The Common Cause Report
into Sydney’s key social issues 2009

Debbie Haski-Leventhal with
Mark Lyons & Sarah Adams
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1 Introduction

Much has been said in the community sector about the need to operate with an evidence base; evidence of the social need being addressed and evidence that what you do makes a measurable difference. This report provides a critical service to social change leaders and practitioners by collating and synthesising the disparate information on social needs of the Sydney Metropolitan community. The report is not an end in itself but the first stage of a broader agenda to address the underlying causes to Sydney’s key social issues.

The social challenges that we face in Sydney are too big for any of us to face alone and so collaborative action from across the community, government and corporate sectors is critical. In the words of Nelson Mandela:

“When people of goodwill get together and transcend their differences for the common good, peaceful and just solutions can be found for those problems which seem most intractable.’

This report itself is the result of such an endeavour having been developed with Major Partners including United Way Sydney, Sydney Community Foundation, Centre for Social Impact, Community Relations Commission for a multicultural NSW, Perpetual Foundation and a range of Supporting Partners listed in the report. A special thanks to each of these organisations for their support for this innovative initiative and commitment to genuine collaboration. A note of thanks also to individual colleagues who have made a contribution to this initiative including Trudy Wyse of the Melbourne Community Foundation, Mike Wood from United Way Worldwide and the report author Dr Debbie Haski-Leventhal from the Centre for Social Impact for her willingness to take on and so effectively execute the challenge of authoring this report.

Reading this report is sobering, so let it not be an end point but the first step in a renewed attempt to provide opportunities for a good life for all people in Sydney.

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Doug Taylor
CEO, United Way Sydney
2 Foreword

“It was the best of times, it was the worst of times.” So Charles Dickens famously began his narrative of the French revolution. It is an apposite epigram for this study although, in truth, Debbie Haski-Leventhal’s report of Sydney is a tale of many cities.

Sydney is an economic powerhouse, accounting for around a quarter of Australia’s GDP. It is a bustling and exciting metropolis linked to a global financial community. It is also, beneath the glamorous tourist images, a place of extremes, in which economic success often sits cheek-by-jowl with social exclusion.

Let there be no mistake. In many ways Sydney is a good place to live. It has the lowest level of poverty of any State capital. At least until the Global Financial Crisis descended into worldwide economic recession, unemployment had been falling, economic opportunity rising and real incomes growing. Prosperity brought some unexpected rewards. As levels of household crime had dropped so had feelings of personal safety improved.

Yet even in the good times it was clear that the benefits of economic success were unevenly distributed. Some ethnic groups (particularly Indigenous Australians and migrants from the Middle East) and some families (notably those headed by single parents) already struggled with an extensive range of disadvantages. Within Sydney these inequalities took a distinctive geographical pattern, revealed in the pages that follow. Whether one examines housing affordability or welfare dependence, internet access or levels of racial intolerance, there are some parts of the city that are far worse off than others.

As the economy turns down, and as the demand for support from non-profit organisations like United Way and the Sydney Community Foundation rises, so the challenge of “providing opportunities for a good life for all” becomes ever harder. Of the thousands of statistics in this study, one stands out to me as both an indictment and a warning. It is that only around 16 percent of Sydneysiders volunteer their time each year, compared to 35 percent for Australia as a whole.

Volunteering is a good measure of the engagement that creates social capital. Sydney’s future depends on it. The challenge is to become a city of cohesive communities which, together, can create not just a fine city but a civil and caring society. Whether we face “the spring of hope” or “the winter of despair” depends on each of us.

Professor Peter Shergold
Macquarie Group Foundation Professor,
the Centre for Social Impact
3 Executive Summary

Although Sydney is often characterised by a high quality of life, this prosperity is not shared by all. Based on secondary data analysis, this report shows that there are individual and community problems in a number of key areas: housing, income, health, education, crime and accessibility.

Affordability remains the main problem for housing in Sydney. Because Sydney is characterised by separate houses rather than other more condensed patterns of living, vacancy rates are low, contributing to high prices and low house affordability. This housing market ‘failure’ contributes to further problems as people with low income are forced to live in more disadvantaged suburbs, where unemployment and crime rates are high, and accessibility to many services are low. The high price of housing (both to purchase and to rent) forces many to pay more than a third of their income towards housing, and give up other life necessities. Others may be forced to live in the street or in shelters (homelessness) or in caravan parks. Housing problems are more common among Indigenous Australians, migrants, lone parents (especially women) and older Australians.

Sydney has a high income polarization: seven of the ten highest income areas in Australia were found in Sydney, but so were some of the poorest. Unemployment was generally low (before the recent economic crisis) but in some areas and for some social groups (Indigenous Australians and migrants) it was quite high. Many Sydney residents, particularly in the western and southern areas, reported a high rate of relative deprivation.

Although the health level of Sydney residents is very good, and life expectancy is very high, some groups, especially Indigenous Australians and older Australians, suffer from levels of health dramatically below that of the general population. There are a high number of people with disabilities and with mental disorders. The main problem regarding health is risk taking, especially by youth: where smoking, drinking, using drugs and driving recklessly all result in a high number of avoidable deaths.

The level of education in Sydney is not particularly high. Many children under 5 do not attend any formal childcare. The retention levels in high school and the results of literacy tests (including adult literacy) can yet be improved. Many people in Sydney do not have 12 years of education. The number of people with higher education is not as high as in other Western countries, particularly among some groups, such as Indigenous Australians and migrants.

The level of crime in Sydney is generally declining and feeling of safety is high, but not in some geographical areas and not for some crimes (such as rape). Domestic violence and child abuse are rising at alarming levels. The rates of youth crime and youth violence are very high. Prisoners in Sydney usually suffer from social disadvantage: low income, poor neighborhoods and mental disorder are some key issues. The correlation between an individual’s economical circumstances and educational background and their likelihood to commit crime is strong.

Sydney is not very accessible in many aspects: both physically (many places and services are not fully accessible) and socially. People with disability suffer from the highest rate of unemployment and lowest rates of income. Using internet access as an indicator of accessibility, many dwellings in Sydney have a broadband connection, but usage rates in some areas and for some groups are still very low. Public transportation is very important in social inclusion and in creating social and work opportunities, but only small proportions of Sydneysiders use it, mainly to get to education/
childcare and commute to work. Political participation and volunteering are relatively low in Sydney, particularly for migrants.

The report also shows that the above social problems are more common among specific social groups and geographical areas. The most disadvantaged groups are Indigenous Australians, migrants and refugees, children and youth, older people and people with disabilities and health problems. In some indicators women (particularly lone parents) were also more disadvantaged than men. Indications of social disadvantage appear to be more concentrated in Western and Southern-Western Sydney, such as in Fairfield, Blacktown, Mt Druitt and Campbelltown.
4 Preface

4.1 About the “Common Cause” initiative

Sydney, with a population of over 4 million, and covering almost 1,120 square kilometres, is a remarkable city. It attracts visitors and migrants from all over the world, making it one of the most diverse and multicultural global cities. Sydney boasts a full roster of musical, theatrical and artistic activity. It is beautiful and cosmopolitan with many attractions and events.

Sydney is a great city, but not for everyone. The eastern and northern suburbs and the city centre are characterised by similar traits that are quite different from those of the outer western and southern-western suburbs. The Sydney Social Atlas (ABS, 2007d) gives a clear and easy to read picture: high rates of unemployment, poverty and migration are mostly located in the west and southern-west, and exist to a far lesser extent in the north-eastern suburbs.

The current report is the first of a three stage project that is aimed at developing a better understanding of, and then addressing, social exclusion, disadvantage and needs in Greater Sydney. The three stages are: research, consultation and strategic planning (including identifying priority areas and activities). The outcome of the project is to use analyses of social trends and the diverse voices of our city to create a more inclusive community. The project will provide an improved information framework, freely available for all interested parties who seek to respond to current and emerging social needs in Sydney. This will incorporate the philanthropic and corporate sectors, in partnership with government and community organisations, to better plan for and resource community initiatives and services in Sydney.

The first stage was completed with the publication of this report. Using secondary data analysis for a number of social indicators ensure that this process of addressing Sydney’s social needs will be evidence-based. The report maps the needs of individuals, social groups and the community in Sydney to allow a evidence-based discussion for the purpose of strategic planning. The report does not include prioritising areas of need or suggestions toward policy, since this will be undertaken in the next two stages.

4.2 Major Partners

Centre for Social Impact (CSI), a partnership between business schools at the University of New South Wales, the University of Melbourne, and Swinburne University of Technology, brings together Australia’s not-for-profit, philanthropic, business and government sectors in a collaborative effort to help build passionate, high performing and sustainable social ventures.

United Way Sydney improves lives by mobilising the caring power of communities around the world to advance the common good. Operating in 46 countries worldwide and 10 communities in Australia, United Way invests donations and volunteer time in community impact initiatives with resources raised from Corporate Community Involvement programs (CCI) that include Workplace Giving, Corporate Connect volunteering, and Seeing is Believing education programs.

Sydney Community Foundation represents a community of donors who seeks to make a lasting difference to the life of the people in their community. It is an independent, charitable community foundation that manages and distributes funds on behalf of individuals, families, companies and other charitable trusts to meet the needs of their local areas.
The Perpetual Foundation is a public charitable trust established in 1998 to demonstrate Perpetual Limited’s commitment to the Australian community. The Foundation’s key objective is to promote thought leadership and best practice in philanthropy. The Perpetual Foundation offers opportunities for open discussion in the areas of philanthropy and the social economy by providing forums and commissioning research.

Community Relations Commission for a multicultural NSW is the lead government agency promoting the benefits of cultural diversity in New South Wales. It has the responsibility for encouraging community harmony, participation and community cohesion, and building strong relations between diverse community groups. The Commission also ensures that all individuals and organisations in New South Wales have an opportunity to fully participate in its public life, and have equitable access to government services and programs.

4.2.1 Supporting Partners

Other partners that have played an important role in supporting the publication of this report include the:

- NSW Department of Housing
- GROW Area Consultative Committee
- Ernst and Young Foundation
- Social Leadership Australia, Benevolent Society
- NSW Department of Community Services
- Freehills Foundation

4.2.2 Pro Bono Partners

The Printing Department for their generous support in the printing of this publication.

4.3 Methods

Data was collected to determine community needs in six main areas: housing, economic well-being, health, education, crime and safety, and accessibility and participation. The above indicators were chosen for several reasons. Firstly, they are based on previous related studies on social exclusion and disadvantage, such as “Macro Melbourne” (co-ordinated by the Melbourne Community Foundation), “Community Impact Models” (as articulated by United Way America) and “Vital Signs” (co-ordinated by the Canadian Community Foundations, as well as on theories and studies of social exclusion and social capital (for example Vinson or Saunders). Second, they could serve as good indicators to the specific needs of the community in a large and modern city like Sydney. Third, they may direct us toward an evidence-based discussion and the development of a long-term strategy to improve the state of various disadvantaged groups in Sydney, which will be done undertaken in forthcoming stages of the project. This analysis will allow a focus on causes, outcomes and processes, as opposed to just available resources at a point in time (Saunders, 2003).

The report is based on a secondary data analysis regarding the above indicators. Among these sources are:

- Australian Bureau of Statistics (ABS; Including the 2006 Census and Report, NSW In Focus and The Sydney Social Atlas);
- Publication and reports by Governmental Departments (both national and NSW) as well as reports from local governments in Greater Sydney;
• Reports from nonprofit organisations;
• Academic studies and books;
• Other data sought from the internet.

Whenever available, the data is detailed according to geographical areas and social groups. However, since we could only use secondary data analysis, data for some indicators was not always available. This meant we were forced to use outdated data or generalised data on NSW or Australia on occasion. An effort was made to ensure the geographical context for each sub-indicator is clear.

It should be noted that the data from the 2006 census formed the basis for many indicators in this report, supplemented by more recent data when available. Although the 2006 census data was quite relevant and generally reflective of Australian conditions, the recent turbulence in the global economy may have ramifications on some indicators to an extent that is not yet measureable. Although all attempts have been made to keep the data as relevant as possible, obtaining updated data in one year’s time is strongly recommended (particularly for some indicators such as unemployment rates).

4.4 The structure of the report

The report includes three main sections:

1. Introduction and background on Sydney. The introduction includes a discussion on social exclusion, including definitions and choice of indicators. It also includes some background data on Sydney such as its geography, people, and social groups.

2. Mapping the social needs of the community according to the following six main indicators: housing, economic well-being, health, education, crime and safety, and accessibility and participation. Each section begins with a short introduction and then presents the statistics on relevant aspects. However, it is important to note that mapping the needs of Sydney involves many indicators that are strongly inter-related.

3. Conclusion and discussion. The discussion includes a summary of the data according to two key-areas: geographical areas and social groups. The social groups include Indigenous Australians, migrants, people with disability, children and youth, older people and women. This grouping will develop an understanding of where the problems exist and prevail, so as to formulate place-based and group-based solutions.

This structure was employed so as to help the reader follow the main social problems in Sydney, and to understand how these problems are related to specific social groups and specific geographical areas in the city. However, the reader will soon appreciate that social disadvantage in Sydney is multifarious and complex, and a proper analysis of social exclusion and social disadvantage must refer to the many linkages between indicators, causes and effects. Therefore, it is only by reading the entire report that one may understand the various dimensions of social disadvantage in Sydney.

This report has aggregated some findings and indicators into social groups and geographical areas for the purposes of clarity and understandability for the reader. This structure by no means intends to generalize the findings, prioritise the needs of any particular group, or to socially stigmatise a place or a group.
4.5 Limitations of the study

The current report strived to look into social disadvantage and needs of people living in greater Sydney. In order to do so, we undertook secondary data analysis from various sources, mainly from the Australian Bureau of Statistics (ABS). The data was categorized into six main indicators, which were based, by most parts, on social exclusion theories and studies, as well as on other similar studies which were done in Melbourne and Canada. Whenever possible, we detailed the social needs according to social groups and geographical areas.

The fact that we could only use available data somewhat limited our ability to describe all the social need and problems in Sydney. In some cases there was no available data on Sydney, whilst in other cases we could not find data on specific groups or areas within Sydney. Some of the data available from ABS was unsuitable for the purposes of this particular study. Furthermore, in some cases the data were outdated, such as in the case of child poverty, on which we could not find any data after 2001. In some cases we preferred to still demonstrate the numbers in NSW, sometimes even Australia, but in others we had to forego the use of some indicators due to a lack of information. We did make an effort to show clearly throughout the report if the data is regarding Sydney or a broader geographic region.

Although this report covers dozens of sub-indicators in six key areas, some indicators were omitted, usually due to a lack of relevance or unavailability of data. Approaches to the use and categorisation of indicators vary, and although our study was based on the framework used by other reports, the division of indicators is unique to this report.

In addition, using only a secondary data analysis limited us in doing any progressive statistical analysis and looking for correlations between the different indictors. This was mainly due to a lack of access to raw and standardised data across the key areas. However, it did allow us to cover a wide range of data in relatively short time.

It is important to note that, due to the use of secondary data, there is no standardisation of terms in the final report. As we have relied on reports from various sources, classifications used in these reports (for example dividing geographical areas by suburb, LGA or SLA) varied considerably. Throughout the report, we have endeavored to identify classification used for each indicator, however the reader should keep in mind that some statistical classifications lack consistency.

Comparison of some indicators with other geographical areas was sometimes suitable to assist in understanding their context. This includes some comparisons with the Australian national rate, the NSW rate or that for other states; however we have rarely used international comparisons. The use of comparative indicators was restricted for two reasons. Firstly, suitable data was not always available, and secondly to prevent the focus moving from Sydney.

It is very important to note that the report was written between November 2008 and March 2009, in times of global economical crisis. Much of the data is based on the 2006 census, which was valid and relevant up until recently. However, in a volatile economic climate, circumstances change rapidly, especially in areas concerning social welfare and exclusion. Income, unemployment and housing affordability are likely to be affected, followed by health, education and crime. We suggest that more updated data will be collected in the next year to overcome this gap.
5 Introduction

5.1 Studying social exclusion and social disadvantage

Social exclusion is a broader concept than poverty alone, and incorporates issues such as inadequate social participation, a lack of social integration and a lack of power. While related to poverty, social exclusion is also linked to the important notion of social capital and one can be socially excluded without being in poverty. Social capital can be defined as the networks of social relations that are characterised by norms of trust and reciprocity that facilitate cooperative behaviour (Putnam, 2000). In addition, Atkinson (1998) explained that social exclusion is relative to the norms and expectations of society at a particular point in time and may be caused by an act of some individual, group or institution. Social exclusion is not a result simply of current circumstances (e.g., unemployment), but also limits the future prospects of an individual.

The UK Social Exclusion Unit (1997) defined social exclusion as a shorthand label for the results to individuals or areas with a combination of linked problems such as unemployment, poor skills, low incomes, poor housing, high crime environments, bad health and family breakdown. The European Union has also adopted a definition of social exclusion that recognises the relationship between individuals and their surroundings and the dynamic nature of social exclusion (see a review of definition and indicators of social exclusion in the report on social inclusion, Australian Institute of Family Studies, 2008).

A lack of economic resources can buttress social exclusion, where people with resources exclude those who lack them. If the quality of public services is perceived as being of lower quality than that available in the private sector, the wealthy may withdraw their involvement, leading to a vicious cycle of degradation of such public services. Ultimately, those who must use public institutions are excluded from better quality standards of health care, education, and access to social networks. In this way, the ‘underclass’ and the wealthy exist in increasingly divergent orbits, and where the services provided to the excluded may be perceived as excessive and unnecessary, a drain on the public purse, or even a potential criminal threat (Zappalà, Green, & Parker, 2000).

There are advantages to preventing this cycle from prevailing. For example, it has been shown that having heterogeneous populations use the same public services is beneficial to all groups. Preventing social exclusion in this way enhances social solidarity, which is the ‘sense of fellow-feeling that extends beyond people with whom one is in personal contact’ and is strengthened by peoples’ participation in common or public institutions (Barry, 1998, p. 16).

Social disadvantage refers to the range of difficulties that block life opportunities and which prevent people from participating fully in society. These difficulties include economic poverty, but also financial resources, poor health, disabilities, lack of education and skills and being subjected to inequitable treatment of discrimination (Vinson, 2007). Social disadvantage has been linked in a recent Australian study to lower levels of social trust and higher levels of crime (Australian Institute of Family Studies, 2008).
5.1.1 Social exclusion in Australia

There has been limited empirical work using the concept of social exclusion in Australia. Saunders (2003) investigated the levels of social exclusion among households in Australia, and found that the major form of social exclusion (defined as reporting two or more problems in each area examined in the study: lack of social interaction, domestic deprivation, and extreme consumption hardship) was a lack of social interaction. Single parent households were the most excluded group.

Vinson (2000, 2007, 2008) used postcode areas as the unit of analysis and presented evidence from a range of sources on indicators covering social distress (income and housing stress), economic, education, health and community safety (crime). The results showed that there were a small number of postcodes that ranked highly on a wide range of the indicators used. Vinson argued that there is a ‘disadvantage factor’ linking social problems, as a small number of postcode areas contained significant concentrations of negative indicators. Vinson (2007) demonstrated that people growing up in Australia’s poorest postcodes are up to seven times more likely to suffer from low incomes, long-term unemployment, early school leaving, physical and mental disabilities, prison admissions and to be at risk of child abuse and neglect.

Bray (2001) also studied the incidence of financial hardship in Australia. He concluded that some financial deprivation was common among Australian households but a relatively small proportion of households (3.1%) faced multiple hardships, which had a more significant impact on children under 15 years. The factors closely associated with hardship were low income, absence of employment, income support, youth, rental housing and a disability restriction.

There were some studies on social exclusion of children in Australia (Harding, McNamara, Tanton, Daly & Yap, 2006; McNamara, Daly, Harding & Tanton, 2008). Daly and Smith (2005) studied the indicators of risk of social exclusion for Indigenous children and found that they were more likely than their non-Indigenous counterparts to live in lone parent families or with relatives other than their biological parents, are also more likely to live in households with low incomes, and in those in which the adults were less likely to be employed.

In summary, social exclusion and social disadvantage are broad concepts that refer to availability of economic resources as well as other indicators such as housing, health, education and crime. In the current report we aimed to use as many of the key-indicators and sub-indicators to draw the picture of social exclusion in Sydney. In addition, we argue that social exclusion also has physical and social dimensions. Therefore, we added a new indicator: accessibility and participation, incorporating some of the sub-indicators in the previous studies as well as some new ones, to demonstrate social and physical inclusion in the context of Sydney.

5.2 Background data on Sydney

5.2.1 Population by age and gender

In 2006 there were 4,119,190 residents in Sydney, representing 55.7 percent of the total population of NSW (ABS, 2006a; 2007d). Of the total Sydney population, 19.5 percent were children between 0 and 14 years; 58 percent were aged between 15 and 54 years; and 22.5 percent were aged over 55 years (ABS, 2006a). Females comprise 50.7 percent of the Sydney population, with males at 49.3 percent. Sydney has a relatively youthful profile overall, with a median age of 35.5 years (compared to 37 nationally).
Moreover, only four of the 43 Local Government Areas (LGAs) in Sydney recorded a median age of over 40 years (Ku-ring-gai, Hunters Hill, Pittwater and Gosford). The lowest median ages across Sydney were in the west and south-west metropolitan areas (31.7 years and 32.4 years; NCOSS, 2008).

Figure 1 shows the population distribution of Sydney by age and sex, demonstrating Sydney’s youthful profile in comparison with the rest of NSW. The age groups 20-34 were over-represented in the Sydney population while there were relatively fewer older people in Sydney compared to the rest of NSW in the older age brackets (from 55 and above).

Figure 1: Sydney population by age and sex

Overall population density for Sydney was 2,058 people per square kilometer. The highest population densities were found in the inner city area, particularly in suburbs such as Elizabeth Bay, Surry Hills, Pyrmont and Potts Point. High population densities were also found in coastal suburbs such as Bondi, Manly, Coogee and Cronulla (ABS, 2007d).

5.2.2 Population growth

The average annual population growth rate in Sydney in the ten years to 2006 was 1.1 percent, a rate lower than the national average (1.2%). However, due to the large size of Sydney, this increase represents an additional 400,000 people, or around one-sixth of Australia’s total population growth over this period (ABS, 2006b). New housing developments caused strong population growth in the Western growth corridors. This includes Penrith, Blacktown, Fairfield, Liverpool, Camden and Campbelltown in the outer west and south-west; Baulkham Hills in the north-west; and Rockdale and the Sutherland Shire in the inner and outer south. Substantial population growth associated with medium and high density housing growth was also evident in and around the inner city. The largest increases in these areas were in the suburbs of Breakfast Point, Homebush Bay, Newington and Rhodes in the inner west; and Zetland in the inner south (ABS, 2007d).
The profile of childbirth and fertility in Australia has changed since the 1960s as women tend to have fewer children, and bear them at an older age. Sydney has followed this broad trend, although there has been a minor baby boom in Sydney over the last 12 months. In 2007, there were over 60,000 births in Sydney, and the total fertility rate was 1.75 babies per woman. The highest fertility rate in Sydney was in Bankstown, with a rate of 2.16 per woman (ABS, 2007b). Women are also having children later in life, with the median age of Sydney mothers at 31.5 years in 2007, older than the median age of 30.8 years in 2003 (ABS, 2007b). Moreover, fertility rates for all groups of women under the age of 30 were in decline (ABS, 2008f). In 2007, the fertility rate of Indigenous women in NSW was 2.0, the lowest value for all Australian states.

At 2006, the number of deaths in Sydney was 25,269, and the standardised death rate was 5.8 per 1,000 persons, a little lower than the national rate (6.0) and NSW (6.1; ABS, 2008f).

