Since then, they have taken on the role of assessing whānau who present with an urgent housing need and identifying the most appropriate action and placement for them. This aims to provide a more holistic approach that can more fully consider whānau needs and achieve better fit of placements at each CEH motel.

CEH is used primarily for families and whānau with children, but also rangitahi/young people, disabled people and, in some instances, other vulnerable individuals/couples such as Kaumātua and Kuia (i.e. elderly) with an urgent housing need. Snapshot occupancy data from 7th February 2022 supports that CEH is primarily used for whānau with children with this group making up 86% of placements across the 13 motels at this time (179 households). The remaining CEH households were made up of 11% singles (23 households) and 3% couples (7 households). This is presumed to be the population described above (rangatahi, disabled, elderly or other vulnerable individuals/couples).

The typical occupancy rate of CEH varies due to turnover; when residents move out before new residents are placed in. Snapshot data from February 2022 shows an occupancy rate that ranges from 65% to 93% with an average of 82% of units occupied by residents across the 13 CEH motels. The occupancy rate was similar for March 2022 ranging from 55% to 93% with an average of 78%. It is reported that where occupancy rates are lower, this is generally due to rooms being refurbished and that there is a continued high demand for beds. At nine of the CEH motels, 1 or 2 units are used for operations and do not have people placed in them. These are included in the above occupancy rates as vacant. The other unoccupied rooms were either undergoing maintenance or were awaiting new referrals. Two of the CEH motels also have rooms dedicated for emergency placements and where available have rooms that can be used to temporarily relocate whānau to de-escalate and manage a family harm incident (from within the site or other CEH motels under the same provider). The number of people residing on-site depends on the number of people housed in each unit. As of March 2022, 586 people were living across the 13 contracted emergency housing facilities (the maximum capacity is 1,100 + children under 18months)). See Table 1 below for more detail.

The average length of stay in emergency housing across all motels is 22 weeks.

Table 1: Snapshot occupancy data for the Contracted Emergency Housing facilities in December, February and March²

| Motel | Number of units contracted for operations ³ | 15 th December 2021 | | 7 th February 2022 | | 30 th March 2022 | |
|--------------|--|--------------------------------|---------------------|-------------------------------|---------------------|-----------------------------|---------------------|
| | | Room occupancy rate | Number of occupants | Room occupancy rate | Number of occupants | Room occupancy rate | Number of occupants |
| Motel 1 | 0 | 100% | 74 | 68% | 69 | 78% | 79 |
| Motel 2 | 1 | 90% | 10 | 90% | 12 | 80% | 11 |
| Motel 3 | 0 | 100% | 56 | 85% | 67 | 67% | 60 |
| Motel 4 | 0 | 100% | 33 | 93% | 34 | 93% | 34 |
| Motel 5 | 1 | 93% | 17 | 79% | 22 | 79% | 19 |
| Motel 6 | 2 | 95% | 63 | 87% | 74 | 84% | 73 |
| Motel 7 | 2 | 90% | 44 | 65% | 29 | 85% | 37 |
| Motel 8 | 1 | 93% | 51 | 93% | 52 | 73% | 42 |
| Motel 9 | 1 | 94% | 31 | 81% | 32 | 75% | 34 |
| Motel 10 | 1 | 93% | 36 | 79% | 37 | 86% | 41 |
| Motel 11 | 1 | 97% | 77 | 78% | 77 | 81% | 73 |
| Motel 12 | 0 | 100% | 66 | 85% | 64 | 85% | 52 |
| Motel 13 | 1 | 95% | 40 | 80% | 46 | 55% | 31 |
| Total | 11 | Average 95% | 598 | Average 82% | 615 | Average 78% | 586 |

² The number of contracted units used for operations (e.g. used as an office for staff or for storage) is also noted. Room occupancy is calculated including these 'operational units' as this is comparable to an occupancy rate when the facility was used for tourism. This is point in time data and is not averaged across each month. Where there are no operational rooms, motel offices or conference rooms are used for staff.

2.2.2 Operations

Unlike emergency housing supplied through EH-SNGs, under the contracted emergency housing model the whole motel is contracted out to provide emergency housing rather than individual rooms. A further distinguishing factor is that there is a dedicated social support service provider responsible for delivering services at each of the CEH sites. Along with day-to-day management, the contracted service providers (Visions of a Helping Hand (Visions), Emerge Aotearoa (Emerge), and WERA Aotearoa (WERA)) are responsible for organising support services for occupants including social and/or support workers. According to the Emergency Housing Factsheet provided with the resource consent applications, once whānau have been referred, the service provider should:

- “Carry out an assessment of the immediate needs of the client or whānau and arrange any necessary services to meet those needs.
- Meet regularly and work with each client or whānau to identify and manage issues that arise in relation to their stay in Contracted Emergency Housing.
- Prepare an individualised action and transition plan in conjunction with each client or whānau to document actions proposed to address any health, social, employment and financial needs.
- Assist in the transition to more permanent housing options where these are available.” (Emergency Housing Factsheet, 2021).

All 13 sites also have 1-2 security guards stationed on-site 24/7 as well as roaming security that visit each site approximately every 2 hours to provide additional support and are on call if required. Motel operators (who often live on-site) are responsible for maintenance, cleaning, inspections and repairs.

Each social service provider has some differences in the way they manage their sites and the behavioural rules that are implemented. Visitors are allowed on-site between set hours in some sites while others have a general no visitors policy, though exemptions may be made on a case-by-case basis. Overnight visitors are not permitted at any of the sites. These operational differences are summarised in Table 2 below.

Table 2: Operations and rules at Contracted Emergency Housing motels

| | Visions | Emerge | WERA |
|----------------------------|---|---|--|
| Staffing Provisions | | | |
| Motel operators | Motel manager (living on-site) | Motel manager (either living on-site or on-site during business hours) | Motel manager (as required) |
| Service provider staff | Social and support workers Monday to Friday between 8.30am and 5pm. On-call social support worker available 24/7 via phone | Support service staff Monday - Friday between 8am and 5pm Kaitiaki on-site for at least 4 hours daily, 7 days a week | Support workers Monday to Friday 9am to 5pm. |
| Security | One security guard on-site 24/7 <i>(plus two on call security guards roaming all 13 sites)</i> | One security guard on-site 24/7 <i>(plus two on call security guards roaming all 13 sites)</i> | One security guard on-site during the day and two at night <i>(plus two on call security guards roaming all 13 sites)</i> |
| Operational Rules | | | |

| | Visions | Emerge | WERA |
|----------|---|--|---|
| Visitors | Permitted between 9am and 6pm. There must be a discussion between staff and occupants before visitors can obtain entrance and visitors must sign in/out with security. | Permitted between 9am to 6pm. Must be invited by occupants or service provider and sign in/out at the motel office. | Not permitted Exemptions may be granted on a case-by-case basis if supporting the client alongside service providers. For example, if occupant has health challenges and needs someone to assist them. |
| Alcohol | No alcohol or drugs allowed on-site | Alcohol is allowed in rooms. Not permitted in shared areas. | No alcohol or drugs allowed on-site |

A more detailed summary of operational features at each site is provided in Appendix A.

Staff members keep a record of any incidents occurring on the site and the actions taken to respond to these. From our review, incidents on-site appear to be occurring less than daily but can range in frequency anywhere from monthly to more than 4 incidents a week at a site; however, these incidents are not necessarily visible to the surrounding community. These range from low-risk incidents such as health and safety, breaches to the rules (such as alcohol use, unpermitted visitors or breaking curfew), loud music, verbal abuse towards staff or other residents, and property damage, to higher risk incidents that may involve criminal offences including illegal drug use, domestic arguments, family violence, altercations, assault, and gang activity. Most incidents are internal to the sites themselves, however, some may be heard or witnessed by the community, for example, yelling, screaming, arguments or Police presence on a site. Of the incidents reviewed, five were from an event that occurred outside the relevant site or just down the street. From a review of staff records, since the commencement of CEH at the 13 sites only one complaint was received from a neighbour relating to direct property impacts from a CEH motel. This case was regarding an unauthorised visitor trespassing on their property (in order to jump the fence into the contracted emergency housing site).

3 Social Impact Assessment Methodology

3.1 Social Impact Assessment Framework

SIA is the most common framework used in New Zealand and internationally to analyse, monitor and manage the potential social consequences of development. The methodology used for this SIA is based on the matters provided for in the International Association of Impact Assessment (IAIA) Social Impact Guidelines. It draws from this framework and identifies the specific social context matters considered relevant to this Project.

The IAIA defines a SIA as:

“...the processes of analysing, monitoring and managing the intended and unintended social consequences, both positive and negative, of planned interventions (policies, programs, plans, projects) and any social change processes invoked by those interventions” (Vanclay, 2003).

A social impact is defined as a change to one or more of the following social domains of concern:

- **“People’s way of life** – how they live, work, play and interact with one another on a day-to-day basis.
- **Their culture** – their shared beliefs, customs, values and language or dialect.

- **Their community** – its cohesion, stability, character, services and facilities.
- **Their political systems** – the extent of which people are able to participate in decisions that affect their lives, the level of democratisation that is taking place, and the resources provided for this purpose.
- **Their environment** – the quality of the air and water people use; availability and quality of the food that they eat, the level of hazard of risk, dust and noise they are exposed to; the adequacy of sanitation, their physical safety, and their access to and control over resources.
- **Their health and wellbeing** – health is a state of complete physical, mental, social and spiritual wellbeing and not merely the absence of disease or infirmity.
- **Their person and property rights** – particularly whether people are economically affected or experience personal disadvantage which may include a violation of their civil liberties.
- **Their fears and aspirations** – their perceptions about their safety, their fears about the future of their community, and their aspirations for their future and the future of their children.” (Vanclay, 2003).

The methodology adopted for this SIA (using the IAIA framework as guidance) has been developed to identify and predict the key social impacts of the operation of 13 contracted motels for emergency accommodation.

3.2 Methodological approach

The SIA has been undertaken using the following steps:

Table 3: Methodological steps undertaken as part of this SIA

| STEP | TASK | DETAILS |
|----------------|-------------------------------|---|
| Step 1: | Scoping and contextualisation | Obtaining an understanding of what is proposed and identifying the preliminary ‘social area of influence’ of the Project, likely impacted and beneficiary communities (nearby and distant), and stakeholders. |
| Step 2: | Information Gathering | The process of gathering information for profiling and assessment: <ul style="list-style-type: none"> • Desk top research • Community consultation |
| Step 3: | Community Profiling | Gain a good understanding of the communities likely to be affected by the Project by preparing a Community Profile. |
| Step 4: | Impact identification | Identify the social domains of concern for assessment. |
| Step 5: | Assessment of Social Impacts | Through analysis describe and assess the potential impacts that will likely result from the Project. |
| Step 6: | Recommend mitigation | Consider the requirements to avoid, remedy or mitigate the identified impacts and make recommendations. |

These steps are further described below.

3.3 Step 1: Scoping and contextualisation

The aim of this step is to understand the scope of the proposal and identify the communities that are likely to experience social change as a result. To achieve this the following was undertaken:

- Review of proposal documentation including site details, activities on-site and operational procedures;
- Review of context documentation on purpose of proposal and wider context in relation to homelessness and housing provision; and
- Identification of the social area of influence.

3.3.1 Social area of influence

The proposal takes place over 13 sites and the impacts are considered at the following scales where relevant:



Figure 1: Spatial scales at which impacts are considered as part of this SIA

The “**wider community**” is Rotorua District.

The “**local communities**” are those communities where these facilities are located. For the purpose of this SIA these have been grouped into two areas of social influence as outlined in Figure 2.

The “**neighbours**” are those living directly adjacent to the CEH sites (both adjoining and within one to two houses away).

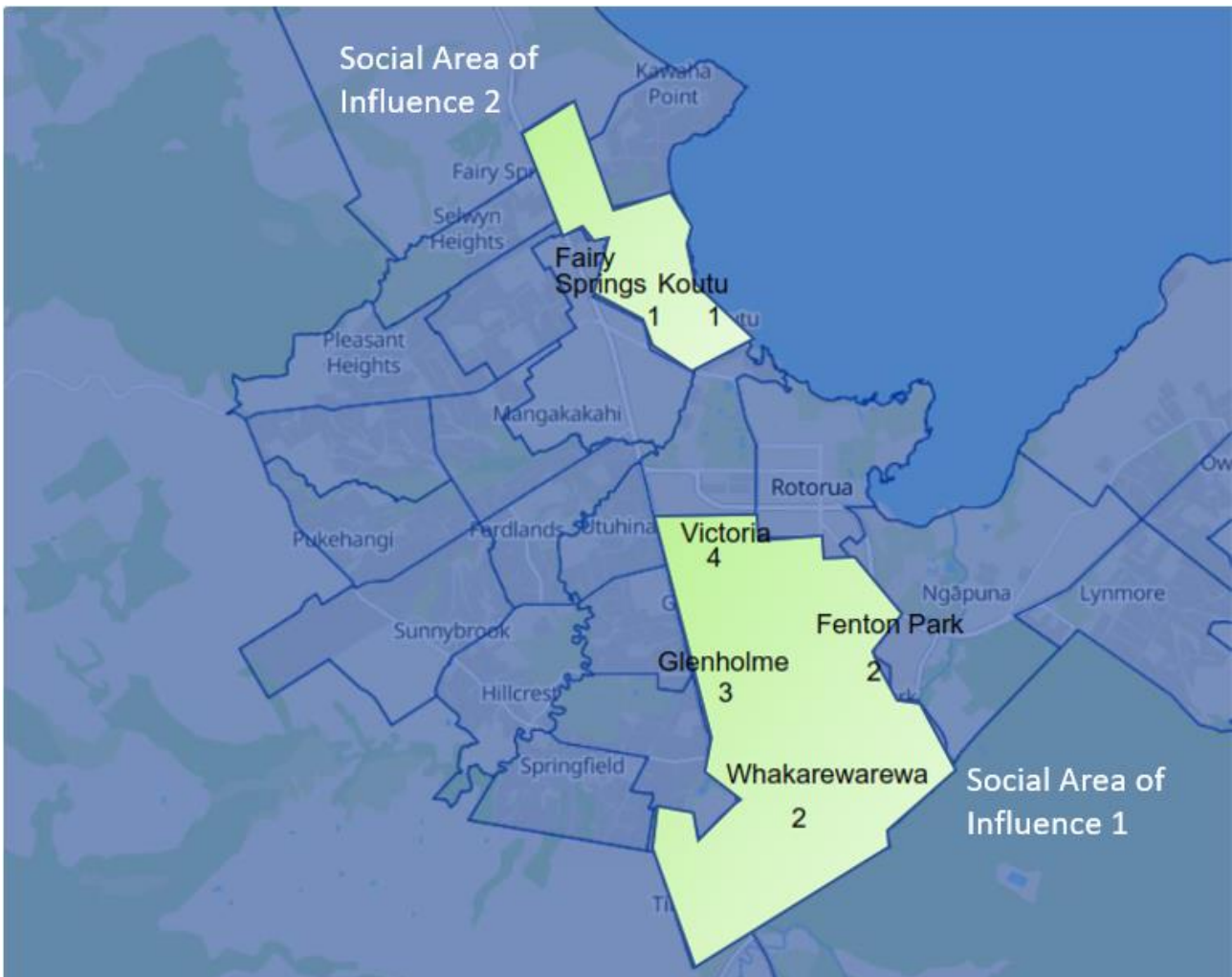


Figure 2: Local communities have been grouped into two areas. Social Area of Influence 1 includes suburbs of Victoria, Glenholme (North and South), Fenton Park, and Whakarewarewa. Social Area of Influence 2 includes Koutu and Fairy Springs. Numbers indicate the number of CEH sites located in each suburb.

3.4 Step 2: Information Gathering

The following data collection methods were undertaken to inform the community profiles and assessment of impacts.

3.4.1 Desktop research

The following publicly available information was reviewed and analysed to inform the background context of this assessment:

- Demographic data including census data, central and local government reports;
- Police crime statistics;
- Motel occupancy rates;
- Reports on housing, population growth, and COVID-19 impacts;
- Relevant statutory documentation including local council plans;
- Relevant literature on the social impacts of emergency and transitional housing; and
- Relevant media reporting on emergency housing in Rotorua.

Literature and media review is located in Appendix B and Appendix C.

3.4.2 Field research

A summary of themes from field research is provided in Appendix E.

3.4.2.1 Site visits

Two site visits were undertaken in December 2021 (site visit one) and March 2022 (site visit two).

Site Visit One was an initial scoping visit to confirm the project team's definition of the social areas of influence and to identify potential stakeholders for the impact assessment.

Site Visit Two was undertaken over two days and involved three visits to each of the 13 CEH motels at the following times:

- Morning (Between 9am – 11am);
- After school (between 3:30pm and 5pm); and
- Evening (after 8pm).

Each of these visits included walking and/or driving around the street or block of each of the sites and involved documenting observations of site environment, surrounding environment and activities taking place at these times. Each morning visit involved walking around the site area for 10 -20 minutes (depending on if there was a neighbourhood block to walk around). Afternoon and evening visits involved driving around the street or block for 3-5 minutes per site.

3.4.2.2 Community survey

An independent subconsultant undertook a randomised phone survey within the **local communities** to understand perspectives of community values, change, emergency housing observations and opinions. Refer to Appendix D for detailed methodology and findings.

3.4.2.3 Stakeholder interviews

Twenty-seven stakeholder interviews were undertaken by phone/online/email (reflecting restrictions on face-to-face meetings due to COVID-19 management). Stakeholders were identified as one of the following:

- Facility providers – motel operators and social service contractors;
- Social service providers – support services, health, education and police;
- Local iwi groups – representatives involved in housing provision (Rotorua Taskforce);
- Community/business organisations – including business organisation, residents' group, community centres, tourism and economic development and community advice; and
- Members of the Rotorua housing taskforce.

3.4.2.4 Neighbour interviews

Across the 13 CEH motels, neighbours (primarily residential) within close proximity of a site were either phoned directly (if operators of the sites held contact details) or delivered a leaflet (to mailboxes) inviting them to email or make contact with the social impact assessment research team to arrange a phone interview. There were approximately 65 residential neighbours identified around the 13 CEH motels. 13⁴ interviews were conducted:

- Fairy Springs (1);
- Whakarewarewa (2);
- Victoria (4); and
- Glenholme (4 interviews and 2 emails).

Neighbours specifically referred to motels in close proximity to them including CEH motels. Overall, the neighbour interviews referred to all but 2 of the CEH sites. No one from Koutu or Fenton Park were spoken to.

⁴ The small number of interviews is due to how many people responded to the flyers.

3.5 Step 3: Community Profiling

The community profile provides a description of the existing social environment from which potential social impacts are identified and assessed. The community profile is set out in Section 5 of this SIA as follows:

Wider Community - Rotorua:

- Demographic profile;
- Tourism; and
- Housing and homelessness.

Local communities:

- Demographic profile;
- Land use and community facilities; and
- Crime.

The existing environment at a neighbour and street level is described within the local communities sections where relevant.

3.6 Step 4: Impact identification

Following the completion of data collection the following process was undertaken. Firstly, surveys and interviews were coded for themes in accordance with the IAIA identified social domains for concern. These were then cross-referenced with the scope of the assessment and in context of the Resource Management Act 1991 and resource consent application. The following were identified as social domains of concern to be assessed for potential social impacts:

- **People's way of life** – how they live, work, play and interact with one another on a day-to-day basis.
- **Community character** – including tourist and residential character.
- **Community services** – impacts on provision of community services.
- **Community cohesion and stability** – how a community comes together and how stable it is.
- **Environment** – amenity, noise and physical safety.
- **Their health and wellbeing** – health is a state of complete physical, mental, social and spiritual wellbeing and not merely the absence of disease or infirmity.
- **Their fears and aspirations** – their perceptions about their safety and their aspirations for their future and the future of their children.

3.7 Step 5: Assessment of social impacts

Firstly all the information collated was reviewed and analysed. For each social domain of concern identified in Step 4 the team described the general social changes that the community described and was identified in research.

The team then assessed how CEH specifically impacted these existing social changes. The potential social impacts identified have been evaluated as either positive, neutral or negative based on the degree of change to the existing social environment (as described in this report). This assessment is made on consideration of both the scale and duration of the impact (e.g. who is impacted within each of the defined 'community of impact' and the period of expected impact (noting the limited duration of the proposal for the use of motels as CEH).

Specifically, we assess if the CEH:

- Improves existing conditions – reducing overall impact: **Positive Impact**
- Maintains the status quo – does not improve the existing impact nor makes it worse: **Negligible Impact**
- Exacerbates existing conditions – negatively contributes to the existing environment further exacerbating the issue: **Negative Impact**

The assessment is for all 13 CEH motels located across Rotorua. Where it is considered CEH sites differ this is described and an impact range is given.

When assessing the potential scale of impact the following is considered:

- extent – within the geographical scales how many are potentially impacted - many, moderate number, few;
- likelihood of impact occurring – almost certain, certain, unlikely;
- severity/consequence – serious, minor, moderate;
- duration – permanent, medium term (years), temporary (months);
- frequency – constant, episodic, rare; and
- ease of mitigation (part of overall assessment).

The assessment considered the activity in relation to the following likely alternatives:

- the sites operating as traditional motels within the current social context;
- this population using EH-SNGs at other motel suppliers; and
- more incidents of people being without temporary shelter/stable living conditions

In addition the following contextual factors have been taken into consideration:

- CEH are not the only type of emergency accommodation being supplied in Rotorua. Other motels are supplying emergency/transitional housing for people who may otherwise be 'homeless' under a range of different models of service delivery via EH-SNG mechanisms or other arrangements.
- In this broader context it is observed that the community is experiencing a variety of motel uses (including CEH motels, other temporary housing, ongoing motel usage, MIQ facilities etc.) as a whole, and as such it may not always be easy for the community to distinguish between these different uses.
- This assessment is also occurring in the context of COVID-19 and associated changes in economic and tourism activity in the region, which may influence some people in the community's perceptions of how their environment has changed.

To counteract this the assessment tries to where possible directly link the potential impacts identified to the activity and use multiple sources to validate these links.

3.8 Step 6: Recommendations

In Section 7, the SIA Report outlines methods to avoid, manage or mitigate identified social impacts resulting from the exclusive use of motels for CEH. Following this an assessment of residual impacts is considered in the conclusion.

4 Relevant policy documents / framework

4.1 Resource Management Act 1991

The Resource Management Act 1991 ("RMA") requires the decision-making process to include consideration of the actual and potential effects of activities on the environment. The RMA definition of the environment in Section 2 includes:

- (a) *Ecosystems and their constituent parts, including people and communities;*
- (b) *All natural and physical resources;*
- (c) *Amenity values; and*

(d) The social, economic, aesthetic, and cultural conditions which affect the matters stated in paragraphs (a) to (c) of this definition or which are affected by those matters.

This definition is central to defining the social impacts with respect to the environment. Other sections of the RMA such as Part 2, Section 5 are also integral to an assessment of social effects. Section 5 defines the purpose of the RMA: *to promote the sustainable management of natural and physical resources. Sustainable management means (emphasis added):*

*“Managing the use, development and protection of natural and physical resources in a way, or at a rate, which enables **people and communities to provide for their social, economic and cultural wellbeing** and for their health and safety.”*

Section 7(c) states that (emphasis added):

*“all persons exercising functions and powers under the Act... shall have particular regard to... the maintenance and enhancement of **amenity values**.”*

Schedule 4(2) states that any person preparing an assessment of the effects on the environment should consider the following matters (emphasis added):

*“Any effect on those in the neighbourhood and, where relevant, the wider community **including any socio-economic and cultural effects**.”*

4.2 Aotearoa Homelessness Action Plan 2020-2023

The Aotearoa Homelessness Action Plan seeks to *“deliver on the Government’s vision that homelessness is prevented where possible, or is rare, brief and non-recurring”*.

The action plan sets out a package of actions to address homelessness with an increased focus on prevention, alongside supply, support and system enablers. Key focus areas are as follows:

- *“Prevention – Prevention actions work to ensure individuals and whānau receive the support they need so that homelessness stops happening in the first place*
- *Supply - Immediate and longer-term supply actions will focus on increasing our supply of different types of housing, with a focus on working with Māori Community Housing providers and other Māori and Iwi providers*
- *Support - Through the action plan, more support will be provided for individuals, families and whānau experiencing homelessness to move as quickly as possible into stable accommodation and access wider social agencies. Some individuals, families and whānau require more support to navigate through the system of organisations and services designed to help.*
- *System enablers - Preventing and reducing homelessness, requires everyone to work together to respond to the different challenges faced in communities around New Zealand. Immediate and long-term actions will focus on building the capability and capacity of the workforce and improve data and information on homelessness.”*

4.3 National Policy Statement on Urban Development 2020

The National Policy Statement on Urban Development (NPS-UD 2020) seeks to improve how New Zealand’s cities respond to growth to enable improved housing affordability and community wellbeing. The NPS-UD 2020 sets out national direction and policies for urban development (under the RMA 1991) that councils must give effect to. Policies include direction on intensification, removing car parking requirements, responsiveness, wider outcomes, strategic planning, evidence and engagement.

4.3.1 Rotorua Context

Under the NPS-UD 2020 Rotorua Lakes Council is a tier 2 local authority. Policy 7 sets out that tier 1 and tier 2 local authorities set housing bottom lines for the short-medium term and the long term in their regional policy statements and District plans.

In accordance with Policy 7 the Rotorua Housing and Business Development Capacity Assessment 2021 (HBA) was completed on the 3rd of February 2022 and officially adopted by council on the 24th of February 2022.

The key recommendations of the HBA included:

- Supporting the need for intensification plan change;
- Re-zoning Fenton Street to a more intensive mixed-use zoning;
- Providing more infrastructure-served, feasible greenfield land;
- Ensuring that the CBD is an attractive place to invest, do business & live;
- That Council continues to seek funding to help alleviate storm water constraints; and
- That Council considers zoning more land for light industrial use.

The NPS-UD requires that following the adoption of the HBA, Council also notifies the Ministry for the Environment of any housing shortfalls and incorporate Housing Bottom Lines into the District Plan and Regional Policy Statement.

The HBA identified that Council has a housing shortfall of:

- 1890 dwellings in the short term (including unmet demand of 1500 dwellings);
- 1400 dwellings in the medium term (including the unmet demand of 1500 dwellings); and
- 3630 dwellings in the long term.

Where there is a housing shortfall Council is required to undertake a plan change and/or consider other options for increasing capacity or enabling development.

A Future Development Strategy (FDS) is required to respond to the findings and is required to be in place to inform the 2024 Long-term Plan. The strategy will specify where and how sufficient development capacity will be provided to meet future growth needs over the next 30 years. The housing bottom lines based on the HBA that have been adopted and are to be included in the District plan are as follows:

- Short term (3 years 2020-2023) - additional 3,560 dwellings;
- Medium term (10 years 2020-2030) - additional 6,240 dwellings; and
- Long term (30 years 2020-2050) - additional 9,740 dwellings

4.4 Resource Management (Enabling Housing Supply and Other Matters) Amendment Act 2021

The Resource Management (Enabling Housing Supply and Other Matters) Amendment Act (the Amendment Act) is an amendment to the RMA introducing Medium Density Residential Standards (MDRS) for specified urban areas and areas where there is an acute housing need (such as in Rotorua) to enable a wider variety of housing choice.

The MDRS will apply to most of Rotorua's existing residential areas and will help to address housing shortfalls identified in the HBA. A change to the District Plan under the new Intensification Streamlined Planning Process must be notified by 20 August 2022.

