

social profile

Blacktown City

2016



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mayor's message



Councillor Stephen Bali
Mayor, Blacktown City

May 2016

We are dedicated to providing residents with the best possible living and working environment, as well as promoting economic growth and strong employment opportunities for Blacktown City.

The Blacktown City Social Profile 2016 is a profile for the whole city, developed in partnership with the community, government departments and local community organisations.

It provides a snapshot of Blacktown City's social situation, allowing us to identify the opportunities, facilities and services needed to assist local people achieve their full potential and to enhance community spirit.

The profile is arranged around "The Solid Facts: The Social Determinants of Health". This is a World Health Organisation approach which focuses on life's essentials, such as access to a good education, a satisfying career and good friends and neighbours.

The Blacktown City Social Profile 2016 will be a key reference document for our community strategic plan and used when working with our community, government departments and local community organisations in their strategic planning.

I congratulate the staff involved in the development of the profile and thank our government and community partners for their participation and commitment to this planning process.

acknowledgements

This profile is the result of extensive research, data collection, and consultations completed by Blacktown City Council.

We acknowledge the involvement from over 2155 residents and community members across the city. In particular, we thank the 107 community groups, organisations and agencies who organised community engagement focus groups and forums. We also thank students from Western Sydney University – Medicine in Context and our staff who assisted on the project.

We acknowledge the work of Western Sydney Information and Research Service Ltd. (WESTIR) who prepared additional indicator data.

A full list of acknowledgements is provided in Appendix 1.

“We acknowledge the Darug people are the original Custodians of this Land.

We pay our respects to Elders past and present, and acknowledge their Custodianship.

We will work together for a united City that respects and values the contribution of all people of Aboriginal and Torres Strait Islander heritage.”



executive summary



executive summary

Executive summary

In 2015, Blacktown City is the largest and fastest growing local government area in New South Wales with an estimated 340,000 residents in 2016 and a projected population of 540,000 by 2036. With 247 square kilometres and 48 suburbs it is at the heart of Western Sydney and well serviced by employment lands, public transport and road access and supported by core infrastructure in health, education, recreation, culture and leisure.

This profile outlines the major social issues currently facing Blacktown City and will inform our community strategic planning. It explores the key issues for eleven priority areas being the social gradient, stress, early life, social exclusion, work, unemployment, social support, addiction, food, transport and service development. It also provides a snapshot of our community strengths and needs. Please refer to the Social Profile section for detailed findings and references.

This executive summary provides an overview of findings from research and community engagement conducted in 2014/2015 and identifies the following key issues and strengths for the city:

Strengths

- People were positive about the people in their neighbourhoods and the importance of being close to their families.
- The closeness to work, facilities and services was highly valued.
- Residents valued the recreational, sporting, social and cultural activities in the city.
- There were strengths and resilience reported in our communities.

Issues

Population growth:

We are experiencing rapid growth, through births, migration, urban renewal and particularly from the development of the North West Growth Centres. Concurrent changes to planning law limit our ability to deliver social infrastructure in new release areas. In the past 5 years funding under the previous planning laws delivered community hubs to the new estates of Ropes Crossing, Bungaribee and The Ponds. These hubs provided new communities with places to meet for life-long learning, recreational, cultural and health and wellbeing activities. It is concerning that our new release areas may not see this same infrastructure. This will lead to suburbs with fewer facilities and limited opportunities for recreation and participation. Existing infrastructure will become increasingly stressed which could result in negative impacts on residents' quality of life.

Urban living:

The link between city living, stress and mental health is becoming increasingly evident with residents experiencing higher levels of daily noise, crime, pollution, congestion and overcrowding. The scarcity of housing and rising housing prices and expenses, housing stress, also impact on urban living. Blacktown City is also valued as a friendly place with a strong community spirit and many beautiful, natural and green spaces. Residents reported they valued the numerous recreational, sporting, social and cultural activities, festivals and events which brought them together. Places like the Blacktown Arts Centre, the Showground, libraries, community hubs and recreation centres provide opportunities to meet and gather with family and friends. These strengths were seen as important to help combat the stresses of urban living.