In 2036, it is projected that the population of Sydney will be younger than the population of NSW overall. In 2036 people aged 65 years and over will make up 18% of Sydney’s population compared to 21% of the NSW population overall. At the same time, however, Sydney will continue to have the greatest number of people aged 65 years and over, with a projected population of 1,075,200 in 2036 compared to 513,000 in 2006 (ABS, 2008g).

5.2.3 Diversity, immigration and minorities

Australia is a culturally diverse nation with migrants arriving from around two hundred countries during the past two centuries. These migrants have played an important role in shaping our nation. Recent social and economic issues such as the ageing population and skills shortages have highlighted the role migration will play in the economic and demographic future of Australia. While migrants contribute to and enrich Australian society through their different skills, abilities and experiences, they potentially face difficulties such as language barriers, cultural differences and discrimination, which could affect their ability to participate in some social activities (ABS, 2008c). Between the 2001 and 2006 Censuses, 228,822 overseas-born residents arrived in Sydney, representing 6.9 percent of the total population. This was the highest proportion for all Australian cities. The main sources of recent immigrants were China (13.7%), the UK and Ireland (10.3%), India (9.4%), New Zealand (7.4%), and the Republic of South Korea (4.5%).

Sydney’s diverse ethnic mix reflects its status as a world city. A large proportion of Sydney’s population was born overseas (31.7%), compared with the broader Australian population (22.2%; ABS, 2006a). This is the highest value across all Australian cities. The most common foreign countries of birth are England (3.5%), China (2.6%), New Zealand (2.0%), Viet Nam (1.5%) and Lebanon (1.3%).

Most Sydney residents are native speakers of English; however, other common languages include Arabic (3.9%), Cantonese (3.0%), Mandarin (2.3%), Greek (1.9%) and Vietnamese (1.8%). The most common second languages spoken by people who were born in Australia and live in Sydney are: Greek (52%), Arabic (44.7%) and Croatian (44%). More than one-third (37%) of the migrant population was from main English-speaking countries (the United Kingdom, New Zealand, the Republic of Ireland, Canada, the United States of America and South Africa). The remainder (63%) was born in other countries. Of those born in other countries, around 2 million (82%) were proficient in spoken English. Six percent of the Sydney population spoke a language other than English at home and did not speak English well or at all, the highest proportion of all Australian capital cities (ABS, 2007d; Department of Immigration and Citizenship, 2008).
Among people who were born in Australia and live in Sydney, 18.7 percent indicated that both their parents were born overseas (thus first-generation Australians). An additional 16.0 percent reported that either their mother or their father was born overseas. Most immigrants report both parents being born overseas (for example: 98% of people born in China; and 98.3% of people born in India), whilst immigrants from English-speaking backgrounds were more likely to have an Australian-born parent (75.7% of people from the USA; 89.5% of people from New-Zealand; and 91.6% of people from England had both parents born in another country; Department of Immigration and Citizenship, 2008).

High concentrations of recent migrant arrivals include Parramatta and in areas surrounding tertiary institutions. The area in Sydney’s west stretching from Liverpool to Canterbury had a high proportion of people born overseas. Over two-thirds of the population in suburbs such as Homebush West, Cabramatta, Fairfield and Campsie were born overseas. This has been influenced by migrant hostels that previously existed in these areas, as well as more recently, by family and cultural ties. The inner city area, particularly the CBD, Haymarket and Ultimo, also had very high proportions of people born overseas, many of whom were students attending nearby tertiary institutions (ABS, 2007d).

Some of these migrants are refugees who were granted entrance to Australia on a humanitarian basis. According to the Australian Centre for Languages Integrated Humanitarian Settlement Services Consortium, the current annual figure for Refugee and Special Humanitarian entrants to NSW is 3,500, from whom a majority settle within Sydney (approximately 95%). Latest arrival statistics indicate that from July 08 to January 09, a total of 739 families or 2,438 people (Refugee and Special Humanitarian entrants) settled in Sydney. Some of the larger groups of arrivals, under both categories of entrants, include Iraq, Burma, Bhutan, Afghanistan, Sri Lanka, Liberia, Sierra Leone and Sudan. The groups are mostly settling in areas of Fairfield, Liverpool, Blacktown and Auburn (Australian Centre for Languages, 2009).

In 2006, there were 34,515 Indigenous Australians (Aboriginal and Torres Strait Islander peoples) living in Sydney. This represented 1.0 percent of the total population. One quarter of the total Indigenous population in NSW in 2006 was living in Sydney. The Indigenous population in Sydney was relatively young, with a median age of 22 years, compared with a median age of 35 years for the total Sydney population. More than one-tenth (11.8%) of the Indigenous Australians in Sydney were under five (compared with 6.6% total Sydney population), and only 1.2 percent were aged 75 years and over (5.9% in the total population). Suburbs recording the highest proportions of Indigenous Australians included La Perouse, Phillip Bay, Airds, and the Blacktown area (Bidwill, Willmot, Tregear, Blackett, Shalvey and Lethbridge Park). With the exception of La Perouse and Phillip Bay, these suburbs also had high proportions of low income households and rented dwellings (ABS, 2007d).

The majority of Sydney residents in 2006 were Christian (29.1% Catholic and 17.9% Anglican: roughly similar to the whole of Australia) with a further 14.1 percent stating they have no religion. The percentage of Sydney residents with religious affiliation of Eastern Orthodox (4.3%) and Islam (3.9%) were slightly higher than overall Australian levels (ABS 2006a).

### 5.2.4 Families and children

In 2006, 6.6 percent of the population in Sydney was children aged 0–4 years (similar to 2001). The outer suburbs of Sydney, particularly the outer west, had the highest concentrations of children under five. The areas of Kellyville Ridge, Rouse Hill, Stanhope Gardens and Beaumont Hills in the north-west; Glendenning in the west; Hornsby Park and Voyager Point in the Fairfield-Liverpool...
region; and Claymore and Currans Hill in the outer south-western suburbs, had 11% or more of their populations aged under 5 years (ABS, 2007d).

In 2006, there were 1,063,384 families in Sydney: 49.3 percent were couple families with children, 33.2 percent were couple families without children, 15.6 percent were one parent families and 1.9 percent were ‘other’ families. Most lone parents (87.1%) were women. The majority of both male (77.2%) and female (60.1%) lone parents were in the labour force. Areas with high proportions of one-parent families with dependent children tended to be characterised by low levels of high income, home ownership and high level of public housing. Higher concentrations of one-parent families were evident in the outer west and south-west. In Claymore and Airds in the outer south-west and several suburbs in the Blacktown region, this family type accounted for over one-quarter of all families. The eastern suburb of Daceyville, and the suburbs of Miller and Heckenberg in the Liverpool region, also contained high proportions of one-parent families with dependent children (ABS, 2007d). In 2006, the marriage rate in NSW was 5.6 per 1,000 persons, and the divorce rate was 2.1 (ABS, NSW State and regional indicators, 2008). The median duration of marriage in NSW was 7.7 years to separation and 11.2 year to divorce (ABS, 2008b). In 2006, 27.68 percent of the Sydney population never married, while 39.96 percent were married. Others were widowed (4.47%), divorced (5.99%) or separated (2.35%).

In 2003, The percentage of children (aged 0-17) who had a natural parent living elsewhere was 21.8 percent in NSW, and who were members of divorcing families was 21.8 percent in 2006 (over 12,000 children). Also in 2006, 14.2 percent of children (0-14) were living in jobless families. In 2006-07, there were 6.8 children per 1,000 on care and protection orders and 8.1 per 1000 children, in out-of-home care. Of children in out-of-home care, 51.1 percent were cared for by relative or Aboriginal kinship care, and 37.3 percent were in foster care. In addition, 30.4 percent of this group was Indigenous Australians (ABS, 2009d).

5.2.5 The Elderly

In 2006, there were 505,979 residents aged 65 years and over in Sydney. This represented 12.3 percent of the total population, a greater proportion than in previous years. This reflects a general trend in Australia of an older population and increased life expectancy. Areas in Sydney with high proportions of older people were in the more established suburbs close to the city centre, including Darling Point, Waverley, Taren Point, Daceyville and Ramsgate Beach. Concentrations of older people in the Northern Sydney suburbs of North Turramurra, Narrabeen and Bayview can be partly attributed to the presence of hospitals, nursing homes or retirement villages in these areas (ABS, 2007d).

5.2.6 Groups with special needs

In 2006, 4.0 percent of the Sydney population reported a profound or severe disability by indicating that they need assistance or help in one or more of three core activity areas: self-care, mobility and communication (the population with a profound or severe disability includes people who noted that they only ‘sometime’ required assistance in one of the 3 activity areas.) Those who need assistance were predominantly aged over 74 (44.9%), and more women require assistance than men (57.6% women; ABS, 2007d). Figure 2 details the percentage of persons requiring assistance with core activity according to age groups, demonstrating how need increases with age, and the group that need most help are people aged 75-84 (ABS, 2007e).
In NSW, 16.9 percent of women, and 17.9 percent of men report a mental illness. The incidence of mental disorders tends to be highest in the 18-24 age bracket (ABS, 2008f).

### 5.3 Sydney Geography

The Greater Metropolitan area of Sydney is formally divided into 642 suburbs, and administered locally by 43 LGA’s (NSW Department of Local governments, 2008).
Academic studies have pointed to the polarisation of advantage in Sydney, as in other global cities. Baum (2008) claimed that “spatially, Sydney is a tale of two cities that starts in the deprived Western suburbs and ends on the storied North Shore” (p. 16). He further suggested that Sydney’s ‘wealth belt’ includes the city and suburbs bordering the harbour on the south and north, and that disadvantage and social exclusion tend to be concentrated in the south-west and greater western areas. Figure 4 shows this spatial distribution of relative deprivation according to Baum, with the red areas relatively deprived and the blue areas relatively privileged (or less deprived). As will be shown throughout this report, many indicators of social exclusion, such as unemployment, poverty and poor housing and health, are much more common in the outer suburbs to the west and south of the city.

Figure 4: Relative deprivation, Sydney

Source: Baum (2008).
6 Housing

Having a place to live is a basic necessity. Suitable and adequate housing can provide a sense of physical and emotional security and safety, contribute to a sense of identity, and provide a means to receive services, seek employment and maintain a social life. Many people place importance on owning their own residence or at least renting a good place for a reasonable price. However, the affordability of other basic necessities is compromised when too much of a household income is spent on housing. Lack of affordable housing not only creates a personal and community level crisis but may contribute to a weakening economy. In this context, it is alarming that affordable housing is scarce in Sydney, with some areas particularly affected by housing stress.

Access to adequate housing has long been viewed by the United Nations as a basic human right and is considered to be an integral factor in the enjoyment of other economic, social and cultural rights. The UN Committee on Economic, Social and Cultural Rights (1966) has defined adequate housing as encompassing: legal security of tenure; availability of services, materials, facilities and infrastructure; habitability; accessibility; location (allowing access to employment, health services, schools etc); cultural adequacy; and affordability. The persistence of significant areas of social disadvantage is a cause for concern because poor housing and neighbourhood amenities are closely linked to a range of poor social and community outcomes (see review by Randolph & Holloway, 2005).

6.1 Housing Affordability

It is essential to know distributional patterns of housing affordability in order to understand social disadvantage and social exclusion. Housing becomes unaffordable when dwelling prices are too high, when incomes fall too low, or some combination of both. Housing affordability can be a good indicator to overall and individual economic conditions and to the way society includes or excludes low-income earners in some areas. Accordingly, high levels of housing affordability are often found in more expensive areas: where residents tend to have comparatively high levels of income, especially in comparison with suburbs that contain cheaper housing alternatives.

Randolph (2008; Randolph & Holloway, 2005) argued that it is the housing market which effectively creates and maintains the places where the poorest and disadvantaged live together. Concentrations of disadvantage contribute to further inequality due to increased burdens on service providers; lack of opportunities; lack of accessibility; and social stigma. According to Randolph (2008), Sydney may be the most extreme example of social exclusion in the urban system in Australia. While regional dynamics reflect the broader scale impacts (labour market restructuring, demographic change, macro policy effects), at the local scale it is the housing market that determines the precise geography of disadvantage.

The problem of housing affordability in Australia has been a consequence of both strong demand and limited supply. Demand strengthened as incomes became higher, the size of the average household decreased, immigration increased and interest rates declined. Supply of affordable housing was constrained by three factors: firstly, state and local governmental planning processes are too complex and often involve long delays and high costs. Secondly, developer infrastructure charges are excessive and have restricted supply. Third, there is a shortage of skilled labour in the construction industry (The Senate Select Committee on Housing Affordability in Australia, 2008).
Despite these constraints, there has been an overall increase in the amount of properties being constructed across most parts of Sydney, especially flats and apartments. The greatest increases were seen in the City of Sydney as well as in new growth areas such as Baulkham Hills, Blacktown and Camden (City Centre Research Centre, 2008).

To provide a thorough analysis of such an important problem in Sydney, this report will disaggregate and examine housing affordability under three areas: renter affordability, purchase affordability, and then a more specific examination of those households under severe housing stress (30% of income or above).

6.1.1 Purchasing

Where possible, most people would prefer to own a place rather than rent one. Owning a place can give people a stronger sense of security and safety, social status and enhance one’s well-being. The Senate Select Committee on Housing Affordability in Australia (2008) noted that owner occupiers are likely to have stronger incentives than renters for civic involvement; less frequent relocation; and that home ownership enhances self esteem which in turn reduces the incidence of socially disruptive behaviour and promotes physical wellbeing. Low levels of housing affordability and associated financial constraints can undermine these incentives and benefits.

Purchasing or renting a dwelling in Australia seemed to become much more difficult over the years. The average house price in the capital cities is now equivalent to over seven years of average earnings; an increase from the equivalent of three years in the 1950s to the early 1980s. As such, only a third of transacted dwellings would have been accessible to the median young household in 2006–07, compared to a long-run average of almost a half. A low income household that in 1996 was devoting 30 percent of its disposable income to mortgage repayments would today have to devote 47 percent of its disposable income to servicing debt while maintaining the same standard of living. The escalation of house prices in Sydney show some signs of abating in the current economic climate, however there are still significant pressures being placed on Sydney home buyers. The average Sydneysider’s monthly home loan repayment has increased significantly since 2001 (up 42% to $1800 across the city); an increase that has not been matched by income growth (ABS, 2009b).

Gan and Hill (2008) drew a distinction between three aspects of housing affordability: purchase affordability, repayment affordability, and income affordability. The authors asserted that in the Sydney prime mortgage market between 1996 and 2006, repayment affordability deteriorated significantly whilst purchase affordability remained stable. This can be attributed to the loosening of credit constraints in the mortgage market leading to higher house prices.

Prices of houses in Sydney not only increased considerably, but also in much higher degree than in Melbourne or Perth. Figure 5 shows that median house prices in Sydney have risen dramatically, to a degree higher than the consumer price index as well as other major cities.
The median sales price for all dwellings across Sydney decreased by -1.2 percent over the September 2008 quarter and by -5.3 percent over the previous year. In the same year, the median sales price decreased in the Inner Ring (-2.2%), Middle Ring (-2.9%), Outer Ring (-5.5%) and in the Rest of GMR (-2.4%). The largest annual increases were recorded in North Sydney (27.4%), while Woollahra recorded the largest annual decrease (-21.1%; Housing NSW, 2008). The median house loan repayment in Sydney is $1800 a month, compared to only $1300 national rate (ABS, 2007d).

There has been little change in the rankings of Sydney’s LGAs in terms of relative median mortgage repayments, with areas such as Campbelltown, Wyong and Fairfield remaining with the lowest median mortgage repayments (City Centre Research Centre, 2008).

In 2006, 33.7 percent of all occupied private dwellings in Sydney were being purchased by their current residents - an increase from 24.8 percent in 2001. Sydney had the lowest rate of dwellings being purchased in 2006 of all Australian capital cities. Generally, the outer suburbs contained very high proportions of dwellings being purchased, while dwellings owned outright were more likely to be found in the older, established suburbs closer to the city. Sydney has shown evidence of abiding with a changing tenure pattern that is common across Australia. This national shift has shown a sharp reduction in the level of households that owned their properties outright and a correlated increase in those that are purchasing. This is experienced across the Sydney metropolitan area, from some traditionally wealthy areas such as Waverley and Randwick to more disadvantaged LGAs including Fairfield and Auburn (City Centre Research Centre, 2008). Suburbs with the highest absolute proportions of dwellings being purchased included Kellyville Ridge, Parklea, Beaumont Hills, Acacia Gardens and Rouse Hill in the outer north; Macquarie Links, West Hoxton, Horningsea Park and Voyager Point in the Liverpool region; and Camden Park, Blair Athol and Harrington Park in the outer south-west (ABS, 2007d).

A comparison of total home repayment with income provides a crude indicator of housing affordability. This indicator demonstrates a significant deterioration in affordability between 2001 and 2006 (from 29% in 2001 to 36% in 2006; City Centre Research Centre, 2008; Tice, in press).
Comparing census data from 2001 to 2006 supports this conclusion. Most LGA’s demonstrate a trend of worsening purchase affordability. The areas where worsening affordability was more pronounced were the traditionally more disadvantaged, and the lowest effects were felt in more advantaged areas. Moreover, there are large amounts of differentiation between areas north and south of the harbour. In 2006, the eastern suburbs and inner west demonstrated a different profile to the inner and upper North Shore (older, established families) with suburbs to the south typically paying a greater proportion of their income (City Centre Research Centre 2008).

Referring to the market availability (the availability of affordable properties by statistical sub-district), Tice (in press) showed that in 2001, 68.19 percent of properties were deemed ‘not affordable’. In 2006 that number rose to an alarming 85.87 percent. The author asserted that it is in the outer west where the greatest numerical decline in housing affordability occurred. The total affordable market in Sydney stood around 14 percent in 2006, but in central northern Sydney, only two percent of available properties were affordable (followed by 4% in Eastern suburbs and 5% in Northern Beaches). The highest percentage of affordable housing were found in Outer South Western Sydney (38%), followed by Outer Western Sydney (34%) and Blacktown (29%).

### 6.1.2 Renting

Renting may be preferred as it provides a place to live without the commitment of a mortgage. However for many it is not a matter of choice: they simply cannot afford a down payment and/or a mortgage. Renters have no access to the asset accumulation most home owners are able to benefit from (Randolph, 2008) As house prices have increased, so too have rents and there are many more renting households in stress than home buying households (The Senate Select Committee on Housing Affordability in Australia, 2008).

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1 As was measured by city level prevailing household income.
In 2006, more than 400,000 dwellings in Sydney were being rented, accounting for 33.4 percent of all occupied private dwellings. Of these rented dwellings, 16.2 percent were rented from the NSW Department of Housing and 81.4 percent from private landlords (ABS, 2007d).

Particularly high levels of rented dwellings are present in the inner- and near-city suburbs, such as in Haymarket, Woolloomooloo, Ultimo and Waterloo. In the outer south-western suburbs, Claymore and Airds had around 95 percent of dwellings being rented and in Bidwill in the Blacktown region, the proportion was around 75 percent. Most of these were rented from the NSW Department of Housing (ABS, 2007d). It is estimated that only 11 percent of low income private renters in Sydney are accessing low rent housing stock (NCOSS, 2008).

During the September 2008 quarter, the median weekly rent for all dwellings in Sydney increased by $10 to $380. Within the Inner and Middle Rings the median rent remained unchanged but it increased by $20 in the Outer Ring at $320. When compared to the previous year, median rents increased by $50 in the Sydney SD and in the Inner Ring and by $40 in the Middle and Outer Rings (Housing NSW, 2008).

### Figure 7: Trend in Median rents.

| Source: Housing NSW, 2008 |

Renting affordability levels have improved in some LGA’s, however these typically mirror areas where buyer affordability improved or decreased only slightly and where household income is traditionally high (Lane Cove, Mosman, North Sydney). The areas where affordability has worsened include the lower value markets of the west and south west such as Fairfield, Penrith and Campbelltown. These areas stand out as they have traditionally been important providers of affordable city housing (City Futures Research Centre, 2008).

#### 6.1.3 Households with housing costs 30% or more of gross income

Related to measures of housing affordability, this indicator can point to the high costs of housing, low levels of income or both. If a large part of gross income is devoted to housing, less is available to spend on food, clothing, transportation, education, recreation or other life necessities.

In 2006, 23.8 percent of all households in Sydney had expenditure on housing costs that amounted to 30 percent or more of their gross household income.
The highest proportions of households that spent 30 percent or more of their gross household income on housing costs were in the Inner City and Canterbury-Bankstown regions, extending to Fairfield-Liverpool and further out to Blacktown in the west and parts of Campbelltown and Camden in the outer south-west. Over 40 percent of households within the Sydney CBD and inner city areas of Haymarket, Ultimo and Waterloo spent 30 percent or more of their gross household income on housing costs, as did those in the western suburbs of Silverwater and Homebush West. The north-western suburbs, in particular Parklea, also contained a high proportion of households with housing costs of 30 percent or more of their gross household income (ABS, 2007d). There are also pockets of some inner-west housing markets and new developments along the Parramatta River where housing costs consume a very high proportion of income (City Future Research Centre, 2008).

It is also useful to disaggregate these figures into properties rented and purchased. Rent as a proportion of household income in 2006 ranged from 27.4 percent in the City of Sydney to 16.6 percent in Hunter’s Hill. Areas of greatest rental stress are in the suburbs of Fairfield, Bankstown and Rockdale, the Inner City and some of the upper parts of Northern Sydney. However, affordability pressures have been more modest on renters than buyers between 2001 and 2006 (City Centre Research Centre, 2008).

The City Centre Research Centre report (2008) emphasised significant declines in affordability for home purchasers between the 2001 and 2006 census. Increases in home loan repayments as a proportion of income dramatically increased in the suburbs of Fairfield, Auburn, Wyong, Canterbury and Bankstown. For these areas, repayments represented around 30 percent of income in 2001, accelerating to around 40 percent in 2006, indicating an approximate 9 percent change. Some more central areas also exhibit high proportions of mortgage payments to income in 2006, such as the City of Sydney, Randwick and Waverley, but these areas have traditionally had large values for this indicator.

6.1.4 Vacancy Rate and Dwelling Characteristics

Constraints on the supply of dwellings contribute to low levels of housing affordability. One factor is the low level of vacancy across Sydney. In the 12 months to March 2008, Sydney had the lowest average vacancy rate of 1.2 percent, while the vacancy rate for Melbourne (1.5%), Brisbane (1.8%), and Perth (1.9%) were higher (ABS, 2008c).

Another factor is the shortage of land for development. Dwellings in Sydney are usually quite large and many live in a private house or a semi, rather than high-rise structures. This pattern of housing consumes more land per person. In addition, the average number of people per bedroom is only 1.1 and the average household size (number of persons usually resident in occupied private dwellings) is only 2.7 persons. More than 63 percent of dwellings in Sydney are separate houses, which are occupied by 71 percent of the population; 11 percent of dwellings are semi-detached; and 23 percent are flats or units, occupied by 17 percent of the population (ABS, 2007d).

The majority of Sydneysiders reside in separate houses (61.7%), however this proportion is lower than that for Australia as a whole (74.8%). Accordingly, a greater proportion of Sydney residents occupy flats, units or apartments (25.7%, compared with 14.2% for the whole of Australia). Roughly the same amount of dwellings in Sydney were fully owned, being purchased, and being rented (all around 30%; ABS, 2006a).
6.2 Housing occupancy standard

According to the Sydney Social Atlas (ABS, 2007d) 5.4 percent of households in Sydney in 2006 were assessed as requiring at least one extra bedroom (number of bedrooms compared to number and characteristics of the residents). This was the highest rate compared to all Australian capital cities. The highest level of households requiring more bedrooms was found in the western suburbs, located geographically around Parramatta down to Bankstown and Liverpool areas. Other clusters were located in the western part of Blacktown and around the city centre.