These MDRS will enable people to develop up to three dwellings on each site, each being up to three storeys, without needing to apply for a resource consent. This is provided all other rules and standards in relevant plans have been complied with.

4.5 Rotorua Lakes Council Long-Term Plan 2021-2031

4.5.1 He Papakāinga, He Hapori Taurikura - Homes and Thriving Communities Strategic Framework

The strategic framework addresses both use of emergency housing and an action plan to enable more houses to be built. The contracted emergency homes are outlined within the Long-term Plan as follows:

“A Central Government, Council and Te Arawa task force has collaborated on a Rotorua focused solution for how to better support the people living in emergency housing motels and the community. This collaboration resulted in Central Government announcing changes to the emergency housing provision in Rotorua.

This will make it easier for wrap-around support to be delivered to whānau and tamariki living in motels including:

- *Central Government will directly contract motels for emergency accommodation*
- *Wrap around social support services will be provided for those in emergency accommodation*
- *Grouping of cohorts like families and children in particular motels will be kept separate from other groups*
- *A one-stop Housing Hub will be established for access to services and support”*

4.5.2 Whakahaumarū Hapori - Community Safety Plan

Council, Te Arawa, the New Zealand Police and key stakeholders are all concerned about an increase in anti-social and criminal behaviour, affecting residents and visitors’ experiences in Rotorua.

The Homes and Thriving Communities Strategic Framework sets out the commitment to develop a Community Safety Plan. To show a dedicated commitment to improving community safety and crime prevention a collaborative partnership between Rotorua Lakes Council, Te Arawa, the Police and key safety stakeholders will be formed.

“The vision guiding the development of a Community Safety Plan is based upon Rotorua:

- *Being the safest place to live and raise a family*
- *Having a positive reputation as a safe destination*
- *Having a sense of belonging and connection in our neighbourhoods*
- *Children and young people growing up in nurturing families*
- *Reducing anti-social behaviour, alcohol and drug abuse*
- *Reducing crime statistics and victimisation*
- *Developing effective collaboration with Police, community groups, business and neighbourhoods*

Actions within the community safety plan will include:

- *Extending and enhancing CCTV, electronic tools and community patrols within the CBD, Fenton Street, known hotspots and community neighbourhoods.*
- *Increasing ‘Crime Prevention Through Environmental Design’ (CPTED) assessment and treatment of hot-spot public places to make them safer.*
- *Supporting the development of Community Centre Hubs that enable community-led delivery of social and other services.*
- *Prioritising grants to support community group initiatives that increase safety*
- *Supporting a range of programmes that keep people connected through positive activities in our public spaces including parks and reserves, city streets and neighbourhoods*
- *Supporting community resilience and safety programmes that ensure our children and young people have the social and life skills that enable positive participation in school, work and social life.”*

4.6 Rotorua Spatial Plan 2018

The spatial plan focuses on the community's vision for the future. Of relevance is the vision for the Central Business District, surrounding area and Fenton Street.

It notes that future District plan changes could allow for the consolidation of the CBD (reducing in size), consolidating tourism accommodation in the CBD, and allowing existing accommodation to change to land for homes. With specific regard for Fenton Street it is noted as follows:

“Entering Rotorua from the south there are a number of older tourist accommodation properties that could be converted or redeveloped with town houses or terrace style homes. New apartments could also be placed on the edges of the CBD.”

Within Objective 5 of the spatial plan there is a recommendation to undertake District plan changes to encourage the movements of tourism accommodation in Fenton Street into areas for housing. This is underpinned with an expectation that tourist accommodation businesses will over time transition to the CBD.

5 Existing environment

5.1 Wider community - Rotorua

5.1.1 Demographic profile

Rotorua is a medium sized city located in the Bay of Plenty region of New Zealand's North Island. The main urban area is located on the southern shore of Lake Rotorua but the wider Rotorua District, governed by Rotorua Lakes Council, includes other surrounding rural areas such as Okere Falls, Mamaku, and Lake Rotoma to the north and Mihi, Broadlands, and Kaingaroa Forest to the south. At the time of the 2018 census, Rotorua District had a population of 71,877 people (Statistics NZ, 2018).

Rotorua has a significant Māori population, with 40% of residents identifying as Māori in the 2018 census, more than double the overall New Zealand proportion of 17%. The median personal income in the Rotorua District is \$28,000, less than the nationwide median of \$31,800. Unemployment in the District is also 2% higher than the New Zealand average sitting at 6%. Rotorua has similar levels of homeownership to the New Zealand average and this has been decreasing since 2006 (also in line with trends across New Zealand). See Table 4 for more detail.

5.1.2 Tourism

Rotorua is a well-established tourist destination attracting large numbers of both domestic and international visitors with its focus on outdoor, adventure, cultural and geothermal activities (Rotorua Economic Development, 2021; McKinnon, 2022). The town was built by the New Zealand government in 1880s for tourists visiting the geothermal lakes on land leased from Ngāti Whakauae near the Māori lakeside settlement of Ōhinemutu (McKinnon, 2022). Rotorua's geothermal surface features are one of the greatest drawcards for international tourists, containing one of the last remaining areas of major geyser activity in New Zealand (Bay of Plenty Regional Council 2022). Construction of the railway in 1894 encouraged growth and the government built European style bathhouses to attract more visitors with therapeutic facilities (McKinnon, 2022). Nearly half of all visitors to Rotorua still come specifically to see and experience the District's geothermal wonders (Bay of Plenty Regional Council 2022).

From 1945 to 1976 Rotorua experienced a high level of population growth from 7,500 to 46,000 people. This was driven by primary industries such as forestry, farming and hydroelectricity development.

From around the 1950s, motels and hotels to accommodate tourists have lined Fenton Street, which acts as an entranceway to the CBD and is within walking distance of popular amenities. This pattern of accommodation remains today with accommodation in Rotorua mainly clustered on or around Fenton Street. Other

accommodation is clustered around Lake Rotorua and near the lake front. According to Rotorua Lakes Council's Destination Management Plan (2021), much of the motel accommodation along Fenton Street is now considered to be "tired and run down" and "these motels can create the perception that the destination [Rotorua] is tired and dated" (Rotorua Lakes Council, 2021, p28).

In 2019, there were more than 3 million visits to Rotorua, accounting for over 30% of Rotorua's GDP (Rotorua Economic Development, 2021). Prior to 2020 and impacts on tourism related to the COVID-19 pandemic, 71% of the visitors to Rotorua were made by international customers and 29% of visits were made by domestic tourists with most of the visitors at this time coming from China, Auckland and Australia (MBIE, 2019). However, domestic tourists spent almost twice as much as international tourists with domestic tourists accounting for 58% of visitor expenditure and international tourists 42% of the total expenditure in 2019 (MBIE, 2019). Of this expenditure, \$132 million was spent on accommodation and \$132 million was spent on food and beverage (MBIE 2019). The tourism sector accounted for 23% of employment in 2019, which is over double the national average of 9% (Infometrics, 2020).

Since April 2020 visitor numbers to Rotorua have dropped significantly due to restrictions brought on by the COVID-19 pandemic, which have restricted the entry of international tourists and national lockdowns limiting domestic movement. According to data collected by the Accommodation Data Programme and Statistics NZ, motel and apartment occupancy varied between 64% and 84% between January and September 2019. Following the start of the COVID-19 pandemic the occupancy rate between June 2020 and January 2022 ranged between 23% and 72%. For twelve of the twenty months during this time period, occupancy was less than 45% (see Figure 3 below).

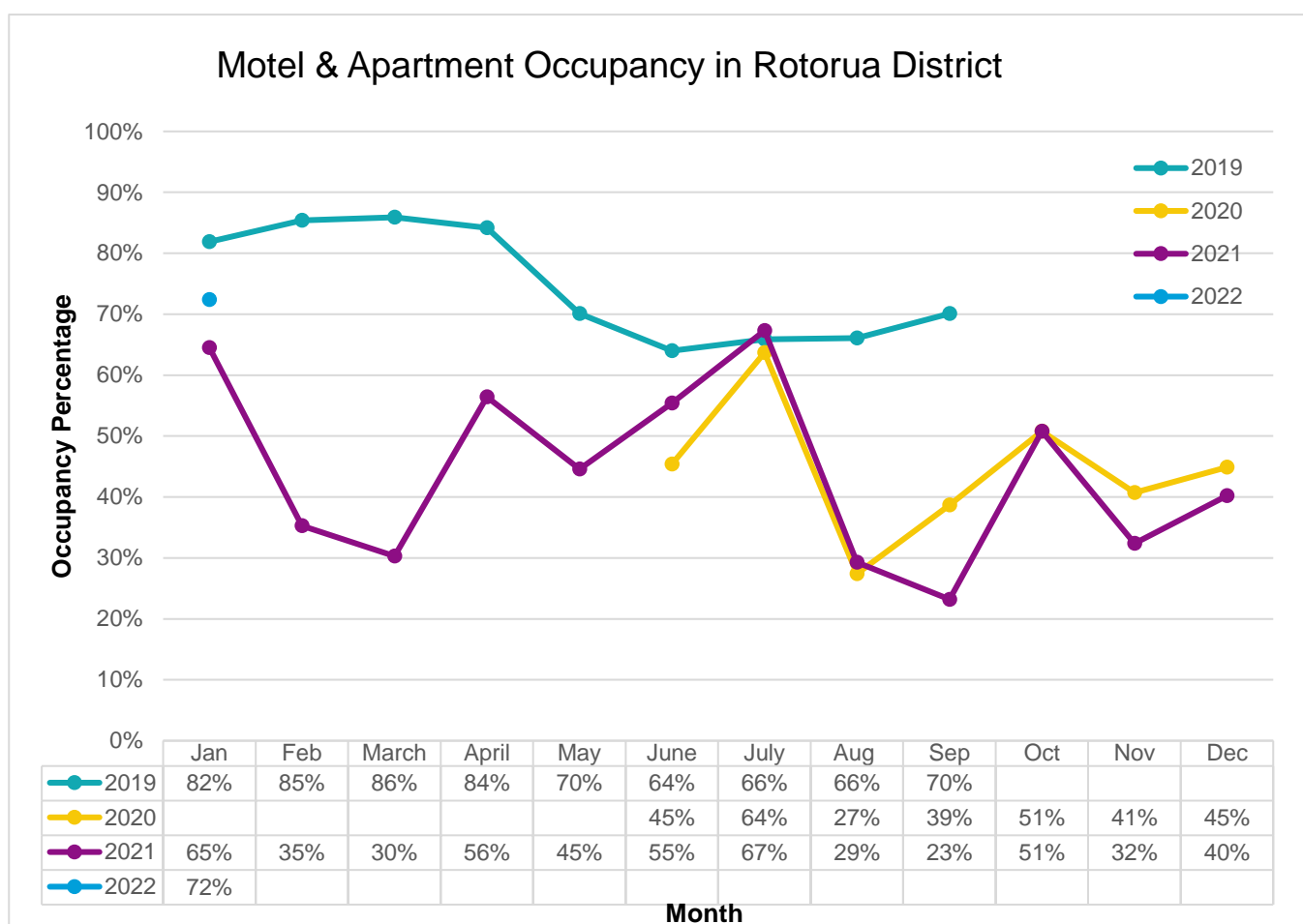


Figure 3: Occupancy rate of Motels and Apartments in Rotorua District prior to and following impacts COVID-19 (Jan 2019-Jan 2022). Sourced from Accommodation Data Programme 2022 and Statistics NZ 2019⁵.

Across New Zealand the number of people employed both directly and indirectly by tourism decreased by 33% and 38% respectively from the year ending in March 2020 to the year ending in March 2021 (MBIE, 2021). The impact of lockdowns also limited the ability of employed people to work, with more than half the workforce unable to operate during a level 4 lockdown (Infometrics 2020). Accommodation, food services, retail and wholesale trade were also particularly affected during level 3 as businesses that were able to open could not operate at full capacity due to social distancing and other requirements (Rotorua Lakes Council, 2020). Māori unemployment rates in Rotorua have historically been higher than the unemployment rates for the whole workforce (Infometrics 2020). COVID-19 added to these statistics as vulnerable and low-income communities in Rotorua continued to be affected by COVID-19, and are overrepresented in almost every industry affected by the pandemic (Infometrics, 2020). This is because half of the job losses in Rotorua in 2020 were experienced by lower skilled workers in hospitality, retail, service and sales industries (Infometrics, 2020).

International expenditure from 2020 to 2022 was greatly reduced and Tourism Electronic Card Transactions show that domestic visitor expenditure has fluctuated throughout the COVID-19 pandemic (MBIE, 2022b)⁶. A

⁵ Data was collected via public and private surveys. In 2019 no data was collected between the months of October, November and December as the accommodation survey is no longer produced by Stats NZ. Accommodation Data Programme (ADP) took over the data collection from June 2020. According to the site *“The data excludes stay units occupied by emergency housing (MSD), transitional housing (HUD), annual sites, and other permanent residents. Managed Isolation and Quarantine hotels are also excluded”*.

⁶ Tourism Electronic Card Transaction data is released by MBIE as an interim replacement to Monthly Regional Tourism Estimates. The figures underestimate the actual expenditure as they only represent card spending

sharp drop in domestic spending was experienced in autumn 2020 (March-May) at the time of New Zealand's first lockdown. Domestic spend in the 2021 summer season (December-February) increased to higher than the previous 2019 and 2020 summers; however, another drop was experienced in spring (September to November) 2021 when Aucklanders (one of Rotorua's large domestic markets) were unable to travel outside their region (MBIE, 2022).

5.1.3 Housing and homelessness

5.1.3.1 Affordable, public and transitional housing


New Zealand is facing issues relating to the provision of affordable housing and over recent years there has been increasing numbers of people seeking support to access housing. From September 2018 to September 2021, the number of people who have applied for public housing through MSD has increased from 9,536 to 24,546 people (HUD, 2021a). Demand for public housing during the September 2021 quarter increased across almost all regions of New Zealand when compared to September 2020 (HUD, 2021a).

Since 2014, Rotorua has experienced strong population growth after two decades of stable growth (Rotorua Lakes Council, 2022a; HUD, 2021c). The housing supply has not responded, and the number of building consents granted remains one of the lowest in New Zealand by population (MSD, 2021). Since the beginning of 2015 rents in Rotorua have increased by 85% and house prices by more than 150% (HUD, 2022). Rents have increased sharply, more than 8% per annum since 2015 compared to growth of 3% per annum from 2001 to 2014. The growth in rents has been a key driver of the increased homelessness, including overcrowding (HUD, 2022). This has placed significant pressure on public and emergency housing with ongoing shortages of affordable housing options. According to tenancy bond data collated by MBIE, the median weekly rent across Rotorua between August 2021 to January 2022 was \$435 (MBIE, 2022a).

Rotorua District has high levels of housing need indicated by higher levels of benefit dependency, emergency housing use and applications on the Public Housing register when compared to the rest of New Zealand (Lankshear & Biggs, 2022). As of December 2021, which is the latest data published by HUD, the Bay of Plenty region had 2,394 applicants on the Housing Register which was a 37% increase from December 2020, the second highest percentage increase of regions across New Zealand (HUD, 2021)⁷. Rotorua District had the highest number of housing register applicants within this region at 973 applicants. Rotorua District also had 788 occupied public houses and 134 transitional housing places. In Rotorua there is also a high reliance on emergency housing supplied by motels rather than transitional housing (HUD, 2021c). In early 2021 prior to the establishment of the Rotorua Housing Taskforce and CEH, Rotorua had around five EH-SNG placements for every one transitional housing placement compared to roughly one-to-one ratio across New Zealand (MSD, 2021). See Figure 4 below for the key statistics for the Bay of Plenty region and Rotorua District.

and do not include other forms of spending including cash, pre-purchases, or online spending. However, they can be used to look at trends in domestic spending.

⁷ The highest percentage increase in applicants on the housing register compared to December 2020 was Northland at 38%, just 1% higher than Bay of Plenty.

| Bay of Plenty | | Applicants on the Housing Register | Public Housing occupied homes | Number of EH SNG approved |
|---|--|-------------------------------------|-------------------------------|-----------------------------------|
|  | | 2,394 (2,191) | 2,993 (2,974) | 4,586 (4,442) |
| | | Applicants on the Transfer Register | Transitional Housing places | Amount of EH SNG approved |
| | | 165 (146) | 376 (351) | \$11,784,063 (\$9,507,506) |

| Rotorua District | Number of applicants on the Housing Register | Number of applicants on the Transfer Register | Public Housing Occupied Homes | Transitional Housing places | Number of EH SNG approved |
|------------------|--|---|-------------------------------|-----------------------------|----------------------------------|
| | 973 (861) | 37 (35) | 788 (784) | 134 (111) | 2,523 (2,268) |
| | | | | | Amount of EH SNG approved |
| | | | | | \$5,654,247 (\$4,524,454) |

Figure 4: Excerpt from Public Housing Quarterly Report and Public Housing in Bay of Plenty Region reports from December 2021 (HUD, 2021a and 2021b). Numbers in brackets denote the figure from the previous quarter.

5.1.3.2 Emergency Housing Special Needs Grants

Since the introduction of EH-SNGs in 2016, there has been significant growth in the number of households accessing the grant nationwide and this growth increased dramatically in the first part of 2020 (MSD, 2021). All regions across New Zealand experienced significant increases in the number of households seeking emergency housing during the COVID-19 lockdown period (MSD, 2021). Between April 2019 and April 2021 the number of distinct⁸ clients who received an EH-SNG more than doubled (HUD, 2021c). Since the peak in May 2020, EH-SNG use had dropped slightly; however, EH-SNG use has not returned to the level seen prior to COVID-19 (HUD, 2021a; HUD, 2021c). The number of households in emergency housing at the end of March 2022 was 4,728, an increase of 744 households from the end of March 2021 (this excludes the number of households in CEH). Figure 5 below shows the number of distinct clients who received one or more EH-SNG in each quarter.

EH SNG recipients

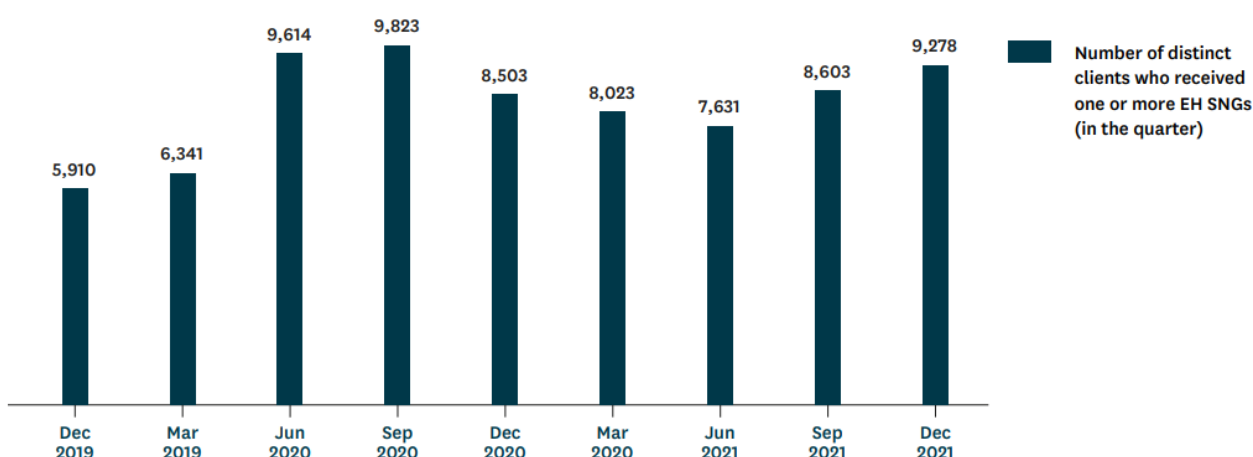


Figure 5: Number of distinct clients across New Zealand who received one or more Emergency Housing Special Needs Grants in each quarter from December 2019 to December 2021 (HUD, 2021a)

⁸ Clients may received more than one grant. Distinct clients are only counted once in this data even if they received multiple grants within each time period.

Although an increase in EH-SNGs has been observed nationwide, the volume of EH-SNGs in Rotorua is the highest in the country by population as of August 2021 (MSD, 2021b).

During the quarter ending 31st December 2021, 1,066 distinct households were supported by Emergency Housing Special Needs Grants in the Bay of Plenty region (HUD 2021b). This is a higher than in the quarter ending 30th September 2021 where grants were made to support 1,027 distinct households (HUD, 2021b). On 31st March 2022 there were 4,728 households in emergency housing under the EH-SNG scheme consisting of 5,367 adults and 4,791 children across New Zealand (MSD, 2022). At this point in time 702 of those households in emergency housing were in the Bay of Plenty which represents the third highest by region following Auckland (1,134 households) and Waikato (714 households) (MSD, 2022). These figures exclude households living in CEH, where 237 households were living in Rotorua as of the 30th of March 2022.

MSD analysis shows that the majority of EH-SNG recipients in Rotorua are from the Rotorua District or the surrounding areas. 69% of clients were already living in the Rotorua District and 19% were living in a neighbouring Territorial Local Authorities (TLA) (Western Bay of Plenty, Kawerau District, Whakatāne District, Tauranga City, Ōpōtiki District, Waipa District, Taupō District and South Waikato District) one month prior to entering emergency housing (Lankshear & Biggs, 2022). 10% of clients had an address from wider New Zealand. Of this 10% just over half had family in Rotorua. In some instances these recipients had moved to Rotorua to live with family before their circumstances changed and they required emergency housing. The previous address for 2% of clients could not be established (Lankshear & Biggs, 2022).

5.2 Local communities

The 13 CEH sites are distributed across six suburbs (local communities): Fairy Springs, Koutu, Victoria, Glenholme, Fenton Park and Whakarewarewa.

5.2.1 Demographic profile

Data from the 2018 census is reported based on Statistical Area 2 units. The 13 CEH motels are located across multiple Rotorua suburbs⁹, although the majority are along or in the vicinity of Fenton Street (e.g. located on a side street connected to Fenton Street). Two motels are located to the northwest of Rotorua's central business District in Fairy Springs and Koutu. The two social areas of influence, defined in Section 3.3.1 of this report and shown in Figure 6 below, are based on Statistical Area 2 units that are used to report demographic data collected from the 2018 Census. This is the most recent data available, although there would be changes since this time with rent prices continuing to rise and also the impacts of COVID-19, particularly on income and employment, which are discussed generally above but are not accounted for at this more local scale of reporting.

⁹ Suburbs in this report are defined by Statistical Area 2 unit boundaries.

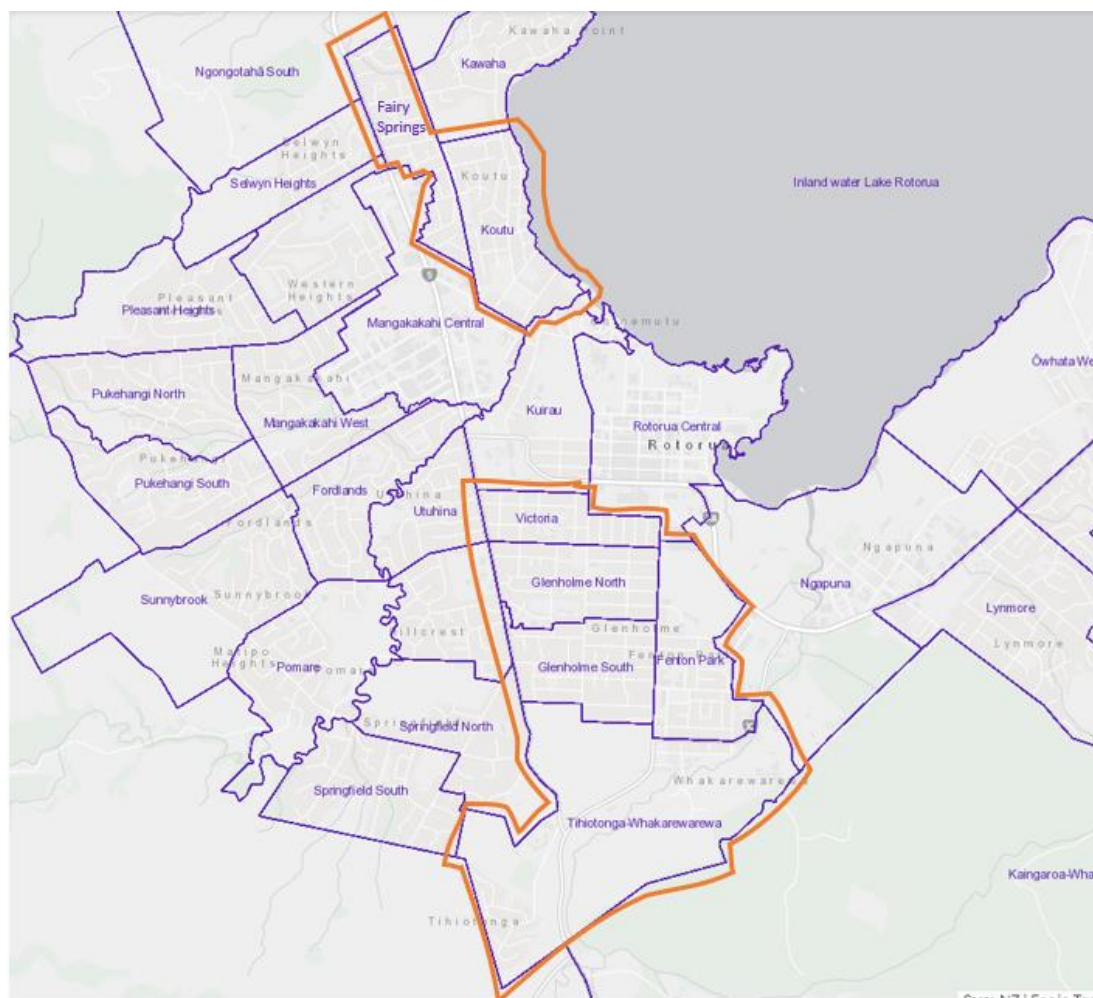


Figure 6: Statistical Area 2 units where the 13 CEH motels are located (Source: Statistics NZ)

5.2.1.1 Social Area of Influence 1- Victoria, Glenholme, Fenton Park, Whakarewarewa

Many of the Statistical Areas where the CEH motels are located are among the most deprived areas relative to the rest of New Zealand. Victoria, Glenholme North, and Fenton Park are among the top two most deprived deciles in New Zealand with score 9 or 10 on the NZDep2018 scale¹⁰. These areas have lower median personal incomes (between \$22,500 and \$22,900) than other areas and the Rotorua average. These areas also exhibit lower rates of home ownership, which are as low as 23% for Victoria (less than half the Rotorua average). 41% of people in Victoria identify as Asian, which is four times the Rotorua average (10%) and makes up the largest ethnic group in this area. Glenholme North and Fenton Park also have a larger proportion of people who identify as Asian than the Rotorua average (23% and 29%) but both still have large proportions of the population identifying as European (37% to 46%) and Māori (27% to 38%). Victoria and Fenton Park also

¹⁰ The NZ Deprivation Index (NZDep) provides an area-based measure of socio-economic deprivation across the country. NZDep 2018 combines nine variables from the 2018 census relating to eight dimensions of deprivation including communication, income, employment, qualifications, home ownership, support, living space and living condition. It uses an ordinal scale ranking the deprivation of areas, relative to other areas in New Zealand giving the least deprived areas a score of 1 and the most deprived areas a score of 10 (Atkinson et al., 2019).

experienced significant population growth between the 2006 and 2018 censuses, increasing by 28% and 18%, respectively.