Early life:

Childhood development is the most significant determinant of a person's life outcomes. Recent research, using the Australian Early Development Index, has identified suburbs with high numbers of children vulnerable in one or more developmental domains. (The index measures the progress of children

“Population growth is the greatest strength and challenge facing our city”

across 5 domains - social competence, communication skills, physical health, emotional maturity and language and cognitive skills indicating children at risk of developmental delay and parents who may be poorly equipped). The lack of early childhood education and poverty can also impact on development. Blacktown City has an estimated 12,319 children living in poverty. Targeted efforts are needed to remedy these vulnerabilities. The city has a strong network of child and family services which aim to build stronger families and improve parental skills. Council has a strong record for services to children and families through our Children's Services who care for 1000 children each day and through programs delivered in our libraries and recreational centres. These services contribute to the survival, as well as the healthy growth and development, of young children.

Education:

There have been improvements in education attainment levels over the last decade. The highest level of schooling has improved with more people achieving year 12. There have been significant increases in enrolment in higher education and in post-school qualifications. The level of educational attainment is a strong predictor of long term health and quality of life as education is the principal pathway for social mobility, opportunity in life and employment. The improved level of educational attainment in Blacktown City is an important stage of improving outcomes for communities. Our collaboration with educational institutions and our work experience programs has contributed to this improvement.

Employment:

Work is an important social determinant of health, providing people with meaningful occupations, opportunities for social engagement and financial autonomy. There are significant economic implications where people do not have work. Unemployment has immediate and long term impacts on individuals, families and the wider community and may result in intergenerational disadvantage. Unemployment in Blacktown City remained higher compared to Sydney, New South Wales and Australia. Vulnerable groups included Aboriginal and Torres Strait Islander people and youth. Our level of youth disengagement (not employed and not in education) included some suburbs where 25% of young people were disengaged. However, we are well connected to the workforce. Our participation rates (those who are employed or actively looking for work) were higher than Sydney and were improving. Residents told us they valued working close to home. We had 22 employment precincts and our economy sustained about 30,000 businesses and 110,000 jobs. The ability to connect our residents with employment will make Blacktown City an important contributor to the prosperity of Sydney and New South Wales.

Life expectancy:

Life expectancy was lower compared to New South Wales and Australia. It varied according to social, economic and environmental factors. Mental illness, obesity and diabetes rates have increased. While smoking rates have reduced, the impacts of high past smoking rates were evident in current smoking related illness. Life expectancy improves with higher income levels and better healthcare, nutrition, living conditions and health promoting behaviours. Our new estates provide examples of walkable communities with access to recreational areas to encourage an active lifestyle. Residents showed an increased interest in community gardens and growing their own food. Access to information about healthy lifestyles had improved and was being shared. Better access to healthy food across the city will improve life expectancy and have social and economic benefits for individuals and the wider community.

Personal and community safety:

Domestic and family violence, the reported increase in drug and alcohol use, antisocial behaviour and graffiti were major concerns in our community as either primary issues or co-related to safety issues. Residents were concerned about adequate lighting, rubbish in streets and poorly maintained areas, which led to them feeling people less safe in their community. Safety is a high priority for our City. We have committed to White Ribbon accreditation to develop a culture that demonstrates a zero tolerance of violence against women. Our Community Safety Plan and Graffiti Plan outline a response to issues of concern in the community. In addition, our safety audits of key sites in the city make it a safer place for everyone.

Social inclusion versus social exclusion:

There was a growing trend of community tension and experiences of racism and discrimination linked to Aboriginality, ethnicity, sexuality, disability and even age. While some residents commented 'cultural diversity made them feel uncomfortable' others talked about valuing our diversity. Many residents expressed their strong feelings of 'belonging' and Blacktown City continued to be a destination of choice for new migrants. Volunteering was important and a measure of strong social support in the city. We have an

established record of programs to maximise the opportunity that diversity brings. This includes community development events and city festivals. They build community connections, social networks and relationships. All these activities foster a socially inclusive society where all people feel valued, their differences are respected, and their basic needs are met.

Transport:

Transport was a challenge with the number of growth centres, poor transit infrastructure and dispersed patterns of land-use with recreational and employment opportunities in clusters far away from residential areas. In many instances these are the outcomes of state planning strategies. Studies show our road network will experience increasing levels of traffic congestion and greater demand for parking due to the growth in the number of vehicles across our City. There was inequity in people's ability to access public transport networks leading to increased reliance on private vehicle use. The North West Rail Link will provide key infrastructure for Blacktown City however, more infrastructure is required and patronage is unlikely to improve unless better access to public transport is provided.