6.3 Social and Public Housing

Although there was a drop of 40 percent in numbers of people on the waiting list for public housing in NSW from 2000 to 2006, there are still some 60,000 applicants waiting. Applicants in NSW are likely to be waiting longer because the turnover of tenants is much lower than the national average and most other states. Funds for social housing under the Commonwealth-State Housing Agreement (CSHA) have fallen by at least a quarter in real terms since 1996 and non-profit housing is very small by international standards at 0.5 percent of total housing stock (NCOSS, 2008).

The total stock of public, community, Aboriginal and crisis housing, including both capital and leased stock, is estimated to grow only marginally by 196 to 148,368 between June 2007 and June 2008. The number of households in social housing has only grown from 135,800 in 2000 to 139,200 in 2006. There has been a 21 percent increase in the number of Aboriginal people purchasing their home from 17,407 in 2001 to 21,151 in 2006. Increases occurred in private renting (from 16,133 to 18,845/31.9%) and state housing (from 10,795 to 12,510 /21.2%) with a decline from 3,075 to 2,827 in social housing. The number of permanent dwellings managed by Indigenous housing organisations increased by about two percent from 4,088 in 2001 to 4,176 in 2006. In 2006, 18.8 percent of those dwellings were in need of major repairs and 2.2 percent needed replacement (NCOSS, 2008).

In Sydney, there were 154,279 people who rented a dwelling from the State or Territory Housing Authority (public housing). Most public housing residents in Sydney were born in Australia (63.4%) while 5.1 percent of residents did not state their birthplace. The next most prevalent groups were born in Lebanon, Vietnam, England, New Zealand and China, but each of these represent small percentages of total public housing residents. Most public housing residents spoke English (64%) followed by people who spoke Arabic, Vietnamese and Spanish (but again, less than 1% each; ABS, table tailored upon request, based on the 2006 Census).

Of all public housing applicants in NSW, 32 percent were of a non-English speaking background. In Western Sydney the percentage was as high as 53. Most of these applicants were from China, followed by Iraq, Lebanon and Vietnam. Sixty percent of applicants were aged between 25 and 54, with a further 21 percent aged over 65 years (NSW Department of Housing, 2008).

A study on social disadvantage, tenure and location (Randolph & Holloway, 2005) found a relation between levels of disadvantage in Sydney and public housing. In Sydney, 38 percent of the 890 CDs (Census Collector Districts) with severe disadvantage scores also had relatively high levels of public housing (i.e. above 20% of households in public housing), twice that of Melbourne (19%). In Sydney the areas of high public housing concentration were: Mt. Druitt and around Blacktown in the west, Green Valley in Liverpool and Villawood on the Fairfield-Bankstown border, pockets around the city and eastern suburbs and the five large estates in Campbelltown. Areas with high levels of public housing have a disproportionately
high level of households whose incomes fall below $400 per week (35%), with children (25%), single parents (23%) and lone persons (27%). The residents of these areas are also more stable with nearly three in five persons (58%) present at the same address 5 years earlier (Randolph & Holloway, 2005).

6.4 Homelessness

“In a wealthy country like Australia,” said the Senate Select Committee on Housing Affordability (2008, p.8), “no citizens should be forced into homelessness.” And yet on any night, around 105,000 Australians are homeless. Homelessness negatively affects individuals and their friends and family. It also has long-term social and economic implications for the community. People who are homeless are among the most marginalised people in Australia. Homelessness is one of the most potent examples of disadvantage in the community, and one of the most important markers of social exclusion. The causes and consequences of homelessness are complex. Economic factors such as unemployment, limited housing supply and neighbourhood disadvantage sit alongside individual triggers such as family breakdown, drug addiction, domestic violence and mental illness (FaHCSIA, 2008a, 2008d).

The level of homelessness in Australia has increased by 6 percent from 2001 (Australian Census Analytic Program, 2008). This figure of 105,000 includes primary homelessness (people without conventional accommodation) as well as secondary homelessness (people moving between various forms of temporary shelter; Commonwealth of Australia, The Road Home, 2008). Remarkably, one-half of the homeless people in Australia are under 24 years-old, and 10,000 are children. There were over 1,700 homeless families (NCOSS, 2008).

Around half of homeless people in NSW rely on the hospitality of friends, nearly a quarter bed down in boarding houses and caravan parks, and the rest rely on emergency accommodation or sleep rough under bridges, in cars or in parks (FaHCSIA, 2008a, 2008d). In Australia, unlike in the USA, most of the homeless people both seek accommodation or food and support (Teeson, Hodder, & Burich, 2001). Young people who request accommodation from a Supported Accommodation and Assistance Program (SAAP) service in NSW have a 53 percent chance of being turned away (NCOSS, 2008).

In Sydney, there are 1,182 “rough sleepers” (people who sleep in the street for long periods): a figure far higher than in other cities. This number is about 25 percent of all “rough sleepers” in all of Australia (FaHCSIA, 2008a, 2008d). As can be seen in Figure 8, in 2006, the rate of homelessness per 10,000 of the population in NSW was 42 – similar to the figure in 2001. It is lower than the Australian average (53) and than other states (69 in QLD and 68 in WA).

Figure 8: Rates of Homelessness per 10,000 of the Population

![Figure 8: Rates of Homelessness per 10,000 of the Population](source: Calculated based on the Australian Census Analytic Program (2008).)
Despite this, NSW has the highest number of homeless people in absolute numbers (27,974 persons). Figure 9 shows the number of homeless people in each state, relative to the national total.

**Figure 9: Number of Homeless people by state**

<table>
<thead>
<tr>
<th>State</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>NSW</td>
<td>25%</td>
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<td>VIC</td>
<td>19%</td>
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<tr>
<td>QLD</td>
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<tr>
<td>WA</td>
<td>18%</td>
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<td>SA</td>
<td>7%</td>
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Source: Calculated based on the Australian Census Analytic Program (2008).

In 2005-06, over 25,000 clients and a further 11,400 accompanying children received assistance from SAAP services in NSW. The largest client groups presenting to SAAP were males alone (45.9%), females alone (28%) and females with children (20.3%; NCOSS, 2008).

Indigenous people continue to be over-represented, with 110 homeless per 10,000 people compared to around 40 non-indigenous people per 10,000 people in NSW. 17.6 percent of SAAP clients in NSW were Aboriginal people (21% female and 13.5% male) compared to a relative population size of 1.7 percent (NCOSS, 2008).

People with a psychiatric disability are at particularly high risk of experiencing housing problems and form a significant proportion of the homeless population. In a study on homeless people in Sydney, Teeson, Hodder, and Burich (2004) found that 73 percent of men and 81 percent of women met criteria for at least one mental disorder in the past year and 40 percent of the men and 50 percent of the women had at least two mental disorders. In another study (Teeson, Hodder, & Burich, 2000) the authors found that half the homeless men and 15 percent of the women had a diagnosis of alcohol use disorder in the past 12 months.

There are only 150 crisis accommodation beds for single women in the Greater Sydney metropolitan area, with none offered west of Parramatta. One shelter for women had only 23 beds, provided accommodation for around 600 homeless clients a year, but has had to turn away more than 1,000. In 2004-05, NSW had the highest number of people turned away from homeless accommodation services of any state or territory with 58 potential clients and 33 accompanying children with valid requests for immediate accommodation being turned away each day (NCOSS, 2008).

### 6.4.1 Caravan Park Residents

With housing affordability in Sydney deteriorating, and social housing failing to meet demand, some of the most disadvantaged are turning to caravan parks as a ‘last resort’ housing option. This includes elderly, itinerant workers, and people without other housing options (such as ex-prison inmates). However, the number of caravan parks in the Sydney region has halved between 2000 and 2007, from...
164 to 74 establishments. The most recent estimate of the number of long-term residents in NSW caravan parks is 40,000 people in 2001 (Wensing, Holloway, & Wood, 2003). Marks (2008) claimed that “one Western Sydney caravan park runs at full capacity, with some people waiting to secure a site resorting to sleeping in their cars alongside a creek bordering the park”. Living conditions in caravan parks are often inadequate for long-term occupancy, in terms of available facilities, services, tenancy rights and safety.

6.5 Housing and specific social groups

6.5.1 Older Australians
In 2005–06, older Australians living in private dwellings either owned (79%) or were purchasing (5%) their home. In 2005–06, older households renting privately spent 36 percent of their gross income on housing, which represented the highest proportion of income spent on housing costs for any age group or tenure type. For this social group, owning their own home provides a large financial benefit, but may also enhance their overall well-being (The Senate Select Committee on Housing Affordability in Australia, 2008).

6.5.2 Indigenous Australians
Home ownership among Indigenous households in Australia is around 36 percent, almost half that of non-Indigenous households. Around 19 percent of Indigenous households rent privately; 20 percent rent from a State or Territory Housing Authority; and 9 percent rent from an Indigenous or mainstream community housing organisation (The Senate Select Committee on Housing Affordability in Australia, 2008).

6.5.3 People with a disability
Seventeen percent of people with disabilities (under age 65) in Australia reside in public housing; 13 percent own their home or have a mortgage; 16 percent are private renters; 16 percent are boarders; and 13 percent live rent free. As with older Australians, many people with disabilities will require housing adaptations to assist them to continue to live in the community. This is difficult without secure housing tenure (The Senate Select Committee on Housing Affordability in Australia, 2008).

People with a psychiatric disability are at particularly high risk of experiencing housing problems and form a significant proportion of the homeless population. Research conducted in Perth in 2000 found that around 49 percent of the residents in Supported Accommodation Assistance Program services on the day of the survey were diagnosed with a mental illness. The same survey found that 46 percent of inpatients in public mental health acute units could have been discharged if there had been suitable community alternatives (The Senate Select Committee on Housing Affordability in Australia, 2008).

6.6 Housing in specific areas

The Senate Select Committee on Housing Affordability in Australia (2008) addressed the issue of housing affordability in all of Australia, but particularly noted the problems in Western Sydney. The Committee asserted that over the past decade the suburbs of western Sydney have experienced a more pronounced increase and subsequent fall in house price than in most other parts of Australia. The western Sydney region has eight of the ten national postcode areas with the highest rates of arrears on home loans. This is related to the high levels of mortgage stress in this region. Figure 10 shows that based on 2006 Census data, the regions of west and south-west Sydney recorded the highest proportion of owner occupier households with debt-servicing ratios over 30 percent.
Figure 10: Households with owner-occupier debt over 30%

Source: The Senate Select Committee on Housing Affordability in Australia (2008).
7 Economic Well-being

At least until recently, Australia had one of the strongest economies in the world, with an annual GDP (Gross Domestic Product) growing by an average 3.5 percent since 1997, a low unemployment rate and a fast-growing productivity rate. Sydney alone accounts for almost one quarter of Australia’s GDP. However, some proportion of the Sydney population is facing anxiety regarding their economic well-being (Wesley Mission, 2006).

Access to a reliable and sufficient income stream enables better access to health, education, housing and other services. Self-provision of basic necessities as well as some discretionary funds can contribute to social status, social inclusion and social affiliation. Those that do not have access to an adequate source of income face relying on social support mechanisms such as family members, friends, human service organisations or the government. This dependency may lead to disempowerment and low self-esteem. Vinson (2007) explained that family income is a central factor in shaping life opportunities. It can be the consequence of factors like limited education and poor health, and may amplify further problems such as mental disorder, crime and child maltreatment.

Most Sydneysiders (64.4%) derive their main income from employment (ABS, 2004), however access to employment does not automatically imply economic sufficiency, as many people under the poverty line are actually employed (“working poor households”). Employment is not only important in assuring a good and steady income, but also to give people a sense of identity, confidence, and social affiliation. Having a job is related to physical and psychological well being, especially among people over 50 (Aquino et al., 1996).

It is impossible to capture the complexity and interrelationships of disadvantage through considering economic indicators alone. Social disadvantage and exclusion must be understood in the context of other indicators included in this report. Other economic factors such as income levels and the location of the poverty line must also be considered.

7.1 Poverty

In NSW, 11.3 percent of the population live below the poverty line (based on 50% of median income or $281 per week); this percentage is lower than some states (TAS, 12.8%; VIC, 11.9%; SA, 11.8%) and higher than others (NT, 4.9%; ACT, 5.2%, WA, 9.2%, QLD, 10.2%). (NCOSS, 2008). This proportion has risen since 2003-4, where 9.7 percent of the NSW population lived below the poverty line. Sydney itself has the lowest rate of poverty (only 7.7%) of all the capital cities. Poverty in Sydney is also the lowest among state capitals when the higher poverty line is used (60% of median income; Saunders, 2008). Although no data is available on specific social groups in Sydney, data from Australia shows poverty prevails at higher rates in some groups in 2006: people over 65 (23.9%), especially single older persons (46.9%); single working age (24.8%); lone parent families (16.4%), especially with more than 4 children (38.8%); unemployed (44.7%) or not in the labour force (25.7%); and persons who receive government pensions and allowances (40.7%). In all of the above groups, percentage of poverty is higher, sometimes much higher, than what it was only in 2003-4 (Saunders, 2008).

The most recent data available on child poverty is from 2001/2002, when 10.7 percent of children and young people aged 0 to 15 years in NSW were in poverty (NSW commission for children and young people, 2008). In 2000, the rate of child poverty in Australia was slightly below the OECD average (12.2%), placing Australia 11th out of the 27 OECD countries used in the study.
It is important to recognise that income tends to have some influence on the fertility of women. In 2006, women aged 40-44 years in the lowest quintile of equivalised household income in Australia had an average of 2.4 babies each, compared with 1.4 for those in the highest quintile of income (ABS, 2008c). Other research showed that about 37 percent of children in Australia were in the bottom income quintile, about 55 per cent in the middle three quintiles and about 8 per cent in the top income quintile (Abello & Harding, 2004). The cluster of NSW small areas showed particularly sharp growth from 2001 to 2006 in the percentage of children living in single parent families and an increase in the proportion of children living in jobless families (McNamara et al., 2008).

More than 13 percent of children living in New South Wales were in the top social exclusion decile in 2006. Although 34 percent of all Australian children aged 0-15 live in New South Wales, children in this state make up only 5.3 per cent of all those children in the bottom CSE (child social exclusion) decile (Harding et al., 2006). Figure 12 compares the incidence of children in the bottom and top deciles in Australian states and territories.
7.2 Income

In 2004, 48.7 percent of households in NSW reported wages and salaries to be their principal source of income (compared with 64.4% in Australia). Other sources of income were Government pensions and allowances (35.1%); and own unincorporated business income (6.2%). Among retired people aged 45 and over, 54.1 percent of men and 36.8 percent of women had Government pensions and allowances as their principal source of income (ABS, 2004).

Figure 13: Principal source of household income in Sydney and NSW (%)

In 2006, the median individual income in Sydney was $518 a week (compared to $466 in Australia) and the median family income was $1,350 a week ($1,171 in Australia). The median household income was $1,154 ($1,027 in Australia; ABS, 2007e). Among employees, the average weekly total cash earnings were $879. The mean weekly income for the following selected households was: $721 for lone people aged 35 and under; $1583 for couples with dependent children; $810 for single parents with dependent children; and only $362 for lone people aged 65 and over (ABS, 2008c).

Many migrant groups endure very low levels of income in Sydney. Recent migrants from many African nations, Central Asia, and Central America are overrepresented in lower income brackets. For example, 71.4% of migrants from Rwanda, 81.8% of migrants from Haiti, and 52.7% of Afghan migrants have a weekly personal income of less than $250. Household income is also very low for migrants from these areas, with weekly household income for migrants from Chad (50%), Mauritania (50%) and Burkina Faso (66.7%) below $500 per week. Some migrant households from Eastern Europe also fall into this group: Latvia (37.3%); Slovenia (36.2%); Estonia (35.4%) and Lithuania (35.3%; Department of Immigration and Citizenship, 2008).

7.2.1 Income polarization

A large gap between the poor and the rich creates social divisions, fear and resentment, and may lead to other social problems such as health disparities and crime (Vancouver Foundation, 2008). As Hunter (2003) asserted, any increase in the income gap between the high and low income households, will result in further inequality between geographical areas. That is, rich neighbourhoods will become richer and poor neighbourhoods will become poorer.
The Gini Coefficient Index is a statistical measure of the inequality of distribution of wealth or income. Coefficients range between 0 and 1, with higher values representing higher levels of income inequality. In NSW the Gini Coefficient Index was 0.317 in 2006, an increase from 0.299 in 1997. It is the highest rate in Australia, which indicates that NSW has the highest rate of income inequality in Australia (national rate 0.307, Victoria 0.306, QLD 0.301, SA 0.291, NT 0.252; ABS, 2009d).

In 2006, 10.3 percent of households in NSW were low income earners, 17.2 percent were middle income earners, and 39.3 were high income earners (ABS, 2009d). Comparison of census data illustrates the increasing polarisation in Sydney – where the richest Local Government Area (LGA) had average household income equal to 2.8 times the poorest LGA in 2006, an increase in polarisation from the figure of 2.6 times in 2001 (City Futures Research Centre, 2008). Over this period, wealthy Ku-ring-gai households increased their average incomes by $511 per week or 24 percent, whilst areas such as Kogarah, Ryde, Strathfield, Bankstown and Fairfield only have median income increases of 12-13 percent - a rate barely in line with inflation (City Futures Research Centre, 2008).

The wealthiest 20 percent of Australian households in 2005-06 accounted for 61 percent of total household net worth, with average net worth of $1.7m per household. The poorest 20 percent of households accounted for 1 percent of total household net worth and had an average net worth of $27,000 per household. The incomes of households considered to have the lowest levels of economic wellbeing (i.e. those people with household income between the bottom 10% and bottom 30% of incomes) grew by eight percent ($24 per week) from 2003-04 to 2005-06, compared to 13 percent growth of those households considered ‘high income’. Alternatively, in 2005-06, 10.6 percent of total equivalised disposable household income went to people in the ‘low income’ group (i.e. the 20% of the population in the second and third income deciles), with 38.5 percent going to the ‘high income’ group (i.e. the 20% of the population in the highest income quintile (NCOSS, 2008).

The Australian Taxation Office recently confirmed that income polarization continues to increase. High income areas in Sydney such as Darling Point, Bellevue Hill and Mosman had income rises of more than 20 percent in 2006-07, while the poorest areas - had relatively small increases or suffered declines in income (Australian Taxation Office, 2009).

### 7.2.2 Location of low and high income households

At the ABS 2006 Census, a low income household was defined as a household which received a gross weekly income of less than $500. According to this definition, 18.2 percent of households are considered low income. More than one-fifth (21.9%) of one-parent families with children, earned less than $500 per week, compared with only 3 percent of couples with children (ABS, 2007d).

Suburbs with high concentrations of low income households were in the west and outer west, in a band between the Georges and Parramatta Rivers extending, south-west to Campbelltown and Airds, and west to Penrith. There was also a high proportion in the eastern suburb of Daceyville. The suburbs of Villawood and Miller in the west; and Claymore in the outer south-west, had over half of all households in this low income category (ABS, 2007d).

It is important to note that the geographical distribution of low income households in Sydney resembles that of unemployed people and one-parent families with dependent children and, to some extent, people aged 75 years and over. The latter two of these groups tend to have large numbers of single income households, and all three may have welfare payments as their main
source of income. High proportions of low income households were also noted in areas with high
levels of dwellings rented from the government (ABS, 2007d).

In 2006, 27.2 percent of all households in Sydney received gross weekly income of $2,000 or more,
and were considered high income households. Areas with the highest proportions were located around
the waterways of Sydney, especially Sydney Harbour, Middle Harbour, and the lower reaches of Lane
Cove River, and covering a band of suburbs to the north and west to Baulkham Hills and Rouse Hill.
High proportions were also found along the shores of the Georges River and in the western parts of the
Sutherland Shire. The highest proportions of high income households were in Northwood, Longueville
and Milsons Point on the Lower North Shore; Warrawee and Pymble in the north; Castlecrag along
Middle Harbour; and Dawes Point on Darling Harbour. These relatively small suburbs had more than
60 percent of households falling into this high income range. These areas generally contained high
percentages of people in the labour force with university qualifications and dwellings being purchased,
and low levels of unemployment (ABS, 2007d).

7.2.3 Income from work

The average annual income from work in Sydney was $47,911. However, there were major differences
between place of residents as well as between different professions. The average annual income in
Mosman, for example, was $100,177. In Sydney statistical division (SD), the five statistical local areas
(SLAs) with the highest average income from wages and salaries all had high proportions of managers
and administrators, and professionals. Together these occupations accounted for 49% or more of wage
and salary earners (ABS, 2009f).

Seven of the ten SLAs across Australia with the highest average wage and salary incomes were
located in Sydney, further emphasising income disparity. Employees in the New South Wales SLAs of
Mosman, Woollahra, Hunter’s Hill, Ku-ring-gai and North Sydney had the highest average incomes
from wages and salaries in Australia. Lane Cove and Willoughby, also located in New South Wales,
were ranked seventh and eighth respectively (ABS, 2004).

7.2.4 Income Mobility

Income mobility is the extent to which incomes change relative to each other. This indicator provides
an insight into the quantities and characteristics of those groups that are moving up and down the
income distribution spectrum.

According to the HILDA survey (Headey & Warren, 2008) in 2005 over 40 percent of Australian
individuals remained in the same quintile as in 2001. Approximately one-third of those in the middle
quintile in 2001 had moved up the income distribution by 2005, while 30.8 percent had moved down
and 34.4 percent had remained in the middle quintile.

Despite an overall picture of moderate stability, a minority registered large changes in equilvalised
income. Of those who started in the bottom quintile in 2001, 7.5 percent were in the top two quintiles
by 2005 (4.0% + 3.5%). Conversely, among those who started in the top deciles 10.2 percent were in
the bottom two quintiles by 2005 (5.0% + 5.2%; Headey & Warren, 2008).
7.3 Employment

The rate of participation in the labour force in Sydney was 65 percent as of September 2008, which corresponds with national averages (65.1%; Department of Employment, Education and Workplace Relations, 2008). Of those who were employed, 28 percent were working part time. Workers in Sydney are predominantly employed as professionals (23.8%) and clerical and administrative workers (16.7%). The main industries of employment include school education (4.0%), hospitality (3.6%) and hospitals (3.2%) in proportions roughly similar to the rest of Australia. Sydney has proportionally greater amounts of workers in legal and accounting services (2.8%) and depository financial intermediation (2.2%) than the rest of Australia (2.0% and 1.4% respectively; ABS 2006a).

In NSW, 14.6 percent of children in were living in families where no resident parent is employed. Of all couple families with children aged under 15, more than half (59%) had both parents working, while in 5.3 percent of them, none of the parents were working. Of one-parent families with children aged under 15, 53.2 percent had an employed parent (ABS, 2008c).

In 2007, females represented 44.8 percent of the total labour force in NSW. Whilst 70.8 percent of males were employed, only 55.6 of females were. Only 51.6 percent of females with children under 4 were employed. The median age for males and females working in NSW at 2007 was the same: 39 (ABS, 2008c).

Figure 14: Labour force status of women and men aged 18-64 years, NSW

<table>
<thead>
<tr>
<th></th>
<th>Women</th>
<th></th>
<th>Men</th>
<th></th>
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<tbody>
<tr>
<td><strong>Employed</strong></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>%</td>
<td>48.3</td>
<td>61.4</td>
<td>67.0</td>
<td>82.0</td>
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<tr>
<td><strong>Full-time</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>%</td>
<td>31.1</td>
<td>36.8</td>
<td>38.2</td>
<td>78.4</td>
</tr>
<tr>
<td><strong>Part-time</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>%</td>
<td>17.2</td>
<td>24.6</td>
<td>28.8</td>
<td>3.6</td>
</tr>
<tr>
<td><strong>Not employed (b)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>%</td>
<td>51.7</td>
<td>38.6</td>
<td>33.0</td>
<td>18.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
<td>100.0</td>
</tr>
</tbody>
</table>

(a) At December. (b) Includes persons who are unemployed or not in the labour force.