Tihiotonga-Whakarewarewa has a NZDep2018 score of 7, and a higher median personal income than other areas. However, it is noted that this area covers two distinct suburbs of Tihiotonga and Whakarewarewa while the CEH motels that are subject to this assessment are only located in Whakarewarewa.

Glenholme South is the least deprived area where the CEH motels are located with an NZDep2018 score of 5. When compared with the rest of the areas and the Rotorua average, Glenholme South has the oldest median age and the largest proportion of people identifying as European, with the lowest as Māori. In 2018 it also has the highest proportion of people who own their own home.

According to market data from MBIE the median weekly rent for a house over the period between August 2021 and January 2022 ranged between \$400 (Victoria) and \$480 (Glenholme¹¹ and Whakarewarewa).

5.2.1.2 Fairy Springs and Koutu

Fairy Springs and Koutu also rate among the most deprived areas relative to New Zealand, with an NZDep2018 score of 9 and 10 respectively. Both areas had a median personal income less than the Rotorua median of \$28,000 at \$26,800 and \$23,500 in 2018. Koutu also had a higher unemployment rate (10%) than the Rotorua average (6%). Koutu has a high proportion of Māori, with 72% of the population identifying as Māori followed by 40% who identify as European (individuals can identify with more than one ethnicity, hence why totals add up to over 100%). In Fairy Springs, 58% of the population identify as European and 52% as Māori.

In 2018, the home ownership rate for Koutu was 7% less than the Rotorua average (52%) while Fairy Springs was similar at 53%. Median house rent during the 2018 census was \$280 per week for Fairy Springs and \$260 per week for Koutu. According to market data MBIE the median rent for the period between August 2021 and January 2022 were \$500 and \$425 per week respectively (MBIE, 2022a).

¹¹ MBIE data does not distinguish between Glenholme North and South. As this data is not based on Statistical Area units the areas may differ slightly to those used to report census data.

Table 4: 2018 Census Data for local community areas (based on Statistical Area 2 units)

| | Victoria | Glenholme North | Glenholme South | Fenton Park | Tihotonga-Whakarewarewa | Fairy Springs | Koutu | Rotorua District | New Zealand |
|---|----------------|-----------------|-----------------|----------------|-------------------------|----------------|----------------------|------------------|----------------|
| 2018 Population | 2,094 | 2643 | 2,022 | 1,698 | 771 | 1,782 | 2,094 | 71,877 | 4,699,755 |
| Population change from 2006 to 2018 | 28% | 12% | 4% | 18% | -5% | 9% | 12% | 9% | 17% |
| Dwellings (number of total private dwellings)* | 999 | 1,212 | 897 | 747 | 327 | 648 | 732 | 28,563 | 1,871,934 |
| Median age | 33 years | 37 years | 48 years | 39 years | 43 years | 33 years | 30 years | 36 years | 37 years |
| Largest ethnic group ¹² | Asian (41%) | European (47%) | European (74%) | European (46%) | European (60%) | European (58%) | Māori (72%) | European (63%) | European (70%) |
| Second largest ethnic group | European (37%) | Māori (38%) | Māori (20%) | Māori (32%) | Māori (38%) | Māori (52%) | European (40%) | Māori (40%) | Māori (17%) |
| Third largest ethnic group | Māori (27%) | Asian (23%) | Asian (15%) | Asian (29%) | Asian (13%) | Asian (8%) | Pacific peoples (9%) | Asian (10%) | Asian (15%) |
| <i>Usual residence 1 year ago**</i> | | | | | | | | | |
| Same as usual residence | 65% | 72% | 80% | 71% | 76% | 78% | 79% | 79% | 79% |
| Elsewhere in New Zealand | 23% | 20% | 16% | 20% | 18% | 17% | 17% | 16% | 17% |
| Overseas | 10% | 6% | 3% | 3% | 6% | 3% | 2% | 3% | 3% |
| <i>Home ownership*</i> | | | | | | | | | |
| Owned, partly owned or held in a family trust | 28% | 38% | 75% | 45% | 65% | 58% | 54% | 62% | 65% |
| Not owned or held in family trust (e.g. rented) | 72% | 62% | 27% | 55% | 35% | 42% | 46% | 38% | 36% |
| Median weekly rent* | \$240 | \$240 | \$330 | \$230 | \$260 | \$280 | \$260 | \$270 | \$340 |
| Median personal income | \$22,800 | \$22,900 | \$31,100 | \$22,500 | \$33,800 | \$26,800 | \$23,500 | \$28,000 | \$31,800 |
| Full time employment | 47% | 42% | 45% | 42% | 51% | 50% | 43% | 49% | 50% |
| Part time employment | 16% | 15% | 15% | 14% | 14% | 16% | 16% | 15% | 15% |
| Unemployed | 7% | 8% | 3% | 7% | 6% | 7% | 10% | 6% | 4% |
| Not in the labour force | 30% | 35% | 37% | 38% | 29% | 27% | 31% | 30% | 31% |
| NZDep 2018 (1 least deprived-10 most deprived) | 10 | 10 | 5 | 9 | 7 ¹³ | 9 | 10 | N/A | N/A |

* Statistics NZ provides a quality rating for some census variables to provide an overall evaluation of 2018 Census data quality for that single variable. Data quality is assessed on a five point scale from very high, high, moderate, poor and very poor. Data for the dwellings, home ownership, and median weekly rent variables are rated as moderate quality by Statistics NZ.

** Data for the usual residence one year ago variable is rated as poor quality by Statistics NZ. Māori have higher rates of missing data for usual residence one year ago than the total population, and Statistics NZ advise caution when interpreting results. All other variables not starred in the table above were rated as high or very high quality

¹² Percentages for ethnic groups can add up to over 100 as where a person reports more than one ethnic group they are counted in each applicable group.

5.2.2 Land use and community facilities

The areas immediately surrounding the contracted motels are primarily residentially zoned, although some sites are adjacent to commercial, city centre and industrial zones. Figure 7 below shows the District Plan zoning across Rotorua. Of the thirteen CEH motel sites 7 are zoned Commercial-city entranceway accommodation, 1 as Commercial- neighbourhood centres, 2 as Residential- medium density living, 1 as Industrial- city entranceway mixed use and two motels have a split zoning where half the site is zoned Commercial-city entranceway accommodation and half the site is zoned Residential- medium density living.

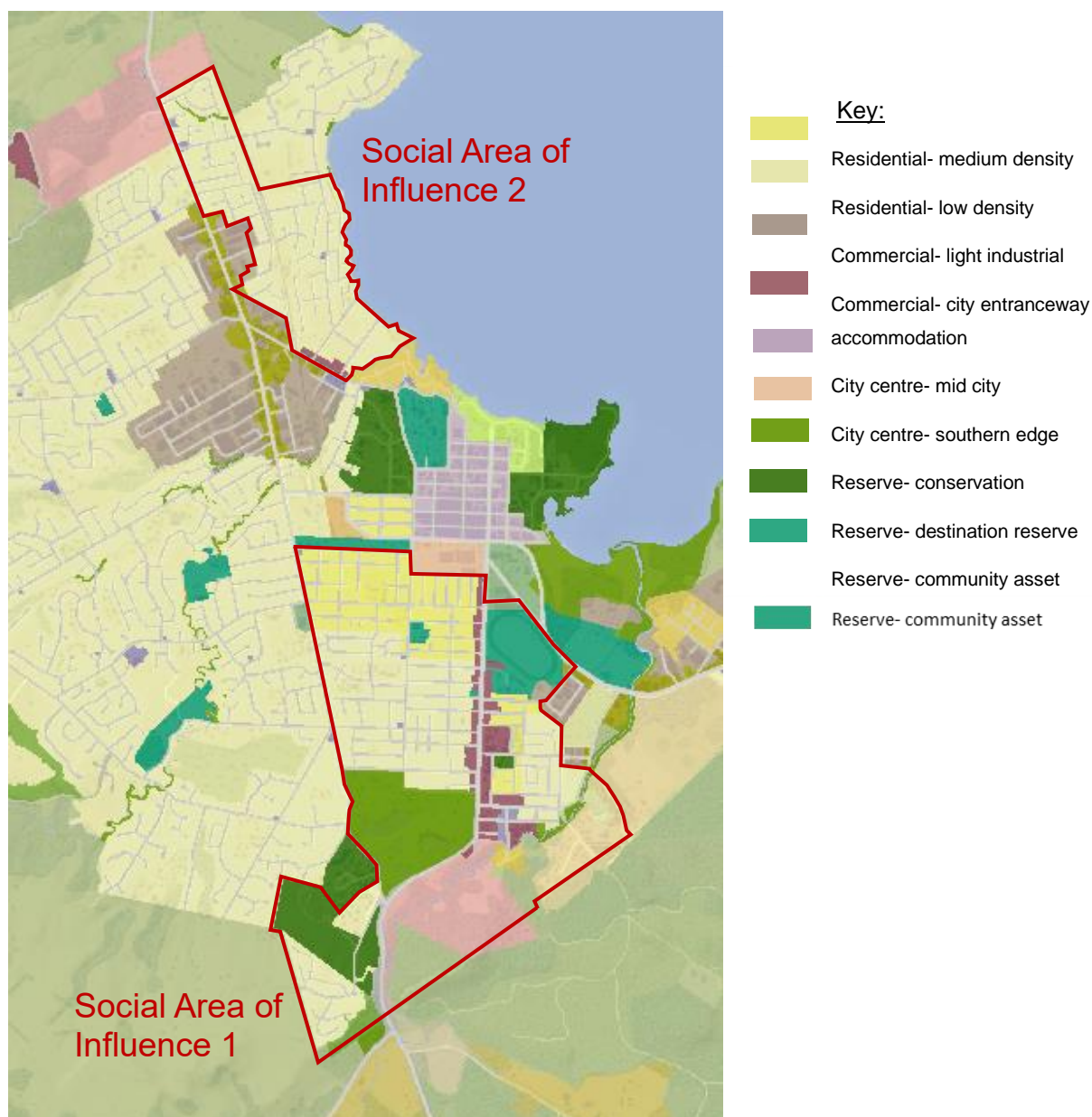


Figure 7 District plan zones across the two areas of social influence in Rotorua. Source: Geyserview, Rotorua Lakes Council, 2022

Data from Rotorua Commercial Accommodation Dashboard produced by Rotorua Economic Development indicates that 59 out of 150 existing commercial accommodation properties listed across Rotorua (40%) have been used for some form of emergency housing (either exclusively or mixed with tourist accommodation) at

some point prior to the end of 2021¹⁴. Three additional properties have also been used as managed isolation and quarantine facilities as part of the government's response to the COVID-19 pandemic (these are now in the process of being closed apart from one hotel which will continue to be used until the end of May 2022). The 13 CEH motels (included in the 59 above) operate within this context of other offerings that form part of the existing environment.

5.2.2.1 Social Area of Influence 1- Victoria, Glenholme, Fenton Park, Whakarewarewa

Area 1 is primarily residential but also adjoins Fenton Street, which is lined with properties zoned as 'city entranceway accommodation'. Fenton Street is one of the main roads that leads into the centre of Rotorua and is one of Rotorua's main tourist areas and accommodation strips. As well as the eleven CEH motels located in these suburbs, there are many motels and other forms of accommodation being used for various purposes including Managed Isolation Facilities (MIQ), motels being used for emergency housing through the EH-SNGs and other low-cost rentals. During site visits, it was observed that many motels along Fenton Street (i.e. beyond the motels used for CEH purpose) had no vacancy signs despite lower visitor numbers expected in the middle of the week and the appearance of these sites also varied greatly with some needing maintenance/management. According to Rotorua Economic Development's Commercial Accommodation Dashboard, approximately 39 accommodation facilities have fully or partially provided emergency housing accommodation within Victoria and down Fenton Street prior to the end of 2021 and one MIQ facility (which is in the process of closing)⁵⁴. There are additional five properties in Fenton Park and three in Whakarewarewa used for emergency housing. These numbers include the 11 CEH motels and illustrate that the CEH motels operate within proximity of other accommodation suppliers offering emergency accommodation.

The character of the residential suburbs varies throughout Area 1. The following observations relating to community character in Area 1 were made:

- Areas such as Glenholme were described by interviewees as being sought after and desirable.
- Victoria adjoins the CBD and is located across the road from a shopping centre. The area is bordered on two sides by a large number of motel style accommodation providers (along Fenton Street and Victoria Street).
- Around the residential areas a number of attached units, pensioner housing and other temporary rental style accommodation was observed in Victoria and to a lesser extent Glenholme.
- In Fenton Park, a range of housing types were observed, including both higher and lower quality housing
- In Glenholme, lower density and higher quality housing was observed, with wide tree lined streets and footpaths.
- Whakarewarewa village consists largely of commercial properties associated with number of tourist attractions and accommodation located in the village, but also has some smaller residential areas.

In Area 1, almost all of the CEH motels are located in close proximity (within 250m) of a school and/or preschool centre as well as other community facilities such as churches and temples. There are six playgrounds spread across these areas however most are located away from Fenton Street, where the majority of CEH motels are located (albeit located within 20 minute walking distance) (Figure 8).

¹⁴ This data is historical and does not necessarily represent the number of properties that are *currently* supplying emergency housing.

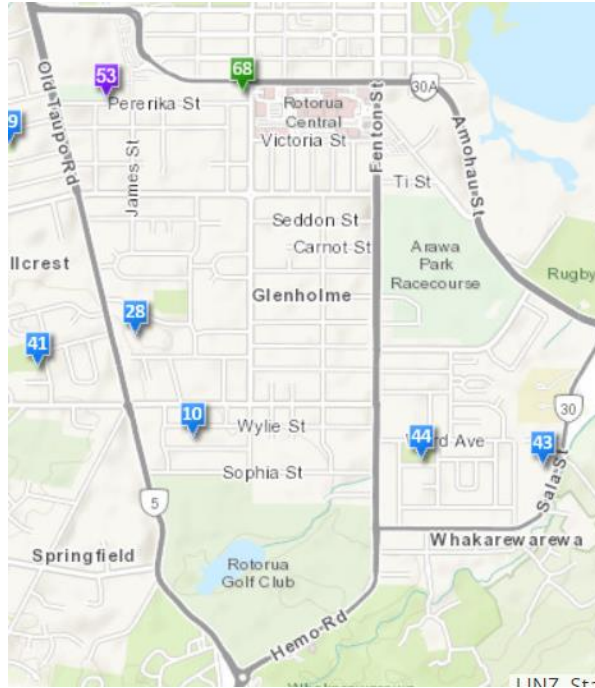


Figure 8 Playgrounds in and around Victoria, Glenholme, Fenton Park and Whakarewarewa. Source: Rotorua District Council, 2022b.

5.2.2.2 Social Area of Influence 2- Fairy Springs and Koutu

Fairy Springs contains a mix of light industrial and residential areas that border Lake Road, one of the key main roads leading into Rotorua from the north. Koutu is primarily residential however, there are also industrial and commercial areas. Along Lake Road there is also a shared use path that was observed and frequented by people. The CEH motels in Area 2 are both located in the vicinity of shops and residential houses but overall, the spatial distribution between motels in Area 2 is far greater when compared to Area 1. Both CEH motels are located in close proximity (within 250m) of a school or preschool centre and are located between 500m and 1km of a marae. The nearest playground is located within 5 minute or 20 minute walking distance (Figure 9).

The Commercial Accommodation Dashboard by Rotorua Economic Development identifies that there are two other motels in Koutu that have been used solely or partially for emergency housing these also have a greater spatial distribution when compared to motels in Area 1, such as those along Fenton Street¹⁵.

¹⁵ This data is historical and does not necessarily represent the number of properties that are *currently* supplying emergency housing.

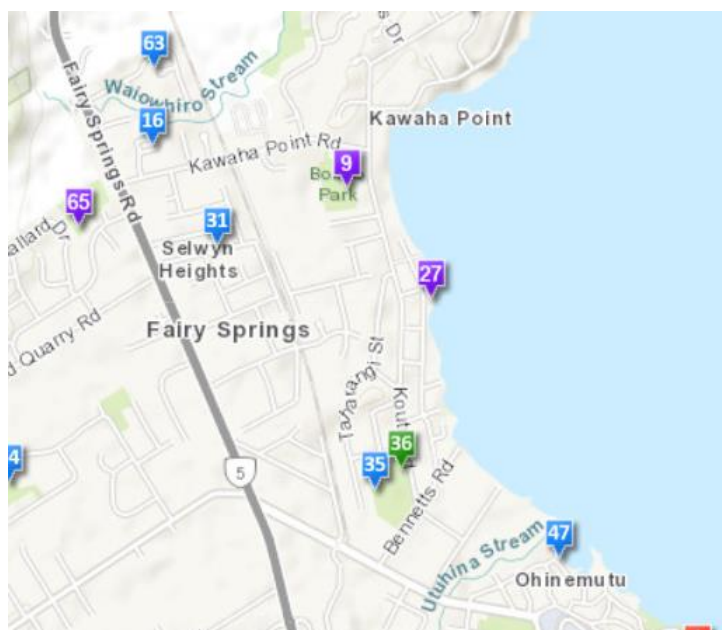


Figure 9: Playgrounds in and around Fairy Springs and Koutu. Source: Rotorua District Council, 2022b

5.2.3 Crime

New Zealand Police data has been analysed to understand crime trends within Rotorua and the local communities of interest. It is noted that data collected and reported on the NZ Police website at the local area level (victimisations time and place data) does not account for all events (excludes information/incidents where the location is not known). It has been used to provide an indication of what is happening in Rotorua where information on location is identified.

The number of reported victimisations¹⁶ in Rotorua District increased toward the end of 2019, peaking in February 2020, and reducing in April 2020 (at the time of New Zealand's first COVID-19 lockdown). Following this first lockdown victimisations returned to 2019 volumes but continued to fluctuate over 2021 and 2022 (Figure 10). It is noted that this aligns with trends seen across New Zealand (with a peak of victimisations in January 2020, followed by a steep drop in April 2020 and then increases to the previous high January 2020 numbers in January 2022). As shown by Figure 11, theft and related offences are the most common type of incident followed by unlawful entry and acts intended to cause injury (this also aligns national level data).

¹⁶ Victimisation refers to the instance of a person, organisation or premises being victimised for a given type of offence

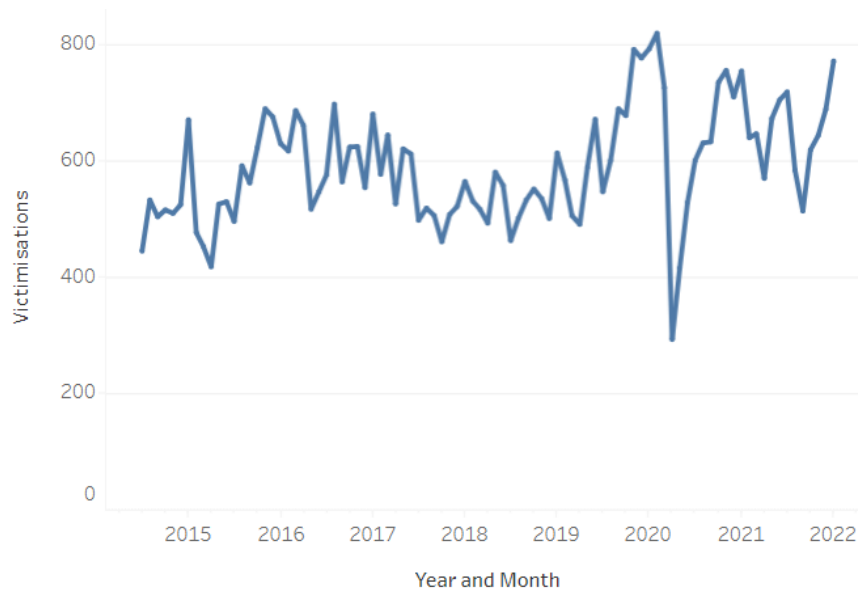


Figure 10 Victimization data for Rotorua District (Source: Policedata.co.nz, 2022)

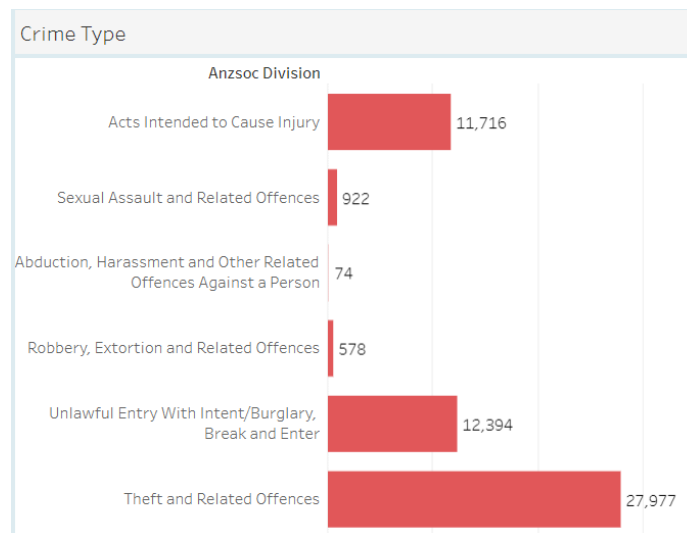
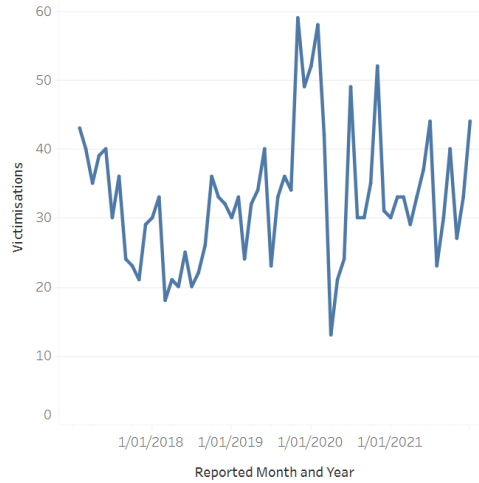


Figure 11: Crime types in Rotorua District (Source: Policedata.co.nz, 2022)

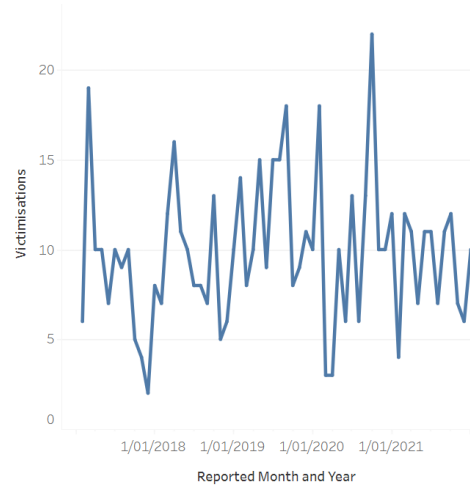
Within the two social areas of influence, the number of victimisations from 2017 to 2022 in each month fluctuates. There is no clear trend in most suburbs, however, crime data shows an increase in the number of victimisations in Victoria and Whakarewarewa from the end of 2019 and start of 2020. In Victoria this increased from around 50 to around 100 victimisations per month and in Whakarewarewa this increased from around 5 to 25 victimisations per month (Figures 12 and 13).

Data on crime types indicate that theft and related offences have increased from 2017 to 2022, particularly in Victoria, Whakarewarewa and Glenholme East (where the number of victimisations with a recorded location more than doubled from 2017 to 2022), and in Fairy Springs. Increases in acts intended to cause injury can also be seen in Fairy Springs, Koutu, Victoria, Glenholme East from 2017 to 2022 and unlawful entry victimisations also seem to have increased in Glenholme East.

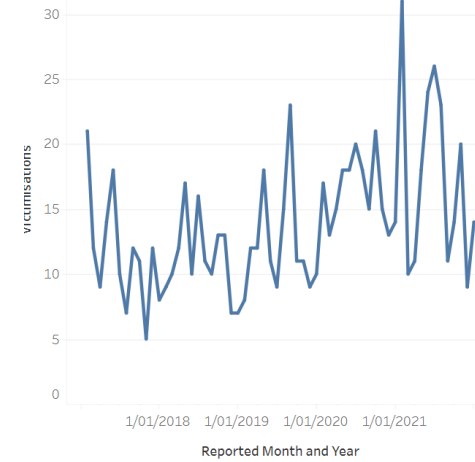
According to NZ Police, there has been a notable increase in call-outs, particularly around the CBD and in the Fenton Street area. Family harm incidents have almost doubled and there has been a marked increase in dishonesty crimes. Calls for service vary from disorderly behaviour to incidents of serious violence, dishonesty crimes, burglary, interference with cars and wilful damage.



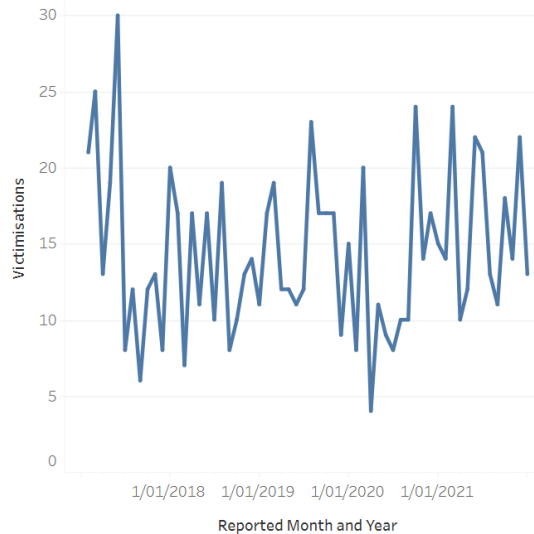
Graph 1. Fairy Springs Monthly Victimisations from 2017/2022, Total: 1,549



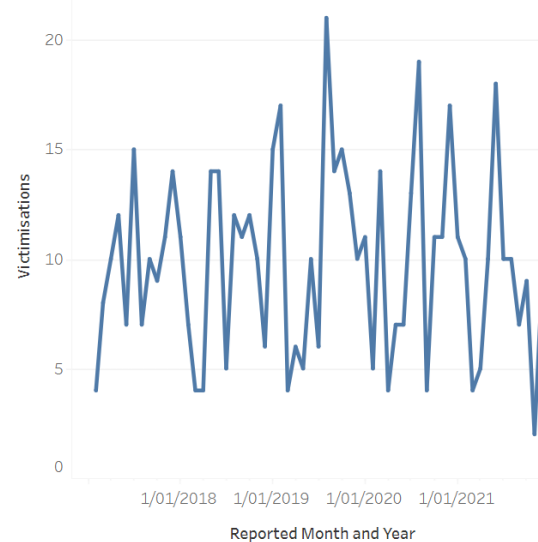
Graph 2. Fenton Monthly Victimisations from 2017/2022, Total: 252



Graph 3. Glenholme East Monthly Victimisations from 2017/2022, Total: 339

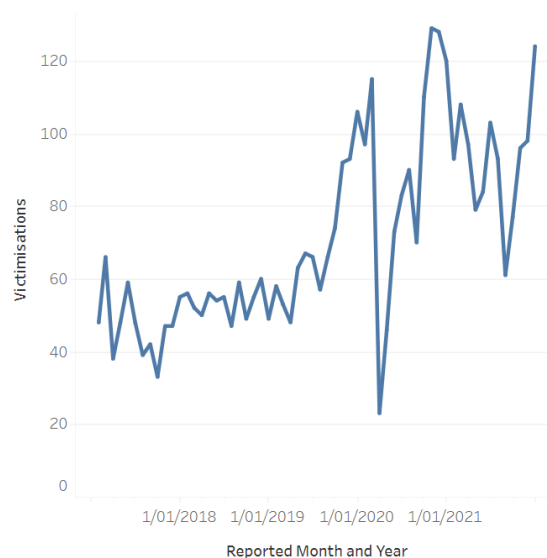


Graph 4. Glenholme West Monthly Victimisations from 2017/2022, Total: 375

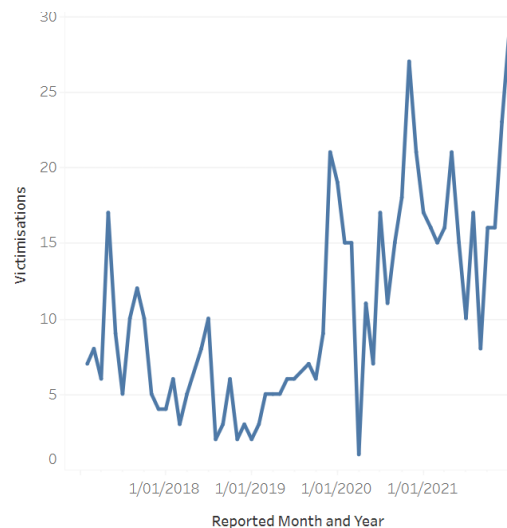


Graph 5. Koutu Monthly Victimisations from 2017/2022, Total: 291

Figure 12: Trends in victimisation time and place data between Mar 2017 and Feb 2022 in each of the local area units. (Source: Policedata.co.nz, 2022) Data included in this figure excludes information where the location (i.e. Area unit) is not known



Graph 6. Victoria Monthly Victimisations from 2017/2022 , Total: 3,426



Graph 7. Whakarewarewa Monthly Victimisations from 2017/2022, Total: 507

Figure 13: Trends in victimisation time and place data between Mar 2017 and Feb 2022 in each of the local area units. (Source: Policedata.co.nz, 2022)(Source: Policedata.co.nz, 2022). Data included in this figure excludes information where the location (i.e. Area unit) is not known

6 Assessment of social impacts

There are a range of complex social conditions, changes and challenges the community within the social area of influence have experienced over the last few years that form the existing environment. The experience of social impacts of the proposed 13 CEH motels cannot be easily separated from other social impacts arising from existing issues in the community. These existing social issues include:

- COVID-19:
 - economic impacts
 - job losses/reduced income
 - drop in business activity and tourist numbers including accommodation businesses;
- rising costs of living;
- rising unemployment;
- rising rental costs;
- shortfall of available housing, including public housing;
- shortage of available rentals;
- increased demand for public housing;
- national and local trends of increased poverty;
- rising numbers of homelessness and housing insecurity;
- aging motel stock; and
- motel providers seeking alternative sources of income to supplement loss of tourism.