Advantage versus disadvantage:

There was evidence of a divide between advantage and disadvantage across our City. We had places where residents were able to access resources and supports that provide for a quality of life (housing, food, education and employment). We also had parts of the city where inequalities in the health and well-being of individuals and communities were evident. In some places social disadvantage has remained unchanged for decades. There was an increase in homelessness, people accessing food programs and an estimated 40,422 people living in poverty. Housing insecurity, poverty, barriers to education and unemployment were often linked to areas with a high concentration of public housing. However, we have seen a reduction in public housing over the last decade and a shift to mixed housing estates. We provide community and leadership development programs to build community capacity. Residents described their communities as resilient, resourceful, connected and willing to share with others.

**“We are the
largest and
fastest growing
area in New
South Wales”**



Homelessness:

This was found to be an increasing issue facing our City with a growing number of the city’s population without homes, sleeping rough or couch sleeping. This was linked to housing affordability issues, the reduction in local public housing stock made worse by long waiting lists for community and public housing . Individuals who are most at risk of homelessness include people living with a mental illness or a substance addiction and victims of domestic violence. Our work delivering homelessness hubs in partnership with other agencies has been an important way to understand the extent of homelessness in our City and to ensure the availability of local support services and responses.

Human services:

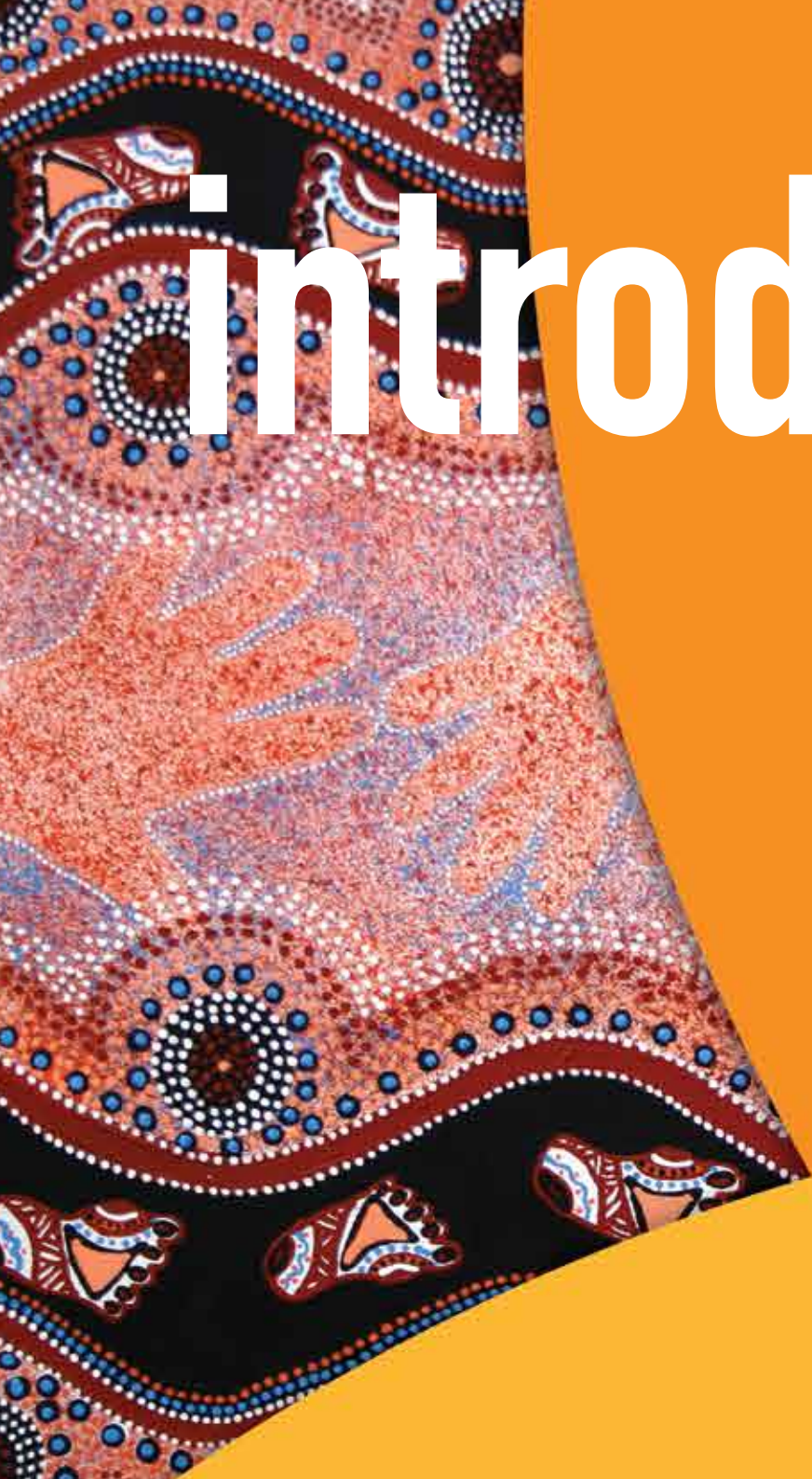
The human services sector is facing significant changes in social policy, models of service and funding. Organisations are functioning at capacity. In an uncertain funding environment, an increased focus on community services is required to address unmet need, gaps in service provision and information fragmentation. Blacktown City is well placed and often called upon to take on these roles in partnership and collaboration with peak groups and other human services organisations. Our many community organisations have extensive local knowledge, making them effective in responding to unmet need. While funding providers require a focus on financial efficiencies, it is vital for them also to recognise the importance of this local knowledge and its impact on the quality of service provision. Blacktown City’s Community Development Unit has a key role in community services within our City, in bringing services together to enhance communication, networking and integration, to meet community need and undertake community development strategies.