7.3.1 Unemployment

The World Health Organisation (2002) stated that unemployment is related to health risks and risk of premature death. Job uncertainty and the loss of a job may lead to poor psychological distress, such as anxiety, depression and harmful bodily effects.

In 2006, almost one-third (32.3%) of all unemployed people in Sydney were aged 15–24 years, while those aged 45 years and over accounted for one-quarter of the unemployed (25.5%).

In March 2009, the Sydney unemployment rate was 6.6 percent, compared with 4.1 percent in the same month of the previous year. This is the highest unemployment rate since 2001. Although the pattern of unemployment varies across the greater metropolitan area, even areas characterised by low levels of unemployment have seen dramatic increases in recent months In some areas unemployment
was higher than average, such as in Fairfield-Liverpool (11.2%) or Inner Sydney (8.1%), while in others it was well below average: Eastern Suburbs (3.4%) or Lower Northern Sydney (3.6%; ABS, 2009e). The long term unemployment rate in NSW was 1.2 percent in 2006 (NCOSS, 2008).

The areas where unemployment was well below average correspond with suburbs identified in the Sydney Social Atlas (ABS, 2007d) as having greater proportions of workers with higher level qualifications. More than half of the unemployed population (57.6%) had no non-school qualifications. Outer areas such as Canterbury-Bankstown (5.9%), Fairfield-Liverpool (6.1%) and Outer North Western Sydney (6.3%) have an unemployment rate well above that of Sydney overall. Unemployment was especially high in local statistical areas such as Auburn (7.8%), Blacktown (7.9%), Fairfield (7.2%), Campbelltown (6.3%) and Wyong (7.6%; ABS, 2009d). Although the percentage of unemployment may have gone up since, the geographical distribution is likely to remain similar.

A new report, ‘Red alert suburbs: An employment vulnerability index for Australia’s major urban regions’, identifies the suburbs across Australia that are most vulnerable to job losses as a result of the current economic crisis (Baum & Mitchell, 2009). According to the report, Sydney will be ringed by an arc of joblessness as the economy deteriorates, and some relatively affluent areas will also face steep increases in unemployment. The worst impact of the slowing economy will be on the city’s south-west, but a band of relatively well-off suburbs are also in danger of becoming “red-alert” at-risk suburbs. The suburbs with the highest employment vulnerability index include Arndell Park, Cabramatta, Claymore, Doyalson and Canley Vale. Haymarket and The Rocks are two inner suburbs at risk, with a high degree of casual labour (for a detailed list see: http://el.newcastle.edu.au/coffee/indicators/job_loss_index/evi.cfm).

In 2006, the level of unemployment for Australia-born (in both Sydney and Melbourne) was the lowest (5.9%-7.9%), followed by those born in Vietnam (7.0%-14.0%); China (11.2%-13.6%), Turkey (12.6%-13.6%); and Lebanon (14.5%-16.9%). An average of 38 percent of the Australia-born population was not in the workforce, 40 percent of Vietnam-born, 49 percent of the China-born, 55 percent of the Turkey-born and 60 percent of the Lebanon-born (Markus & Dharmalingam, 2008). According to the ABS, in 2006 the unemployment rate was higher (5% or more) among people from: China, India, Indonesia, Iraq, Lebanon, Thailand, Turkey and Vietnam (ABS, 2006C).

### 7.3.2 Barriers to work

Even among those who were employed in Australia, 28 percent would prefer to work more hours and 9.5 percent worked less than 15 hours a week. There are some significant barriers for people who want to work or work for more hours: caring for children (especially by women); studying/returning to studies (especially by younger persons); being considered too old by employers (especially by older persons); satisfaction with their current employment arrangements; disability; and caring for another person (ABS, 2007a).

In Australia, the two main difficulties to finding a job reported by people who were available and looking for a job was lacking necessary training/qualifications/experience (15%); and no jobs with suitable conditions/arrangements (12%). Women had more barriers to work than men, because they reported more caring for children or elderly and having less training and experience. Older people also reported more barriers than younger ones, due to their age or to a disability (ABS, 2007a).
7.4 Debts

Personal debt in Australia hit $1 trillion in 2006. Defaults across credit card debt, personal loans and mortgages rose by 35.5 percent. In NSW, mortgage belt suburbs with credit defaults are growing by 43.5 percent, ahead of the state average rise in defaults of 40.2 percent. Credit defaults in regional NSW have climbed nearly 60 percent in the past financial year. A recent study found four in five Australians are worried about their ability to pay their debts in the next 12 months. Of these 51 percent were concerned about a rise in interest rates and 60 percent about a rise in living expenses (ABS, 2007a).

The interest on household debt as a proportion of gross disposable income in NSW was 10.1 percent in 2006, compared with only 5.8 percent in 2000 (ABS, 2008f). According to Wesley Mission Research (2006) more than three-quarters of households in Sydney have credit cards, and 40 percent have two; one third of households have a mortgage and one third have other loans. No less than 88 percent of Sydney households had debts.

7.5 Socio-Economic Disadvantage

Simple analysis of income and the position of the poverty line are not sufficient to develop a comprehensive understanding of economic disadvantage. Other indicators are available that allow a more thorough picture of disadvantage to be established. These include concepts of deprivation and food insecurity.

Saunders (2003, 2007, 2008) studied economic disadvantage in Australia. He differentiated between poverty and deprivation, explaining that while poverty is a situation in which someone’s income is so inadequate that it precludes them from having an acceptable standard of living (exists when people’s actual income is below a poverty line); deprivation exists when a lack of resources prevents people from accessing a wider range of goods and activities that are still considered essential. In a 2007 study, Saunders and others showed what is considered essential by the majority of Australians who participated in the survey, and how many people cannot afford these essentials, both from the general public and social service users (“clients”). Figure 15 shows the incidence of deprivation among the postal (blue) and client (orange) samples. Those items where deprivation is most severe are a week’s holiday away from home each year (22.4%), $500 in savings for use in an emergency (17.6%), dental treatment when needed (13.9%), home contents insurance (9.5%), an annual dental check-up for children (9%), and comprehensive motor vehicle insurance (8.6%).
Baum (2008) characterises the variation between levels of deprivation in Sydney as “A Tale of Two Cities”. The polarisation of the city extends between the high levels of disadvantage in the western suburbs and the privileged northern shore. Comparing all areas of Australia, Sydney contains the suburbs with both the highest score of deprivation (Claymore) and the lowest (Milsons Point). Sydney has many suburbs in both band 1 (highest relative deprivation) and band 6 (lowest relative deprivation), reflecting polarisation of deprivation across Sydney. The suburbs of Airds, Cabramatta, Auburn and Fairfield in Sydney’s western suburbs all score highly on the General Deprivation Index (GDI, see Baum, 2008). The suburbs of Kirribilli, Milsons Point and Double Bay are included in the Sydney suburbs with lowest relative deprivation. Interestingly, while suburbs including Redfern and Dawes Point once were identified as among the city’s deprived locales, heavy gentrification activity has seen recorded deprivation in these suburbs decline. Figure 16 shows the relative deprivation in different areas of Sydney.
Another indicator for economic disadvantage is **food (in)security**. Food security refers to the ability of individuals, households and communities to acquire appropriate and nutritious food on a regular and reliable basis by using socially acceptable means. Food security is determined by the food supply in a community, and whether people have adequate resources and skills to acquire and use (access) that food. Food insecurity (lack of food security) among disadvantaged and low income groups has been proven to exist in NSW. The NSW Child Health Survey (2001) found that 6.2 percent of the respondent population reported that in the last 12 months they had run out of food and couldn’t afford to buy more. Parents from low income areas were three times more likely to run out of food and not have enough money to buy more than parents from other areas (9.9% in Macquarie Area Health Service versus 2.8% in Northern Sydney).

The Wesley Mission report (2006) showed that one out of three households in Sydney was anxious about being able to meet expenses for the coming year. Almost one-half of households (45%) worried about money ‘more than they used to’. Nearly 15 percent of households would find it difficult or impossible to meet a regular increase of $40 per week in household expenses. A large majority (81%) of respondents faced some level of financial stress. The research showed that levels of financial stress were found in many geographical areas, including Inner Metro region (34% experienced financial stress), North region (31%) and South region (33%), Mid West and North West (25%) and South-West and Outer West region (45%). One in four respondents from the South West region had difficulty paying bills on time, compared to 13 percent from the total population. The financial stress had an impact on other aspects in life such as relationship breakdown, substance abuse, gambling and violence.
8 Health and Personal Well-being

Physical and psychological well-being operate as useful indicators of social inclusion, as levels of health shape life opportunities such as education employment and social inclusion (Vinson 2007). Inadequate housing, malnutrition, unemployment and poverty may impact upon health as people with fewer resources often cannot afford health services such as medical and preventive care (Vinson 2007). Poverty and unemployment are often correlated to higher health risks such as substance abuse and obesity. Furthermore, those with poor health often find it more difficult to find a job and retain it, and are therefore subjected to a stronger likelihood to be poor and in need of services. Similarly, persons with disabilities, both physical and mental, may find many services or workplaces inaccessible and thus also face social exclusion.

8.1 Physical health and disability

In 2004-5, 55.5 percent of people in NSW reported their health to be excellent or very good, while 27.9 percent rated it good, and 16.6 percent rated it fair or poor. Females tend to consider their own health to be slightly better than males (56.4% of females rated their health as excellent or very good, in comparison with 53.8% of males; ABS, 2008f).

Trends can be observed across certain social groups which suggest that health is related to other human and economic factors. Of persons in the 1st income quintile (lowest income) in NSW, only 33.1 percent reported their health to be excellent or very good, compared with 71.1 percent of persons in the 5th quintile (highest income). Moreover, the number of persons that report their health to be fair or poor is lower amongst those that have a high income (7.4%) in comparison with 34.3 percent of those from the lowest income group. Differences in education are also related to levels of reported health: 64.5 percent of persons with a degree/diploma or higher qualification reported excellent or very good health, compared with only 52.4 percent of persons with ‘other’ qualifications or 47.7 percent of persons with no non-school qualifications. Persons whom were employed were healthier than the unemployed (64.8% vs. only 50.1% reported excellent or very good health respectively). In addition, the proportion of unemployed people who report their health to be fair or poor (16.4%) is nearly twice that of the employed (8.9%; ABS, 2008f).

Levels of reported health tend to decrease with age. The percentage of people who reported excellent or very good health was 73.9 percent at ages 15-24; 62.2 percent at ages 25-44; 48.1 percent at ages 45-64, and only 32.5 percent at 65 and over. Furthermore, 62.9 percent of couples with children reported good health compared with only 44.1 percent of persons living alone. Whilst only 15.4 percent of people living in major cities reported their health to be fair or good, it was 19.0 percent in inner regional and 25.1 percent in outer regional (Australian Institute of Health and Welfare, 2008; ABS, 2007e).
In 2006, 4.0 percent of the Sydney population reported a profound or severe disability by indicating that they need assistance or help in one or more of three core activity areas: self-care, mobility and communication (the population with a profound or severe disability includes people who noted that they only ‘sometime’ required assistance in one of the 3 activity areas.) Those who need assistance were predominantly aged over 74 (44.9%), and more women require assistance than men (57.6% women; ABS, 2007d). Need increases with age, and the group that need most help are people aged 75-84 (ABS, 2007e).

The disease burden (measured by disability adjusted life years) was greater in NSW than in Australia from infectious disease, neonatal causes, non-cancerous tumours, mental conditions, cardiovascular, chronic respiratory and genitourinary diseases (FaHCSIA, 2008c).

Cardiovascular diseases account for 43 percent of all deaths in women. Breast cancer (16%) is the most common cause of female cancer deaths followed by lung cancer (14%), and colorectal cancer (13%). In 2005, almost 7 percent of females aged over 16 in NSW reported having diabetes or high blood sugar, a significant increase from the 1997 level of almost 4 percent (NCOSS, 2008).

8.2 Life expectancy and death

Australians enjoy one of the highest life expectancies in the world, at 81.4 years. However, many Australians live with long-term health conditions. Most of these conditions are not major causes of death, but they are common causes of disability and reduced quality of life (Australian Institute of Health and Welfare, Australia’s Health, 2008). There is a strong correlation between mortality and income inequalities (Vinson, 2007).

Between 1996 and 2006, Australian life expectancy at birth increased for both males and females. Over this period, the life expectancy of boys improved by 3.5 years, with a boy born in 2006 expected to live to be 78.7 years of age. For girls, life expectancy improved by 2.4 years, with a girl born in 2006 expected to reach the age of 83.5 (ABS, 2008c). Life expectancy in Sydney in 2008 is 83.8 for females and 78.6 for males (NSW Department of Health, 2008). Figure 18 illustrates that life expectancy varies considerably between different income brackets.
At 2006, the number of deaths in Sydney was 25,269, and the standardised death rate was 5.8 per 1,000 persons, a little lower than the national rate (6.0) and NSW (6.1). NSW has lower rates in comparison with national figures for cancer (1.4% vs. 1.7% national rate) disability (17.5% vs. 19.8%) and asthma (9.2% vs. 10.2%). In 2007, the death rate of children in NSW (aged 0-19) was 20 deaths per 100,000 children. For children 1-4 years old, it was 21 deaths per 100,000; for those 5-12 years old it was 10 per 100,000; for 13-19 years old, it was 31 per 100,000; ABS, 2008f).

The main causes of death in NSW in 2006 were cancer, heart disease and stroke. However, between 1996 and 2006, the rates for all these main causes of death decreased. In 1996, 205 persons in every 100,000 died of cancer. This decreased to 176 persons in every 100,000 in 2006 (177 in NSW). In 1996, 182 persons in every 100,000 died of ischaemic heart disease. In 2006 this rate had fallen to 102 persons in every 100,000 (109 in NSW). In a 100,000 population, six people would die in car accidents in NSW, eight would die of suicide and five from drugs. The rates were highest for males aged 15-24, among whom 16 per 100,000 would die in car accidents, 13 would die of suicide, and seven would die from drugs; ABS, 2008f).

8.3 Children’s health

In 2006, the infant mortality rate in NSW was 4.9 per 1,000 live births, slightly higher than the national rate (4.7 per 1000). Among Indigenous Australians the infant mortality rate was considerably higher (7.5 per 1,000 live births), but this represents a lower number than for the previous seven years (ABS, 2008f). The infant mortality rate in Australia almost halved between 1986 and 1998, and has since stabilised at 4.7 deaths per 1,000 live births in 2006 (1,262 infants died in 2006). The neonatal period (the first four weeks of life) retains the highest rate of infant deaths (68.9% of all NSW infant deaths in 2004). The Indigenous infant mortality rate was 3 times the non-Indigenous rate (Australian Institute of Health and Welfare, 2008).
In 2006, the mortality rate of children (0-19) in Australia was 20 per 100,000 children. Indigenous children and youth were twice as likely to die between the ages of 1–19 as their non-Indigenous counterparts. Among people aged 1–19 years, mortality rates were highest for teenagers. Across all child groups, mortality rates have fallen by around one-third over the last decade (from 1997–2006). The fall has been greater for males (a 38 per cent fall) than for females (a 25 per cent fall). The leading specific causes of death were cancers and accidental drowning (each at a rate of 3 per 100,000) for children aged 1–4 years; cancers and transport accidents for children aged 5–12 years (each 2 per 100,000); and transport accidents and intentional self-harm for teenagers (11 and 5 per 100,000). For teenagers, mortality rates were twice as high among males as among females, largely due to higher mortality from transport accidents, intentional self-harm and ‘other’ injuries (Australian Institute of Health and Welfare, 2008).

In 2003, eight percent of young people aged 0–19 years in Australia had a disability, including 4 percent with severe or profound core activity limitations and more than 6 percent of 5–19 year olds with schooling restrictions. Boys aged 5–12 years were twice as likely as girls to have schooling restrictions or severe or profound core activity limitations (Australian Institute of Health and Welfare, 2008).

Low birthweight babies experience a higher risk of death, and are more likely to develop poor health outcomes. The incidence of low birthweight children varies by social class, however a number of studies indicated a link between low birth-weight and reduced school performance, psychomotor development, and emotional well-being. In 2005, the percentage of babies with a low birthweight in NSW was 5.9 – a rate that has been relatively stable over the last 7 years. Babies born to mothers of Indigenous Australian mothers were more likely to have a low birthweight (12.0%; ABS, 2008f).

Teenage motherhood, particularly at younger ages, can pose significant long-term risks to both mother and child. For the mother, there is a higher risk of some medical complications, such as high blood pressure; and, for the baby, there is a greater risk of low birthweight, prematurity, and stillbirth. The teenage fertility rate in Sydney fell from 12.5 to 9.6 births per 1,000 between 2003 and 2007 (compared to 16.2 and 13.0 in NSW respectively). The teenage fertility rate of Indigenous women (70 babies per
1,000 women) was more than four times the teenage fertility rate of all women (16 babies; ABS, 2007b; Australian Institute of Health and Welfare, 2008). The teenage pregnancy rate was consistently higher for girls in the lowest socio-economic groups compared with those from the highest socio-economic group, with a ratio of 8:1 in 2004 compared to 3:1 in 1990. This divergence can be mainly attributed to a decrease in the number of teenage mothers from higher socioeconomic status. The overall trend is decreasing numbers of teenage births accompanied by an increasing relative gap between the highest and lowest socioeconomic groups (NCOSS, 2008; NSW Department of Health, 2008).

### 8.4 Mental health

Mental health is a state of emotional and social well-being, and influences how an individual copes with the normal stresses of life and whether he or she can achieve his or her potential (Australian Health Ministers, 2003). Psychological distress has a major effect on the ability of people to work, study, and manage their day-to-day activities (ABS, 2008f). It may lead to cessation of education, employment, poverty and homelessness (Vinson, 2007).

In 2007, almost one-half (45%) of the 16 million Australians aged 16–85 years, had a lifetime mental disorder, that is, a mental disorder at some point in their life. One in five (20% or 3.2 million) Australians had a mental disorder in the previous 12 months: 14.4 percent of Australians aged 16–85 years had a 12-month anxiety disorder, 6.2 percent had affective disorder and 5.1 percent had a substance use disorder. Depression is the leading cause of non-fatal disability in Australia, with less than 50 percent of those affected receiving medical care. Depression associated disability costs the Australian economy $14.9 billion annually, with more than 6 million working days lost each year (NCOSS, 2008).

A survey undertaken by Wesley Mission in 2007 demonstrates the impact of mental illness on the Sydney community. Of Sydney residents, 85 percent live with the impact of mental illness, either themselves or being exposed to one through a friend of family member. Exposure to mental illness was lower among older people, males, low-income households and respondents with post-secondary education. 14 percent of respondents in Sydney had a diagnosed mental illness, and another 14 percent had undiagnosed mental illness (Wesley Mission, 2007).

In 2005, around two-thirds of the NSW population aged over 16 years reported low levels of psychological distress (72.8% of males and 65.6% of females). High or very high levels of psychological distress were more commonly reported in NSW by females (13.7%) than by males (9.4%). This pattern is consistent with the findings of national surveys (ABS, 2008f). Physical problems are often the cause of psychological distress. Of the 481,700 people who had a profound or severe core-activity limitation, 43 percent had a 12-month mental disorder. Persons who had a profound or severe core-activity limitation had almost three times the prevalence of 12-month anxiety disorders (33%) and five times the prevalence (20%) of 12-month affective disorders compared with people who had no disability or no specific limitations or restrictions (11.6% and 4.2% respectively; ABS, National Survey Of Mental Health, 2007c; NSW Department of Health, 2008).

Education, employment and income are closely related to mental health. Of the 413,600 unemployed persons in NSW in 2006, 29 percent had a 12-month mental disorder compared to 20 percent among employed people.
The psychological profile of people in prisons is increasingly marked by mental illness. 78 percent of men and 90 percent of women assessed at corrective custody reception had at least one mental illness diagnosis including psychosis, affective disorder, anxiety disorder, substance use disorder, personality disorder or combinations of these. One in twenty prisoners reported that they had attempted suicide in the 12 months before interview. During 2005-06, 500 offenders required urgent mental health assessment upon reception and over 1,600 were assessed after staff made notifications (NCOSS, 2008).

Community attitudes toward mental illness in Sydney were quite positive: 29 percent said they would trust someone with a mental illness in a position of high responsibility, 68 percent were positive about working with someone with mental illness, and 78 percent agreed that people with a mental illness improve with treatment, however, only 34 percent would be comfortable with their child sharing a flat with someone who has mental illness. People who had mental illness or people who were exposed to it through a family member or friend, tended to have more positive attitudes than others (Wesley Mission, 2007).

8.5 Health related behaviours and risk factors

Rates of obesity in NSW are similar to overall Australian figures, and demonstrate an overall increasing trend. Between 2001 and 2004–05, the proportion of both males and females who were overweight or obese increased, with the rates of male obesity consistently higher than that of women. In 2001, 55 percent of males and 41 percent of females were either overweight or obese, compared with 59 percent of males and 43 percent of females in 2004–05 (similar rates in NSW; ABS, 2008f).

In 2008, 23 percent of men and 18 percent of women in NSW reported that they were current smokers. These percentages have decreased slightly from levels in 2001, but remain similar to national rates (NSW Department of Health, 2008). In 2004–05, 14.8 percent of males and 11.1 percent of females in NSW reported consuming either risky or high risk levels of alcohol. These figures are slightly lower than national rates (15.2% of males and 11.7% of females; (ABS, 2008c).

In NSW 43,798 drug and alcohol treatment episodes were provided by 282 government funded agencies in 2005-06. Alcohol was the most common principal drug of concern in closed treatment episodes (43%), followed by cannabis (20%), opioids (20%, with heroin accounting for 16%), and amphetamines (11%). Close to one-third of closed treatment episodes in NSW were for clients aged 20–29 (31%) or 30–39 years (31%) and the overall proportions of male and female clients in NSW (67% vs. 33%, respectively) were similar to the national proportions (66% vs. 34%; NCOSS, 2008).

In 2008, 57 percent of men and only 47 percent of women were adequately physically active (“Adequate” physical activity is defined as a total of 150 minutes of moderate to vigorous physical activity per week on five separate occasions); 45 percent of men and 58 percent of women had adequate quantities of fruit; and only 5 percent of men and 10 percent of women had adequate quantities of vegetables (NSW Department of Health, 2008).

8.6 Risk taking by young people

Youth is a period characterised by rapid psychological and physical transition, where young people progress from being dependent children to independent adults. In this stage of life, people may be vulnerable to the influences of peer pressure and popular culture, and may be inclined to experiment, push boundaries and take risks that could impact on their immediate and longer term health and
wellbeing. While not all young people engage in these risky behaviours, the consequences for those who do, and for those around them, can be serious (ABS, 2008c).

In 2005, nearly half of all deaths of young men and a third of young women aged 15–34 years in NSW, were due to suicide, transport accidents or accidental drug overdoses (418 persons). In 2005, as many young people died from suicide (173 persons) as from transport accidents (167 persons), and four times as many young men (330) died from suicide, transport or drug causes, as young women (88; ABS, 2008i).

Figure 20: Causes of death among young people in NSW, 2005

![Graph showing causes of death among young people in NSW, 2005](image)

(a) Refers to deaths resulting from transport related accidents  
(b) Total is made up of all suicide deaths, drug induced deaths and transport related accidents

Source: NSW in focus (ABS, 2008f)

Although the legal age for drinking remains at 18 years of age, many young people have access to alcohol before this age. In 2007, amongst young men in the age group 15-24 in NSW, the average age for first consumption of alcohol was around 15, and amongst women of the same age group, the average age for first use of alcohol was around 17 years. In addition to its potential direct health consequences, risky/high risk drinking can increase the likelihood of a person falling, or being involved in an accident or violence (ABS, 2008c). Over one-tenth (11.1%) of people aged 15-24 NSW reported risky levels of alcohol consumption (ABS, 2008f). On average, 25 percent of hospitalisations of 15-24 year olds occur as a result of alcohol consumption (Prime Minister of Australia, 2008).