While this is the existing environment the CEH motels operate within, these social issues are the conditions that the CEH motels are responding to (rather than causative of). In order to evaluate the potential social impacts of the CEH proposal our assessment takes the following approach:

- For each potential social impact we report the community's general experience of change that will have causal factors from a range of those outlined above.
- We specifically assess how CEH motels further contribute to this as a potential cumulative impact by assessing whether CEH:
 - Improves existing conditions – reducing overall impact (i.e. *positive impact*).
 - Maintains the status quo – does not improve the existing impact nor makes it worse (i.e. *negligible impact*).
 - Exacerbates existing conditions – negatively contributes to the existing environment further exacerbating the issue (i.e. *negative impact*).

We also assess each social impact in the context of what the environment would be like if the CEH motel ceased to operate (noting that in the current social and economic environment this would likely only serve to exacerbate many of the social conditions set out above). Considering whether without CEH the above existing social condition have the potential to change for the better, the worse or remain the same, acknowledging that there is a degree of uncertainty in respect of how other social agencies, moteliors and housing provision (or lack thereof) would be able to respond in the 'absence' of the CEH motel provision.

The potential social impacts identified have been evaluated as either positive, neutral or negative based on the degree of change to the existing social environment (as described in this report) and relative to the potential counterfactual environment (without the operation of CEH motels). This assessment is made on consideration of both the scale and duration of the impact (e.g. who is impacted within each of the defined 'community of impact' and the period of expected impact (noting the time-limited duration of the proposal for the use of motels as CEH).

6.1 Way of life

6.1.1 Reported general social change - Way of life

Of those surveyed within the local communities 51% noticed and reported being personally affected by local business closing due to COVID-19.

Where members of the community assessed local motels were being used for emergency housing¹⁷ 35% reported being personally impacted by these motels (noting that 45% reported noticing these and not being directly impacted and 20% not noticing these). Of those reporting impacts of emergency housing in local motels 27% reported a negative impact, 5% a positive impact and 3% both positive and negative.

Local businesses closing and reduced tourism due to COVID-19 had the highest negative impact on individuals within these local communities.

In terms of way of life impacts some people surveyed and interviewed reported that they had begun to avoid walking around their neighbourhoods and into town, particularly on and around Fenton Street (within Victoria and Glenholme), and around Victoria Street and Malfroy Road (between Fenton Street and Ranolf Street). People cited the reasons for this change being:

- feeling intimidated by other members of the public;
- incidents of intimidation and verbal abuse;
- witnessing anti-social behaviour;
- the state of the environment (graffiti, litter and abandoned shopping trolleys);
- a general feeling of being unsafe due to "*the type of people you are likely to encounter and concern of possible behaviours*"; and
- concern of encountering people under the influence of drugs and alcohol.

Many attributed the above behaviours to people being accommodated in emergency motels and or visitors/associates of these people. This was due to where the above scenarios took place or assumptions by the community of the origin of people involved in the above. In the community survey 8% reported that the provision of emergency housing in motels had created a fear of walking in their neighbourhood and that they did not feel able to move around their local communities as freely.

Where people reported (self-reported or reported on behalf of someone they knew) to have stopped walking in their neighbourhoods or to town and/or avoided a particular street, it was more likely to occur in the evening and the person was more likely to be elderly, a woman on their own and/or others such as children and disabled. However it is noted that this behavioural change is not universal as evidenced by varied survey and

¹⁷ In the survey emergency housing in local motels refers to all accommodation that the public has assumed is being used to house people who do not have alternate accommodation. It does not determine who is funding these identified motels or what specifically they are used for. Emergency housing appears to be a catch-all term used by the community.

interview responses and community observations (i.e. during site visits women, children and elderly were observed walking around this area (in small numbers).

Only a small percentage of those surveyed and interviewed reported themselves or others changing where they walked. Others reported that they had witnessed or experienced concerning behaviour but because of their own sense of personal safety this did not alter where they walked. Others in the same neighbourhood who reported feeling safe, did not report any incident such as those listed above and continued to walk around the area.

Whilst not universal there appears to be a trend over the past 18 months to 2 years of people increasingly avoiding certain areas of the city when walking on their own due to increasing feelings of being unsafe which they attribute to perceptions of threats to their safety within the public environment including parts of Fenton Street and around Victoria. However, this is dependent on a personal assessment of the surrounding environment and their own sense of safety and vulnerability. This is assessed as a negative impact on way of life as people are changing where they go for daily walks or stopping walking for activities, such as shopping and accessing places in the community.

6.1.2 Assessment of potential way of life impacts of Contracted Emergency Housing

CEH motels are located within the areas of Victoria and Glenholme which are referenced in the above paragraphs as places where some people are now avoiding walking. A review of incident reports from the CEH motels shows that publicly visible incidents such as altercations have occurred on occasion at some CEH motels (either inside the site but visible to public or just outside the site with residents from the motel and/or visitors). During site visits, anti-social behaviour (which the interviewees cited as a deterrent) was observed at one CEH motel on the berm outside the site, which was visible to public walking by.

CEH motels only began operating since July 2021, negative impacts on way of life were described to be arising over roughly a 2-year period. Therefore, our assessment is focused on whether CEH motels have the potential to alter (positively or negatively) the existing impact occurring within these communities. Community members interviewed reported that over the last six months (the time in which CEH motels have been operational), the situation had largely stayed the same; a few reported it had gotten worse and a few that it had improved. Of note, a few of the CEH motels were specifically cited by those who identified that some improvements were being experienced in relation to community safety and amenity. However, on two occasions, specific CEH motels were part of a cluster of motels on Fenton Street (CEH motels and other motels supplying emergency housing) where it was noted that things had worsened. Operators of many CEH motels (particularly where emergency housing was supplied previously) noted an improvement in resident behaviour now that they are supported by service providers and security.

6.1.3 Conclusion

This assessment only considers impacts that can be attributed to, or is the responsibility of, the CEH motels. Anti-social behaviour by members of public within these communities that do not occur directly outside of or on the site of CEH motels are not considered to be within the scope of this assessment.

The experience of the community is not universal nor is the reporting of the contribution of specific CEH motels. However, the following observations are made;

- negative impacts are reported in areas of high foot traffic due to being enroute to the city, other amenities or a common recreational route;
- perception and experience of the impact is not universal but is more likely to occur where there is a high degree of change from tourist accommodation to a concentration of suppliers of non-tourist accommodation (CEH, accommodation supplied for SNG or other emergency housing (short and longer term));

- CEH was identified as providing more management of potential anti-social behaviours, however this improvement is more likely to be noted where the CEH motel is located away from other accommodation.
- Where CEH motels are located amongst other accommodation (many of which are SNG suppliers or are using the motel for an alternative purpose other than for tourist accommodation) any incident is seen to exacerbate or continue existing impacts (potential reductions in the number of incidents and improvements in behaviour at CEH motels are overshadowed by the surrounding environment)

Events causing indirect impacts on way of life are intermittent and could occur at any time within the duration of these consents (up to 5 years). Within the context of the likelihood of an event occurring the more CEH sites that are located close to each other (coupled with supplier of other emergency accommodation for those without permanent housing) the higher likelihood of an incident occurring.

In terms of scale, the potentially negative impacts on way of life appear to be largely confined to Victoria and Glenholme (due to walkability and concentration of accommodation) impacting those who previously walked around specific streets within these areas. It is only those that now feel too unsafe to continue and have changed behaviours that are impacted.

If these sites were not utilised for CEH it is reasonable to assume that a large number of CEH occupants would apply for EH-SNG grants and either reside at these sites or alternate sites within Rotorua. Where facilities for EH-SNG grants might not be available it is anticipated that a reasonable consequence is that people will be without secure accommodation. Again, this outcome would be likely to occur either within the communities assessed or in the wider Rotorua area. Neither of these options ensures improved social conditions for the local or wider community that will reduce current way of life impacts.

Overall it is assessed in relation to the existing environment, that CEH will potentially have a negligible impact (no change) on way of life for those outside of Victoria and Glenholme and potentially very low negative impact on way of life for neighbours and those within proximity of the CEH sites within Glenholme and Victoria.

6.2 Community - character

This refers to the distinct identity of a place and in part people's sense of place. The local communities contain relatively high-profile streets/areas that offer accommodation. These streets/areas have their own characteristics and the residential neighbourhoods surrounding them may also have a different set of characteristics. For this reason, this section of the assessment is split into two: tourism and residential.

6.2.1 Reported general social change - Tourism character

Rotorua is characterised as a tourist destination largely relating to cultural experiences and natural features. Supporting infrastructure such as accommodation offerings are seen as key to bringing people to the city and getting them to stay whilst enjoying these tourist attractions. It is within these local suburbs where much of the city's accommodation offerings are located.

Fenton Street is perhaps the highest profile street within Rotorua known for offering accommodation. People spoke of it historically being known as the "*gateway to Rotorua*", "*golden mile*" and "*jewel of Rotorua*".

The Council's strategic plan published in 2018 noted that at that time there was already a number of older tourist accommodation properties that could be converted or redeveloped. The plan indicates an intention to undertake District plan changes in the future to provide more inner city living (reducing the footprint of the CBD) and consolidating tourism accommodation in the CBD and allowing existing accommodation to change to land for homes.

Survey respondents and interviewees spoke of the changes to the physical character of accommodation areas across Rotorua over the last two years in particular. This has been echoed in media reporting. This has

included changes in the physical appearance of accommodation; both grounds (unkept gardens and lawns and rubbish) and buildings (peeling paint and building maintenance not attended to). Public areas are reported to have an increase in rubbish, abandoned shopping trolleys, graffiti and incidents of vandalism and property damage.

In terms of tourism identity there are two major themes that are reported to impact the tourist character of the area; COVID-19 and alternative uses of tourist accommodation. COVID-19 has led to decreased tourist demand, decreased tourist activity and motels and businesses closing down or being empty. People spoke of a loss of vibrancy with the decreased presence of tourism. In the phone survey, local businesses closing and reduced tourism due to COVID-19 were cited as the most prominent impacts people had experienced.

In terms of character and identity people talk of a downshift in desirability of the area. Terms such as “MSD mile” and Rotorua referred to as a “dumping ground” for people with complex social needs and anti-social behaviour was a rhetoric commonly brought up in interviews, the surveys and the media review. There is mixed opinion as to the causal factors of the damage of Rotorua’s reputation and a recent article in Stuff (Bathgate, March 2022) describes some of the narratives:

- Accommodation being used for tourism and emergency housing simultaneously and subsequent poor online reviews of sites.
- Increased crime and anti-social behaviour in town and within “tourist areas” such as Fenton Street which presents a poor image of the city to visitors.
- Much of the dialogue and concern being played out in the media therefore presenting a tarnished reputation to the rest of the country and further afield.

This mix of narratives was reiterated in interviews. Again, the opinion is not universal however nearly all acknowledge a change in the accommodation clusters. Most widely recognised is:

- A deterioration in the quality of accommodation stock (occurring over many years) and in some places the grounds.
- A lack of tourists and activity (including businesses closing down) reducing vibrancy of the area.

6.2.2 Assessment of potential impacts of Contracted Emergency Housing on tourism character

The CEH sites for which resource consent is sought are largely located within accommodation clusters providing for tourism (with one exception that largely catered for the business sector prior to being contracted).

The CEH motels are in a variety of locations; sited on their own, adjacent to tourist motels/hotels and in areas where much of the surrounding accommodation appears to be used for temporary accommodation/rental for purposes such as emergency accommodation. The physical quality of the CEH motels ranges from well-kept buildings with a high level of landscaping to older accommodation stock with less landscaping. During site visits it was noted that none of the CEH motels had overgrown lawns or rubbish amassing on-site and sites were generally well-maintained.

Fencing and gates at CEH motels ranged from metal fencing and hedging around the whole site and gates to low level fencing and use of temporary methods such as bollards, chains, ropes or traffic cones instead of gates. All locations, apart from one, still had motel signs up that said, “no vacancy”. One site still had a vacancy sign. In around a third of the sites security personnel were prominent either stationed at the front entrance and/or wearing jackets with large lettering “security” on the back. In some locations staff and/or residents gathered at the entrance/street frontage, while at other CEH motels residents and staff were not overly visible from the road. It was noted that at several sites cars were parked on the grass verges/footpaths outside the sites’ legal boundary.

Incident records of each CEH motel were reviewed¹⁸. Within the local communities, incidents that may be visible/audible to public fluctuated, but were most frequent (more than weekly – most months) in CEH motels located in Whakarewarewa and Victoria. Only one recorded incident included a member of public who called the police. A few community members interviewed reported calling the police when family harm was heard at one of the CEH sites or for disorderly behaviour/fights in public. However, it was generally reported that incidents of parties and loud music had been controlled since the motel sites had been contracted, and for some sites, the property maintenance had improved.

6.2.3 Conclusion

From our experience as social impact practitioners on types of residential accommodation for social service purposes and based on the literature reviewed, the way a site is run, the way it looks and the way it is maintained goes a long way to how it fits into its surroundings and is experienced and accepted by the neighbouring and local community. It was observed/assumed by a few interviewees that when operating as tourist accommodation motels were more focussed on outward appearance as they were trying to attract customers (although it was reported by others that some of the contracted sites had been offering emergency accommodation for a long time and/or catered for the “low-cost accommodation” bracket of the market previously) and do not have the same motivation to maintain outward appearances with a secure income from emergency accommodation.

From our observation it appears that CEH motels that have little public fronted space are afforded more privacy and a change of activity is less visible. Equally those with fences and landscaping such as hedges offering privacy blend into the surrounding character more. Well-kept buildings and grounds blend in with the tourism characteristic of “*attracting customers*”. On their own the CEH motels cannot be directly attributed to the change of character of the accommodation clusters in Rotorua. However where there are a few located in close proximity, privacy is limited, cars are parked on verges, security very visible, and traffic cones or temporary blockades are used, it is likely that CEH motels are contributing to the overall negative impact. It is assessed that CEH motels specifically (when considered separately) have a negligible, or in limited locations, a very low negative impact on tourism character for the local community and wider Rotorua in relation to the existing environment. It is considered that these potential impacts on tourism character that are directly related to the CEH sites could be reduced with changes to operations and ground improvements.

6.2.4 Reported general social change - Residential character

Survey respondents identified location (proximity to town and services), quiet/peaceful environment, and caring community as community characteristics that they valued. Respondents in Victoria and Glenholme more frequently commented on proximity to town and ease of getting around relative to those respondents from Fenton Park/Whakarewarewa and Fairy Springs/Koutu. By contrast respondents residing in the latter suburbs were more likely to comment on the safe nature of their communities.

In the community survey of local communities, 10% of respondents felt their suburb had improved over the last 2 years, the highest being Victoria and Fairy Springs/Koutu at 17% and the lowest Fenton Park/Whakarewarewa at 4%. In addition, 26% of survey respondents thought their local community stayed the same and 34% thought it was worse. 54% of survey respondents from Glenholme thought was worse. Characteristics that local communities noted in improvement were largely pertaining to community spirit and coming together as a community to help through COVID-19. Issues that had negatively changed the

¹⁸ It is noted each operating organisation records these differently so were not directly comparable (this is based on assumptions from information provided). Only incidents assessed as involving the community or were likely to disrupt the surrounding community (i.e. visible to people passing by) were considered (police being called was included). Internal rule breaches or disruptions were not.

community related to increased incidents of crime (41%), homelessness (18%), emergency housing (16%) feeling unsafe (14%) and unwanted behaviour (14%).

The most noted impact that people had been personally affected by from surveys was local business closing due to COVID-19 (51%) and reduced tourism due to COVID-19 (42%). 35% of respondents had noticed and been personally affected by emergency housing in local motels.

Neighbours and community groups interviewed spoke of more disturbances of peace (not universal), changing areas otherwise traditionally known for being quiet and peaceful. People spoke of their communities (Victoria and Glenholme) as becoming less desirable and now known as “problem areas” where before areas like Glenholme were described as being desirable places to live.

6.2.5 Assessment of potential impacts of Contracted Emergency Housing on residential character

This impact in relation to residential character (not amenity) appears to be specifically reported about suppliers of emergency accommodation located in Glenholme and to a lesser extent Victoria. People spoke of the reputation and desirability of the neighbourhood as changing negatively. These observations appear to be focussed around the residential areas in close proximity to accommodation clusters.

Restore Rotorua¹⁹; a community group responding to the use of motels for emergency accommodation, has primarily formed within Glenholme to both restore the tourism character and reputation but also their neighbourhood reputation. Whilst other areas may be experiencing increased crime and social issues this neighbourhood and “Fenton Street area” appears to be a focus area of concern and media attention with regards to impacts from emergency housing motels (in general).

Specifically in relation to CEH motels some neighbours and operators in Victoria, Whakarewarewa had noted that it was quieter as there weren't parties and loud music anymore and security managed behaviour on-site more. This was reiterated by many stakeholders. At another location within Fairy Springs a neighbour reported they had not even noticed that the CEH motel had changed its purpose from providing tourist accommodation. Some residents noted that the security and use of cones to blockade entrances at the CEH motels made the area feel custodial and did not help to improve the character of the area, while others thought it made the area feel safer.

The look and management of the motels also appeared to change how residents felt about the motel contribution to the character of their residential neighbourhood. People noted motels that looked well-kept and well-managed were less problematic to the character of the area. Stakeholders noted that at the CEH motels there was the opportunity for motel owners to upgrade the sites and behaviour on-site had improved.

6.2.6 Conclusion

The changes made at CEH motels, compared to when the motels were used for emergency housing funded through EH-SNGs, have in some cases been noticed and visible to the general public. Whilst security may add to a sense of safety it does not necessarily improve the residential character of local communities. It is our assessment that CEH motels have very low negative impact on residential character due to physical and security characteristics. It is noted that these are impacts that could be managed and the overall impact reduced.

¹⁹ Restore Rotorua – Is self-described as “a group of Rotorua locals who are deeply concerned about our community, our people, our businesses and our visitors”. They are specifically concerned about the use of motels for emergency accommodation in the heart of Rotorua and the negative impact emergency housing has on the environment, it's people, it's businesses, local tourism and the city of Rotorua. They have come together collectively to get more information on what is happening, put out requests to be consulted about changes and challenge the changes happening in their city.

6.3 Community - community services

6.3.1 Assessment of potential impacts of Contracted Emergency Housing²⁰ on community services

This assessment is directly related to CEH motels as the stakeholders interviewed specifically spoke in relation to these CEH motels.

13 motels have been contracted to provide emergency accommodation for whānau / families and vulnerable people. The sites can accommodate up to 1100 people (as of March 2022 they accommodated 586 people). As well as on-site services residents of sites may need additional services such as education and health. It was noted by all community service providers spoken to, that this is a group with complex service needs but often also poor rates of uptake of help. Many are unlikely to be registered with local services or have limited records to track education or health needs.

With regards to health services a clinical nurse liaison from the District Health Board works across the sites to assess whānau health needs, provide health plans and support health seeking behaviours. Health and social services interviewed acknowledged that residents of the CEH sites were a high needs population (due to instability of living situations) that, for the most part, already existed within the Rotorua community. While these populations were harder to reach due to transience, the contracted motels gave residents an opportunity to engage and address health issues. Interviewees from community and social services reported that more mental health, drug and alcohol resources were needed across Rotorua as well as a more co-ordinated referral and cross-discipline/service working model to provide for the residents in these motels. It was suggested that a social service hub including a GP be allocated to these motels to provide for their needs.

Most schools who responded stated the CEH motels had little impact on their school in terms of roll and resources. One school identified that children from CEH motels often required more support due to disruptions in their learning, limited education records and unstable living environments. It was suggested that an allocated resource to support students in adjusting to regular schooling and assess and access education histories was needed to assist schools in meeting the needs of these students and reduce some of the extra resource required at the schools. There were reports of students witnessing anti-social behaviour when walking to school or feeling unsafe (around the central city/Fenton Street area). It was observed that one school located within close proximity of many motels (both contracted and used for other forms of temporary and emergency housing) had temporary security fencing around the perimeter. An interview with a local community group reported that the school was in the process of installing permanent secure perimeter fencing due to frequent incidents of trespass and vandalism (this was not verified by the school). No direct incidents on school grounds involving the CEH sites were reported by schools.

The police noted that over time the Fenton Street area had become a high call out area requiring a lot of police attention. Whilst crime like this already existed in Rotorua there has been a substantial increase in family harm incidents and dishonesty crime in this area. The Fenton Street area had not traditionally required a lot of police resources but, particularly in the last two years, there has been an increase in police calls for service around Fenton Street in addition to continued demand in the city. Crime data (see Section 5.2.3) suggests theft and related offences are the highest recorded offences. Accommodation providing for emergency accommodation (under various models) does require a lot of police attention. The CEH motels with security and social services had not exacerbated this issue (however not substantially reduced this either). Service providers at CEH motels reported incidents that traditionally may not be self-reported (i.e. Family harm), providing opportunity for police to engage with victims and work on harm reduction. From a review of CEH site incident reports family-harm (verbal, emotional and physical), threatening behaviour, arguments, physical altercations

²⁰ This section does not describe the general environment as it is specific to CEH.

(residents/visitors) required police assistance (police call outs were not noted at a high frequency at each site, this excludes visits from the police as follow up not initiated in an emergency).

6.3.2 Conclusion

Overall, the population served by the CEH motels does for the most part have high health and social service needs in general (unrelated to where they reside); however, providing for this population in CEH motels does not exacerbate this. Conversely, the CEH sites provide stability and potential to engage and support people to develop health seeking behaviours that can be carried on when they transition to their own housing. Feedback from interviews is that systems (including referrals and cross-agency collaboration) could be improved and more resources would support health and education to better support this population, however this is an operational matter not an impact that needs addressing within the scope of this assessment.

Police call outs and therefore use of police resources is high in the area where many of the motels (both CEH and those used for other forms of temporary, longer term and emergency accommodation) are located. The implementation of operational rules, monitoring and/or restriction of visitors, service provider support and security presence at CEH motels helps to support the sites to not exacerbate this issue (i.e. increase police call outs at motels).

CEH motels are recognised not to be long-term solutions for housing (motel use for living is not without problems but is a favourable alternate to no accommodation). However, this service model provides more support and supervision to vulnerable groups (i.e. elderly, youth and families) and provides the potential to improve access to services and help seeking behaviours.

Overall impacts on services (compared to this population being housed elsewhere or transient) is assessed as a low positive to negligible impact (not improving the existing issues but not exacerbating them). The CEH model provides opportunity to further enhance any positive impacts over time and potentially address existing social conditions (a [small] positive change from the existing environment, noting these are generally considered adverse conditions) as can specifically focus on family interventions (and other specific groups the sites provide for) as on-site services develop and connections and integration with other community service providers strengthen.

6.4 Community - community cohesion and stability

6.4.1 Reported general social change - Community cohesion and stability

Historically local residential communities particularly those around Fenton Street and other accommodation clusters are used to a high number of visitors/tourists coming and going from the area. As of the 2018 Census many of the local communities also have high proportions of people that did not own the home they were residing in (presumption many are rentals) particularly in Glenholme North and Victoria (above 60%). Survey respondents who noted positive changes in their community noted more connectivity with neighbours and collaboration often brought about from facing the adversities of COVID-19 collectively.

The following themes were prevalent in interviews and surveys with residents of local communities:

- High degree of change in how they experience their community over a 1-2 year period (particularly Glenholme), including incidents of crime.
- Strong narrative from community members that they believe that many people living in a motel temporarily are not from Rotorua and therefore the community interpret this as not being part of the community.

People spoke of a relatively sharp increase in numbers of motels providing “emergency accommodation” (all supply types) and feeling they were taking on a national problem due to high availability of accommodation in Rotorua. In Rotorua around 70% of tourist accommodation is concentrated on or within proximity of Fenton Street (CBD, Victoria, Glenholme, Fenton Park and Whakarewarewa), prior to current changes in motel

operations. This change is coupled with changes brought on by COVID-19 such as reduced tourism, reduced jobs, working from home and closure of businesses including accommodation providers.

In addition to the changes the community has experienced there is a narrative expressed in some interviews that residents living in emergency housing do not belong in areas where tourism should be the focus (e.g. Fenton St) and those identified as not being local or displaying anti-social behaviour in particular, should not be offered emergency accommodation in Rotorua. Who belonged within the community and should be provided for in emergency accommodation was not a universally agreed concept amongst interviewees and survey respondents and could be seen as a topic that differs amongst the wider Rotorua community based on concepts of belonging and community membership.

Similarly support for motels being used for emergency accommodation varied. In the survey, 36% of respondents approved of the use of motels for emergency accommodation, 34% disapproved and 20% had not noticed the use. People seemed to be largely agreed that people experiencing housing vulnerability needed to be accommodated but how to do this was not agreed upon.

6.4.2 Assessment of potential impacts of Contracted Emergency Housing on community cohesion and stability

The CEH motels have for the most part been established in motels already being used for emergency accommodation (since April 2020 and in some cases as early as 2017). They have tried to be self-sufficient both for privacy and security of occupants (perhaps also in light of well-documented community opposition), resulting in limited communication with neighbours. In places like Whakarewarewa the full occupancy of contracted motels would result in a 50% population increase (based on census 2018 population data). In areas where CEH motels are located on their own, in more residential areas that have sufficient space and privacy there appears to be more opportunity for the local area to absorb the change in use. Where they are located amongst other similar uses and afforded less privacy and space the increase of people living on the site is more evident.

6.4.3 Conclusion

It is acknowledged that the wider social changes over the last two years in general have had negative impacts on the stability of the community. Coupled with differences of opinions and beliefs on causes and solutions particularly in relation to housing shortages and provision of emergency housing, there are noted general negative changes to the cohesion and stability of the wider and local communities. CEH motels entered into these already established issues.

CEH motels (if not the individual residents) will be part of the community for up to 5 years and this is a longer-term use than the transitory length of stays in tourist motels. CEH motels provide services to support residents in their transition back into the community and to engage with community resources but is acknowledged they largely operate in isolation of the local community.

Overall, it is our assessment that CEH motels have negligible impact on stability and cohesion of the local and wider community relative to the existing environment. Furthermore, there is potential to embed the CEH motels within the surrounding communities and balance the community perception through looking at opportunity to connect into the community or other services and provide forums for community members to provide feedback and seek information.

6.5 Environmental amenity

6.5.1 Reported general social change - Environmental amenity

Many respondents reported that feeling unsafe, witnessing crime and anti-social behaviour, hearing verbal and physical abuse, and physical decline of the environment due to vandalism, rubbish, abandoned shopping

trolleys etc has led to a decreased quality and enjoyment of the surrounding environment. This had accumulated over a 2-3 year period and was on top of the backdrop of a reduction in tourism and vibrancy of the area, aging motel stock, business closures and more visible evidence of deprivation.

6.5.2 Assessment of potential impacts of Contracted Emergency Housing on environmental amenity

In relation to CEH motels there were a few neighbours who reported witnessing or hearing fights/arguments and anecdotal reports of criminal activity and trespassing (people using the respondent's property to access the CEH motel sites). Others reported some improvements when the motel became contracted such as fewer parties, loud music and better management of behaviour. Review of incidents suggest that there were occasions where neighbours may be disturbed; however, this was most commonly when voices were raised on sites where neighbours were located in close proximity (applicable to only a few of the contracted sites).

From site visits, sites were not noted for rubbish but some were better maintained than others. The presence of security was viewed by some interviewees as reassuring, whilst others noted high visibility of security reduced the amenity of the environment: making it feel patrolled. During site visits the security guard at one CEH was stationed at the entrance facing the public, and at a few others, security were very visible at the front of the site and seemed to gather there. At other sites security guards were not visible and were positioned inside offices or in a more discreet location.

Temporary gates including bollards, traffic cones, ropes and chains have the potential to detract from the amenity of the sites (this was observed during site visits and was raised by a couple of interviewees). At several sites staff and/or security cars were parked out front on verge/footpath, and the parking of cars in unauthorised areas and driver behaviour were cited as amenity issues by a few neighbouring residents.

In terms of noise there were reports from neighbours of their own or other neighbour's experience of frequent incidents at some CEH sites of yelling and hearing domestic arguments (physical and verbal) which was disturbing and disruptive. These were not raised with the CEH sites themselves and if members of the community were concerned they would generally call police. This is something that could occur within a normal residential environment and would not require resource consent. On CEH motel sites there is more visibility, reporting and management of incidents due to there being on-site security and support and this has the potential to both reduce occurrences and provide safe environments for other residents.

6.5.3 Conclusion

In terms of potential impacts on environmental amenity of the neighbours and local community this was not universal across the CEH sites. It was dependent on frequency of disturbances at the sites, behaviour of tenants and visitors to the site, visibility of security providers (staff and physical security), privacy, and upkeep of the property.

Comparative to being run as a motel (i.e. pre-emergency housing) CEH sites have potentially very low positive to low negative impacts due to increased or decreased incidents of disturbances and visible changes in regard to temporary security measures and visibility of security.

However, most of these sites were suppliers of emergency housing via EH-SNGs (at least partially) prior to CEH. Negative changes to environmental amenity within the local communities was being experienced at least a year prior to CEH being established. The establishment of CEH sites provides the following opportunities to improve the environmental amenity of the existing environment:

- Assurance of property maintenance (due to contract conditions) and opportunity to condition further physical amenity improvements
- Monitoring and reporting of on-site behaviour
- Management of visitors entering site

- Implementation of behavioural rules including management of loud music and social gatherings

At some sites where they are located on their own, the above practices have resulted in some improvements to the amenity or immediate neighbours due to reduction in social gatherings and loud music. Where the CEH sites are clustered among other motels offering emergency or temporary non-tourist accommodation, any improvements are not recognised and the potential addition of people to a concentrated geographic area is more likely to have negative impacts.

Therefore, overall in relation to the existing environment and social changes experienced by the community CEH has potentially very low positive to low negative impacts on the existing environmental amenity. There is potential with continued improvement of on-site management and upgrades to the properties to manage potential negative impacts and improve the sites' impacts on the amenity of neighbours and the local community.

6.6 Health and wellbeing

It is recognised that providing shelter for people who don't have any alternatives, benefits their health and wellbeing. The objective of CEH specifically is to improve the outcomes for families and other vulnerable groups seeking emergency accommodation, in particular, their health and well-being. Furthermore, it is recognised that CEH is a temporary accommodation solution that is not ideal for families or anyone on a long term basis and the intention is to transition people as quickly as possible to longer term solutions where possible. This SIA is focussed on the health and well-being of the surrounding community rather than those housed within CEH motels. The commentary and subsequent assessment is largely focused on the neighbours, local community and wider Rotorua surrounding the CEH sites.

6.6.1 Reported general social change - Community health and well-being

Stakeholders reported that more people are presenting in Rotorua with housing instability. Reasons for this varied from overcrowding exacerbated by COVID-19 conditions, family harm, loss of rentals, raising rental prices and limited availability of affordable rental stock and/or social housing. There were also reports of increased incidents of drug use and untreated mental health (due to growth in people experiencing these issues, lack of engagement and/or limited local resources).

Some interviewed and surveyed noted an increased visibility and occurrence of these social issues. For example, more people appearing intoxicated or under the influence of drugs in public and more incidents of being approached for money. Some reported hearing or witnessing violence (verbal and physical) on a more frequent basis particularly concentrated in and around the CBD and accommodation clusters. It was reported in stakeholder interviews that some places in the community have improved in terms of "safety" for those walking in the community, such as at Kuirau Park. However, the comment from these interviewees were that these "safety issues" appear to have transferred to other areas of Rotorua (noting this is in reference to the safety of the wider community, not necessarily the safety of those being accommodated with the emergency housing).

Of those surveyed 30% reported experiencing a negative impact from the use of motels as emergency housing (all accommodation assessed by community as providing for those requiring emergency accommodation not just CEH). Anecdotally people reported that they attributed people residing in motels to the following (noting these have not been verified either in terms of activity and/or location):

- incidents of trespassing by visitors trying to access emergency motels or leaving;
- people staying emergency accommodation trespassing on private property (including children playing on private property);
- gang altercations and other physical fights;
- incidents of looking into cars, vandalising or graffitiing around the area (including public sites such as racecourse and lawn bowls club);

- bottles and rubbish thrown over fences into private properties;
- abusive and aggressive behaviour;
- high levels of intoxication; and
- witnessing people leaving motels and participating in drug deals outside motels.

In terms of impacts on wellbeing, people reported threats to their physical safety, increased incidents of damage to property and increased stress due to the changes in the local environment, specifically focussing on increased crime and anti-social incidents. Statistics show over time a general increase in crime in the local communities particularly in Victoria and Whakarewarewa. Police reported a marked increase in police callouts in the Fenton Street area. It was observed that the occurrence of incidents were in reference to both public areas and on or outside motel sites where emergency accommodation was assumed to be being provided, this may or may not include specific CEH motels.

6.6.2 Assessment of potential impacts of Contracted Emergency Housing community health and wellbeing

Most CEH incidents involving police call outs that have occurred at CEH motels are internal (the residents and/or visitors), not involving members of public. Police note that issues are more problematic where sites offering emergency accommodation (all service models – supervised and unsupervised) are clustered together as there is more overspill into the public areas and anti-social interactions between sites.

CEH motels that have security, safety measures and support services are generally reported by stakeholders, motel operators and some neighbours to provide more management of potentially problematic behaviour on-site that is experienced/witnessed by the surrounding community. Some neighbours and stakeholders reported no changes to their own well-being as a result of the provision of security and support services at the CEH sites (either problems continued or no problems to begin with), other noted an improvement due to feeling more safe and therefore less stressed.

6.6.3 Conclusion

Overall, it is assessed that contracting whole motels and providing support services and security has improved the safety conditions at CEH motel sites relative to the previous activity at motel sites. Therefore, it is concluded that CEH motels have not exacerbated and in some cases have even improved the experience and activity at motels sites and as a result cannot be considered to adversely impact the overall well-being of the immediate community around them. Although this will not necessarily reduce the stress or physical safety concerns people are experiencing in the wider community it may for some improve the immediate neighbourhood environment. Overall, therefore, the finding is that the CEH motels have a negligible impact on the health and safety in context of the social changes within the existing environment.

6.7 Fears and aspirations – fears of safety

6.7.1 Reported general community social change - Fears of safety

In neighbour interviews the majority of respondents reported that over the last two years they have felt increasingly unsafe in the local communities of Victoria and Glenholme. This issue was particularly raised about Fenton Street and side streets (both from those from the local area and those who were not). This varied between a general *“the community has become more unsafe”* to *“I personally feel unsafe”*. People spoke of witnessing what they assess to be behaviour that would increase risks to personal or public safety such as anti-social behaviour, criminal activity and people appearing under the influence of drugs and/or alcohol. They reported these incidents were happening in increasing frequency.

Several neighbours during interviews spoke of themselves personally and/or neighbours increasing security provisions such as fencing and security cameras due to increased incidents of theft in the area and incidents of trespassing. Those interviewed spoke particularly of the elderly being vulnerable (as someone elderly themselves or as neighbours), but also incidents of fears for safety of women, people with disability and children. In the community surveys when asked why people perceived their communities as becoming worse 14% reported that they felt unsafe, threatened or more security conscious.

A few interviewed reported that they generally did not feel personally unsafe due to getting familiar with new people in the area, having no experiences of crime or harassment personally and/or they did not view the people in the area as intimidating. In the community survey overall 7% of respondents reported that they liked living in their local community as it was safe (highest reported in Fairy Springs/Koutu (14%)).

With regard to public perception and experience of motels they believed to be supplying emergency accommodation (all models of service delivery), feedback indicates that people perceive that much of the behaviour that makes them feel unsafe in the community is being generated by people staying in motels that are used for emergency accommodation. Specifically, a concentration of emergency housing being offered within a relatively small geographic area is observed to generate more concern. In the survey, 21% felt use of motels for emergency housing in general had made them feel unsafe/threatened or more security conscious. A few examples from the survey include:

“Emergency housing. I have to be a lot more conscious of locking my car and house and looking after my dog. I always carry my cell phone with me. I often have to call the police re an incident of domestic violence, which spills out onto the streets around the motels”

“Use of local motels for homeless people, and the one right next door is a bad one - ankle bracelets, people on parole. Different levels in different motels. I still have my life I've always had but have concerns about security. My home is like Fort Knox”

6.7.2 Assessment of potential impacts of Contracted Emergency Housing on fears of safety

The 13 CEH motels these were commissioned in July 2021 (one in September 2021), into a setting where the above social change was already occurring (discussed in section 5). It is noted that at least two thirds of these motels were supplying emergency housing under the EH-SNG system prior to being contracted. In terms of adding to the concentration of people reported above the cumulative impact is low and, if anything, the more stringent criteria and referral process has seen occupancy sitting much lower overall, than the total occupancy capacity of sites.

In terms of sense of safety, those people interviewed that were aware of the CEH motels specifically had mixed opinions. The majority of external stakeholders (not CEH service providers or CEH motel operators) observed that behaviour on-site was better managed, providing a safer environment for residents of the sites and neighbours relative to the use of sites for other emergency housing. Some neighbours reported the presence of security provided more reassurance and an improved sense of safety and had noted an improvement in terms of anti-social behaviour on-site and around the site. A few reported continued fears for safety and no change from the unregulated / unmanaged wider use of motels (though none identified an increase in impacts / issues associated with the CEH). Where sites were surrounded by other motels that appeared to be supplying emergency accommodation these seemed to be experienced collectively as negatively impacting on fears of safety.

A review of incident reports from CEH motels show that most incidents (range of health and safety issues and rule breaches) are internal (recognising where voices are raised this could be heard by neighbours). However, on occasion or where a motel is more exposed to the street or neighbours or the incident occurs on the street outside the motel, this has the potential to contribute to fears for safety from those in the community. Across all CEH motels there would be an incident visible to and/or heard by neighbours at least fortnightly, ranging from hearing shouting, seeing police being called or witnessing threatening verbal or physical behaviour.

At nearly all CEH motels, fears of safety from the community were not expressed directly to the on-site manager / service providers - rather reported to police or unreported. The CEH motels did not have systems to work with neighbours / local community on fears of safety, beyond receiving and responding to direct complaints.

Overall, our research indicates that a number of people in the community are expressing a moderate adverse impact arising from their fears for safety over the last two years particularly clustered around the Fenton Street strip, due to an increase in anti-social behaviour which was cited as having connections to the increased poverty, a transient community, unemployment, housing insecurity and other complex social factors of people in the area.

6.7.3 Conclusion

With regards to the CEH motels, there is the potential that the establishment of additional motels operating for emergency housing or other temporary housing (even under a different operating model) are likely to exacerbate these existing impacts, particularly where there is a concentration of temporary accommodation for emergency housing purposes. People identifying this impact is not universal (e.g. it is in part related to personal perception) and seems to be concentrated to immediate neighbours and those within visual or audible distance from the sites or by those who pass these sites regularly.

Some of the CEH operational measures already in place have contributed to minimise this potential impact (security provisions and on-site behavioural rules) and it is recognised that the CEH model has improved some of the motel sites when compared directly to prior to these motels being contracted. It was noted by operators and service providers that incidents are in general reducing as operational measures improve and settle in. This improvement has been experienced and identified by some in the community at a few sites. However, unless this has been coupled with other improvements to safety occurring within the local community it has often gone unrecognised (e.g. change at one site is 'lost' or unrecognised from activity in the wider area).

Therefore, in the context of the existing environment and current social issues pertaining to fears of safety the CEH motels have potentially negligible to low positive impacts on the fears of safety for neighbours and negligible impacts on the local and wider community.

6.8 Fears and aspirations - fears and aspirations of the future of their community

6.8.1 Reported general community social change - Community aspirations

Most people interviewed (neighbours and stakeholders) and many surveyed aspired for Rotorua to retain and develop its reputation as a desirable tourist destination, where people visited and stayed overnight (or longer). Views on how to meet this aspiration varied, some people spoke of returning Fenton Street to the hub of tourist accommodation, whereas wider visions outlined in spatial plans indicated a strategic intention to consolidate the CBD and focus tourist accommodation on natural assets such as the lake and transition Fenton Street into a mix of accommodation and higher density housing. People feared that social issues occurring within Rotorua due to COVID-19 and/or other social challenges such as social housing shortages, increased poverty, rises in crime would provide challenges to attracting people to Rotorua.

The use of motels as emergency accommodation was viewed by many as a deterrent to tourists. Reasons cited included tourists experiencing sharing accommodation with people who were using it for emergency housing, witnessing environmental degradation (vandalism and rubbish) in highly visible spaces (i.e. Fenton Street) and anti-social behaviour and/or reading about Rotorua's social issues in the media.

Most people shared the sentiment that they aspired to care for members of their community who were without stable accommodation and provide a safe space for them to reside (even if it was temporarily). However, some were concerned that what initially appeared to be a short-term solution of using motels as emergency accommodation seemed to be growing in terms of number offered and duration with no visibility of how this would be down scaled and transitioned to more suitable long-term solutions. There were also fears that this activity in tourist areas would make the transition back to more tourism once borders opened more difficult.

6.8.2 Assessment of potential impacts on community aspirations – Contracted Emergency Housing

Aside from stakeholders directly involved in CEH motels, the awareness of this model (i.e. CEH) of service delivery was limited in the community. As a whole, CEH motels were effectively indistinguishable from all other motels supplying emergency accommodation.

CEH motels are spread across Rotorua (although motels in Rotorua are largely clustered around a few key areas). CEH motels provide specifically for whānau and vulnerable adults and provide support to transition people on to more stable accommodation and provide a safe environment while living on-site (through the operational policies and staffing provisions). As part of the contract HUD specifies expectations on the physical maintenance of properties that is in keeping with community expectations. Specificities of CEH motels have not communicated to the community, this includes information such as how long these will be in service and any plans on how the down scaling of these services will occur in the future.

Publicly visible incidents and issues at CEH sites coupled with the existing social issues in Rotorua potentially inhibits the aspirations of the community to improve the reputation of Rotorua and attract tourists back to the area. Conversely the aims and delivery of CEH motels do fit with the aspiration to provide shelter and care for vulnerable members of the wider community.

6.8.3 Conclusion

Overall, CEH motels have the potential to provide a temporary, suitable model of care for vulnerable members of the community in keeping with wider community aspirations, if properly managed, embedded into other community networks and properly maintained. However it is likely incidents will continue to occur on-site occasionally (where visible/audible to the community) and therefore may not change the existing environment which people are fearful is negatively impacting aspirations to attract tourists to the area.

CEH motels potentially do not change the existing fears and aspirations and therefore have a negligible impact. Visibility by the community of longer term plans regarding the transition from CEH to more permanent housing solutions may also minimise aspirational fears.

6.9 Summary

The above assessments consider the potential impacts of CEH with regards to the existing environment (and pre-existing social changes) in which the CEH motels commenced operation (also what would happen without CEH motels). The assessment considers all 13 CEH motels, but all have the potential to generate a different scale of effect due to location, neighbours, prior use of motel, proximity to other emergency accommodation, physical layout and condition of property, size (re: how many potential residents on-site) and management of site. For this reason, many of the impacts have included a potential range of impacts and have specified the qualification for where CEH sties fit on the range due to certain characteristics.

The following table is a summary of impacts outlined throughout Section 6 of this report. It is noted that these impacts are assessed without the implementation of management measures suggested in this report.

| Potential Impact | Description | Geographic extent | Impact of CEH on existing environment |
|----------------------------------|---|--|--|
| Way of life | How people move around the local community by foot | Those who move around the proximity of the sites by foot | Negligible to very low negative - <i>more likely to negatively impact when clustered with other motels supplying emergency or other longer term occupancy</i> |
| Tourism Character | The impact on the tourism experience and reputation | Wider community | Negligible to very low negative – <i>more likely to negatively impact when clustered with other motels supplying emergency or longer term occupancy</i> |
| Residential Character | The impact of the CEH motels on the surrounding residential character | Neighbours and local communities (located in proximity of sites) | Very low negative |
| Community Services | How the CEH motels impact on the delivery of community services within the community. | Wider community | Low positive to negligible |
| Community cohesion and stability | How the CEH impacts how the community operates and the stability of the community. | Local and wider community | Negligible |
| Environmental Amenity | The impact of the CEH on the experience of the community environment. | Neighbours and local community within proximity of sites | Very low positive to low negative impact- <i>more likely to negatively impact when clustered with other motels supplying emergency or longer term occupancy</i> |
| Health and Wellbeing | Impacts on the health and well-being of the community | Neighbours and local community within proximity of sites | Negligible |
| Fears of safety | Impacts on sense of safety | Neighbours and local community within proximity of sites | Negligible to low positive impacts |
| Community Aspirations | Impacts on future aspirations of the community. | Local and wider community | Negligible |

7 Potential measures and opportunities to remedy adverse effects

Many of the impacts identified are related to larger social issues outside the scope of this consenting environment. In terms of direct impacts on the receiving environment from the CEH motels the following recommendations are suggested to help improve the integration of the sites to the surrounding areas. It is our assessment that if successfully implemented, these recommendations could further minimise identified social impacts being experienced:

- Quality permanent fencing and gates (removal of cones and other temporary blockades) that is in keeping with the character of tourist accommodation environment
- Enhancement of landscaping to soften any security provisions (as per above) and to provide further privacy screening where practicable.
- Improved management of on-site and offsite parking to prevent staff parking out the front of the site on the driveway or berm/footpath.
- On-site dedicated play areas for children on-site or alternatively residents being orientated to local parks within close proximity and supported to access these.
- A 24/7 0800 number to be provided to neighbours to contact the service operators/security on-site where concerns arise and a complaints/queries response process to be put in place.
- A forum for the community to ask questions and share information for the overall service.
- Scheduled visits (where visitors allowed) and a maximum number of visitors on-site at any one time.

As a wider observation, opportunities to mitigate social issues associated with the use of motels for emergency housing could also include working with the motel industry on density and distribution of emergency housing activity. It is acknowledged this is not within scope of the CEH, but may assist with some of the social cohesion, environmental quality and social disruption issues identified in our engagement with the community and stakeholders. It is also acknowledged that the council and central government are already providing wider community mitigation and longer term solutions including:

- The Rotorua Housing Taskforce;
- Te Pokapū- the Rotorua Housing Hub;
- Whakahaumarū Hapori - Community Safety Plan; and
- Council “clean-up” crews addressing graffiti and dumping of shopping trolleys and rubbish in public spaces

8 Conclusion

It is acknowledged that local communities and wider Rotorua are going through numerous social changes that set the context within which CEH motels are being experienced. Potential impacts attributed by the community to the CEH motels are found to be similar to or attributable to those existing wider community social changes.

It is not considered that contracting 13 CEH sites at the same time (noting one was 6 months later) has caused additional cumulative impacts. 11 of the CEH sites already supplied, at least in part, EH-SNG accommodation and therefore did not add to the overall number of suppliers of emergency accommodation. The other two sites (not previously supplying EH-SNG accommodation) are not within the central cluster of accommodation and are, in our opinion, more able to be absorbed within the existing local community.

Without these CEH sites it is reasonable to consider that the demand for emergency and transitional housing will continue as evidenced by the increase in EH-SNG grants applications over the last few years. Housing supply shortages indicate it will take many years to rectify. Therefore, we consider that removing the contracted emergency accommodation option (e.g. were it not to be consented) would not improve the current social

changes experienced within Rotorua and may result in further negative social change, particularly for vulnerable members of the community.

It is important to consider how to minimise potential impacts of emergency housing on the surrounding community. In our opinion contracted emergency housing does this. Contracted emergency housing separates emergency housing use from the provision of tourist accommodation and improves the care of whānau and vulnerable adults in emergency housing. The operating model aims to reduce potential impacts on the neighbours and local community through its management of the sites.

The use of motels for emergency housing in our assessment is the symptom of social issues within the community rather than the cause. Overall, it is assessed that CEH motels would largely not change the existing social conditions (improve or detract). Positive impacts were more likely where managerial inputs (improved reliability of maintenance of building and grounds, wrap around support services, operational rules, security services) resulted in improved motel conditions (including operational systems to manage the interface of CEH occupants of motels and the wider community and/or maintenance of sites). Negative impacts are more likely where the CEH motels are clustered within close proximity to other forms of emergency and transitional housing and other contracted motels, due to increased density of activity and therefore increased likelihood of incidents and subsequent social impacts.

It is anticipated that further measures as recommended in Section 7 may also assist to improve the environmental amenity of the CEH sites and provide an avenue for feedback and dialogue with the local communities, which would ultimately bring about further improvements. Beyond this, it is noted that resource consent for the CEH motels is being sought on a time-limited basis (5 year duration) and that during this period some CEH motels may be decommissioned as more permanent housing options become available. The following table summarises the overall impacts with and without recommended management in place.

| Potential Impact | Description | Geographic extent | Impact of CEH on existing environment | Potential reduction of impact after recommendations are implemented |
|-------------------|---|--|--|---|
| Way of life | How people move around the local community by foot | Those who move around the proximity of the sites by foot | Negligible to very low negative - <i>more likely to negatively impact when clustered with other motels supplying emergency or longer term occupancy</i> | No management recommended |
| Tourism Character | The impact on the tourism experience and reputation | Wider community | Negligible to very low negative – <i>more likely to negatively impact when clustered with other motels supplying emergency or longer term occupancy</i> | Negligible to very low negative <i>It is considered that further improvement to the appearance and management of the sites can be made to reduce some of the potential negative impacts but the likelihood of incidents occurring visible to the community may not fully reduce potential negative impacts on character</i> |

| Potential Impact | Description | Geographic extent | Impact of CEH on existing environment | Potential reduction of impact after recommendations are implemented |
|----------------------------------|---|--|--|--|
| Residential Character | The impact of the CEH motels on the surrounding residential character | Neighbours and local communities (located in proximity of sites) | Very low negative | Very low negative <i>As per above</i> |
| Community Services | How the CEH motels impact on the delivery of community services within the community. | Wider community | Low positive to negligible | Low positive <i>Further integration and collaboration with community services could further enhance potential positive impacts</i> |
| Community cohesion and stability | How the CEH impacts how the community operates and the stability of the community. | Local and wider community | Negligible | No management recommended |
| Environmental Amenity | The impact of the CEH on the experience of the community environment. | Neighbours and local community within proximity of sites | Very low positive to low negative impact- <i>more likely to negatively impact when clustered with other motels supplying emergency or longer term occupancy</i> | Very low positive to very low negative <i>It is considered that further improvement to the appearance and management of the sites could reduce some of the potential negative impacts on environmental amenity but the likelihood of incidents occurring visible to the community may not fully reduce potential negative impacts amenity impacts.</i> |
| Health and Wellbeing | Impacts on the health and well-being of the community | Neighbours and local community within proximity of sites | Negligible | No management recommended |
| Fears of safety | Impacts on sense of safety | Neighbours and local community | Negligible to low positive impacts | Negligible to low positive <i>It is considered the recommendations to improve communication</i> |

| Potential Impact | Description | Geographic extent | Impact of CEH on existing environment | Potential reduction of impact after recommendations are implemented |
|-----------------------|---|---------------------------|---------------------------------------|---|
| | | within proximity of sites | | <i>with the surrounding community and other physical and managerial management recommendations may further allay community fears.</i> |
| Community Aspirations | Impacts on future aspirations of the community. | Local and wider community | Negligible | No management recommended |

Within the context of the social change that is being experienced in Rotorua (with increased homelessness and demand for housing and other social drivers) it is our assessment that the CEH motels are not significantly contributing to adverse social outcomes. Further, there are measures available to improve the operational interface with the wider neighbourhood and therefore, potentially the perceptions and experiences the community has of these facilities.