In the 2007 National Drug Strategy Household Survey (Australian Institute of Health and Welfare, 2007), 19 percent of young men aged 18–24 years in Australia reported that they had engaged in risky/high risk drinking at least once a week during the last 12 months. This was double the comparable rate of regular risky/high risk drinking among men aged 25 years and over (8%). Among young women, 16 percent reported risky/high risk drinking on a regular basis, a figure around three times as high as the proportion of women aged 25 years and over (5%).

Almost one-quarter (23%) of people aged 15–24 years in Australia reported using illicit drugs during the last 12 months, around twice as high as the proportion of people aged 25 years and over (11%). Marijuana/cannabis was the most common drug used by 15–24 year olds (18%). Ecstasy (9%), meth/amphetamines and pharmaceuticals (both 4%) were the next most commonly used drugs by this age
group during the last 12 months. The average age for first use of marijuana/cannabis was around 19 years; 21 years for first use of meth/amphetamines; and 23 years for ecstasy. In the three year period of 2004–2006 the annual average number of drug-induced deaths was 78.6 (the rate for men was twice that for women; ABS, 2008c).

In 2005–06, there were 15,100 hospital separations for transport accidents among people aged 15–24 years. Young men had a transport accident hospital separation rate (720 per 100,000) that was over twice as high as that for young women (318 per 100,000). Over one-third (36%) of transport accident hospitalisations among 15–24 year old men in 2005–06 were for motorcyclists, whilst 20 percent were for car drivers and 11 percent were for car passengers. Over the period 2004–2006, the average number of transport accident deaths of young people aged 15–24 years was 418 per year. Transport accidents made up a much higher proportion of all deaths among young people (31%) than among people aged 25 years and over (1% of deaths). For male teenagers aged 15–19 years the rate was 19 deaths per 100,000 and for men aged 20–24 years it was 25 deaths per 100,000 (ABS, 2008c).

Figure 21: Number of hospitalisation due to transport accidents, NSW, 2005-06.

Source: NSW in focus (ABS, 2008f)

8.7 Level of health services

In NSW, there are 309 hospital separations per 100,000 population. This is lowest number in Australia (compare for example with 380 in Vic.). At 2006, there were 3.9 hospital beds per 1,000 population (national rate was 4.0), 273 doctors (266 national rate), and 927 nurses (968 national rates). Almost one half (45%) of residents in NSW had private health insurance (43.5% national rate; ABS, 2008f). Residents in south-eastern Sydney and Illawarra are more likely to face difficulties getting health service compared to the more affluent health areas like northern Sydney (Urban Development Institute of Australia, 2007).
8.8 Deprivation of Health

In the previous chapter on economic resources, we explained the concept of deprivation, and its impact on accessibility to health services and medicines. Saunders (2007) found that 2.1 percent of the population in Australia could not afford medical treatment if needed, but among the clients of social services, the number rose to 9.7 percent. Almost one-quarter (22.9%) of social service clients could not afford to buy prescribed medicines, compared to 4.5 percent in the general population. Furthermore, almost one-half (44.7%) of social service clients could not afford dental treatment if needed, compared to 13.9 percent of the general population.

A 2006 study in NSW found that difficulties accessing health care are related to the level of socioeconomic disadvantage, gender and location. Over 13 percent of adults reported difficulties seeking health care for reasons that include waiting times, transport problems and shortage of services. Cost is a major barrier for those who do not access services, such as the cost of getting health care when needed (11.5% of women and 9.8% of men), to the cost of accessing dental care (28.2% of women and 24% men), and the cost of obtaining prescription drugs (10.8% females and 9.4% males; NCOSS, 2008).

8.9 Health of Indigenous Australians

Indigenous Australians are the most disadvantaged group in Australia, as measured by a range of socioeconomic indicators including education, employment, income, housing and contact with the justice system. The increased burden of disease carried by the Aboriginal population cannot however be fully explained by socioeconomic disadvantage alone or even in combination with other health risk factors, such as smoking, risk drinking, and poor housing (Australian Institute of Health and Welfare, 2008).

Aboriginal people have significantly lower life expectancy than non-Aboriginal people, with most estimates suggesting a 17 year life expectancy gap. Across Australia, Aboriginal people have higher rates of long term and chronic health conditions, including arthritis, asthma, back pain/problems, diabetes, heart disease and kidney disease. Despite some decline, the prenatal mortality of babies of Aboriginal mothers is still higher than for non-Aboriginal mothers, and rates of low birth weight and prematurity also remain higher amongst the Aboriginal population. More than three-quarters of Aboriginal deaths in NSW are potentially avoidable.

Rates of risk-drinking are much higher amongst the Aboriginal population than the non-Aboriginal population, however there is some evidence that overall Aboriginal people are less likely than non-Aboriginal people to consume alcohol. Rates of smoking amongst Aboriginal people in NSW are more than twice the rate of the rest of the population for both men and women. Notification rates for indigenous people were higher than the non-Indigenous population across a number of communicable diseases. Indigenous Australians aged 18–24 years were 1.5 times as likely to have a disability or long-term health condition as non-Indigenous young persons (NCOSS, 2008).

Indigenous Australians reported their health to be worse than the rest of the population. Only 36.1 percent reported their health as excellent or very good compared with 55.9 percent in the general population; 35.2 rated it as good (27.7% in general) and 28.7 percent reported it to be fair or poor (16.3% in general). Figure 22 illustrates that Indigenous Australians are overrepresented in almost every health problem or risk area:
Figure 22: Indigenous Health Status compared to Non-Indigenous in NSW, 2006

Source: Calculated based on NSW in focus (ABS, 2008f).
9 Education

Education is related to social inclusion and social advantages in many ways. First, education can be expensive and requires a commitment of economic resources including the cost of tuition, other expenses and opportunity costs such as time away from work. Those who are confronted daily with providing the necessities of life may find it more difficult to attend school or university. Second, a good qualification and higher degrees are directly related to likely profession types and level of income in later life. Research reaffirmed the relationship between education and financial disadvantage - namely, poverty rates among those aged 15 years and over declined sharply as educational qualifications increased (Zappalà, 2003). Education is related to employment and income, but also, as can be seen in the chapter on health, to both physical and psychological well-being. Indeed, according to Vinson, the number of years of formal schooling is among the best predictors of good health (both physical and mental; Vinson, 2007).

Good education is about offering all Australian children a good start (Vinson, 2006). Good education begins in primary schools with small classes and good teachers, continues through secondary school, to professional qualification and university degrees. The level of education can be examined by the number of schools per child, number of children in class, number of students who graduate or drop out of school, and percentage of people with higher education degree or qualification.

9.1 Education and social inclusion

Education is a useful indicator of social inclusion, through the gap between rich and poor and the level of education, the number of public vs. private schools, and by the inclusion of certain social groups in all levels of education. The Early Childhood Longitudinal Study (Karoly, Kilburn, & Cannon, 2005) showed that disadvantaged children not only arrive at school less well prepared but early gaps persist and even widen as children progress through school. Children who are socially disadvantaged drop out of high school more frequently than others, and have higher levels of unemployment, welfare dependency, delinquency and crime. The long impact of education on the social advantage of an individual is emphasized by Vinson in 2006:

“No one should be left in doubt that in the absence of compensatory educational experiences a substantial number of today’s socially disadvantaged small children are positioned to become tomorrow’s frustrated and rejected adults. (...). Unless there is a serious commitment to uphold every child’s birthright to acquire the educational and personal foundations for a full and satisfying life, we fail the first test of any civilised community” (pp.1-3).

Many studies have shown that background variables (such as fathers’ occupation, father’s class or fathers’ education) may have an impact on education in early childhood on to later life (years of education; transitions from primary to lower secondary, from lower to higher secondary, and from there onto tertiary studies; see review by Breen & Johnsson, 2005). One study (Jones, Kojima, & Marks, 1994) found that Japan and Australia have a fairly long history of collecting mobility data, and in a comparison of the two between 1965 and 1985, Jones et al. (1994) found a slight increase in fluidity in Australia but not in Japan.
9.2 Preschool

Preschool is one of the earliest stages for building a child’s education and creating future opportunities, but it also allows parents to go back to work and increase their own income and social advantage. Studies (e.g. Karoly et al., 2005) showed that children who attend preschool are much more likely to complete their schooling. Unfortunately childcare in Sydney, as in the rest of Australia, is mainly provided by private for-profit businesses, and the costs can be very high. By comparison, some European countries offer child care services for free or low cost through government or non-profit associations (to see more about child care strategies in other countries see Vinson, 2006). That is, children’s preschool participation in Australia tends to increase in line with household income. The Australian Government’s child care tax rebate contributed to escalating child care costs in Sydney, as the average weekly cost went up to $247, compared with a national rate of $233 (Dunlevy, 2007).

Just over one-half of children under 5 in NSW (54.3%), attended school, preschool or formal care in 2005, with the highest percentage being 5 year olds (98.6% attended school), followed by 4 year olds (88%), 3 year olds (74.2%) and children under 3 (only 25.9%). Figure 23 shows the comparison between the participation of 4 year olds and 3 year olds in different formal child care settings.

Figure 23: Participation in school, preschool and child care, children aged 3-4 year, NSW, 2005

Almost one-third (30.91%) of persons aged 15-54 in Sydney provided unpaid child care (35% of females vs. 25% of males); the majority to care for their own children (83%; ABS, 2007e). Many of these parents, particularly women, sacrifice full-time employment in order to care for their child. The high cost of child care is often considered a factor in the decision for parents to leave work.

9.3 Schools

In 2006, there were 521,785 children over the age of 5 attending school. In NSW, 27.6 percent of students had a language background other than English; 5 percent were Indigenous students; and 4.3 percent were students with a disability (Department of Education and Training, 2007a, 2007b).
By the end of 2007, the Class Size Reduction Program delivered more than 1,800 teachers to more than 650 classrooms in NSW primary schools. Class sizes have been reduced below the statewide average targets set for 2007: 20 for Kindergarten students; 22 for Year 1 students; and 24 for Year 2 students. The commitment included approximately $603 million in recurrent expenditure and $107 million for capital works, a total of $710 million over four years from 2004 (Department of Education and Training, 2007a, 2007b).

In 2005/6, NSW spent $9,769 per full time primary student in the classroom - $70 more than the national average of $9,699. In 2005/6, NSW spent $12,397 per full time secondary student in the classroom - $249 more than the national average of $12,148 (Department of Education and Training, 2007a). Figure 24 shows the recurrent per capita expenditure in government primary and secondary schools by state in the years 2005-6. The NSW government spent $11,279 for both primary and secondary schools: a figure slightly higher than the national average.

### Figure 24: Recurrent per capita expenditure in government primary and secondary schools by states.

<table>
<thead>
<tr>
<th>Year</th>
<th>NSW</th>
<th>VIC</th>
<th>QLD</th>
<th>SA</th>
<th>WA*</th>
<th>TAS</th>
<th>NT</th>
<th>ACT*</th>
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<tr>
<td>2005-2006</td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>In-School Primary</td>
<td>9,769</td>
<td>8,767</td>
<td>9,809</td>
<td>9,734</td>
<td>10,684</td>
<td>9,510</td>
<td>12,867</td>
<td>10,903</td>
<td>9,699</td>
</tr>
<tr>
<td>In-School Secondary</td>
<td>12,397</td>
<td>11,329</td>
<td>11,600</td>
<td>12,017</td>
<td>13,732</td>
<td>11,877</td>
<td>17,904</td>
<td>14,395</td>
<td>12,146</td>
</tr>
<tr>
<td>Total Primary (in &amp; out)</td>
<td>10,195</td>
<td>9,285</td>
<td>10,387</td>
<td>10,543</td>
<td>11,448</td>
<td>10,349</td>
<td>15,072</td>
<td>11,632</td>
<td>10,280</td>
</tr>
<tr>
<td>Total Secondary (in &amp; out)</td>
<td>12,823</td>
<td>11,848</td>
<td>12,178</td>
<td>12,827</td>
<td>14,495</td>
<td>12,716</td>
<td>20,109</td>
<td>15,024</td>
<td>12,729</td>
</tr>
<tr>
<td>Out-of-School</td>
<td>426</td>
<td>518</td>
<td>578</td>
<td>810</td>
<td>764</td>
<td>839</td>
<td>2,206</td>
<td>729</td>
<td>580</td>
</tr>
<tr>
<td>Total Primary &amp; Secondary (in &amp; out)</td>
<td>11,279</td>
<td>10,352</td>
<td>11,043</td>
<td>11,363</td>
<td>12,512</td>
<td>11,361</td>
<td>16,647</td>
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<td>11,243</td>
</tr>
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</table>

The student/teaching staff ratio in NSW in 2007 was 16.4 students per teacher in primary schools and 12.2 in secondary school, showing a slight improvement from 2000 (17.9 and 12.5, respectively).

### 9.3.1 Public and private schools

In 2006, 60.8 percent of students in Sydney were attending government schools, a lower proportion than in 2001 (62.4%). Attendance at government schools in 2006 was higher for both infant/primary (66.0%) and secondary (54.5%) school students compared with attendance figures at non-government schools (ABS, 2007d).

Subsidies to private schools comprise 74 percent of the federal recurrent (annual) funding of schools. In 2007-08, private schools in NSW will receive $5,509,193,000. In comparison, public schools will receive $1,931,581,000 for instruction of 62.5 percent of all school-aged pupils. Public schools also provide for 79 percent of students with disabilities, 80 percent of those considered to be poor and 91 percent of recent immigrants and Indigenous pupils (NCOSS, 2008).

School children attending government schools were highly concentrated in the outer southern, south-western and western areas of Sydney. Suburbs with over 85 percent of students attending government schools included Kurnell in the outer southern suburbs; Airds and Claymore in the...
outer south-west; and Blackett, Willmot, Tregear and Shalvey in the Blacktown area. Cowan in the north; and Miller, Cabramatta and Cartwright in the Fairfield-Liverpool region also had very high proportions. The North Shore, eastern and inner suburbs had very low proportions of students attending government schools (ABS, 2007d).

9.3.2 Numeracy and literacy outcomes

Numeracy and literacy outcomes in year 5 (students attaining band level 3 or higher) are steady at 94.1 percent and 93.4 percent in 2005 for NSW. Indigenous students’ results are still around 13-15 percent lower at 79.4 percent and 80.1 percent respectively. The apparent retention rate in 2008 for full-time secondary students in NSW was 69.6 percent (64.6% for government schools). This is a decrease from the 2006 figures (73% overall, 68.2% for government schools and 80.9% for non-government schools). This is lower than the Australian average (74.5%) and well behind other states such as the ACT (85.2%), Victoria (74.9%), Queensland (78.0%), South Australia (74.4%) and Western Australia (73.6%; ABS, 2009a).

In 2006, the minimum NSW standards for literacy were not met by 8.0 percent of Year 3 students, 6.1 percent of Year 5 students, and 3.8 percent of Year 7 students. For both literacy and numeracy, there was a substantial gap between the achievements of Indigenous students and those of a non-Indigenous background. The proportion of Indigenous students not meeting the NSW benchmarks was considerably higher than for all students: 25 percent of Year 3 students, 20 percent of Year 5 students, and 13 percent of Year 7 students (ABS, 2008f).

This divergence recurs with respect to basic numeracy benchmarks. Benchmarks were not attained by 9.1 percent of total Year 3 students, 5.4 percent of Year 5 students, and 7.1 percent of Year 7 students. For Indigenous Australian students, numeracy benchmarks were not met by 25 percent of Year 3 students, 17 percent of Year 5 students, and 21 percent of Year 7 students (ABS, 2008f).

9.3.3 Early School Leaving

Early school leaving is a particularly serious indicator of wider inequality in education (NCOSS, 2008). In 2006, of all those in Sydney no longer in school 57 percent reported to have 12 years or equivalent of school years; 5 percent had 11 years; 24 percent had 10 years; 12 percent had less than 9 years and 2 percent did not go to school (see figure 25).

Figure 25: Percentage of school leaving by year of school, Sydney

Source: calculated based on ABS (2008f).
In Sydney, of all school leavers aged 15-19 years, 34.8 percent were not fully engaged in education and/or employment, compared to a national rate of 28.4 percent. In fact, 15.1 percent of all persons aged 15-19 were not engaged in education or employment, compared to 12.8 percent national rate (ABS, 2008f).

The apparent retention rates from year 7 to year 12 in NSW in 2007 were 69.7 percent, lower than in the previous three years and lower than the national rate (74.3%) and some other states (Vic. 80.1%, ACT, 85.2%, QLD, 78.5%). More females remained in school than males (74.9% vs. 64.7%) and more non-government school students remained in school than those in government schools (78.6% vs. 64.5%). Indigenous students had the lowest retention rate, far lower than the state average (only 34% vs. 69.7% of total students; (see figure 26; ABS, 2008f).

Figure 26: Apparent retention rates by different groups, NSW 2000-2007

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<tr>
<td>Year 7 to year 12</td>
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<td></td>
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<td>73.2</td>
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</tbody>
</table>


9.4 Higher education and certificate III qualifications

There are over 302,000 higher education students in NSW, which counts for approximately one-third of all students in Australia. There are more females than males completing higher education (54.9% vs. 45.1% respectively), and most (59.4%) are 24 years old or younger.

Post-school outcomes have generally improved in NSW and the proportion of people aged 25-64 years with a bachelor degree qualification or above increased from 19.8 percent in 2000 to 25 percent in 2006. A 9 percent fee increase in 2008 is well above the Consumer Price Index and may bring a decline in enrolments. Women are underrepresented in trade apprenticeships: in NSW in 2006, there were 6,576 women in-training as a trade apprentices, comprising only 13.5 percent of all NSW apprentices (NCOSS, 2008).
At 2006, 30.5 percent of the Sydney labour force held a Bachelor degree or higher non-school qualification. This was an increase since the 2001 Census, when the proportion was 25.2 percent. Of those in the labour force with university qualifications in 2006, 72.2 percent held a bachelor degree, 21.3 percent a postgraduate degree and 6.5 percent a graduate diploma or certificate. Just over half (51.1%) of those with university qualifications were men (ABS, 2007d).

Concentrations of people with university qualifications in the labour force were located around the harbour-side suburbs of the inner, eastern and northern areas, especially the North Shore and Middle Harbour. Suburbs in these areas that had more than 60 percent of the labour force with university qualifications were Waverton, Milsons Point, McMahons Point and St Leonards. Other areas with high levels included Killara, East Lindfield, Gordon and Pymble. The distribution of people in the labour force with university qualifications across Sydney was similar to the distribution of high income households (ABS, 2007d).

In 2006 (similar to 2001), 13.0 percent of the Sydney labour force had a Certificate III qualification. A Certificate III qualification provides the skills for a person to work in a specific vocation, such as baker, plumber or motor mechanic. The highest proportions of people in the labour force with Certificate III qualifications were in the outer suburbs, generally in areas 10 kilometres or more from the city centre. High proportions were found in the area south of the Georges River stretching from Heathcote through Sutherland to Kurnell; in the suburbs around Bankstown Airport; throughout the Campbelltown and Camden areas in the outer south-west; in the Fairfield, Blacktown, Penrith and Hawkesbury areas to the west; and in the northern beaches suburbs around Narrabeen and Cromer. Generally, areas with high proportions of people with Certificate III qualifications were characterised by medium levels of household income and medium to high levels of dwellings being purchased (ABS, 2007d).

Some migrant groups have high levels of higher qualifications (Certificate III, IV or bachelor-level degrees), in comparison with the 42.1 percent of Australians with a higher qualification. Migrants from the Sub-Continent (such as those that speak Telugu, Malayalam, Gujarati and Marathi) have the highest number of bachelor degrees or post-school qualifications (82.3% among Malayalam speakers, 71.4% of people who were born in India and 64.9% of people from Bangladesh). A high number of Chinese speakers had completed higher education (58.9% of Hokkien speakers), African languages (59.6% of Swahili speakers), and various European languages (69.3% of Bulgarian speakers and 55.4% of Norwegian speakers). Over one half of the people who were born in the United States (65.4%) had higher qualifications. Out of 248 birthplaces on the list, Australia is only rated number 155 in level of higher education. The indicated birthplace with the lowest percentages of higher education included: Italy (21.4% had post-school education, with only 4.7% having a bachelor degree or higher); Greece (15.4%); and Malta (16.3%; Department of Immigration and Citizenship, 2008).

**9.5 Adult literacy**

Literacy skills are essential to cope with the various demands of life in modern society. Like many other developed countries, Australia is facing a shortage of skilled labour. Whilst literacy represents only part of an individual’s overall skills and abilities, the growing share of skilled and knowledge-based jobs in the economy has increased the importance of good literacy skills among adults in Australia (ABS, 2008c).

The 2006 Adult Literacy and Life Skills Survey (ALLS) measured literacy competence in four domains: prose literacy, document literacy, numeracy and problem solving. The results were ranked on a scale from level 1 (lowest) to level 5 (highest). Level 3 was considered the minimum level required to
meet the demands of a knowledge society. Almost half of all Australians aged 15–74 years had literacy skills below level 3 (46% had prose literacy skills below level 3 and 47% had document literacy skills below this level) and more than half (53%) had numeracy skills below level 3. While three-quarters of people surveyed scored below level 3 in at least one domain, just over one-third (36%) were below level 3 in all four domains. One-quarter of people scored at level 3 or above in all four domains. The survey showed some small improvements in literacy in the ten years to 2006 (ABS, 2008c).

A number of factors, including educational attainment, whether English is a person’s first or second language, age and labour force activity are related to literacy skills. People who either did not complete schooling to Year 12 (or equivalent) or spoke English as a second language comprised 83 percent of those with poor prose literacy skills (level 1 and 2). Additionally, those with higher levels of literacy tended to have higher income. In 2006, 77 percent of people with high income had adequate or better prose literacy skills, compared with 57 percent of those in the middle income group and 37 percent of those with low income (ABS, 2008c).

9.6 Education and social groups

9.6.1 Indigenous Australians

In NSW there were 41,449 Indigenous full-time students, the highest number in Australia. There were more male students than female Indigenous students (21,216 vs. 20,233 respectively). Nationally, the apparent retention rate for indigenous students to year 12 grew from 35.7 percent in 2001 to 40.1 percent in 2006. For the same period, the non-Indigenous apparent retention rate was 74.5 percent and 75.9 percent respectively (NCOSS, 2008). Indigenous students at all levels show worse education outcomes than non-indigenous students in several indicators: lower school attendance, retention and achievement (AMP Foundation, 2008).
10 Crime and safety

Crime must be understood by its impacts on two groups: the victims of crime as well as those who commit it. The victims of crime suffer from offences against their person or property. On the other hand, those who commit crimes often come from socially disadvantaged backgrounds, and may suffer from other problems such as substance abuse. In this chapter we will address both groups.

Crime levels can be indicators of profound social problems. Crime is related to social disadvantage, such as a divergence between the rich and the poor, where some individuals feel forced to try and improve their economic status in illegal ways. Accordingly, childhood socio-economic disadvantage is often associated with rates of crime and convictions.

Moreover, through its link with disadvantage, crime is associated with social exclusion. Disadvantage may contribute to feelings of detachment from society and its codes, other community members, and the government. Since there is a linkage between the likelihood to commit crime and several background variables (such as low level of education, unemployment, substance abuse, migration and family background), it is possible that social exclusion as well as inadequate services may later lead to high levels of crime.