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A

Appendix A – Summary of Contracted Emergency Housing Motels

The following table summarises the key features of each motel contracted to provide emergency accommodation from the resource consent applications.

| Site | Suburb | Max Number Occupants | Staffing provision | Outdoor facilities | Noise Management | Behavioural rules | Visitor rules | Capacity |
|------|----------------|--|---|---|---|---|---|---|
| 1 | Fenton Park | 142 (excluding infants aged under 18 months) | <ul style="list-style-type: none"> -Motel operator (on-site 24 hours 7 days) -Motel reception (Mon to Fri 8am to 6pm, weekends and holidays) -On-site security 24/7 -Visions support staff | <ul style="list-style-type: none"> -Swimming pool -Grassed open picnic area | <ul style="list-style-type: none"> - No recreational equipment will be placed within five meters of the neighboring residential boundary fences -Visitors to the site are restricted to 9.00am to 6.00pm -Outside site use is restricted to 8.00am to 8.00pm | <ul style="list-style-type: none"> -No alcohol or drugs allowed on-site | <ul style="list-style-type: none"> -There must be a discussion between staff and the household before visitors can obtain access to the premises -Visitors are only permitted between 6am and 9pm. Visitors are not permitted to stay overnight -Visitors must only access the site by the main entrance -Visitors must sign in and out, advise who they are visiting and their expected length of stay with security on entry. | The site has 40 accommodation units, and all are available for Contracted Emergency Housing |
| 2 | Victoria | 39 (excluding infants under the age of 18 months) | <ul style="list-style-type: none"> - 24/7 security on-site - On-site staff from Emerge Aotearoa (5 days 8am to 5pm) - Kaitiaki (7 day, 4 hours daily) - Motel manager on-site 24/7 | Playground | <ul style="list-style-type: none"> - Use of outdoor facilities limited to 6am to 10pm - Recreational equipment cannot be used within 5 meters away from neighboring residential boundary fences - Large gatherings and parties prohibited | <ul style="list-style-type: none"> -Consumption of alcohol in common areas is prohibited. Alcohol is allowed in rooms. - Illegal substances and activities are prohibited on-site - Breaches to the rules of stay results in removal from the accommodation. | <ul style="list-style-type: none"> - Permitted to visit 9am to 6pm. - Must only use designated entrance to enter and exit the site - Permission will be obtained to create a visitor profile -Visitors not permitted to stay overnight | All units (10) contracted by HUD. 9 will be occupied and the 10 th unit will be used by the Housing Service Provider to support their on-site support services |
| 3 | Whakarewa rewa | 117 (excluding infants under the age of 18 months) | <ul style="list-style-type: none"> -Motel operator (as required only) -Cleaning staff (rostered daily) -WERA Aotearoa support service staff (Mon-Fri 9am till 5pm) -1 security guard on-site 24/7 | None | <ul style="list-style-type: none"> -No recreational equipment to be used within five meters of the neighboring residential boundary fences. | <ul style="list-style-type: none"> -No alcohol, or drugs allowed on-site | <ul style="list-style-type: none"> -Visitors will be not permitted on-site - Persons visiting the site in the capacity of supporting the client alongside the support service providers are exempt from this rule - Uninvited visitors will be asked to leave by on-site staff | The site has 39 accommodation units, and all are available for Contracted Emergency Housing |

| | | | | | | | | |
|---|-----------|--|--|----------------|--|---|--|---|
| 4 | Victoria | 54 (excluding infants under the age of 18 months) | <ul style="list-style-type: none"> -Motel manager (as required) -Cleaning staff (rostered daily) -Support workers from WERA Aotearoa - On-site security 24/7 | None | <ul style="list-style-type: none"> - No recreational equipment to be used within five meters of the neighboring residential boundary fences. | <ul style="list-style-type: none"> - No alcohol or drugs allowed on-site | <ul style="list-style-type: none"> -Visitors will be not permitted on-site. - Persons visiting site in the capacity of supporting the client alongside the support service providers are exempt from this rule -Uninvited visitors will be asked to leave by on-site staff | The site has 14 accommodation units, and all are available for Contracted Emergency Housing |
| 5 | Glenholme | 52 (excluding infants under the age of 18 months) | <ul style="list-style-type: none"> -Motel operator will be on-site during business hours -Emerge Aotearoa will provide support staff from Monday to Friday 8am to 5pm -Kaitiaki to be on-site for at least 4 hours per day and 7 days per week -On-site security presence 24/7 | None | <ul style="list-style-type: none"> -Recreational equipment cannot be used within 5 meters away from neighboring residential boundary fences -Use of any playground equipment is restricted to the hours stated in the rules of stay (6am to 10pm each day). - Large gatherings and parties are prohibited | <ul style="list-style-type: none"> -Consumption of alcohol in common areas is prohibited. Alcohol is allowed in rooms. - Illegal substances are prohibited in all areas of the site, meth testing of units will be undertaken once a month with written notice in advance -All illegal activities are prohibited in all areas of the site -No gang apparel to be worn on-site | <ul style="list-style-type: none"> -Visitors are only permitted between 9.00am and 6.00pm, unless prior approval is arranged with the residential manager -Visitors must be invited by the occupants or the Support Services Provider -All visitors must use specific entrance to enter and exit the site and report to the Motel office when they enter and exit the site (sign in and out) -Permission will be obtained to create a visitor profile which will include full name, vehicle registration, name of occupant they are visiting and identify any support required in the event of an emergency evacuation -Visitors are not permitted to stay overnight -Visitors may only park in the carpark space allocated to the unit they are visiting if it is unoccupied. If the household has their own vehicle and are utilizing this space, then the visitor must find suitable alternative parking -Uninvited visitors will be asked to leave by on-site staff | The site has 14 accommodation units, 13 are available for Contracted Emergency Housing and one is used by the service provider. |
| 6 | Koutu | 140 (excluding infants under the age of 18 months) | <ul style="list-style-type: none"> -Social and support workers will be available on-site from Monday to Friday between the hours of 830am to 5pm. -An on-call Social and Support Worker will be available 24 hours, 7 days per week via phone. -Motel operator on-site 24/7 -24/7 security guard | -Swimming pool | <ul style="list-style-type: none"> -No recreational equipment will be placed within five meters of the neighboring residential boundary fences -Outside site use is restricted to 8.00am to 8.00pm -If there is continuous disregard to noise management, the household maybe removed from the premises | <ul style="list-style-type: none"> - No alcohol or drugs allowed on-site -Any illegal activities are prohibited in all areas of the site | <ul style="list-style-type: none"> -There must be a discussion between Visions staff and the household before visitors can obtain access to the premises. -Visitors are only permitted between 9am and 6pm. Visitors are not permitted to stay overnight -Visitors must only access the site by the main entrance -Visitors must sign in and out, advise who they are visiting and their expected length of stay with security on entry | The site has 38 accommodation units and 26 are available for Contracted Emergency Housing and 2 used by the service provider. |

| | | | | | | | | |
|---|-------------|---|--|--|--|--|--|--|
| 7 | Glenholme | 66 (excluding infants under the age of 18 months) | <ul style="list-style-type: none"> -24/7 security and an on-call senior security officer -Living on-site motel operator -Visions of a Helping Hand Social and Support workers will be available on-site from Monday to Friday between the hours of 8.30am to 5.00pm. | None | <ul style="list-style-type: none"> -No recreational equipment will be placed within five meters of the neighboring residential boundary fences -Visitors to the site are restricted to 9.00am to 6.00pm -Outside facility use is restricted to 8.00am to 8.00pm -If there is continuous disregard to noise management, the household maybe removed from the premises | <ul style="list-style-type: none"> - No alcohol or drugs allowed on-site -Any illegal activities are prohibited in all areas of the site | <ul style="list-style-type: none"> -There must be a discussion between the Visions staff and the household before visitors can obtain access to the premises -Visitors are only permitted between 6am and 9pm. Visitors are not permitted to stay overnight -Visitors must only access the site by the main entrance -Visitors must sign in and out, advise who they are visiting and their expected length of stay with security on entry | The site has 20 accommodation units and 18 are available for Contracted Emergency Housing and 2 used by the housing service provider. |
| 8 | Glenholme | 90 (excluding infants aged less than 18 months) | <ul style="list-style-type: none"> -Motel operator will be on-site during business hours -Emerge Aotearoa will provide support staff from Monday to Friday 8am to 5pm -Kaitiaki to be on-site for at least 4 hours per day and 7 days per week -On-site security presence 24/7 | <ul style="list-style-type: none"> -BBQ area -Playground | <ul style="list-style-type: none"> -Recreational equipment cannot be used within 5 meters away from neighboring residential boundary fences -Use of any playground equipment is restricted to the hours 6am to 10pm each day -Large gatherings and parties are prohibited | <ul style="list-style-type: none"> -Consumption of alcohol in common areas is prohibited. Alcohol is allowed in common areas. -Illegal substances are prohibited in all areas of the site -All illegal activities are prohibited in all areas of the site | <ul style="list-style-type: none"> -Visitors are only permitted between 9.00am and 6.00pm, unless prior approval is arranged with the residential manager -Visitors must be invited by the occupants or the Support Services Provider -All visitors must only use the specified entrance to enter and exit the site and must report to the Motel office when they enter and exit the site (sign in and out) -Permission will be obtained to create a visitor profile which will include full name, vehicle registration, name of occupant they are visiting and identify any support required in the event of an emergency evacuation -Visitors are not permitted to stay overnight -Visitors may only park in the carpark space allocated to the unit they are visiting if it is unoccupied. If the household has their own vehicle and are utilizing this space, then the visitor must find suitable alternative parking -Behavior or actions by visitors that do not comply with the rules of stay will be the full responsibility of the occupants who invited them - Uninvited visitors will be asked to leave by on-site staff | The site has 15 accommodation units and 14 are available for Contracted Emergency Housing and 1 by the housing service provider. |
| 9 | Fenton Park | 64 (excluding infants under the age of 18 months) | <ul style="list-style-type: none"> -24/7 security -Motel operator living on-site -Social and support workers will be available on-site from Monday to Friday between the hours of 8.30am to 5.00pm | None | <ul style="list-style-type: none"> -No recreational equipment will be placed within five meters of the neighboring residential boundary fences -Outside facility use is restricted to 8.00am to 8.00pm | <ul style="list-style-type: none"> -No alcohol or drugs allowed on-site. -Any illegal activities are prohibited in all areas of the site | <ul style="list-style-type: none"> -There must be a discussion between the Visions staff and the household before visitors can obtain access to the premises -Visitors are only permitted between 6am and 9pm -Visitors are not permitted to stay overnight -Visitors must only access the site by the main entrance -Visitors must sign in and out, advise who they are visiting and their expected length of stay with security on entry | The site has 16 accommodation units and 15 are available for Contracted Emergency Housing and 1 is used by the housing service provider. |

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|----|-------------------|--|---|--|---|---|---|--|
| 10 | Whakarewa rewa | 58 (excluding infants under the age of 18 months) | <ul style="list-style-type: none"> - Motel operator (residing on-site) -24/7 security -Social and Support workers will be available on-site from Monday to Friday between the hours of 8.30am to 5.00pm. | None | <ul style="list-style-type: none"> -No recreational equipment will be placed within five meters of the neighboring residential boundary fences -Visitors to the site are restricted to 9.00am to 6.00pm. -Outside facility use is restricted to 8.00am to 8.00pm -If there is continuous disregard to noise management, the household maybe removed from the premises | <ul style="list-style-type: none"> -No alcohol or drugs allowed on-site. -Any illegal activities are prohibited in all areas of the site | <ul style="list-style-type: none"> -There must be a discussion between the Visions staff and the household before visitors can obtain access to the premises -Visitors are only permitted between 6am and 9pm -Visitors are not permitted to stay overnight -Visitors must only access the site by the main entrance -Visitors must sign in and out, advise who they are visiting and their expected length of stay with security on entry | The site has 14 accommodation units and 13 are available for Contracted Emergency Housing and 1 is used by the housing service provider. |
| 11 | Fairy Springs | 111 (excluding infants under the age of 18 months) | <ul style="list-style-type: none"> - 24/7 security on-site - Social and support workers from Visions of a Helping Hand (5 days 8:30am to 5pm) - Motel Manager - On call social and support worker available 24/7 via phone | <ul style="list-style-type: none"> -Swimming pool - Playground - Trampoline | <ul style="list-style-type: none"> -No recreational equipment will be placed within five minutes five meters of the neighboring residential boundary fences -Outside facility use restricted to 8am to 8pm | <ul style="list-style-type: none"> - No alcohol or drugs allowed on-site -Any illegal activities are prohibited in all areas of the site -Breaches to the rules of stay could result in removal from the accommodation | <ul style="list-style-type: none"> -Visitors to the site are restricted to 9am to 6pm - Not permitted to stay overnight -Must only access site via main entrance | 36 Units are contracted by HUD as the motel operator uses one unit for storage and 1 to be used by housing service provider. |
| 12 | Victoria | 108 (excluding infants under the age of 18 months) | <ul style="list-style-type: none"> -Motel operator (as required only) -Cleaning staff (rostered daily) -WERA support service staff (Monday and Friday 9am till 5pm) -24/7 security guard -Roaming security will be in operation between the hours of 9am to 5pm and on call as required. | <ul style="list-style-type: none"> - Children's play area. - 3 off site units with private courtyards - Guest laundry - BBQ area - Swimming poo - Games room | <ul style="list-style-type: none"> - No recreational equipment to be used within five meters of the neighboring residential boundary fences. | <ul style="list-style-type: none"> -No alcohol or drugs allowed on-site | <ul style="list-style-type: none"> -Visitors will be not permitted on-site - Persons visiting the site in the capacity of supporting the client alongside the support service providers are exempt from this rule - Uninvited visitors will be asked to leave by on-site staff | The site has 27 accommodation units and 26 are available for Contracted Emergency Housing and 1 is used by the housing service provider. |

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|----|----------|---|---|---|--|--|---|---|
| 13 | Victoria | 78 (excluding infants under the age of 18 months) | <ul style="list-style-type: none"> -Motel operator (available when required) -Motel reception operates between 9am to 4pm, Monday to Sunday -24/7 security | <ul style="list-style-type: none"> -Pool (closed) -4 thermal pools (closed) | <ul style="list-style-type: none"> -No recreational equipment will be placed within five meters of the neighboring residential boundary fences -Visitors to the site are restricted to 9.00am to 6.00pm -Outside facility use is restricted to 8.00am to 8.00pm | <ul style="list-style-type: none"> -No alcohol or drugs allowed on-site. -Any illegal activities are prohibited in all areas of the site | <ul style="list-style-type: none"> -There must be a discussion between Visions staff and the household before visitors can obtain access to the premises -Visitors are only permitted between 6am and 9pm -Visitors are not permitted to stay overnight -Visitors must only access the site by the main entrance -Visitors must sign in and out, advise who they are visiting and their expected length of stay with security on entry | <p>The site has 20 accommodation units and 19 are available for Contracted Emergency Housing and 1 is used by the housing service provider.</p> |
|----|----------|---|---|---|--|--|---|---|

B

Appendix B– Literature review

Literature review

Motels and emergency housing

The use of motels for emergency housing is not new, nor is it unique to New Zealand with Canada, United States of America, United Kingdom, and Australia all using motels or other forms of tourist accommodation to provide emergency housing (Giles, 2020; Wilson & Barton, 2022; Mantler et al., 2021; Thomas & So, 2016). Motels and hotels have been used as emergency shelters in U.S. and Canada since the 1980s (Giles, 2020; Thomas & So, 2016). Previously known as ‘welfare hotels’ the U.S. General Accounting Office (1989) defined these as “commercially owned single or multi-story hotels or motels providing shelter to a clientele composed exclusively or primarily of homeless families receiving some type of public assistance” and described as “a room with a private bath, linen changes, and general facility maintenance...generally cooking facilities are not provided” (p.2. as quoted by Thomas & So, 2016). Busch-Geertsema & Sahlin (2007) also note that dedicated homeless hostels were developed in 1990s in Scotland, Germany and Sweden to reduce reliance on commercial tourist accommodation such as hotels and bed and breakfasts. In Canada the use of motels for emergency housing has continued to grow as in mid-2018 Toronto expanded the motel programme (which previously used three motels to supplement other shelter services) to help meet increasing demand for shelter services which was up by 38% since 2016 (City of Toronto, 2019 as cited by Giles, 2020).

Studies related to motels and the provision of emergency housing tend to focus on the experiences of people who are living in emergency accommodation (e.g. Giles, 2020; Thomas & So, 2016; Mantler et al., 2021). People staying in emergency accommodation are increasingly people and families (often women) who are unable to afford housing or are escaping domestic violence (Thomas & So, 2016; Giles, 2020). Giles (2020) studied families living in motels in Toronto finding that residents did not consider these spaces a ‘home’ because the motels lacked control over space, safety/security and privacy. In exploring the experience of mothers living in emergency assistance motels and hotels in Massachusetts Thomas & So (2016) found that they often failed to meet residents’ basic needs, fostered loneliness and isolation, lead to feeling in a constant state of limbo and that it created conflict between hotel staff and residents. Women interviewed did not feel safe in the hotels as they were fearful of other residents and their guests and therefore kept to rooms. This compounded issues with the lack of space provided in rooms and also the lack of accessible services and amenities where the hotels were located. Similar issues were also identified by Mantler et al (2021) who studied the experiences of women escaping domestic violence living in hotels in Ontario during the COVID-19 pandemic. Although the use of hotels meant women and children who would have otherwise been turned away could be given shelter, those interviewed had mixed feelings about the adequacy of hotels as temporary housing solutions it was not a suitable place for most to recover and provide support.

Across these studies it is identified that motels (and other similar accommodation) are not ideal accommodation in which to live for extended periods as they are not designed or set up as places to live on a long-term basis. However, despite these challenges they often present the only available option to provide homeless people and families with shelter. Recognising the issues with longer term use of commercial accommodation designed for tourists, England implemented an order in 2004 that “homeless families with children, or where a member of the household is pregnant, should not be placed in B&B accommodation except in an emergency, and even then only for a maximum of six weeks” (Wilson & Barton, 2022). It was identified that B&Bs were only suitable for very short term stays as they lacked privacy, often involved shared cooking and cleaning facilities and had potential detrimental impacts on the health and development of children. Despite this, reports show that more extended use continues with 590 households staying in B&B accommodation for longer than six weeks in 2021 highlighting the lack of other alternatives (Wilson & Barton, 2022). That said, Busch-Geertsema & Sahlin (2007) argue that while the need for emergency housing legitimises the use of these facilities caution should be taken that these are only for emergency use and that this should not extend to inadequate political ambition to address underlying issues of homelessness.

Community concern and opposition

Facilities that serve homeless people such as homeless shelters, transitional and affordable housing commonly face community opposition to their establishment (Wynne-Edwards, 2003; Dear, 1992; Lyon-Callo, 2001; Busch-Geertsema & Sahlin, 2007; Farrell, 2005). Dear (1992) studied the siting of controversial facilities and examined both community opposition and factors determining community attitudes. With regards to community opposition, it was observed that it often begins as a confined, small vocal group living near the proposal but can shift into a wider public forum (sometimes referred to as ‘community outrage’). The arguments for opposition are generally focussed around three key issues; threat to or impacts on property values, personal security (safety and wellbeing) and the potential decline of neighbourhood popularity or ‘sense of place’ (all of which were present in community concerns in Wynne-Edwards 2003 study explained further below). There is also a noted geographic pattern evident to such opposition; residents closer to an unwanted facility are more likely to oppose it and that generally this diminishes as residents get further away. For example, those from two to six blocks away tend to have lower interest and awareness of proposals decline, often to a point of indifference in respect of the proposal (Dear, 1992). The type, size, number, operating procedures, reputation of operating provider and appearance of the facility were all factors that influenced community perceptions / concerns of such facilities. In addition, characteristics of the neighbourhoods in which the facilities were proposed also influenced community acceptance or views of proposals. In particular, homogenous neighbourhoods (those with little social and/or physical diversity), those with more affluent residents and those where there were no facilities currently present; were likely to be less accepting of these facilities (Dear, 1992).

In considering those factors that determine community attitudes, Dear (1992) noted that homeless shelters garnered ‘mixed responses’ from communities, meaning that while people supported and recognised the need for homeless shelters in principle, they did not support location of these services near them. This is supported in other studies on community responses to the location of services for people who are homeless. For example, Wynne-Edwards (2003) conducted a study of 14 projects across Canada to support homeless people including emergency shelters, transitional, and affordable housing and serving a range of clients (e.g. homeless individuals and families, women escaping violence, ex-offenders and Aboriginal peoples facing homelessness). Wynne-Edwards repeatedly observed that while opponents supported the provision of homeless shelters, they opposed the siting of such services close to them. Similarly, Lyon-Callo (2001) studied community opposition to a proposed homeless shelter in Northampton, Massachusetts also found that most community members in opposition to the shelter were supportive of providing services for homeless people in general, and of existing shelters, however resisted the location of a homeless shelter in their neighbourhood.

Across all of their 14 Canadian case studies Wynne-Edwards (2003) noted that community opponents had concerns that were largely speculative and not supported by evidence. These included concerns of safety and an increase in crime (this was the most common concern observed in 85% of the projects), decline in property values, decline in neighbourhood and its character, and decline in business activity. Other concerns in relation to the process and physical nature of the project were also commonly raised (though this was not consistently observed across all 14 case studies) including concerns that there was an unfair concentration or over saturation of facilities in the neighbourhood, that there was a lack of consultation, and that the proposal was inconsistent with city/neighbourhood plans. Wynne-Edwards (2003) argues that these objections are often driven by fear, stigma and not wanting particular people in their neighbourhood that underly other presenting issues. This is exemplified in the case studies with examples where no change was proposed to the physical nature or operations of a site with the same number of women residing in an existing building. Only the type of people who would be living there changing from nuns to low income or homeless women (Wynne-Edwards, 2003). Busch-Geertsema & Sahlin (2007) note prevailing ideas that homeless people cannot live amongst “normal people” lead to other residents rejecting the location of homeless hostels near them, speculating the types of ‘people that will be living there and the damage they may cause to the neighbourhood’. Homelessness

is highly stigmatised and discourses of homeless people as deviant, disorderly and addiction and mental health problems drive these stereotypes and concerns (Busch-Geertsems & Sahlin, 2007; Takahashi et al., 2002).). Through their Canadian case study examples Wynne- Edwards argues that resident's concerns can be conceptualised as icebergs with rational and procedural concerns being the key issues raised in opposition but that this is driven by other underlying and potentially unspoken concerns that are subjective and involve people's fears and not wanting particular people in their neighbourhood. Lyon-Callo (2001) also acknowledged this complexity but rejected that opponent responses are driven by prejudice and misinformation, instead arguing that concerns centre on the inadequacy of the proposed shelter to help homeless people deal with challenges that they might face and/or the "dumping" of multiple social services in their area by officials with more power. However, in this study focus is still on the types of people that will be residing at the shelters with both those opposed and social service staff quoted saying that because people living in homeless shelters are under stress this did not make them "ideal neighbours".

Realised operational neighbourhood impacts

The studies discussed above are based on proposed facilities for homeless people rather than facilities that are already operating. As discussed, many concerns are driven by fear and anticipate that impacts that might occur while there is limited evidence to support these coming to fruition. As with research on other typically 'undesirable' community facilities there is limited research on the realised impacts of homeless shelters and other similar facilities once they are in operation. As Farrell (2005) notes most research focusses on people's attitudes to theoretical facilities or in the period prior to facilities being established. Where studies do exist (such as those described above) these relate to the anticipatory concerns of residents and their opposition prior to homeless shelters being located close to them.

While there are no specific studies of the social impacts on the neighbourhood in which motels used as emergency accommodation Farrell (2005) used data from a national survey conducted in United States in 1990 to study how residential exposure to homelessness influences people. Farrell compared residents who reported observing homeless people in their neighbourhood 'sometimes' or 'often' and those who reported living between 1-2 miles from a shelter, soup kitchen or other facility that serves homeless people with others to test if this exposure influenced respondents. Residents in close proximity to shelters or who observed homeless people in their neighbourhood did report being exposed to 'disorderly behaviour' more often including seeing homeless people sleeping in public areas, looking through garbage cans, being panhandled, seen a homeless person that appeared drunk or high or making strange gestures/talking to themselves or seen a homeless person hit or threaten someone. However, Farrell (2005) challenges the idea that this exposure to these behaviours and presence of homeless clientele is associated with urban decline as Farrell found that residents living near shelters or in neighbourhoods with homeless present did not attribute the presence of homeless people with urban disorder and decline or blame them for neighbourhood problems. Farrell argues that this could be because residents living in nearer to facilities such as homeless people were also more likely to see positive actions as well as negative behaviours of homeless people and therefore had a more balanced view and did not attribute issues to 'homeless people' as a homogenous group. Although Farrell (2005) also noted that these facilities were most commonly located in neighbourhoods with more marginalised groups of people and perhaps that residents were more sympathetic towards homeless people. It is worth noting that this study was based on respondents self-reporting of exposure to homeless people and presumably residents who might not know someone was homeless if they were perceived to be undertaking 'normal' or 'orderly' behaviours. Also, that the nature of emergency housing is different to observing homeless people sleeping rough or facilities that only serve homeless clients during particular times of the day (e.g. soup kitchens) in that homeless people would be much more visible in public spaces and therefore the impact experienced by other residents in the neighbourhood is likely to be different.

Studies on the impacts of other similar types of accommodation such as supportive and transitional housing have been undertaken and have found little evidence of impact on surrounding neighbourhoods. An article by Coburn (2015) also notes that while variation between supportive housing developments makes it difficult to categorically define the impacts these have they provide two US based example of supportive housing developments that faced heated opposition and protest when first proposed but that they were still operating years later and surrounding residents had experienced little issue with them and that the areas were quiet and that there are no problems. Similarly, Davidson and Liu (2016) conducted surveys with residents living with 60 metres of affordable housing projects operating in Parramatta, Australia and found that 78% had experienced no negative impacts (despite the initial local opposition). Two of the eight sites had a number of neighbours experiencing negative impacts that were mostly associated with behaviour of a small group of residents.

Research by the Furman Centre for Real Estate and Urban Policy (2008) on supportive housing developments in New York found that there was no sustained impact on property values as a result of the construction of these developments. In this study, supportive housing is described as a type of affordable housing that is managed by non-for-profit organisations that provide on-site services such as job training or mental health and substance abuse counselling (Furman Centre, 2008). Residents included “formerly homeless individuals and families, people with HIV/AIDS or physical disabilities, young people aging out of foster care, ex-offenders, people with mental illness or individuals with a history of substance abuse” but unlike contracted emergency housing these are permanent places of accommodation (Furman Centre, 2008, p1). They found after the development opened there was a statistically significant rise in price of properties within 500 metres of the development relative to comparison properties. For properties between 500m and 1000m away there was a statistically significant drop in property prices when development was under construction and at first opening but that these steadily increased again in the years following completion, more than other similar areas with no facility (Furman Centre, 2008). Similarly a research study by the Urban Institute in Denver, Colorado also found that being located within 1000-2000 feet of small scale supportive housing developments was associated with a positive impact on property value with greater increases than other comparative properties (Galster et al, 1999). However it was noted that while there was an increase in property value across the studied sites on average the most positive impact was in neighbourhoods that were lower valued and minority occupied, while the site located in the highest value and predominantly white occupied area experienced a negative impact on property price. Analysis of property prices near affordable housing developments in Australia have also found no significant impact on property prices (Davison and Liu, 2016).

Galster et al (1999) also investigated impacts on crime across these sites and finding that there were no differences in reported offences near the sites compared to the rest of Denver. However, a strong relationship was identified with an increase in rate of reports of disorderly behaviour with 500 feet of the sites. Galster et al (1999) identify their central finding that “supportive housing generally has a positive impact on neighbourhoods when done at a small scale but that poorly managed properties can be deleterious to neighborhoods” (p xiv). They highlight that the extent and type of impacts depends on the particular features of each supportive housing facility (e.g. operator, type of clients, local neighbourhood and how well the facility is managed). For example, their focus group participants noted that well managed facilities could become ‘invisible’ to surrounding neighbours while poorly managed facilities were likely to be used as examples to resist the siting of facilities elsewhere.

C

Appendix C – Media Review

Media coverage of homelessness and emergency housing

We have reviewed media coverage of homelessness and emergency housing in Rotorua focussing on the community response to these issues. It is noted that, in general, these do not distinguish between emergency housing provided through EH-SNGs and CEH motels

New Zealand's response to homelessness has been reported in international media with the Guardian (Graham-McClay, May 2020) reporting on the move to accommodate people in motels in response to COVID-19 restrictions which virtually eliminated rough-sleeping from the country.

Several articles in March 2021 reported on community concerns on the use of motels for emergency housing in Rotorua. These centred around a public meeting held by Rotorua Member of Parliament Todd McClay to discuss "homelessness, social disorder and crime" and reported on claims from community members that Rotorua being used as 'a dumping ground' for New Zealand's homeless problem (Makiha, 2021; Waikato, 2021; Sadler & McCarron, 2021; Wall, 2021). While most people interviewed acknowledged that homeless people from Rotorua need somewhere to live concerns raised in the articles are in relation to (perceived) increase in crime, social disorder, gang violence in Rotorua and also how this impacts on tourism. For example:

- Radio NZ quotes Rotorua Economic Development chair John McRae saying that Rotorua's homeless problem has impacted on tourism, which is already struggling due to the ongoing effects of COVID-19 and reductions in visitor numbers as it detracts from the Rotorua's iconic tourist brand (Desmaris, 2021a). A more recent story by Radio NZ in April 2022 covers the challenge of balancing the need to provide somewhere for homeless people to stay (when there is a lack of housing both currently available and planned to be built) while also managing emergency housing in a way that does not damage Rotorua's reputation, particularly now that New Zealand's borders reopening (Truebridge & Monroe, 2022). The main concern with reputation was motels that where mixed use. Head of Rotorua Association of Motels acknowledges that where entire properties are contracted (CEH motels) and wrap around services can provided there has been success in managing the impact.
- An article from Bathgate (2022a) also quotes negative reviews left by visitors who stayed in accommodation seemingly also used for emergency housing reporting that their accommodation was unsafe and that they witnessed drug deals next door and fights in the middle of the night. Chief Executive of Rotorua Economic Development saying these issues have come from mixed use of motels for both emergency housing and tourist accommodation.
- Another article by Bathgate (2022b) published a week earlier reports on a letter sent by Mayor Steve Chadwick to Ministers in November 2021 raising the issue of the Ministry of Social Development bringing homeless people from other areas in New Zealand to Rotorua and that "our community is suffering due to drug use, violent behaviour, vandalism and other anti-social behaviours that they are seeing on a daily basis, in the proximity of the motels providing emergency housing".
- Wall (2021) reports that Fenton Street had been nicknamed "MSD Mile" by locals and that emergency housing has led to a rise in crime and social disorder in the 'previously tranquil suburb of Glenholme'. Wall reported that elderly did not feel safe leaving their homes and that parents didn't want their children to walk to school as people spoken to by Stuff described fights spilling on to the road, drug deals in the open, thefts from cars and garages, children being intimidated on the way to school and gang members hanging around. Bathgate (2022a) also reports impacts on Rotorua's tourist reputation from emergency housing with Fenton Street going from 'Golden mile' to 'MSD mile'.
- In this same article from March 2022 Police Area Commander Phil Taikato is quoted saying that Police have seen an increase in calls for service in the Fenton Strip and CBD areas (Bathgate, 2022a).
- Articles by Makiha (2021) and Sadler & McCarron (2021), report on similar community concerns of increasing burglaries, car and house break ins, assaults, intimidation, gang presence in the Fenton St/Glenholme area. Sadler & McCarron (2021) quote Rotorua MP Todd McClay who states that this

increase in crime and nuisance is not the fault of people staying in emergency accommodation but that of the Government who has “dumped the problem on Rotorua”.

- In an April 2021 from Newshub, MP Todd McClay expressed concerns that there was not enough accommodation available for Australian tourists or that people were not comfortable staying in the available accommodation due to its use for emergency housing meaning that local businesses were missing out on potential revenue from visitors (Hendry-Tennent, Turton, & Dexter, 2021).
- An article from January 2021 also reported on concerns of social service providers warning that the lack of space and proximity to others with mental health and addiction challenges in motels makes them unsuitable for permanent living and that their longer term use is having an emotional and health impacts on residents and their children (Radio New Zealand, 2021). Several other articles note similar concerns of vulnerable people and children being housed in motels which are unsafe environments (Patterson, Apr and Dec 2021).

Majority of these articles also included statements from Ministry of Social Development, Social Development Minister Carmel Sepuloni and/or Visions of a Helping Hand Trust Chief Executive Tiny Deanes disputing some of these claims and assuring that they do not proactively relocate people to Rotorua for emergency housing. However, Makiha (2021) reported that several community members present at the public meeting did not believe these assurances. In a July 2021 Rotorua Daily Post article Ministry of Social Development's Bay of Plenty regional commissioner Mike Bryant criticised media coverage of issues with homelessness and housing stating that it was often had errors and led to misconceptions (Desmaris, 2021b). Bryant acknowledged that having whānau staying in motels was not ideal however neither was living in parks, night shelters and other places. He said that the Ministry of Social Development is doing all they can to increase social housing supply but that countries right across the world, not just New Zealand, were facing a housing shortage. Rotorua Labour MP Tamati Coffey attributed Rotorua's reputational damage to the coverage of the city online and negative comments from locals online (Bathgate, 2022).

This media coverage also occurs in the context of reporting on the economic impact of COVID-19 on tourism, accommodation, retail and hospitality sectors in Rotorua with many businesses reported to be struggling and reports of others such as long standing tourist attraction Rainbow Springs closing its doors after more than 90 years of operation (Trafford, Feb 2022; Yeoman, Oct 2021).

D

Appendix D – Survey Summary



UNDERSTANDING THE COMMUNITY RESPONSE TO EMERGENCY HOUSING IN ROTORUA

FINAL REPORT / Prepared by One Picture – 30 March 2022

RESEARCH OBJECTIVES

Beca wish to understand the impact on the Rotorua community of short-term emergency housing solutions such as motel accommodation, offered while more permanent housing options are delivered.

The need is to identify whether the immediate local community perceives any benefits or drawbacks to these initiatives, and/ or whether there are any significant concerns or impacts being experienced.

METHOD

10-minute telephone interviews with people living in Victoria, Glenholme North and Glenholme South, Fenton Park, Whakarewarewa, Fairy Springs, and Koutu.

N=136 interviews conducted between 9th-20th March 2022

The margin of error on a sample size of $n=136$ is $\pm 8.4\%$, at the 50 percent confidence interval. This means at the situation of greatest sample error, 50%, the actual result lies between 58.4% and 41.6%, with the most likely result being 50%. When the survey result is significantly less, such as 10%, the sample error is $\pm 5.0\%$ (so the result lies between 15% and 5% with the most likely result being 10%).

PARTICIPANT PROFILE

| REGION | N= | % |
|-----------------|------------|----------|
| Victoria | 23 | 17% |
| Glenholme North | 30 | 22% |
| Glenholme South | 22 | 16% |
| Fenton Park | 18 | 13% |
| Whakarewarewa | 7 | 5% |
| Fairy Springs | 16 | 12% |
| Koutu | 20 | 15% |
| TOTAL | 136 | |

| REGION Groupings for Analysis | N= | % |
|--------------------------------------|------------|----------|
| Victoria | 23 | 17% |
| Glenholme North and South | 52 | 38% |
| Fenton Park and Whakarewarewa | 25 | 18% |
| Fairy Springs and Koutu | 36 | 26% |
| TOTAL | 136 | |

| AGE | N= | % |
|--------------|------------|----------|
| 20-39 years | 47 | 35% |
| 40-69 years | 45 | 33% |
| 60+ years | 44 | 32% |
| TOTAL | 136 | |

| ETHNICITY | N= | % |
|------------------|------------|----------|
| NZ European | 72 | 53% |
| Māori/ Pacific | 25 | 18% |
| Other | 39 | 29% |
| TOTAL | 136 | |

| HOUSEHOLD STRUCTURE | N= | % |
|----------------------------|------------|----------|
| Young singles/ couples | 11 | 8% |
| Families | 23 | 17% |
| Older singles/ couples | 92 | 68% |
| Something else | 10 | 7% |
| TOTAL | 136 | |

| HAVE LIVED IN THE AREA... | N= | % |
|----------------------------------|------------|----------|
| Up to 3 years | 19 | 14% |
| 3-5 years | 17 | 13% |
| More than 5 years | 100 | 74% |
| TOTAL | 136 | |

KEY FINDINGS

NOTE: All proportions represent the total sample of interviews, unless otherwise stated.

1. OVERALL PERCEPTIONS OF LOCAL COMMUNITIES

Location and proximity to town and amenities holds appeal for nearly half of locals in the suburbs we canvassed (49%). Many also strongly value a quiet and peaceful environment (21%), a caring, kind and friendly community atmosphere (19%), and nice neighbours (15%).

When asked about aspects that are not so ideal about their local area, emergency housing motels and their occupants are spontaneously mentioned most often (16%), followed by crime (10%), homelessness (9%), gangs (6%) and unwanted behaviour in the local streets (5%).

People living in Glenholme North/ South are more likely to mention emergency housing (29% of all those living there raised this as a downside of living in their area); homelessness (17%) and unsavoury behaviour taking place on the streets (10%).

10% of participants felt that their communities had improved over the last 2 years, with comments around improved community unity since Covid, such as people more likely to look out for each other; housing stock being improved; and upgraded infrastructure such as road and parks.

By contrast, **34% of participants felt that their local community has worsened in the last 2 years**.

- This is **significantly higher among people living in Glenholme North and Glenholme South**, where 54% of those we spoke to felt the community had become worse.
- By contrast, only 13% of those living in Victoria and 19% of those living in the Fairy Springs/ Koutu area felt their community had declined.
- Crime is the strongest sign of a worsening community, including more stealing, robberies and gang activity. This was mentioned by 41% of those feeling their community had declined. Other indicators of a decline in the area include homelessness (18%), emergency housing in local motels (16%); unpleasant behaviour on the streets (e.g. drinking, fighting, domestic violence – 14%), and feeling less safe and secure (14%).

2. VISIBILITY OF EMERGENCY HOUSING*

Emergency housing in local motels is visible in Rotorua – 80% have noticed it :

- **52% have noticed emergency motel housing in their local community**; and a further 28% have noticed it in Rotorua. Only 20% have not noticed emergency motel housing.
- Those living in Glenholme North and Glenholme South are slightly more likely to have noticed emergency motel housing in their area.
- One in three have noticed homelessness in their local community (35%) – there are no differences by suburb.

*Note: *Emergency Housing* refers to all accommodation facilities the community determines is being used to provide temporary emergency accommodation under any public or private delivery model.

KEY FINDINGS (continued)

NOTE: All proportions represent the total sample of interviews, unless otherwise stated.

3. IMPACT OF EMERGENCY HOUSING

30% of participants or their families have been personally negatively affected by emergency motel housing.

- This is comprised of 27% who have been affected in a negative way; and 3% who have been affected both positively and negatively.
- The major impacts have been increased crime; unwanted street behaviour such as fighting or loitering; and feeling unsafe.
- Residents mention experiencing trespassing and litter being left on their property; witnessing increased crime; more vandalism and graffiti; hearing and seeing arguments, disturbances and domestic violence on the streets; increased noise; aggressive behaviour; feeling concern and worry about security; feeling unsafe; experiencing loss of peace of mind; reduced property values; degradation of community facilities; and reduced quality of life.

4. COMMUNITY SUPPORT FOR EMERGENCY HOUSING

There is polarization around support for Emergency Motel Housing

1. 36% approve of it.
 2. 34% disapprove of it – (younger people under 40 are significantly less likely to disapprove).
 3. 10% are unsure/ don't know.
 4. And 20% haven't noticed it in Rotorua.
- Most of those approving do so because they believe everyone needs shelter/ somewhere to live. Some benefits are also noted for local motel owners gaining business. Around one in ten qualify their response by saying they believe emergency motel housing is a good thing in the short term, but not suitable for the longer term – with some raising concerns around where returning tourists might stay.
 - The most commonly mentioned theme among those disapproving of it is that emergency motel housing should be for locals only and not for others 'being brought in' from elsewhere in the country. They also feel it is negatively impacting the perception and reputation of Rotorua, with potential impact on tourism; that housing affordability and availability is the bigger issue that needs to be fixed; that the emergency motels are located too close to town; and that those staying in the motels did not respect the accommodation or local area.

DETAILED RESULTS

1. OVERALL PERCEPTIONS OF LOCAL COMMUNITIES

WHAT PEOPLE VALUE ABOUT THEIR COMMUNITIES

People are most likely to comment on the central location of their suburb, and how this gives them easy access to town and a range of other amenities. A quiet and peaceful environment, a caring community and friendly neighbours are also highly valued.

Firstly, what are the top things you value most / like most about living in your local community? [SELECTION OF VERBATIM RESPONSES].

'The proximity to the city. It's within walking distances to nice places'

'Very central and I don't drive/ need my walker. When I came here 16 years ago it was a delightful part to be in. You could leave your doors open. No rirraff going past. We all had a lot of pride. It's a different type of person walking past now - party goers'

'It's a peaceful suburb. Nice neighbours. Close to amenities; shops, schools and golf courses'

'It's close to town and within walking distances. The neighbours are friendly'

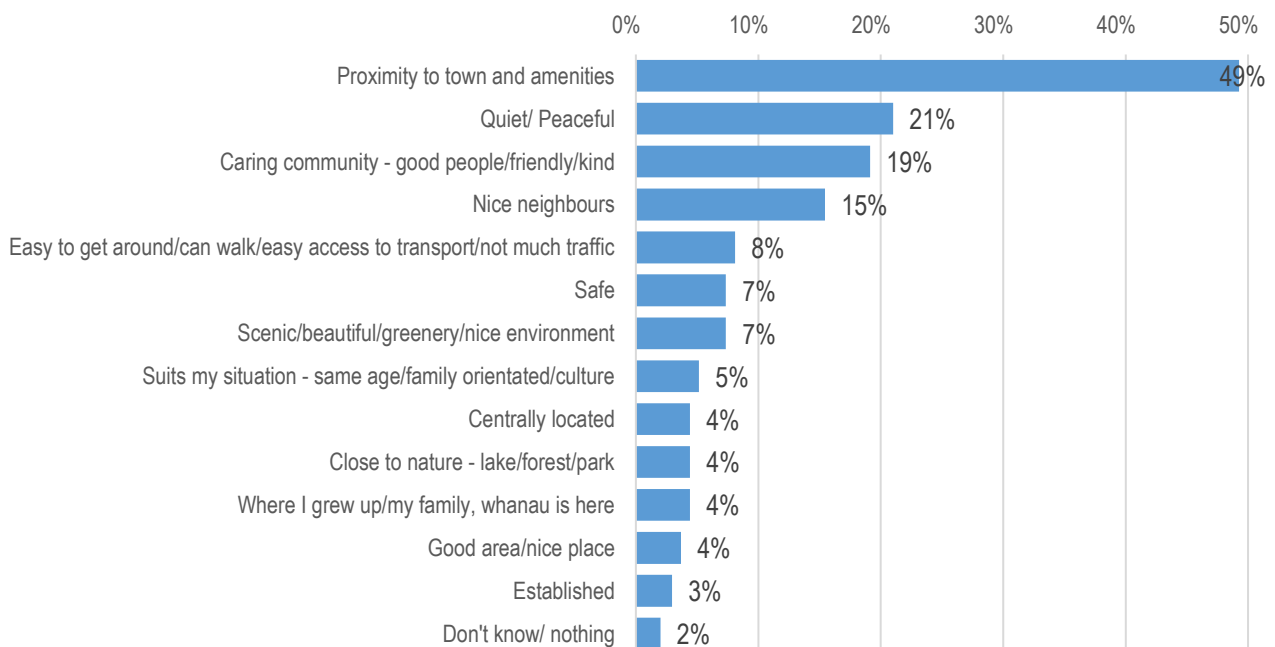
'It's more leafy than other areas. A mature community. Close to amenities like the bowling club etc.'

'The community - I've known them for my whole life. It's home'

'Kaupapa of Māori' close by, a good things for my kids'

'The city is near to us, so things are available to us like shops and doctors. The schools. The people here are helpful. There isn't much traffic. The transport. The facilities'

THINGS MOST VALUED ABOUT LOCAL ROTORUA COMMUNITY (coded)



DETAILED RESULTS

1. OVERALL PERCEPTIONS OF LOCAL COMMUNITIES (Cont'd)

WHAT PEOPLE VALUE (cont'd)

People in Victoria and Glenholme are more likely to appreciate the proximity to town and the ease of getting around, relative to those in Fenton Park/ Whakarewarewa and Fairy Springs/ Koutu. By contrast, residents of the latter suburbs are more likely to comment on the safe nature of their communities.

Q. Firstly, what are the top things you value most / like most about living in your local community?

| Coded spontaneous responses – TOP REASONS BY DEMOS | | Total | Victoria | Glenholme (North/ South) | Fenton Park/ Whaka-rewarewa | Fairy Springs/ Koutu |
|--|-----|-----------------|----------|--------------------------|-----------------------------|----------------------|
| Proximity to town & amenities | 49% | 61% | 60% | 36% | 36% | |
| Quiet/ peaceful | 21% | 13% | 19% | 20% | 28% | |
| Caring community – good people/ friendly/ kind | 19% | 22% | 13% | 28% | 19% | |
| Nice neighbours | 15% | 22% | 21% | 12% | 6% | |
| Easy to get around | 8% | 13% | 13% | 0% | 3% | |
| Safe | 7% | 0% | 4% | 12% | 14% | |
| Base | 136 | 23 [^] | 52 | 25 [^] | 36 [^] | |

  Significant differences relative to each other – minimum 90% Confidence Interval

[^] Caution – low base

DETAILED RESULTS

1. OVERALL PERCEPTIONS OF LOCAL COMMUNITIES (cont'd)

WHAT PEOPLE DON'T LIKE ABOUT THEIR COMMUNITIES

Emergency housing motels are mentioned most frequently as a less desirable aspect of local Rotorua communities, followed by crime, homelessness, gangs and unwanted street behaviour.

And what, if anything, isn't so good about living in your local community? [SELECTION OF VERBATIM RESPONSES].

"The motels with all the homeless in them - lost all my privacy. Full length curtains that no one can see in. Every now and then I ring 105 because of swearing and fighting. Get mail stolen and thrown down the street. Damage the flowers to roadside gardens. Now I have extra security. I thought of moving - agent said I'll never be able to replace this property. I have to live with the neighbours"

"The social housing motels are too close. There are too many of them"

"Rotorua has changed in the last few years with homeless people increasing and staying in motels where crime has also increased"

"We have a motel around the corner where there's some undesirable people living. They steal things and drive rowdy cars"

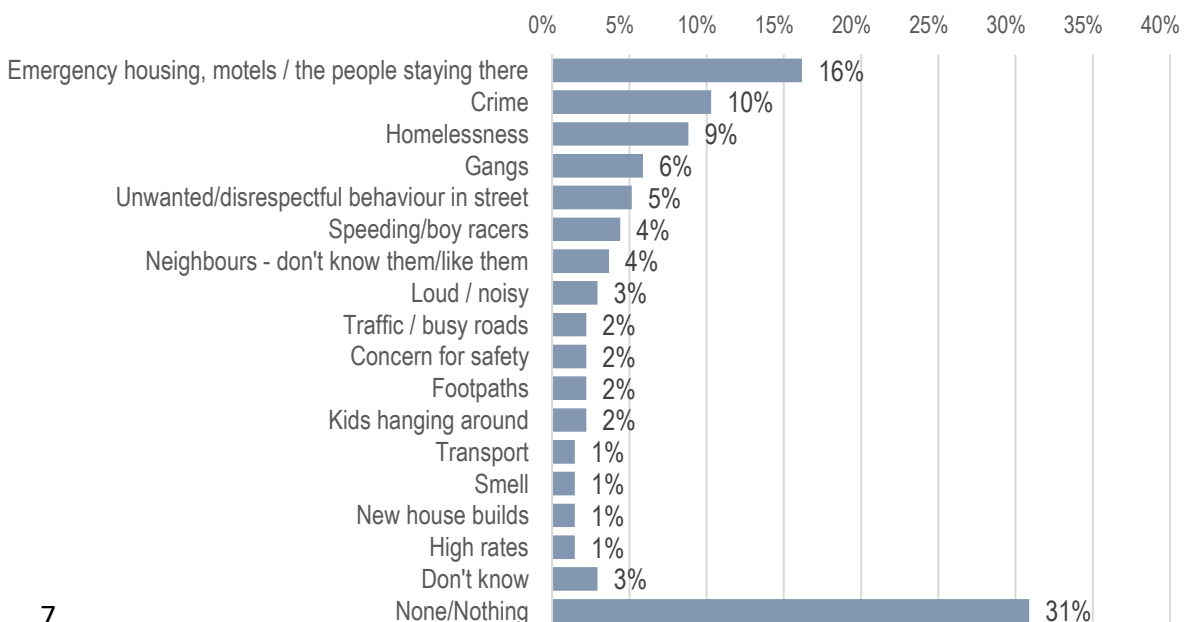
"Emergency housing is a nightmare for us. The new 24/7 Laundromat in the area is a problem"

"Neighbours often come and go, therefore don't get the chance to meet neighbours. Mobile population"

"The local transport is very poor, especially on the weekends, when they come only once every one or two hours. Also, the bus service doesn't go to the local supermarket"

"I guess there is a lot more crime. A lot more shouting and screaming"

THINGS DON'T LIKE ABOUT LOCAL ROTORUA COMMUNITY (coded)



N=136

DETAILED RESULTS

1. OVERALL PERCEPTIONS OF LOCAL COMMUNITIES (Cont'd)

WHAT PEOPLE DON'T LIKE ABOUT THEIR COMMUNITIES

Those living in Glenholme North and Glenholme South are significantly more likely to raise issues around emergency housing, homelessness and unpleasant street behaviour

Q. And what, if anything, isn't so good about living in your local community?

| Coded spontaneous responses – TOP REASONS BY AREA | | Total | Victoria | Glenholme (North/ South) | Fenton Park/ Whaka-rewarewa | Fairy Springs/ Koutu |
|---|-----|-----------------|----------|--------------------------|-----------------------------|----------------------|
| Emergency housing, motels | 16% | 4% | 29% | 20% | 3% | |
| Crime | 10% | 9% | 12% | 4% | 14% | |
| Homelessness | 9% | 9% | 17% | 4% | 0% | |
| Gangs | 6% | 4% | 2% | 8% | 11% | |
| Unwanted street behaviour | 5% | 4% | 10% | 4% | 0% | |
| Base | 136 | 23 [^] | 52 | 25 [^] | 36 [^] | |

  Significant differences relative to each other – minimum 90% Confidence Interval

[^] Caution – low base

DETAILED RESULTS

1. OVERALL PERCEPTIONS OF LOCAL COMMUNITIES (cont'd)

HAS THE COMMUNITY IMPROVED OR BECOME WORSE?

10% of locals feel their suburb has improved over the last 2 years, while 34% feel it has become worse. More than half of those in Glenholme North and South believe their community has declined in the last 2 years (54%)

Q. How have the last 2 years been in your local community - have you noticed that the local community has changed in the last 2 years [or in the time you have lived there if less than 2 years]?

| | Total | Victoria | Glenholme (North/South) | Fenton Park/Whakarewarewa | Fairy Springs/Koutu | 20-39 yrs | 40-69 yrs | 70+ |
|--------------------------|------------|-----------------|-------------------------|---------------------------|---------------------|------------|------------|------------|
| Yes, changed a little | 38% | 35% | 44% | 32% | 33% | 40% | 24% | 48% |
| Yes, changed a lot | 34% | 22% | 38% | 32% | 36% | 21% | 56% | 25% |
| TOTAL – 'CHANGED' | 71% | 57% | 83%* | 64% | 69% | 62% | 80% | 73% |
| No | 29% | 43% | 17% | 36% | 31% | 38% | 20% | 27% |
| Base | 136 | 23 [^] | 52 | 25 [^] | 36 [^] | 47 | 45 | 44 |

Weakly significant vs Total – 90% Confidence Interval

*Also, significantly higher at 95% Confidence Interval than Victoria

[^] Caution – low base

Q. Would you say your local community has 'improved' overall, stayed 'about the same', or 'got worse' (in the last 2 years)?

| Over the last 2 years, my community... | Total | Victoria | Glenholme (North/South) | Fenton Park/Whakarewarewa | Fairy Springs/Koutu | 20-39 yrs | 40-69 yrs | 70+ |
|--|-------|-----------------|-------------------------|---------------------------|---------------------|-----------|-----------|-----|
| Has improved | 10% | 17% | 6% | 4% | 17% | 15% | 4% | 11% |
| Has stayed about the same | 26% | 26% | 23% | 24% | 31% | 17% | 31% | 30% |
| Has got worse | 34% | 13% | 54% | 32% | 19% | 28% | 42% | 32% |
| I'm not sure | 1% | 0% | 0% | 4% | 3% | 2% | 2% | 0% |
| COMMUNITY HAS NOT CHANGED | 29% | 43% | 17% | 36% | 31% | 38% | 20% | 27% |
| Base | 136 | 23 [^] | 52 | 25 [^] | 36 [^] | 47 | 45 | 44 |

Significantly lower than Total – 95% Confidence Interval

Significantly higher than Total – 95% Confidence Interval

Weakly significant vs Total – 90% Confidence Interval

[^] Caution – low base

DETAILED RESULTS

1. OVERALL PERCEPTIONS OF LOCAL COMMUNITIES (cont'd)

HOW HAS THE COMMUNITY IMPROVED?

Those feeling their community has improved reference the strong community spirit, housing which is being improved or built and upgraded amenities such as road, shops and recreational areas

Q. What has improved in your local community (in the last 2 years)?

SELECTION OF VERBATIM RESPONSES

"We've pulled together"

"Houses are slowly being redeveloped into a better way of living for people"

"Have noticed when driving people are more friendly"

"We're more aware of each other - that is the people in the community - we look out for each other"

"The properties in the area have been upgraded and become more middle class"

"Community unity, though it's hard with covid"

We're getting more jobs"

"People being kind to people, getting to know each other and meeting the neighbours. It's good for our social well being"

"More communication among the community"

ANSWERS FROM THOSE WHO FEEL THEIR COMMUNITY HAS IMPROVED (N=14)

Sample size too small to code

DETAILED RESULTS

1. OVERALL PERCEPTIONS OF LOCAL COMMUNITIES (cont'd)

HOW HAS THE COMMUNITY BECOME WORSE?