Vinson provides a striking example of these links between disadvantage and committing repetitive crimes. In 2006, Vinson pointed out that the planning of future prison accommodation in some areas is shaped by primary school test results. This provides support for the notion that areas that are economically depressed and suffer from an accumulation of health, educational and social problems are more likely to produce criminal offenders. To minimise crime rates, it is important to address this cycle of disadvantage. Vinson claims:

“We are well advanced in accommodating ourselves to the same emu-like approach in New South Wales. Having recklessly quarried the most socially disadvantaged of our neighbourhoods to fill the ever-expanding penal estate, some now (...) declare pride in the ever-spiralling number of incarcerated women and men within a correctional system that itself bends uncritically to the punitive obsessions of the day. There is an alternative. (...) It involves taking pride in intercepting with positive and helpful means lives otherwise at risk of being stunted, unsatisfying and fodder for punitive regimes. As Victor Hugo says, if the soul is left in darkness, sins will be committed. The guilty ones are not those who commit the sin, but those who cause or permit the darkness.” (p. 3)

10.1 Crime levels

Household crime in NSW has decreased since 2000, while personal crime has remained relatively constant. In NSW, household crime (including break and enters, attempted break and enters and motor vehicle thefts) declined from a peak of 11 percent in 2001 to 6.5 percent of households in 2007. Contributing to this decline in household crime was a reduction in break and enters which decreased from 6.3 percent in 2001 to 3.2 percent in 2007. Over the period 2000 to 2007 personal crime (which includes robbery, assault and sexual assault), remained relatively steady at a rate between 4 and 6 percent (ABS, 2008f).
In 2007, there were 82 cases of murder in NSW (compared to 103 in 2000 and 97 in 2006). This also represents a decrease in the rate of murders per 100,000 population; in 2000 the rate was 1.6, in 2006 the rate had declined to 1.4 and in 2007 the rate dropped to 1.2. Some of the most prevalent crimes in NSW (per 100,000 population) were damage to property (1572); motor vehicle theft (1303) and assault (1072). There were also over 600,000 driving offences; this corresponds to 9,150 offences per 100,000 population (ABS, 2008d).

In the 24 months to September 2008, fraud increased in 11 of the 14 Subdivisions within Sydney: Inner Sydney (up 13.9%), Canterbury-Bankstown (up 20.7%), Fairfield-Liverpool (up 36.3%), Outer South Western Sydney (up 48.6%), Inner Western Sydney (up 24.9%), Central Western Sydney (up 16.7%), Outer Western Sydney (up 19.5%), Blacktown (up 22.7%), Lower Northern Sydney (up 30.2%), Central Northern Sydney (up 31.0%). Steal from motor vehicle increased significantly in Fairfield-Liverpool (up 10.8%). Overall, however, Sydney had downward trends for five of 17 major offences identified by the Bureau of Crime Statistic and Research (Bureau of Crime Statistic and Research, 2008).

### 10.2 Domestic Violence

One of the most common forms of violence against women is that performed by a husband or an intimate male partner. Domestic violence is known to have short-term and long-term negative affects upon victims’ life, on several aspects such as physical and mental health (with risk of death), employment, education and social opportunities (Vinson, 2007; World Health Organization, 2002).

The NSW Bureau of Crime Statistics and Research (2005) has found that, between 1997 and 2004, the recorded rate of domestic assault in NSW increased by about 40 percent in the Sydney area and more than 50 percent in the rest of NSW. Over one-third (36%) of all domestic assaults recorded by police are alcohol-related. Female victims are more likely to be abused by a current or former intimate partner and male victims are more likely to be abused by other family persons and other persons. Almost half of all victims under 15 are abused by a parent or guardian. The top three LGAs in Sydney in the number of domestic violence incidents per head of population in 2004 were Campbelltown, Blacktown and Sydney (BOCSAR, 2005).
In 2006 there were 9,478 apprehended domestic violence orders (ADVO) granted in Sydney (almost one-half of the total in NSW), a rate of 221 per 100,000 population. The highest number of ADVOs were in Fairfield-Liverpool (1032, or 287 per 100,000); Outer South Western Sydney (1023, or 420 per 100,000); and Gosford–Wyong (1006, or 327 per 100,000). By contrast, the lowest numbers were in Inner Western Sydney (240, only 139 per 100,000); Northern Beaches (287, or 120 per 100,000); Lower Northern Sydney (295, or 98 per 100,000); and Central Northern Sydney (358, or 84 per 100,000; ABS, 2008f).

Violence inside and outside the family is a major issue in NSW that affects women and children in particular. More than a quarter of all reports to the Department of Community Services (DoCS) Helpline concern children at risk of harm because of domestic violence. The Domestic Violence Line received more than 23,000 calls in 2006/07 that reported verbal issues (8,623), psychological issues (7,379), physical issues (6,060), social issues (3,092), economic issues (2,194), or sexual issues (1,233). These numbers are of a greater magnitude than recorded in previous years (see figure 28). These calls relate to over 5,800 households where more than 12,200 children were affected (NSW Department of Community Services, 2007).

Figure 28: Calls to DOCS Domestic Violence Line by issue reported

<table>
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<tr>
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<tr>
<td>Economic</td>
<td>2,194</td>
<td>1,822</td>
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</tbody>
</table>

Source: NSW Department of Community Services (2007).

### 10.3 Child abuse

Child abuse refers to physical assault, psychological and emotional abuse, sexual assault and failing to provide adequately for children and young peoples’ care and protection. Child abuse can have a profound effect on children and young people, affecting their physical, emotional and cognitive development both in the short and long term. Effects vary according to the type of abuse and can include: lower social competence; poor school performance; impeded language ability; depression, anxiety disorders and self-harm; injury and disability; and death. Child abuse and neglect has been found to be associated with low socio-economic status, parental involvement in crime, domestic violence, substance abuse and family disruption (New Commission for Children and Young People, 2008).

Several indicators demonstrate an increase in the number of incidents of child abuse. In 2007-08, there were over 300,000 child protection reports to The NSW Department of Community Services, compared with only 185,000 in 2003-04 (81 per 1000 children rate in 2007-08). Over 209,000 child protection reports were referred to CSC/JIRT (Joint Investigation Response Teams) for further
assessment (65.7 per 1000 children). In metropolitan NSW there were 1939 referrals accepted by JIRT in 2007-08 (60% of total in NSW). Domestic violence, alcohol and drug abuse are key risk factors identified in reports. Indigenous children are over-represented in these reports (five times more than non-Indigenous Australians) as well as children under the age of one. The gap between substantiation rates for Indigenous and other children was greatest for infants, and declined with age (Australian Institute of Health and Welfare, 2008; NSW Department of Community Services, 2007).

In 2006-07, there were 40,472 substantiation reports in NSW, of which the highest percentage was related mainly to emotional abuse (39.5%); followed by neglect (31.7%), physical abuse (18.5%) and sexual abuse (10.2%; ABS, 2009d).

In June 2008, The NSW Department of Community Services was supporting 14,667 children in out-of-home care: an increase of 15.4 percent since June 2007 and of approximately 40 percent since 2004. In 2006-07, there were 58,563 substantiated cases of child abuse and neglect in Australia – up by 45 percent over the past five years. The number of children removed from their family for their own protection has more than doubled in the past ten years from 14,078 in 1997 to 28,441 in 2007 (NSW Department of Community Services, 2008). In 2006-07, there were 8.1 children per 1,000 in out-of-home care: 51.1 percent were cared for by a relative or were in Aboriginal kinship care, and 37.3 percent were in foster care. Out of children in out-of-home care, 30.4 percent were Indigenous Australians. Over 1,000 children in this group had more than 5 placements (ABS, 2009d).

The number of children aged 0–17 years who were the subject of a child protection substantiation in a given year is 7 per 1,000 population, with higher rates (17 per 1000) among babies less than one year old. There are at least 181,000 children forced to live with family violence in Australia each year. Children aged between 0 - 5 years experience one of the highest homicide victimization rates of all age groups at 1.9 per 100,000. The majority of child homicides are committed by a family member (92%). Children and young people aged 19 years and younger, over time, have been significantly more likely to be a victim of sexual assault than adults aged 20 years and over (Australian Childhood Foundation, 2008; Australian Institute of Health and Welfare, 2008).

10.4 Youth Violence and Crime

Young people, especially young men, are at a greater risk than other age groups of experiencing violence. Twelve percent of people aged 18–24 years in NSW reported being physically assaulted by a man during the last 12 months, and 3 percent reported physical assault by a woman. The proportion of men aged 18–24 years (19%) who reported experiencing physical assault by a male was almost five times as high as the rate for men aged 25 years and over (4%). The majority (79%) of 18–24 year old men who were physically assaulted by another male said that the perpetrator had been drinking alcohol or taking drugs. Just over one-third (34%) also said that they themselves had been drinking or taking drugs (ABS, 2008f).

In 2005, 8,428 persons aged 17 and under were charged in Children’s Court, out of which 6021 (71.4%) had received penalties for proven offences. Twenty five individuals in this age bracket were charged with homicide and related offences (12 received penalties). The most common offense was theft (1901 persons charged); acts intended to cause injury (1216); and public order offences (908). The penalties for proven offences vary and include: bond or recognizance (32%), dismissed with caution (18%), probation (13%), fine (11%), control order (8%), community service order (6%) or other proven outcome (12%; ABS, 2008f).
Figure 29: Children’s court appearances finalised, by selected offences and penalties in NSW, 2005

There is a relationship between offending as a juvenile and adult criminal careers. More than two-thirds (68%) of juveniles reappeared at least once in a NSW criminal court within eight years of first appearing before Children’s Court. Non-Indigenous males who first appeared at court aged between 10 and 14 reappeared, on average, four times within the next eight years; Indigenous males reappeared 12 times; non-Indigenous females reappeared twice and Indigenous females reappeared six times (NCOSS, 2008).

10.5 Imprisonment

There is a well-established relationship between social disadvantage and rates of imprisonment. Most prisoners are unskilled and have poor levels of education (over 60% are illiterate in NSW). These facts, in addition to high levels of poor mental health, (see chapter on health) - may testify for the social exclusion of this group (Vinson, 2007).

Although the crime rate in NSW remains stable, the number of prisoners is growing and additional prisons are being built to accommodate them. NSW has the third highest imprisonment rate after the Northern Territory and Western Australia. The rate in NSW is 182 prisoners per 100,000 adult population (NCOSS, 2008).

In 2006, 135,574 persons were charged in local courts in NSW, 87.1 percent were found to be guilty but only 6.4 percent were sentenced to prison. In higher courts, some 3,468 persons were charged, 83.7 percent were found guilty, and two thirds (66.7%) were sentenced to prison, with average imprisonment period of 29.4 months (ABS, 2008f). The number of persons sentenced to imprisonment in NSW rose from 7,309 in 2005 to 7,531 in 2006. This represents 6.5 percent (in 2005), and 6.8 percent (in 2006), of all persons found guilty. Highest imprisonment rates were for break and enter (49.7%), motor vehicle theft (42.0%) and deal/traffic in illicit drugs (25.4%). The average duration of imprisonment for those offences was 8.9 months, 7.8 months and 7.3 months, respectively (NCOSS, 2008).
In 2006, there were 10,167 persons in corrective services custody in NSW (such as a prison, prison farm, Periodic Detention Centre or Community Custody Centre), most of whom (92.6%) were in full time custody (the remainder in periodic detention). This number is the higher than in recent years – for example, by comparison 8,484 individuals were incarcerated in 2000 (19.8% lower than in 2006). Most of the persons in NSW corrective services custody were males (92.6%) with a high percentage of Indigenous Australians (20.4%; ABS, 2008h). The rate of appearance in court on criminal charges is 13 times higher for Indigenous Australians than non-Indigenous Australians. Moreover, the rate of Indigenous imprisonment in NSW is ten times that of non-Indigenous Australians. The fastest growing group in NSW prisons is Indigenous Australian women followed by women in general (NCOSS, 2008).

Of the total inmates in NSW, 16.1 percent were of a non-English speaking background (this includes gazetted, correctional centres, transitional centres, police/court complexes and periodic detention centres). Of detainees in periodic detention in NSW, 14.1 percent were from non-English speaking backgrounds. 24.9% of the total number of offenders in Sydney Metropolitan Correctional Centres was from culturally and linguistically diverse backgrounds (totalling 958 inmates). The highest numbers of inmates from this group recorded Vietnam as their country of birth (19.0%), followed by Lebanon (10.0%) and China (7.7%; NSW Department of Corrective Services, 2008).

Corben (2008) showed that the highest percentages of inmates come from areas such as: Fairfield-Liverpool (8.1%), Inner Sydney (7.6%), Blacktown-Baulkham Hills (6.4%), Canterbury-Bankstown (5.2%). Higher proportions of female inmates are from inner Sydney (12.2%) and Fairfield-Liverpool (10.7%).

The number of persons in community-based corrections (including restricted movement, fine option, community service, parole, bail and sentenced probation) in NSW is on the decline: 17,783 in 2006 compared to 18,344 in 2000 and 18,066 in 2005. The percentage of males is lower in community-based correction than in the corrective services custody, with men representing only 84.6 percent of the total population in corrective service custody (ABS, 2008h).

Cost of custody services per inmate per day have increased from $154.47 in 2001-02 to $189.69 in 2005-06, and $195.76 in 2006-07 (the national average is $184.47). The cost of secure prisons is $201.70 per inmate per day. Cost of community based correctional services per day in 2006-07 was $10.37, a figure below the national average of $11.60 (NCOSS, 2008).

10.6 Reoffending

The recidivism rate within two years is 43.3 percent returning to prisons and 17 percent to community services (Department of Corrective Services, annual report, 2006/07). Of those offenders who were convicted in 2004, 29 percent of adult offenders and 50 percent of juvenile offenders reoffended within two years. Higher reoffending rates were found for young people aged 10–13 years (68%) and 14–17 years (49%) than for older age groups (35–44 years, 27% and 45 years and over, 16%). Reoffending was also higher for Indigenous youth (72%) and Indigenous adults (53%). Males tended to reoffend more than females (29.5% vs. 23.2% respectively). In 2008, 20.4 percent of the prisoners in NSW were Indigenous and 52.4 percent previously been imprisoned (ABS, 2008h).
10.7 Victims of crimes

In 2008, 4.2 percent of the NSW population was victim to a personal crime, compared to 5.0 percent in 2007 (0.7% robbery, 3.6% assault and 0.7% sexual assault in 2008). The highest increase was in sexual crimes, increasing from 0.2 percent in 2000 to 0.7 percent in 2008. There was a decline in the percentage of people who were victims of household crime from 9.4 percent in 2000 to 7.0 percent in 2008 (3.8% break and entry; 3.4% attempted break and entry, 0.7% motor vehicle theft; ABS, 2008d).

The likelihood of being a crime victim is higher amongst younger age groups and amongst males. In NSW 8.5 percent of males aged 15-24 were victims of crime, followed by males aged 24-34 (6.3%) and males aged 35-44 (6.1%) The likelihood of being victim to crime declines with age: for people aged 65 and over the likelihood is only 1.0 percent in NSW, compared with 6.6 percent of all 15-24 year olds (ABS, 2008d). Across all crimes, 52.8 percent of the cases the offenders were unknown to the victim, but in 10.3 percent of crimes the perpetrator was a family member or partner, and in 28.2 percent - by some other ‘known’ person. Nearly one third of crimes in NSW occurred in the street or other open area (30.1%), 19.7 percent occurred in the victim’s place of work or study, and 17.3 percent were committed in the victim’s home (ABS, 2008d). Figure 31 shows the crime victimisations rates (household and personal) in NSW in 2005, compared to other states and to two previous years (2002 and 1998). In NSW, crime victimisation rates are declining, but still remain slightly higher than the national rates.
Most people in Sydney felt safe (80.8% compared with 85.3% in NSW) with 4 percent feeling unsafe and 5.2 percent reporting never to be home alone. However, when asked specifically about feelings of safety after dark, 71.3 percent feel safe, and 8.2 percent feel unsafe (but only 4.5% never stay home alone). Individuals in older age brackets tend to report lower rates of feeling safe: in all of NSW, only 78.5 percent of persons aged 65 and over felt safe (68.6 after dark), compared to 85.7 of persons aged 35-44 (76.6 after dark; ABS, 2008f).

In 2008, an estimated 55 percent of persons in NSW did not think there were any crime or public nuisance problems in their neighbourhood, compared with 48.6 percent in 2000. Of those who did perceive problems in their neighbourhood, the most common problems reported were vandalism/ graffiti/damage to property (25.9%), dangerous or noisy driving (25.1%); housebreaking/burglaries/theft from homes (20.6% compared with 33% in 2000) louts or youth gangs (20.1%); and drunkenness (19.5% compared to only 13.5% in 2000; ABS, 2008d).

Collins and others (2002) also found there is widespread concern about crime, or fear of crime, amongst Sydney residents from a non-English speaking background. The study found that there are age and gender dimensions to crime perception amongst migrant groups. Adults are more fearful of crime than youth (63% of adults are ‘very concerned’ about crime, compared with 21% of youth); and women are more fearful than men (45.4% vs. 34.4%). The authors also found that many residents felt unsafe in transport nodes (including railway stations, bus stops and car parks) and using public transport (41.1% of youth felt safe using public transport all times of day, compared with only 14.4% of adults). In addition, 60.7% of respondents believe there to be a problem with youth gangs in their area, especially those from an Asian or Lebanese background (Collins et al., 2002).

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**10.8 Feeling of safety**

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**Source:** ABS, Crime and Safety, Australia, Apr 2005
11 Accessibility and Participation

Accessibility and participation are both important concepts in social inclusion. People may be considered socially excluded if they cannot access services or premises; participate in decision-making which impacts their lives; or be part of a community social life.

Accessibility is a general term used to describe the degree to which the functions and benefits of a product (e.g., device, service and environment) are accessible to as many people as possible. The focus of accessibility is often on the rights of access of people with disabilities, however the concept must be broadened to embrace other socially disadvantaged groups that may have difficulties to access services (employment, financial resources, housing), physical places (lack of transportation) or devices (internet connection).

In transportation, accessibility refers to the ease of reaching a destination. People who are in places that are highly accessible can reach many other activities (such as employment or leisure) or destinations quickly. Excessive time consumed by travelling and commuting is often at the expense of quality of life factors, particularly family life. Furthermore, housing affordability (see chapter 1) may be related to accessibility: often cheap housing is remote from employment places (which makes it more difficult to find a job or get to it); from educational institutes (good schools and universities) and health services. Thus, physical access may be related to other indicators of social exclusion.

Another dimension of accessibility is the ability to access information and services by minimising the barriers of distance and cost as well as the usability of the interface. In many countries this has led to initiatives, laws and regulations that aim toward providing universal access to the internet and to phone systems at reasonable cost to citizens. With internet accessibility, people may have more knowledge, skills and information to further access services and fully exercise their rights.

11.1 Disability and Accessibility

The Disability Discrimination Act 1992 (DDA) aims to promote the rights of people with disabilities in certain areas such as housing, education and provision of goods and services. The objects of this Act were: (a) to eliminate discrimination against persons on the ground of disability in the areas of work, accommodation, education, access to premises, and the provision of goods, facilities, services and land; and (b) to ensure that persons with disabilities have the same rights to equality before the law as the rest of the community; and (c) to promote recognition and acceptance within the community of the principle that persons with disabilities have the same fundamental rights as the rest of the community.

In NSW, an increasing number of people with disabilities are remaining in the care of their families, instead of seeking professional care. It is important that both those with disabilities and their families and carers are recognised and receive support (NSW Department of Ageing, Disability and Home Care, 2008).

11.1.1 Physical access

Physical accessibility refers to many different types of disability. Some of the groups that must be considered in ensuring accessibility include: the mobility disabled, people with vision or hearing impairment; persons with intellectual or psychiatric disability; or people with manipulatory disability (difficulty in holding objects; FaHCSIA, 2008c).
Although there has been progress in making premises physically accessible, the Physical Disability Council NSW (www.pdcnsw.org.au) asserted that physical accessibility in NSW has yet to be improved in several areas such as education, working places, health services, and transportation.

The lack of physical access in educational institutions is a significant barrier to students with physical disabilities, with some students forced to regularly travel significant distances to access suitable facilities. Only a small percentage of schools are physically accessible and the Department of Education and Training (DET) has no systematic plan for upgrading access in schools. Currently, students with physical disabilities do not have a right to attend regular classes in local schools. Moreover, there is often no access or extremely difficult physical access to the premises of private doctors and health services.

In addition, many places of work in Sydney are not physically accessible. The abolition of the Commonwealth Employment Service (CES) has resulted in many people with physical disabilities being unable to access structured employment assistance programs which previously provided funding for an employer to provide equipment or to modify the work place. People with disabilities must now convince employers to fund suitable equipment and modifications. These changes can entrench people with physical disabilities into an indefinite welfare cycle (Physical Disability Council of NSW, 2008).

Even public transportation, a vital resource for those with a disability, is not always accessible. The Physical Disability Council (2008) claimed the introduction of the accessible buses by the government is somewhat random and there does not appear to be a strategic plan to maximise their effectiveness. Often, there are not enough accessible buses on particular routes to ensure a regular patronage by those with a disability. The NSW Government’s Easy Access Program will result in many Sydney train stations becoming accessible. However not all stations are included in the program, with key stations such as Central and Wynyard remaining difficult for people with physical disability to access (Physical Disability Council NSW, 2008). The proportion of persons with a schooling or employment restriction (people who because of their disability cannot work or study) that used public transport fell from 54 percent in 1998 to 40 percent in 2003. By contrast, over the same period the proportion of this group with a current drivers licence was almost unchanged at around 77 percent (Department of Employment and Workplace Relations, 2008).

In December 2008, the Government tabled a draft of the ‘Disability Standards for Access to Premises’ reform. These Standards will help provide better access to new and upgraded public buildings for people with a disability by making clear requirements of what is necessary to avoid discrimination. Improved building access will give people with mobility, vision and hearing impairments greater opportunities to access employment and other services, helping them to better connect with family, friends and the local community (http://www.ag.gov.au/premisesstandards).

### 11.1.2 Economic well-being of people with disability

The relationship between disability and economic well-being is complex. Disadvantage may contribute to and precede disability through exposure to environmental risks, inadequate nutrition, or maternal risk factors. Alternatively, disadvantage may be the result of having a child with a disability, reflecting reduced opportunities to engage in paid employment and the greater costs of caring for a child with a disability (ABS, 2008f). Levels of income are substantially lower for people with disability than those of the general population. This is due to a wide range of discriminatory factors as well as a hostile physical and social infrastructure that prevents or inhibits people with physical disabilities from gaining suitable employment. As a result, many people with disabilities are forced
to accept below award wages working in sheltered workshops or are reliant on the Disability Support Pension (Physical Disability Council NSW). Additionally, people with disability or families with disabled children are forced to incur extra expenses such as additional health services, equipment or employing a personal carer. When physical accessibility is insufficient, expenses may rise, for example incurring the expense of a taxi when public transport is not accessible.

Australia has the lowest average personal income for people with disabilities among the OECD countries, at 44 percent of the income of those without a disability. Only 30 percent of people with disability had completed year 12 compared to 49 percent of those with no disability (NCOSS, 2008).

In 2003, people with some disability in NSW had higher rates of unemployment (12.6% vs. 4.9% for the general population) and higher proportion of part-time work for those with a job (45% vs. 28%). For people with a schooling or employment restriction, the unemployment rate of males (15.3%) was much higher than for females (8.9%). For both genders the participation rates of people with a schooling or employment restriction was around half of those with no disability – males (44% v 89%), females (36% vs. 71%). Of the people with a schooling or employment restriction who were employed, a relatively high proportion was ‘own account’ workers (14% compared to 9% for all persons aged 15-64; Department of Employment and Workplace Relations, 2008).

Figure 32: Labour force status of persons aged 15-64 by disability, Australia

In 2003, families with a child with a disability were more likely to be living in areas of greater socio-economic disadvantage (SEIFA). Almost one-fifth (18%) of families living in areas of greatest socioeconomic disadvantage (the first decile) had a child with a disability, compared with 13% of all families (ABS, 2008c).