Those feeling their community has become worse commonly mention an increase in crime, stealing and gangs. They also cite homelessness and emergency motel housing as a recent issue, and an increased sense of feeling unsafe

Q. What has become worse in your local community (in the last 2 years)?

SELECTION OF VERBATIM RESPONSES

“All the robberies and domestic violence”

“Homelessness increasing. Gangs and crimes increasing”

“I feel that with covid there is a lot of homelessness. It used to be a nice area there are a lot of motels nearby. But the government has been buying local boarding houses and we hear unsavoury things at night. It’s not as bad as what it was 3 months ago. You hear domestics and shouting and screaming. There is a heavy police presence”

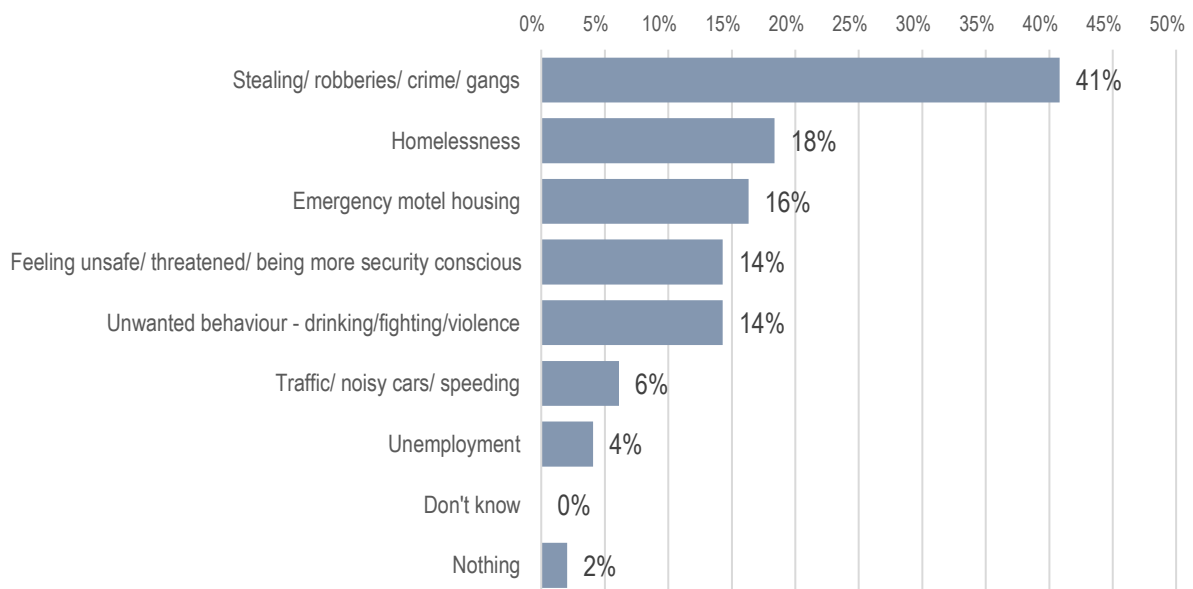
“Our previous area in central Rotorua was surrounded by emergency motels. There was always a lot to worry about all the time. People are a lot more unsafe compared to the past”

“The amount of homeless. They fight, they booze, the police are always there, and a lot of people want to leave Rotorua”

“Too many shopping trolleys being dumped around”

“Seeing more gangs around”

WHAT HAS BECOME WORSE IN COMMUNITY IN LAST 2 YEARS (coded)



ANSWERS FROM THOSE WHO FEEL THEIR COMMUNITY HAS BECOME WORSE (N=49)

Sample size too small to analyse by Suburb

DETAILED RESULTS

2. VISIBILITY OF EMERGENCY HOUSING AND OTHER ISSUES

Eight in ten people have noticed emergency housing in local motels – a majority have noticed it in their community (52%) and another 28% in the wider Rotorua area. Visibility of emergency housing is higher in Glenholme, where 65% of locals have noticed it.

HAVE YOU NOTICED? *I'm now going to read out a few issues that some people have mentioned earlier, and for each one I would like you to indicate whether you personally have noticed this issue in your local community, or in the wider Rotorua area, or haven't noticed this at all. Have you noticed...?*

| Base: n=136 | A | B | C |
|---------------------------------------|------------------------------------|-------------------------|------------------|
| | Have noticed in my local community | Have noticed in Rotorua | Have not noticed |
| Emergency housing in local motels | 52% | 28% | 20% |
| MIQ Facilities | 47% | 38% | 15% |
| Reduced tourism due to Covid | 40% | 50% | 10% |
| Local businesses closing due to Covid | 35% | 47% | 18% |
| More homelessness | 35% | 32% | 33% |

HAVE NOTICED... (ANALYSED BY SUBURB) *I'm now going to read out a few issues that some people have mentioned earlier, and for each one I would like you to indicate whether you personally have noticed this issue in your local community, or in the wider Rotorua area, or haven't noticed this at all. Have you noticed...?*

| I have noticed in my local community... | A | | | | |
|---|-------|----------|--------------------------|----------------------------|----------------------|
| | Total | Victoria | Glenholme (North/ South) | Fenton Park/ Whakarewarewa | Fairy Springs/ Koutu |
| Emergency housing in local motels | 52% | 43% | 65% * | 44% | 44% |
| MIQ Facilities | 47% | 39% | 54% | 56% | 36% |
| Reduced tourism due to Covid | 40% | 35% | 40% | 44% | 42% |
| Local businesses closing due to Covid | 35% | 35% | 31% | 40% | 39% |
| More homelessness | 35% | 39% | 37% | 32% | 31% |
| Base | 136 | 23 | 52 | 25 | 36 |

*No significant differences vs Total, but Glenholme is weakly significantly higher (90% Confidence Interval) vs the other three areas

^ Caution – low base

DETAILED RESULTS

3. IMPACT OF EMERGENCY HOUSING AND OTHER ISSUES

HAVE YOU BEEN IMPACTED? For each of these, please indicate whether you or your family have been or are personally impacted?

| Base: n=136 | Have noticed this and been personally affected | Have noticed this and NOT been personally affected | Have not noticed this |
|---------------------------------------|--|--|-----------------------|
| Emergency housing in local motels | 35% | 45% | 20% |
| MIQ Facilities | 17% | 68% | 15% |
| Reduced tourism due to Covid | 42% | 49% | 10% |
| Local Businesses closing due to Covid | 51% | 32% | 18% |
| More homelessness | 21% | 46% | 33% |

| Have noticed this and been personally affected – analysed by suburb | Total | Victoria | Glenholme (North/South) | Fenton Park/Whakarewarewa | Fairy Springs/Koutu |
|---|-------|-----------------|-------------------------|---------------------------|---------------------|
| Emergency housing in local motels | 35% | 35% | 38% | 28% | 36% |
| MIQ Facilities | 17% | 9% | 8% | 32% | 25% |
| Reduced tourism due to Covid | 42% | 22% | 46% | 52% | 42% |
| Local Businesses closing due to Covid | 51% | 35% | 52% | 68% | 47% |
| More homelessness | 21% | 26% | 21% | 20% | 17% |
| Base | 136 | 23 [^] | 52 | 25 [^] | 36 [^] |

Weakly significant vs Total – 90% Confidence Interval

[^] Caution – low base

TYPE OF IMPACT And has that impact been positive or negative?

| Base n=136 | Have noticed this and been personally affected... | | | Have noticed this and NOT been personally affected | Have not noticed this |
|---------------------------------------|---|-------------------|--------------------------------|--|-----------------------|
| | IN A POSITIVE WAY | IN A NEGATIVE WAY | BOTH POSITIVELY AND NEGATIVELY | | |
| | [A1] | [A2] | [A3] | | |
| | | | | | |
| Emergency housing in local motels | 5% | 27% | 3% | 45% | 20% |
| MIQ Facilities | 7% | 8% | 2% | 68% | 15% |
| Reduced tourism due to Covid | 3% | 38% | 1% | 49% | 10% |
| Local Businesses closing due to Covid | 7% | 42% | 1% | 32% | 18% |
| More homelessness | 0% | 18% | 2% | 46% | 33% |

| Have experienced a negative impact (NET 'negative' or 'both positive and negative') | Total | Victoria | Glenholme (North/South) | Fenton Park/Whakarewarewa | Fairy Springs/Koutu |
|---|-------|-----------------|-------------------------|---------------------------|---------------------|
| Emergency housing in local motels | 30% | 17% | 37% | 24% | 33% |
| MIQ Facilities | 10% | 4% | 6% | 20% | 14% |
| Reduced tourism due to Covid | 39% | 17% | 44% | 52% | 36% |
| Local businesses closing due to Covid | 43% | 26% | 48% | 52% | 42% |
| More homelessness | 21% | 26% | 21% | 20% | 17% |
| Base | 136 | 23 [^] | 52 | 25 [^] | 36 [^] |

Significantly lower than Total – 95% Confidence Interval

Weakly significantly lower than Total – 90% Confidence Interval

[^] Caution – low base

DETAILED RESULTS

3. IMPACT OF EMERGENCY HOUSING AND OTHER ISSUES (cont'd)

IMPACT OF EMERGENCY HOUSING: *Thinking specifically about the impact that you and/or your family has experienced from emergency housing in local motels, please tell me what that impact has been?*

SELECTION OF VERBATIM RESPONSES

“Residents from motels are often trespass on property, including mine. They are looking into cars, vandalizing/graffiti around the area, beer bottles are often being thrown over the fence, and arguments are heard in the early hours in the morning and abusive use of drugs”

“We were surrounded by 2 or 3 motels - it’s not the motels themselves or the govt, it’s people taking advantage of it and abusing everything they have. A motel caught on fire behind us - we could have been hurt but we were lucky enough to not get hurt or have our house damaged”

“The area around our main shopping area has become quite scruffy with the trolleys and the people hanging around, and the fences around the emergency housing. We see a greater police presence – it’s not uncommon to see two or three police cars outside these facilities”

“Heaps of dodgy people in the community. Halfway house people everywhere. Feel stink about the kids being around them”

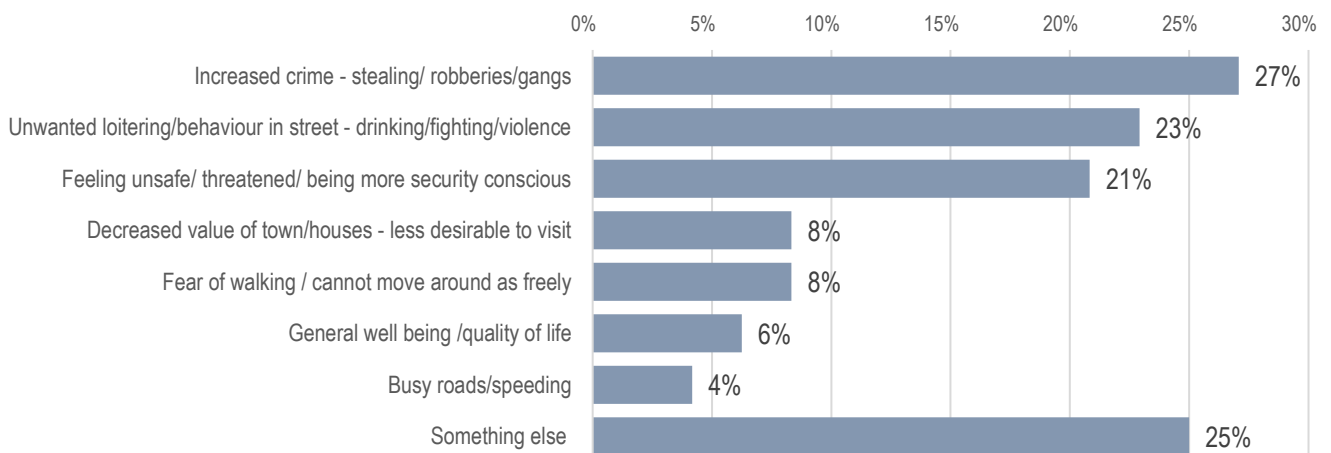
“I’m not against them, but they sit on the wall and smoke, and you can’t leave anything outside your house. They make a lot of noise. They always ask you for money”

“A lot more worry over crime e.g. graffiti and bottles on lawn and increased disturbances”

“The lack of security, decrease in value of my property, my health, well-being and peace of mind”

“The loitering around streets and the abuse and aggressive behaviour from a lot of them. I had to call 111 about some people outside my house”

WHAT HAS BEEN THE IMPACT OF EMERGENCY HOUSING ON YOU/ YOUR FAMILY? (coded)



ANSWERS FROM THOSE WHO HAVE NOTICED EMERGENCY HOUSING IN THEIR AREA AND BEEN PERSONALLY AFFECTED BY IT (N=48)
Sample size too small to analyse by Suburb

DETAILED RESULTS

3. IMPACT OF EMERGENCY HOUSING AND OTHER ISSUES (cont'd)

ASKED OF THOSE SPONTANEOUSLY MENTIONING HOMELESSNESS, EMERGENCY HOTEL ACCOMODATION OR CRIME WHEN ASKED ABOUT CHANGES IN THEIR COMMUNITY:

What do you think has caused this change or created this issue?

Are you doing things differently now because of this change or this issue? [If so, what?]

Do you think this change or issue has affected the wider Rotorua community? [If so, how?]

SELECTION OF VERBATIM RESPONSES

“Council allowing people to have emergency housing who don’t really need it. I’m thinking of selling the house. Heaps of people are unsatisfied with the council policies”

Emergency housing. I have to be a lot more conscious of locking my car and house and looking after my dog. I always carry my cell phone with me. I often have to call the police re an incident of domestic violence, which spills out onto the streets around the motels”

“Emergency housing. Locking doors, alarms, constantly nervous about our house if we go away. I don’t walk my dog anymore. I’m too scared to walk my dog. There’s a perception that Rotorua is going to the dogs a bit. Rotorua has gotten worse. Glenholme and Kuirau Park are the worst. In the centre of town, you encounter people who are clearly on drugs. I’ve had some scary encounters”

“I’m more aware of locking things carefully”

“The housing crisis and living cost, it’s taking a toll on people, some take it for granted and take advantage of the motels. I moved away as too much stuff was happening to us and around us. It’s too unsafe to be in town, it’s best to be on located on the outskirts of Rotorua. People are more careless and violent nowadays”

“Use of local motels for homeless people, and the one right next door is a bad one - ankle bracelets, people on parole. Different levels in different motels. I still have my life I’ve always had but have concerns about security. My home is like Fort Knox. Rotorua used to be to lovely tourist town. Parks have unsavoury people in them. Council does deny it but there are people from out of town. They disappear at Xmas - to wonderful accommodation in motels and free food”

“There is all sorts of speculation going on about how Rotorua has become a dumping ground. Perhaps we need stronger leadership. Homelessness needs to be addressed but why ruin a perfectly good area. The local council and government could do better planning”

“The emergency housing. Being more careful - watching people when they walk past my house. More people are worried about the emergency housing - scaring away the tourists - nowhere for tourists to stay”

“The crime rate - and it’s bad crime like knifing and drugs and booze. I don’t go out at night. The people who have been brought into Rotorua by the govt have caused the crime”

“Most of it seems to be coming from social housing. I have security cameras, no cars parked on the street. People are not happy about it. They are a lot more security conscious. It’s a lot harder if your car is pinched. A lot of break-ins”

DETAILED RESULTS

4. COMMUNITY SUPPORT FOR EMERGENCY HOUSING

APPROVE/ DISAPPROVE: *You mentioned you have noticed emergency housing. Do you approve or disapprove of local motels being used to provide emergency accommodation for people in need?*

| | Total | Victoria | Glenholme (North/South) | Fenton Park/ Whakarewarewa | Fairy Springs/ Koutu | 20-39 yrs | 40-69 yrs | 70+ yrs |
|---|------------|-----------------|-------------------------|----------------------------|----------------------|------------|------------|------------|
| Strongly approve | 7% | 13% | 6% | 8% | 6% | 13% | 4% | 5% |
| Approve | 29% | 26% | 33% | 16% | 33% | 36% | 31% | 18% |
| TOTAL APPROVE | 36% | 39% | 38% | 24% | 39% | 49% | 36% | 23% |
| No opinion | 8% | 4% | 12% | 8% | 6% | 4% | 13% | 7% |
| Disapprove | 26% | 17% | 33% | 24% | 22% | 15% | 29% | 34% |
| Strongly disapprove | 8% | 9% | 8% | 16% | 3% | 4% | 7% | 14% |
| TOTAL DISAPPROVE | 34% | 26% | 40% | 40% | 25% | 19% | 36% | 48% |
| Don't know | 2% | 0% | 0% | 4% | 6% | 2% | 4% | 0% |
| HAVEN'T NOTICED EMERGENCY HOUSING IN LOCAL MOTELS* | 20% | 30% | 10% | 24% | 25% | 26% | 11% | 23% |
| Base | 136 | 23 [^] | 52 | 25 [^] | 36 [^] | 47 | 45 | 44 |

*Some were not asked this question

Significantly lower than Total – 95% Confidence Interval

Weakly significantly lower than Total – 90% Confidence Interval

[^] Caution – low base

WHY APPROVE: *Why do you [approve of local motels being used to provide emergency housing]?*

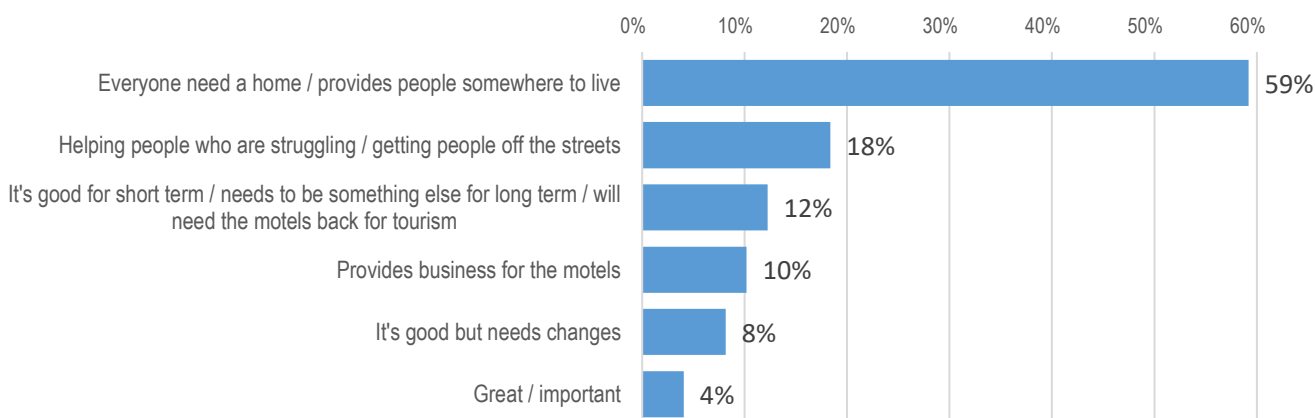
SELECTION OF VERBATIM RESPONSES

“Because I am a school teacher and know of the students that stay there and have stable environments”

“I approve because it's better for the homeless to be in motels for emergency housing rather than being on the streets and having no place to stay”

“I approve because it helps local motels to gain business and also it's good to help homeless people in emergency housing”

WHY DO YOU APPROVE OF EMERGENCY HOUSING IN LOCAL MOTELS? (coded)



ANSWERS FROM THOSE WHO APPROVE OF EMERGENCY HOUSING IN LOCAL MOTELS (N=49)

Sample size too small to analyse by Suburb

DETAILED RESULTS

4. COMMUNITY SUPPORT FOR EMERGENCY HOUSING

WHY DISAPPROVE *Why do you [disapprove of local motels being used to provide emergency housing]? Are there any solutions or suggestions that you feel would improve this at all?*

SELECTION OF VERBATIM RESPONSES

"It's degenerating our hometown - what should've been our golden town. It's a scary place to walk"

"Homelessness is taking over the beautiful image of our town"

"I disapprove for people coming from elsewhere but I approve for people who are already living in Rotorua. I believe that there's a large input coming from Auckland"

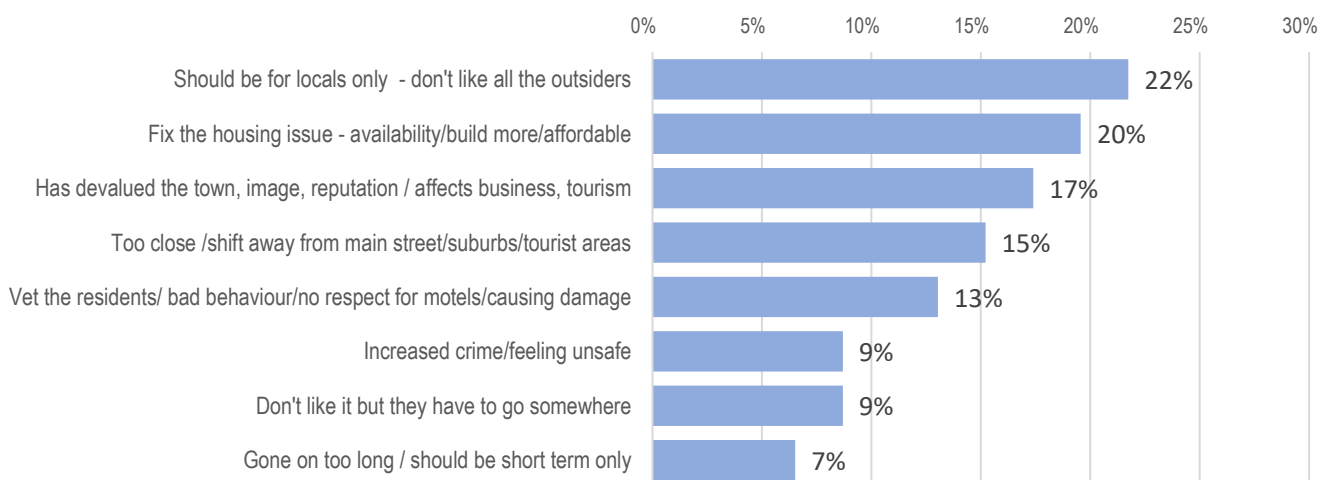
"I think the ones in these [types of] housing are the ones that don't have any respect for the place. Solution - put them in the outskirts of town, away from where tourists would stay"

"I would approve if the accommodation was used for short-term but I disapprove if the accommodation is used for long-term"

"Personally, I believe that a lot of these people are imported into Rotorua, they are not local people. It's had a negative impact on the central city. Whoever has let this happen has basically turned our city into a slum, they're turning it into a ghetto"

"It affects the tourism businesses. However, people need a house especially family with kids - there should be more housing. Those with no homes shouldn't be all sent down to Rotorua, they should at least be scattered around the country - not just Rotorua. They have taken over Rotorua, and this place is no longer the same as it used to be"

WHY DO YOU DISAPPROVE OF EMERGENCY HOUSING IN LOCAL MOTELS? (coded)



ANSWERS FROM THOSE WHO DISAPPROVE OF EMERGENCY HOUSING IN LOCAL MOTELS (N=46)

Sample size too small to analyse by Suburb

E

Appendix E – Community Feedback Summary

| Method | Technique | Key themes |
|---|---|--|
| Phone survey | <p>10 minute telephone interviews were conducted with 136 people living in Victoria, Glenholme, Fenton Park, Whakarewarewa, Fairy Springs and Koutu between 9th and 20th March 2022.</p> <p><i>Full methodology of the phone interviews can be found in Appendix D</i></p> | <p>Mixed support for emergency housing- 36% of participants approve of the use of motels for emergency housing mentioning that people need shelter, and that emergency housing is preferred to people being on the streets. Also, some benefits are noted for local motel owners gaining business. While 34% disapprove feeling like it is negatively impacting the perception and reputation of Rotorua, with impacts on tourism; that many of the homeless people are not local and are 'being imported' into Rotorua from elsewhere; or that those staying in the motels did not respect the accommodation or local area. 10% are unsure or don't know and 20% haven't noticed motels being used as emergency housing in Rotorua.</p> <p>Impact of emergency housing- 30% of participants or their families reported being personally negatively affected by emergency housing in motels. These residents mentioned experiencing trespassing and litter being left on their property; witnessing increased crime; more vandalism and graffiti; hearing and seeing arguments, disturbances and domestic violence on the streets; increased noise; aggressive behaviour; feeling concern and worry about security; feeling unsafe; experiencing loss of peace of mind; reduced property values; degradation of community facilities; and reduced quality of life.</p> <p>Perceptions of local communities- 37% of participants feel that their local community has changed for the worse in the last 2 years. This is significantly higher among people living in Glenholme North and Glenholme South, where 54% of those we spoke to felt the community had become worse. By contrast, only 13% of those living in Victoria and 22% of those living in the Fairy Springs/ Koutu area felt their community had declined.</p> <p><i>Full results of the phone interviews can be found in Appendix D</i></p> |
| Neighbour interviews and community stakeholders | <p>Notes requesting that residents to contact the research team to speak about their experience with the operations of contracted emergency housing were distributed to residential properties neighbouring the contracted emergency housing motels. Community facilities close-by to the CEH motels were also emailed for comment.</p> <p>Between 17th March and 1st April 2022 we spoke to or received e-mail feedback from:</p> <ul style="list-style-type: none"> 8 residential neighbours in Fairy springs, Glenholme, Whakarewarewa and Victoria (1 email) 2 motel neighbours 2 community facility neighbours (1 email) <p>In addition community groups were interviewed:</p> <ul style="list-style-type: none"> 2 community groups | <p>Crime and antisocial behaviour- Most neighbours reported an increase in crime and antisocial behaviour in their neighbourhood over the last 1-2 years. These neighbours reported incidents of intimidation, people trespassing on their properties, vandalism of public and private property such as graffiti, windows being smashed, broken gates and other property damage, and theft of cars and tools, speeding and unsafe driving were reported as regular occurrences that did not happen before. Neighbours and survey respondents also reported witnessing fights, drug deals, frequent family violence incidents and gang activity in their local area. Most neighbours interviewed attributed these incidents to the emergency housing motels, whether this be the people living in emergency housing or their visitors. Neighbours had mixed views on how this had changed over the last 6 months with some saying that was the same, worse or better. Neighbours interviewed also had mixed views about whether the presence of security at some of the motels (e.g. the contracted motels) was making a difference.</p> <p>Physical safety and security- These neighbours cited feeling unsafe or having to be more security minded and taking measures to protect their property including installing higher fencing and security cameras. These reports were not shared by all those interviewed however with one neighbour reporting that they had not experienced any change or negative impacts and that other's reports of feeling unsafe stemmed from prejudice against people living in emergency housing. Instead they were happy to know that people with nowhere else to go were provided shelter.</p> <p>Amenity of the local area- Common across all of the interviews with neighbours was a decline in the amenity of their local neighbourhood. Interviewees noted that the properties were no longer being looked after with a lack of maintenance of landscaping, temporary security fencing and cars parked everywhere including up on berms, smashed cars and windows. One of these neighbours did acknowledge that the more tired appearance of Fenton St was a result of a combination of factors and that it may be worse if the motels were not used for emergency housing and were shut down.</p> <p>Attractiveness and reputation for tourism- Some neighbours interviewed also thought that neighbourhoods in particular around the CBD, Fenton St and Whakarewarewa should be attractive destinations for tourists and that emergency housing should be spread around outskirts of the city or managed in a way that still attracts people to the area. Concerns for the impact on the reputation of Rotorua to visitors were shared.</p> <p>Rotorua as a dumping ground- Interviewees reported stories of people they had met living in emergency housing that did not have connections to Rotorua but were offered to transfer here from other parts of New Zealand. These interviewees were concerned that the relocation of people from outside of Rotorua put a strain on police and health services as well the ability to place people in permanent housing in the future. These people were frustrated that even though they keep being told that this is a Rotorua problem this was not what they have experienced.</p> <p>Taking care of people- Most neighbours acknowledged that some emergency housing was necessary to provide shelter to families however expressed concern at the numbers of people being provided for and that they were being housed next to people with addiction and mental health issues. Some expressed concern also that there was no space for children to play on the sites.</p> |