The labour force participation rates of people with a psychological disability (mental disorder) are only 28.8 percent (in 2003, in Australia): the lowest of the major disability groups. Although employment is an important factor in addressing some of the problems people with mental disorder suffer from, there is a lack of flexible job opportunities for people with a mental illness (Cowling, 2005).
11.1.3 Social groups and disability

Children
In 2003, almost 320,000 children aged 0–14 years in NSW had a disability. Almost all (99.7%) of these children lived in family households, as opposed to care institutions. Around 4 percent of all children aged 0–14 years had a disability classified as profound or severe. These children needed assistance all or most of the time with self-care, communication or mobility. Children may have more than one type of disability. In 2003, the most common types of disability among children were intellectual disabilities (59% of children with a profound/severe disability) and sensory/speech disabilities (53%; ABS, 2008f).

Indigenous Australians
Indigenous Australians have elevated rates of the prevalence of disability (approximately 2.4 times the rate of other Australians). The percentage of Indigenous service users in NSW stands at 3.3 percent. In general, reported primary disability groups were similar for Indigenous and non-Indigenous service users. The most commonly reported primary disability groups for Indigenous service users were intellectual (39%) and physical (14%), followed by psychiatric (12%; ABS, 2008f).

11.2 Internet access

Internet access is not only a good indicator of social advantage but it may also be a factor in improving it. To have internet access usually indicates some financial resources as well as a level of computer literacy. However, it also allows individuals to access further information, knowledge, and networking. The differential ability to access and use IT exacerbates existing inequality, resulting in a ‘digital divide’ (Zappalà, Green, & Parker, 2000). Vinson (2007) found correlations between limited computer use and internet access in NSW to other indicators of social disadvantage such as early school leaving and an absence of post-school qualifications.

In 2006, one-half (50.8%) of households in Sydney had broadband Internet access and an additional 18.1 percent had dial-up and other Internet connections. Areas with high levels of broadband Internet access generally corresponded to those suburbs with high levels of high income households (95% of high income households had internet access) and people in the labour force with university qualifications. On the other hand, those areas with lower levels of broadband access corresponded to suburbs with high proportions of low income households and those not fluent in English (ABS, 2007d). Only 22.3 percent of people born overseas had internet access in Sydney in 2006, and only 20.4 percent of people who speak a language other than English at home, compared to 44 percent of Australia born (Department of Immigration and Citizenship, 2008).

Connection rates range from 45.5 percent in Wyong to 75.3 percent in Ku-ring-gai. The highest concentrations of dwellings with broadband access were found in the inner city and north of the Parramatta River, with smaller clusters also evident to the west of Penrith in the Sutherland region, and in parts of Camden and Campbelltown. Suburbs in the Ku-ring-gai and Hornsby areas had the highest proportions of dwellings with broadband access. The lowest concentrations of dwellings with broadband access were found in Western Sydney, such as in Fairfield. Households with children under 15 had higher rates of internet access than families with no children (82% vs. 57%; ABS, 2007d).

Usage has greatly increased across all areas in Sydney between 2001 and 2006. There has been strong growth in Camden, Wollondilly and to a certain extent Auburn (City Futures Research Centre, 2008).
11.3 Transportation

Transport is a fundamental aspect of an advanced economy and has considerable social, economic and environmental impacts. Effective transport systems contribute to economic prosperity as well as providing benefits to individuals through access to a greater range of employment, residential, holiday and entertainment opportunities. The 2005 Household Travel Survey showed that the private vehicle continued to be the most commonly used mode of transport for every weekday trip in the Sydney Greater Metropolitan Area. Amongst those who commuted to work, 69% used private vehicles. Figure 34 shows the usage of private vehicles vs. public transportation for different purposes. Public transport usage was highest amongst those people travelling for education/childcare purposes (ABS, 2008f).

Figure 34: Proportion of trips on an average weekday, Sydney, 2005

In 2008 there were over 3.5 million registered passenger vehicles in NSW, almost 80 percent of the total vehicle fleet (ABS, 2008e). In 2006 there were nearly 4.5 million registered motor vehicle license holders in NSW, an average of 1.6 motor vehicles per dwelling. Passenger vehicles travel an average of 14,000 kilometers per year.

The rate of road transport related deaths, injuries and accidents per 100,000 persons in NSW has been declining since the 1970s. Between 2000 and 2006 transport fatalities declined from 9.3 per 100,000 persons to 7.3 per 100,000 (–22%). Injury (–16%) and accident rates (–18%) have also declined. The contributing causes to accidents have also changed. Alcohol as a contributing cause to an accident has declined from 7.1 percent in 1990 to 4.2 percent in 2006 whilst speed as a contributing cause increased over the same period from 13.4 percent to 17.2 percent. Fatigue as a contributing cause has remained steady. Sydney had the lowest fatality rate of the regions at 4.5 per 100,000 persons (191 total deaths). The contributing causes of speed, alcohol and fatigue to accidents were lower in Sydney than the rest of the state (ABS, 2008f).

Figure 35: Reasons for travelling in Sydney:

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commuting</td>
<td>15.1%</td>
</tr>
<tr>
<td>Work-related business</td>
<td>8.9%</td>
</tr>
<tr>
<td>Total work-related purposes</td>
<td>24.0%</td>
</tr>
<tr>
<td>Shopping</td>
<td>15.8%</td>
</tr>
<tr>
<td>Social/recreation</td>
<td>22.9%</td>
</tr>
<tr>
<td>Serve passenger (h)</td>
<td>18.2%</td>
</tr>
<tr>
<td>Education or childcare</td>
<td>8.4%</td>
</tr>
<tr>
<td>Personal business</td>
<td>7.8%</td>
</tr>
<tr>
<td>Other</td>
<td>3.0%</td>
</tr>
<tr>
<td>Total non-work related purposes</td>
<td>76%</td>
</tr>
</tbody>
</table>


**11.3.1 Public transportation**

Public transport in Sydney mainly includes buses, trains and ferries. A vast majority of people in Sydney prefer private vehicles over public transport, and public transport is mainly used for travelling for education/childcare, commuting purposes or to get to Sydney CBD in peak hours (ABS, 2008f; Ministry of Transport NSW, 2007). In 2004, public transport accounted for 10.2 percent of all trips made by Sydney residents on an average weekday, down from 11.9 percent in 1991. In the morning peak, public transport share decreased from 17.3 in 1991 to 15.6 percent in 2004. Males tend to use private transport options a little more than females (71% vs. 69%). The use of public transport is highest among persons under 20 (23%), persons aged 21-30 (15%) and persons aged over 70 (13%). Persons with lower income tend to use private vehicles less than others (only 61%), but tend to compensate by using `other` means of transport (mainly walking – 27%) instead of increasing their rates of using public transport (only 12% compared to a general population usage rate of 11%; Ministry of Transport NSW, 2007).
In September 2008, the number of customers travelling by CityRail has risen by 5.7 percent compared to the same period in the previous year. In December 2008, 96.4 percent of trains were running on time, and 99.6 percent of peak services reached their destinations. However, the afternoon peak hours have worse performance than in the morning peak hours (CityRail, 2009). The performance of Sydney ferries were below annual targets, with 99.3 percent of scheduled services that actually ran, and 97.7 percent of services ran on time (Sydney Ferries, 2008).

Among those who use public transport in NSW, the main reasons for using it were: convenience, comfort or less stress (58.2%); parking concerns (24.4%); not owning a motor vehicle (21.7%); and cost (20.3%). Among those who do not use public transport, the main reasons for doing so were: no service available (28.9%); convenience, comfort or privacy in private vehicle (22.7%); no service available at right or convenient time (21.9%) and travel time too long (14.6%; ABS, 2008f).

The Western Sydney Community Forum (2008) provides an example of car use in Sydney, by asserting that Western Sydney has one of the highest dependence on cars as the means of transport to work. However, each person living in Western Sydney takes 3.6 trips per day in public transportation, most of which (75%) are not work-related.

11.3.2 Travelling to work

In 2006, over one-fifth of all employed people living in Sydney (21.7%) used public transport to travel to work (either in conjunction with other transport or as the only mode of travel), slightly lower than in 2001 (22.7%). In 2006, Sydney had the highest proportion of people who used public transport to travel to work of all Australian capital cities. People travelling by train as their only mode of transport comprised 44.7 percent of all people using public transport to travel to work (ABS, 2007d).

Inner city suburbs, with ready access to various forms of public transport, also recorded high levels of public transport use. Suburbs such as Wolli Creek, Newtown and Enmore recorded more than 40 percent of employed usual residents using public transport to travel to work. Similar levels were also recorded in the nearby suburbs of Ashfield, Summer Hill and Burwood in the inner west; St Leonards, Milsons Point and Kirribilli on the North Shore; and Edgecliff and Bondi Junction in the east. Further from the city, there were concentrations in Hornsby, Parramatta and selected suburbs in the Campbelltown region (ABS, 2007d).

Figure 36: Mode of travel to work in Sydney, 2006

![Figure 36: Mode of travel to work in Sydney, 2006](source: ABS, 2008e)
11.4 Participation

11.4.1 Political participation

Participation refers to public engagement with political, economic, managerial and social decision-making. Ideally, every citizen should make a proportional input into decisions that affect them. Another important facet of civic participation is the contribution of an individual to their community through volunteering and involvement in community groups. Levels of participation can be measured by rates of voting, participation in political groups, and in decision making processes.

In 2006, 18.3 percent of people in NSW participated in civic and political groups. The highest participation was among people aged 55-64 years (26.8%), followed by the 45-54 year old age bracket (22.9%); 25-34 (20.4%) and 35-44 (17%). The age brackets with the lowest rates of political participation were 65 years and older (10.8%) and 24 and younger (11%). Males tended to participate in political groups more than females (20.7% vs. 16%). Low rates of participation were found among low income persons (12.1%) and people with no proficient English (only 7.5%). Of those who participated in civic activities, signing a petition was the most common type of participation (23.6%), followed by boycotting or buying products for political, ethical or environmental reasons (22.1%); contacting a local councillor/territory government member (12.5%); attending a community consultation/public meeting (7.6%); contacting a member of parliament (5.8%); and attending a protest march/meeting/rally (5.2%; ABS, 2008f).

Only 29 percent of people in NSW felt that they were able to have a say in the community on important issues all or most of the time. Surprisingly, the numbers were higher among people who are 65 years and over (33.1%). However, the numbers were lower among low-income (24.9%) and people with no proficient English (only 15.4%; ABS, 2008f).

Voter turnout is the percentage of eligible voters who cast a ballot in an election. After increasing for many decades, there has been a trend of decreasing voter turnout in most established democracies since the 1960s. Voting turnout in Australia is relatively high, likely due to the fact that voting is compulsory. The voting turnout in the federal elections in 2007 was 95.4 percent in NSW, a figure slightly higher than the national rate (95.17%). However, in Sydney the voting turnover was lower: only 90.8 percent voted for House of Representatives and 91.5 percent voted to the Senate. This was the lowest rate among all capital cities in Australia (Australian Electoral Commission, 2008).

11.4.2 Social Participation

High levels of social participation and social connectedness are believed to contribute to the overall well-being of individuals and their communities. Social opportunities occur in paid and unpaid work, friendships and participation in culture and leisure activities. The Universal Declaration of Human Rights recognised that some level of social and cultural participation is a fundamental human right and need. Social participation is believed to have positive impacts on the health of individuals and on the strength of communities (ABS, 2008c).

In 2006, most people in NSW (71%) lived in households as members of a family unit, and 87.6 percent lived with at least one other person. However, the percentage of people who lived with another person dropped among those with low income (to 72.1%) and among those aged 65 years old and over (72.9%). Only 78.9 percent of people in NSW had face to face contact with family or friends living outside the household (74.8% among those with low income), but females had more
social contact than males (82.3% vs. 75.4%). Although most people in NSW (92.8%) were able to get support in time of crisis from persons living outside their household, the numbers were much lower among migrant households (71.3%). Most people said that their source of support is a family member (78.4%), followed by friend (67.8%), neighbour (35.0%), work colleague (20.4%) or community, charity or religious organisation (13.6%; ABS, 2008c).

In 2006, 62.8 percent of people in NSW had actively participated in social groups and 33.3 percent participated in community support groups. Most people (92.3%) visited or were visited by friends, but only 75.4 percent went out with or met a group of friends. More than one-fifth (21.8%) of the population in NSW had social life in the internet. In the same year, 87 percent attended at least one cultural and leisure event, such as cinema (66%), library (43.1%) or zoo (43.1%). Only 13 percent attended a classical music concert and 15.9 percent attended a dance performance (ABS, 2008c).

11.4.3 Social exclusion of migrants

In their 2001 project, Dunn and Forrest reported that in response to the question ‘Which cultural or ethnic groups do you believe do not fit into Australian society?’ 27.3 percent of respondents in Sydney referred to immigrants from the Middle East and 22.5 percent to Muslims; the next most frequent specific references were to South-East Asians (6.6%) and to the generic category of foreigners or ethnics (6.5%; Dunn & Forrest, 2001 as cited in Markus & Dharmalingam, 2008).

In the same study, almost one-half of respondents (42%) considered the current Australian intake of migrants to be ‘about right’, a further 13% considered it to be too low; but more than one third (35%) considered the intake to be too high. Most respondents (62%) oppose government assistance to ethnic minorities to maintain their customs and traditions, and it is seen as of benefit to select minorities, not as of national benefit (Markus & Dharmalingam, 2008).

Slightly more than one in four respondents (25.6%) reported experience of discrimination over the course of their lives because of their national or ethnic background; a much lower proportion (7.7%) reported discrimination on the basis of their religion. Almost one in 10 Australians (8.6%) reported discrimination on grounds of national or ethnic background or religion over the last 12 months; 5.8 percent of respondents reported experience of discrimination on an ongoing basis (at least once per month). Of respondents of Middle Eastern background, 27.5 percent reported experience of discrimination on the basis of religion, compared to only 2.3 percent among those whose first language is Mandarin, Cantonese or Vietnamese and 15 percent of those of a non-English speaking background (Markus & Dharmalingam, 2008).
In response to the question of whether immigration from different countries had made Australia stronger, only 21.6 percent Australia-born, 23.3 percent of English-speaking countries and 34.7% non-English speaking countries were strongly in agreement. Forrest and Dunn (2007) found evidence of a distinctive geography of racial intolerance in Sydney, which transcends relationships based on ethnic composition. Sydney’s northern and eastern suburbs (areas with relatively low cultural diversity) are accepting of cultural diversity at the national level whilst at the same time reject the national presence of racism. By contrast, the south-western suburbs of Sydney and outer ‘commuter belt’ areas is the least tolerant part of Sydney, showing strong opposition to diversity and multiculturalism, high levels of acknowledged personal racism and themes of cultural privilege.

11.4.4 Civic participation (volunteering)

Civic participation can be undertaken formally (volunteering for a formal organisation) or informally (helping neighbours). People can give their time, money or other resources (such as their reputation, experience, talent or blood). Research shows that people with higher human capital (education and income) and social capital (networks) usually volunteer more than others and therefore volunteering can also be an indicator of social advantage (Wilson & Musick, 1998).

Volunteering has been found to be related to engagement with the paid labour force, with different patterns for men and women. In Australia in 2006, men who were employed were more likely than those who were unemployed to be regular volunteers, with 19 percent of both full-time and part-time employed men volunteering at least once a fortnight. For women, those employed part-time had the highest rates of regular volunteering (29%), followed by those who were unemployed (25%). Women employed full-time were equally as likely as men who were employed full-time to be regular volunteers (ABS, 2008c).

In 2006, 16.2 percent of the adult residents of Sydney (age 15 and over) undertook some unpaid voluntary work, through an organisation or group, in the previous twelve months, the lowest proportion of all Australian capital cities (national rate 35%, NSW rate 33%). Of all people undertaking voluntary work, 35–44 year olds had the highest participation of all age groups (21.9%), while those aged 65 years and over had the lowest (13.2%). Overall, more women (57.1%) were volunteers than men (42.9%; ABS, 2007d).
The northern suburbs had the greatest concentration of people who volunteered. Suburbs such as Riverview, Longueville, Cheltenham and Scotland Island, had one in three residents volunteering. The Blue Mountains area also contained high proportions of volunteers, as did the inner eastern suburbs. The western and south-western suburbs recorded low proportions, particularly around the Fairfield-Liverpool area (ABS, 2007d).

In 2006, people who described their own health as excellent or very good were more likely to be regular volunteers (23%) than people who described themselves as having fair or poor health (14%). Among selected groups, people with a child aged less than 15 years were the most likely to volunteer regularly (29% of people in couple relationships and 27% of lone parents). People who were born in Australia were more likely to volunteer than migrants (36% vs. 29%). Migrants who were born in English-speaking countries were more likely to be volunteers than were people born in other countries (34% vs. 26%; ABS, 2008c). The rate of volunteering is lowest among the first generation of Middle Eastern background, at 12.4 percent (Markus & Dharmalingam, 2008). However, it should be noted that previous research showed that migrants tend to volunteer more in informal manners – directly with the community and its members, and not so much through organisations.
12 Discussion

12.1 General summary

The current reports demonstrate social disadvantage in Greater Sydney. Although Sydney is often characterised by a high quality of life, this prosperity is not shared by all. This report shows that there are individual and community problems in a number of key areas: housing, income, health, education, crime and accessibility.

Affordability remains the main problem for housing in Sydney. Because Sydney is characterised by separate houses rather than other more condensed patterns of living, vacancy rates are low, contributing to high prices and low house affordability. This housing market ‘failure’ contributes to further problems as people with low income are forced to live in more disadvantaged suburbs, where unemployment and crime rates are high, and accessibility to many services are low. The high price of housing (both to purchase and to rent) forces many to pay more than a third of their income towards housing, and give up other life necessities. Others may be forced to live in the street or in shelters (homelessness) or in caravan parks. Housing problems are more common among Indigenous Australians, migrants, lone parents (especially women) and older Australians.

Sydney has a high income polarization: seven of the ten highest income areas in Australia were found in Sydney, but so were some of the poorest. Unemployment was generally low (before the recent economic crisis) but in some areas and for some social groups (Indigenous Australians, youth and migrants) it was quite high. Many Sydney residents, particularly in the western and southern-western areas, reported a high rate of relative deprivation.

Although the health level of Sydney residents is very good, and life expectancy is very high, some groups, especially Indigenous Australians and older Australians, suffer from levels of health dramatically below those of the general population. There are a high number of people with disabilities and with mental disorders. The main problem regarding health is risk taking, especially by youth: where smoking, drinking, using drugs and driving recklessly all result in a high number of avoidable deaths.

The level of education in Sydney is not particularly high. Many children under 5 do not attend any formal childcare. The retention levels in high school and the results of literacy tests (including adult literacy) can yet be improved. Many people in Sydney do not have 12 years of education. The number of people with higher education is not as high as in other Western countries, particularly among some groups, such as Indigenous Australians and migrants.

The level of crime in Sydney is generally declining and feeling of safety is high, but not in some geographical areas and not for some crimes (such as rape). Domestic violence and child abuse are rising at alarming levels. The rates of youth crime and youth violence are very high. Prisoners in Sydney usually suffer from social disadvantage: low income, poor neighborhoods and mental disorder are some key issues. The correlation between an individual’s economical circumstances and educational background and their likelihood to commit crime is strong.

Sydney is not very accessible in many aspects: both physically (many places and services are not fully accessible) and socially. People with a disability suffer from the highest rate of unemployment and lowest rates of income. Using internet access as an indicator of accessibility, many dwellings in Sydney
have a broadband connection, but usage rates in some areas and for some groups are still very low. Public transportation is very important in social inclusion and in creating social and work opportunities, but only small proportions of Sydneysiders use it, mainly to get to education/childcare and commute to work. Political participation and volunteering are relatively low in Sydney, particularly for migrants.

To sum up, there are some social problems for individuals, households and communities in Sydney in all the six studies key-areas. However, specific suburbs and social groups suffer much more than others. In the next section we will summarise the above problems according to geographical areas and social groups.

12.2 Geographical areas

Dealing with social exclusion is a complex and difficult policy area. Complex problems require complex policy approaches, however there are few precedents of integrated policy intervention in Australia (Randolph, 2008). Given the concentration of disadvantage in particular neighbourhoods, place-based approaches to improving outcomes for those experiencing disadvantage have been implemented in a number of countries, including the US, UK, many European countries and Australia (Australian Government, Social Inclusion, 2008). Vinson (2004) asserted that opportunities in life are shaped not only by an individual and their family, but disadvantage is also related to a ‘neighbourhood effect’. According to Vinson, neighbourhood affects life chances during early childhood and late adolescence. Social networks, which are sometimes linked to neighbourhoods but often transcend them, are critical.

Sydney’s ‘wealth belt’ includes the city and suburbs bordering the harbour on the south and north. Disadvantage and social exclusion tend to be concentrated in the south-west and greater western areas. Vinson (2007) demonstrates that 1.7% of the postcode areas in NSW accounted for 12.5% of the most disadvantaged: a more than sevenfold over-representation. There were 36 NSW localities that appeared six or more times in the 40 most disadvantaged lists in different indicators such as early school leaving, low family income, limited internet access, crime and imprisonment. In Sydney the most disadvantaged areas were Sydney South, The Rocks, Dawes Point, Haymarket, Millers Point and Claymore.

In a previous study undertaken in 2004, Vinson found that 5.9 percent of postcodes in NSW accounted for 25 percent of the incidence rates related to different social indicators. In three instances: imprisonment, child abuse and long-term unemployment, it required only 4 percent of postcodes to cover a quarter of the cases. Among these were Cabramatta, Liverpool, Wyong, Campbelltown, and Fairfield. Other concentration of disadvantage areas included Claymore and Waterloo.

As the current report was being written, the Social Inclusion Unit in the Department of the Prime Minister and Cabinet and the Australian Social Inclusion Board are developing an approach for identifying locations of concentrated socio-economic disadvantage. Unlike most approaches that generate an average area level score, the approach uses data for the smallest geographic unit available and aggregates counts of people meeting a particular threshold value up to a larger geographic unit. As an example of this approach, the table below lists suburbs or clusters of adjacent suburbs in the Sydney Metropolitan area where there are at least 3000 people who live in one of the most disadvantaged 5% of collections districts nationally, based on the 2006 ABS SEIFA index of relative disadvantage. Suburbs in bold are those where the 3000 person cut-off used in this example is covered by a single suburb, others require consideration of one or more adjoining suburbs to meet the cut-off value. The cut-off values used in this example could be tailored to meet specific purposes.

The following section summarises the concentration of the social problems according to the six indicators which were used in this report, according to geographical areas:
Table 1: Concentration of social problems in Sydney

<table>
<thead>
<tr>
<th>Suburb</th>
<th>Total Suburb (SSC) population, 2006</th>
<th>Suburb population that lived in one of the most disadvantaged 5% of Collection Districts based on the 2006 ABS SEIFA index of relative disadvantage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canley Vale</td>
<td>8983</td>
<td>7325</td>
</tr>
<tr>
<td>Carramar</td>
<td>2960</td>
<td>1512</td>
</tr>
<tr>
<td>Airids</td>
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The following section summarises the concentration of social problems in Sydney according to the six indicators which were used in this report, according to geographical areas:

**Housing:** The greatest increases in the amount of properties being constructed were seen in the City of Sydney, Baulkham Hills, Blacktown and Camden. Affordability has worsened in many areas of the city. Housing affordability has deteriorated significantly in the West and South West: Fairfield, Penrith and Campbelltown. The highest percentage of affordable housing was found in Outer South Western Sydney (38%), followed by Outer Western Sydney (34%) and Blacktown (29%). However in Northern Sydney and in the Eastern Suburbs, there were hardly any affordable dwellings. Areas of greatest rental stress are in Fairfield, Bankstown and Rockdale, the Inner City and some of the upper parts of Northern Sydney. High home loan repayments (30% or more of income) dramatically increased in Fairfield, Auburn, Wyong, Canterbury and Bankstown. High public housing concentrations are in Mt. Druitt and around Blacktown in the west, Green Valley in Liverpool and Villawood on the Fairfield-Bankstown border, pockets around the city and eastern suburbs and the five large estates in Campbelltown.

**Income:** Geographical distribution of low income households in Sydney resembles that of unemployed people and one-parent families with dependent children and, to some extent, people aged 75 years and over. Suburbs with high concentrations of low income households were in the west and outer west, in a band between the Georges and Parramatta Rivers extending, south-west to Campbelltown and Airds, and west to Penrith; Daceyville in the Eastern suburbs; Villawood and Miller in the west; and Claymore in the outer south-west. High rates of unemployment were found in many outer suburbs: Auburn (7.8%), Blacktown (7.9%), Fairfield (7.2%), Campbelltown (6.3%), Wyong (7.6%), Canturbury-Bankstown (5.9%), Fairfield-Liverpool (6.1%) and Outer North Western Sydney (6.3%).
Education: Suburbs with over 85 percent of students attending government schools included Kurnell, Airds, Claymore, the Blacktown area, Cowan, and the Fairfield-Liverpool region. High proportions of persons with higher education were found in the north and in city centre, whilst there were a higher proportion of those with Certificate III qualifications in the south, west and south-west suburbs.

Crime and safety: The highest numbers of apprehended domestic violence orders were in Fairfield-Liverpool, Outer South Western Sydney, and Gosford–Wyong.

Accessibility: The lowest concentrations of dwellings with broadband access were found in Western Sydney, such as in Fairfield. Suburbs such as Wolli Creek, Newtown and Enmore recorded more than 40 percent of employees using public transport to travel to work. Similar levels were also recorded in the nearby suburbs of Ashfield, Summer Hill and Burwood in the inner west; St Leonards, Milsons Point and Kirribilli on the North Shore; and Edgecliff and Bondi Junction in the east. Further from the city, there were concentrations in Hornsby, Parramatta and selected suburbs in the Campbelltown region. The western and south-western suburbs recorded the lowest proportions of volunteering, particularly around the Fairfield-Liverpool area.

Table 1 shows the geographical areas with the highest concentration of Indigenous Australians, migrant, one parent families and children under four. Table 2 summarises some of the main findings of the report, by showing which geographical areas have the highest rates of social disadvantage indicators. This table demonstrates that some areas are characterised by a number of social problems, signifying a concentration of social disadvantage. Due to the challenge of consistency between different resources, the table includes both suburbs and LGAs. We have included the LGAs each suburb belongs to for the purposes of comparison.

Table 1: Geographical areas with the highest rates of specific social groups

<table>
<thead>
<tr>
<th>Area</th>
<th>Indigenous Australians</th>
<th>Migrants</th>
<th>One parent families</th>
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Table 2: Geographical areas with the highest rates of specific social problems

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<th>House loan stress</th>
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<th>Government schools</th>
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12.3 Social groups

In this section we summarise the main findings of the report according to five social groups: Indigenous Australians, migrants, people with disability and health problems, children and youth, and women. The findings are presented after a short background on each social group.

12.3.1 Indigenous Australians

Indigenous Australians are the most disadvantaged group in Australia, as measured by a range of socioeconomic indicators including education, employment, income, housing and contact with the justice system. The increased burden of disease carried by the Aboriginal population cannot however be fully explained by socioeconomic disadvantage alone or even in combination with other health risk factors, such as smoking, risk drinking, and poor housing. A range of socioeconomic indicators demonstrate the relative disadvantage of the Indigenous Australians in NSW. In 2006, one percent of the total population in Sydney were Indigenous Australians. Suburbs recording the highest proportions of Indigenous Australians can be found in the introduction.

Children: The median age of Indigenous Australians was 22 years (compared to 35 for the total Sydney population), with 11.8 percent under five and only 1.2 percent aged 75 years and over. Indigenous children were more likely than their non-Indigenous counterparts to live in lone parent families or with relatives other than their biological parents; are also more likely to live in households with low incomes, and in those in which the adults were less likely to be employed. Thirty percent of children in out-of-home care were Indigenous Australians. The rate of infant mortality and of low birth weight rate was considerably higher amongst Indigenous Australian babies than for the total NSW population. The teenage fertility rate of Indigenous women was more than four times the teenage fertility rate of all women.
**Housing**: Home ownership rates among Indigenous households are less than half those of non-Indigenous households. The homelessness rate is higher among Indigenous Australians (110 homeless people per 10,000, compared to 40 among non-indigenous) and 17.6 percent of SAAP clients in NSW were Aboriginal people. Indigenous Australians were also more likely to rent a dwelling, to be a multi-family household or have seven or more usual residents.

**Income**: Indigenous Australians have higher rates of unemployment and are more likely to be part of low income households.

**Health**: Indigenous Australians reported their health to be worse than the rest of the population. Indigenous Australians have significantly lower life expectancy, higher rates of long term and chronic health conditions and higher rates of risk behaviour. They are much more likely to have a disability or long-term health condition. More than three-quarters of Aboriginal deaths in NSW are potentially avoidable.

**Education**: Indigenous Australians have lower results in numeracy and literacy tests, a higher proportion of students not meeting the NSW benchmarks, and the lowest school retention rate that was far lower than the state average. The indigenous population also had higher proportions of persons with no post-school qualifications.

**Crime and Safety**: The rate of appearance in court on criminal charges is 13 times higher for Indigenous Australians than non-Indigenous Australians, and the rate of Indigenous imprisonment in NSW is ten times that of non-Indigenous Australians. Reoffending was also higher for Indigenous youth and Indigenous adults. There are higher rates of child abuse and domestic violence among Indigenous Australians.

**Accessibility & Participation**: Indigenous Australian household have lower levels of internet access.

**12.3.2 Migrants**

Sydney had the highest proportion of overseas-born residents for all Australian cities. Although social diversity contributes to and enriches Australian society, migrants, particularly non-English speakers, often face difficulties such as language barriers, economical and social difficulties, and even cultural differences and discrimination.

High concentrations of recent arrivals include Parramatta and in areas surrounding tertiary institutions. Other areas with high concentration of migrants were in Liverpool to Canterbury; Homebush West, Cabramatta, Fairfield and Campsie. The inner city area, particularly the CBD, Haymarket and Ultimo, also had very high proportions of people born overseas.

**Income**: economic deprivation was more prevalent among migrants than for other citizens. In times of crisis, many migrants could not get support from persons living outside their household, which highlights both economic and social problems. Unemployment was higher among migrants, and the highest rates of unemployment were found among migrants from Iraq, Lebanon, Turkey, and China. Compared to those born in Australia, migrants had higher percentage of the population not in the workforce.

**Education**: The majority of migrant children (91%) were attending government schools. Migrants, especially from non-English speaking countries, had much lower rates of participation in both formal and informal adult education.
Crime and Safety: Fear of crime is widespread amongst migrant groups, especially amongst older people and women. This includes concern about safety using public transport and transport hubs, as well as perceptions of youth gangs.

Accessibility & Participation: People who were born in Australia were more likely than migrants to volunteer especially in comparison to migrants from a non-English speaking background. Migrants from the Middle-East showed very low rates of volunteerism. Migrants reported lower social participation for both adults and children (for example in culture and leisure activities).

12.3.3 Children and youth

In 2006, 19 percent of the population in Sydney was under 14 and 26 percent were under 19. Children are often at risk of social exclusion, and the impact of social disadvantage on children can be long-term. Socially excluded families tend to have more children and therefore the number of social excluded children should also be taken into consideration. The following indicators demonstrate the social problems of children in Sydney.

Family status: A high percentage of children had a natural parent living elsewhere and/or were members of divorcing families, and 0.8 percent of children were in out-of-home care.

Income: One tenth of children in Sydney were living in poverty and 14.2 percent were living in jobless families.

Health: In general, mortality rates, child mortality rates and incidences of low birthweight are relatively low in Australia and Sydney. Despite this general trend, some groups have values for these indicators at elevated levels, including Indigenous Australians and teenage mothers. Mortality rates are higher among children under one and among teenagers. Around 4 percent of all children aged 0–14 years had a profound/severe disability. Health risks for boys tend to be higher than for girls. Adolescents (especially males) in Sydney tend to take risks such as drinking, smoking, drug abuse, dangerous driving and suicide.

Education: Just over one-half of children under 5 in NSW attended school, preschool or formal care. There were 521,785 children over the age of 5 attending school. Of the one-quarter who had a language background other than English, 60 percent were in government schools. The apparent retention rates from year 7 to year 12 in NSW in 2007 were 69.7 percent, lower than in the previous three years and lower than the national rate.

Crime and safety: There was an alarming increase in the number of children who were victim to direct child abuse (physical, emotional or sexual) and indirect domestic violence. Children under one were the age group with the highest risk of being abused. There was a 40 percent increase in the number of children in out-of-home care. Adolescents, in particular males, were highly involved in violence and crime, both as victims and as offenders.

12.3.4 People with disability and health problems

Approximately 20 percent of Sydney residents have some disability, but 4 percent have a profound or severe disability. Older people tend to have higher rates of disability. Among children age 19 or less, 8 percent have some physical disability and 4 percent have a profound core activity limitation. Almost 17 percent of women, and 18 percent of men, report a mental illness.
**Housing:** Seventeen percent of people with disabilities reside in public housing. People with a psychiatric disability are at particularly high risk of experiencing housing problems and form a significant proportion of the homeless population. An increasing number of people with disabilities are remaining in the care of their families, instead of seeking professional care.

**Education:** 4.3 percent of school students had a disability, most of them in government schools. The lack of physical access in educational institutions is a significant barrier to students with physical disabilities. Only a small percentage of schools are physically accessible, and thus students with physical disabilities do not have a right to attend regular classes in local schools. Only 30 percent of people with disability had completed year 12 compared to 49 percent of those with no disability.

**Income:** People with disabilities have the lowest average personal income and the highest rate of unemployment. High unemployment is also found among people with a mental disorder. Public transportation and work places are not always accessible. Families with a child with a disability were more likely to be living in areas of greater socioeconomic disadvantage.

**Crime and Safety:** A very high percentage of prisoners are affected by mental disorders.

**12.3.5 Older Australians**

The number of older people (age 65 years and more) is increasing in Sydney, as is their relative proportion of the overall Sydney population.

**Housing:** Many older Australians live in private dwellings. High rates of older Sydneysiders belong to a lone-person household.

**Income:** The poverty rate is higher among older people in Sydney, reflecting their worsening economic situation over the last few years. Average weekly earnings tend to be much lower than the overall average income, and many older people are reliant on government pensions. Additionally, older people can find it more difficult to find a job due to age-based selection, their own disability or their own duties as carers.

**Health:** Reported levels of health declined with age, and older people report more health problems, higher rates of disability and greater needs for assistance.

**Crime and safety:** Despite the likelihood of being victim to crime declining with age, older people in Sydney tend to have heightened perceptions of insecurity.

**Accessibility & Participation:** In comparison with other age groups, older people in Sydney participated least in civic and political groups. They also demonstrated the lowest rates of volunteering. Despite these, they report a greater sense of feeling that they were able to have a say in community on important issues.

**12.3.6 Women**

Females comprise 50.7 percent of the Sydney population. Most lone parents were women.

**Income:** Women have lower income than men. The female unemployment rate was higher than for men, but there has been an increase in work participation for women in recent years. Despite this, most women work part time. Women had more barriers to work than men, because they reported additional duties in caring for children or the elderly and having less training and experience.
Health: In general, women’s health is better than men’s. Women tend to be healthier, live longer and are less likely to engage in behavior that affects their health. Despite this, women are less physically active than men, have higher rates of mental disorder, and more women require physical assistance than men. The greatest causes of death among women are cardiovascular diseases and cancer. The fertility rate has declined significantly over the years; however it remains very high among Indigenous women.

Education: More females remained in school than males, but the situation was reversed among Indigenous students. There are more females than males completing higher education. Women are also underrepresented in trade apprenticeships.

Housing: There are only 150 crisis accommodation beds for single women in the Greater Sydney area.

Crime and Safety: There is an increase in the number of domestic violence reports, of which women were the main victims. The perpetrators of these crimes were usually their partner. Although there is a decline in many types of crime, rape is on the rise. Although women are much less involved in violence and crime as offenders, the fastest growing group in prisons is women, particularly Indigenous Australian females.
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14 Abbreviations

ABS        Australian Bureau of Statistics
ACT        Australian Capital Territory
AIHW       Australian Institute of Health and Welfare
CSE        Child Social Exclusion
GDI        General Deprivation Index
GDP        Gross Domestic Product
HILDA      Household Income and Labour Dynamics in Australia
LGA        Local Government Area
NSW        New South Wales
NT         Northern Territory
QLD        Queensland
SA         South Australia
SEIFA      Socio-Economic Indexes for Areas
SAAP       Supported Accommodation Assistance Program
SD         statistical division
SLA        Statistical Local Area
UK         United Kingdom
USA        United States of America
Vic.       Victoria
WA         Western Australia
WHO        World Health Organisation
ADVO       Apprehended Domestic Violence Orders
AVO        Apprehended Violence Orders
15 Glossary

Age-specific fertility rate
The number of live births (occurred or registered) during the calendar year, according to the age of mother, per 1,000 of the female resident population of the same age at 30 June. For calculating these rates, births to mothers under 15 years are included in the 15–19 years age group, and births to mothers aged 50 years and over are included in the 45–49 years age group. Pro rata adjustment is made for births for which the age of mother is not given.

Anxiety disorders
Feelings of tension, distress or nervousness. Includes Agoraphobia, Social phobia, Panic disorder, Generalised anxiety disorder (GAD), Obsessive-compulsive disorder (OCD), and Post-traumatic stress disorder (PTSD).

Apparent retention rate
This is the number of school students in a designated level/year of education expressed as a percentage of their respective cohort group (which is either at the commencement of their secondary schooling or Year 10). In this publication, apparent retention rates are generally calculated for full-time school students who continued to Year 12 of secondary schooling.

Apprehended Violence Order (AVO)
Apprehended Violence Orders (AVOs) are orders that a court makes to protect people. AVOs protect people by ordering a number of things that the defendant must not do. Depending on the relationship between the applicant and defendant, AVOs can relate to either domestic violence or non-domestic related (personal) violence.

Average weekly earnings
Average weekly earnings statistics represent average gross (before tax) earnings of employees and do not relate to average award rates nor to the earnings of the ‘average person’. Estimates of average weekly earnings are derived by dividing estimates of weekly total earnings by estimates of number of employees.

Break and enter/ attempted break and enter
An incident where a person’s home, garage or shed had been broken into, or where an attempt was made to break into a person’s home, garage or shed. Break and enter offences relating to a car or garden are excluded.

Broadband
An ‘always on’ Internet connection with an access speed equal to or greater than 256 Kilobits per second.

Child protection report
A child protection report is initiated when a person makes contact with the Department of Community Services about a concern for a child’s or young person’s welfare or safety.

Closed treatment episode
A period of contact with defined start and finish dates between a client and a treatment agency.

Community Service Order
The offender is ordered to perform a specified number of hours of unpaid community service work.

Community-based corrections
This refers to the community-based management of court-ordered sanctions, post-prison administrative arrangements and fine conversions, which principally involve the provision of one or more of the following activities: supervision, programs or community work.

Consumer Price Index
The Consumer Price Index (CPI) measures quarterly changes in the price of a ‘basket’ of goods and services which account for a high
proportion of expenditure by the CPI population group (i.e. metropolitan households). This ‘basket’ covers a wide range of goods and services.

**Core activity limitation**
A person’s overall level of core activity limitation is determined by their highest level of limitation in any of the core activities (communication, mobility or self care). There are four levels:

1. **profound**: the person is unable to do, or always needs help with, a core-activity task
2. **severe**: the person sometimes needs help with a core-activity task; or has difficulty understanding or being understood by family or friends; or can communicate more easily using non-spoken forms of communication
3. **moderate**: the person needs no help but has difficulty with a core activity task
4. **mild**: the person needs no help and has no difficulty with any of the core activity tasks, but uses aids and equipment; or cannot easily walk 200 metres or up and down stairs without a handrail or easily bend to pick up an object from the floor or has difficulty using public transport.

**Corrective services custody**
Confinement in a place intended primarily for the purpose of confining prisoners, such as a prison, prison farm, Periodic Detention Centre or Community Custody Centre.

**Crude divorce rate**
The number of decrees absolute granted during the calendar year per 1,000 estimated resident population at 30 June.

**Crude marriage rate**
The number of marriages registered during the calendar year per 1,000 estimated resident population at 30 June.

**Decile**
Groupings that result from ranking all households or people in the population in ascending order according to some characteristic such as their household income and then dividing the population into 10 equal groups, each comprising 10% of the estimated population.

**Dependent child/ren**
An individual who is either a child aged under 15 years or a child aged 15–24 years who is a full-time dependent student. To be regarded as a child the individual cannot have a partner or child of his or her own usually resident in the household.

**Dial-up connections**
Connection to the Internet via modem and dial-up software utilising the public switched telecommunication network (PSTN).

**Disability**
A limitation, restriction or impairment which has lasted, or is likely to last, for at least six months and restricts everyday activities.

**Disease burden**
Disease burden is the impact of a health problem in an area measured by financial cost, mortality, morbidity, or other indicators. It is often quantified in terms of quality-adjusted life years (QALYs) or disability-adjusted life years (DALYs), which combine the burden due to both death and morbidity into one index.

**Dwelling**
Defined as a suite of rooms contained within a building which are self-contained and intended for long-term residential use. To be self-contained the suite of rooms must possess cooking and bathing facilities as building fixtures.

**Equivalised (disposable) household income**
Equivalised income scales adjust household income according to the size and composition of the household to enable a better comparison of the economic wellbeing of different types of households. In the case of the ABS equivalised income scale, a lone person household has a factor of 1.0, that is, a lone person household’s...
income is divided by 1.0 to get the equivalised household income (i.e. they are the same). For other households the factor is the sum of 1.0 for the first adult, 0.5 for each subsequent adult aged 15 years and over, and 0.3 for each child aged under 15 years.

Gini Coefficient Index
The Gini coefficient is a single statistic which summarises the distribution of income across the population. It ranges between zero when all incomes are equal and one when one unit receives all the income. The smaller the Gini coefficient the more even the distribution of income.

Gross Domestic Product (GDP)
The total market value of goods and services produced in Australia within a given period after deducting the cost of goods and services used up in the process of production but before deducting allowances for the consumption of fixed capital. Thus GDP, as here defined, is ‘at market prices’. It is equivalent to gross national expenditure plus exports of goods and services less imports of goods and services.

Homelessness
Includes ‘primary’, ‘secondary’ and ‘tertiary’ homelessness. Primary homelessness: people without conventional accommodation (living on the streets, in deserted buildings, improvised dwellings, under bridges, in parks etc.). Secondary homelessness: people moving between various forms of temporary shelter including friends, emergency accommodation, youth refuges, hostels and boarding houses. Tertiary homelessness: people living in single rooms in private boarding houses—without their own bathroom, kitchen, or security of tenure.

Household
A group of two or more related or unrelated people who usually reside in the same dwelling, who regard themselves as a household, and who make common provision for food or other essentials for living; or a person living in a dwelling who makes provision for his/her own food and other essentials for living, without combining with any other person.

Imprisonment
An order requiring a person to be detained within a facility built especially for the purpose of incarceration. Includes: Life and indeterminate imprisonment, Imprisonment with determined term and Periodic detention.

Indigenous
A person is defined to be of Indigenous origin if he or she identifies themselves as of Aboriginal and/or Torres Strait Islander origin.

Internet access
Availability of lines, points, ports, and modem to subscribers to access the Internet.

Labour Force Participation rate
For any group, the labour force expressed as a percentage of the civilian population aged 15 years and over in the same group.

Life expectancy
Life expectancy refers to the average number of additional years a person of a given age and sex might expect to live if the age-specific death rates of the given period continued throughout his or her lifetime.

Lone person
A person who makes provision for his or her own food and other essentials for living, without combining with any other person to form part of a multi-person household. He or she may live in a dwelling on their own or share a dwelling with another individual or family.

Long term unemployment rate
The number of long term unemployed persons expressed as a percentage of the labour force.
Low birthweight
Birthweight of less than 2,500 grams.

Mean income
The total income received by a group of units divided by the number of units in the group.

Median income
That level of income which divides the units in a group into two equal parts, one half having incomes above the median and the other half having incomes below the median.

Mental disorder
According to the ICD–10 Classification of Mental and Behavioural Disorders, a disorder implies ‘the existence of a clinically recognisable set of symptoms or behavior associated in most cases with distress and with interference with personal functions’ (World Health Organisation, 1992, p. 5). Most diagnoses require criteria relating to severity and duration to be met.

Non-government school (private schools)
Any school not administered by a Department of Education, but including special schools administered by government authorities other than the state and territory education departments.

Non-school qualification
Non-school qualifications are awarded for educational attainments other than those of pre-primary, primary or secondary education. They include qualifications at the Post Graduate Degree level, Master Degree level, Graduate Diploma and Graduate Certificate level, Bachelor Degree level, Advanced Diploma and Diploma level, and Certificates I, II, III and IV levels.

Not in the labour force
Persons who were not classified as employed or unemployed.

One parent family
A family consisting of a lone parent with at least one dependent or non-dependent child (regardless of age) who is also usually residing in the household.

Out-of-Home Care
In certain circumstances children and young people may not be able to live at home with their families. OOHC services provide placement and support to children and young people and their families where children and young people have been assessed as being at risk of harm, or where their parents are unable, for a period of time, to provide care.

Overweight or obese adults
Overweight is defined by a body mass index (BMI) greater than or equal to 25 and less than 30, while obesity is defined by a BMI greater than or equal to 30. BMI is body weight in kilograms divided by the square of height in meters.

Own account workers
Own-account workers are those workers who, working on their own account or with one or more partners, hold the type of job defined as a self-employed job, and have not engaged on a continuous basis any employees to work for them during the reference period.

Population growth
For Australia, population growth is the sum of natural increase and net overseas migration. For states and territories, population growth also includes net interstate migration. After the Census, intercensal population growth also includes an allowance for intercensal discrepancy.

Preschool
Educational and developmental programs for children in the year before they begin full-time primary education.
**Private dwelling**
Normally a house, flat or even a room. It can also be a caravan, houseboat, tent, or a house attached to an office or rooms above a shop.

**Quintiles**
Groupings that result from ranking all households or people in the population in ascending order according to some characteristic such as their household income and then dividing the population into five equal groups, each comprising 20% of the estimated population.

**Separations (Hospital Separations)**
The term used to refer an episode of care for an admitted patient, which can be a total hospital stay (from admission to discharge, transfer or death), or a portion of a hospital stay beginning or ending in a change of type of care (for example, from acute to rehabilitation). Separation also means the process by which an admitted patient completes an episode of care either by being discharged, dying, transferring to another hospital or changing type of care.

**Social disadvantage**
The range of difficulties that block life opportunities and which prevent people from participation fully in society. These difficulties include economic poverty, but also financial resources, poor health, disabilities, lack of education and skills and being subjected to inequitable treatment of discrimination

**Standardised death rate (SDR)**
Standardised death rates enable the comparison of death rates between populations with different age structures by relating them to a standard population. The ABS standard populations relate to the years ending in 1 (e.g. 2001). The current standard population is all persons in the 2001 Australian population. Standardised death rates are expressed per 1,000 or 100,000 persons.

**Total fertility rate**
The sum of age-specific fertility rates. It represents the number of children a woman would bear during her lifetime if she experienced current age-specific fertility rates at each age of her reproductive life.

**Unemployed**
Persons aged 15 years and over who were not employed during the week before the interview and had actively looked for full-time or part-time work at any time in the four weeks before the interview and:
- were available for work in the week before the interview, or
- were waiting to start a new job within four weeks from the interview and would have started in the week before the interview if the job had been available then.

**Unemployment rate**
For any group, the number of unemployed persons expressed as a percentage of the labour force in the same group.

**Vacancy rate**
The percentage of all rental units (as in hotels) that are unoccupied or not rented at a given time

**Voluntary work**
The provision of unpaid help in the form of time, service or skills.