In summary the Blacktown City Social Profile 2016 provides an evidence base and the opportunity for us to work with our community, government departments and local community organisations to identify the opportunities, facilities and services that will be needed to assist local people achieve their full potential, and to enhance community wellbeing.

“In some places social disadvantage has remained unchanged for decades”

If Blacktown City were a village of 100 people, it would look like this:





introduction

introduction



Introduction

Why have a social profile?

Social and community planning helps us focus on the needs and aspirations of local communities through a whole of community approach. It provides an evidence base that guides our activities over the short-term and long-term.

In line with the Office of Local Government requirements, under the Integrated Planning and Reporting Framework, we develop a community strategic plan based on the community’s priorities and aspirations. A community strategic plan should be based on the social justice principles of access, equity, participation and rights and address quadruple bottom line (social, environmental, economic and civic leadership) issues.

A social profile is a key reference to inform the development of a community strategic plan.

The principles of equity, access and social justice underpin the social profile. The profile is also strength based, recognising community strengths and resources which can be used to build strong, healthy and sustainable communities.

The social profile is a snapshot of a wide range of issues facing the city at this time. This is our fourth social profile. It builds on the achievements and experiences of the first three profiles and was developed in consultation with the community and service providers.

While we have a lead role in addressing many of the issues identified, we recognise not all issues raised in community engagement are solely in the realm of local government and require strategic linkages and collaborative partnerships with the community sector and other stakeholders The social profile will guide us in focussing resources on key issues and actions in response to community need and mindful of the directions of other stakeholders.

What is in the social profile?

The Blacktown City Social Profile 2016 is a profile for the whole city, developed in partnership with the community, government departments and local community organisations. It provides a snapshot of the city’s social situation allowing us to identify the opportunities, facilities and services be needed to assist local people achieve their full potential and to enhance community spirit.

The Blacktown City Social Profile 2016 is based on the World Health Organisation Social Determinants of Health (Wilkinson & Marmot 2003) using “health” in its broadest sense. These are the conditions in which people are born, grow, live, work and age. The distribution of money, power and resources at national, state and local levels shape the social and economic circumstances we live in. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between communities.

These are the key aspects of social and economic circumstances affecting social wellbeing and health:

- The social gradient
- Stress
- Early life
- Social exclusion
- Work
- Unemployment
- Social support
- Addiction

“The social profile helps us work with communities to improve individual and community health well-being”

- Food
- Transport.

As a result of the community engagement, we have included an eleventh priority area focussing on how services can be enhanced or supported to improve outcomes for the community:

- Service development

Using the World Health Organisation framework allows us to select a set of indicators specific to the social wellbeing in Blacktown City, provide a current overview of the social health of the city, and suggest evidence for future trends in issues and strategies. These indicators have been selected as they are readily available, easily measured and can be compared over time. The social profile draws together data from recent community engagement and our social indicator data to identify common key strengths and issues.

Each of the eleven priority areas chapters has the following:

- A definition of the priority area and why it is important.
- Data relevant to each priority area.
- The results of community engagement with residents and service providers. This includes:

- o Information from the Office of Local Government mandatory groups: Aboriginal and Torres Strait Islander people, children, people from culturally and linguistically diverse communities, people with disability, older people and women. In addition we have included men and representatives from our LGBTIQ (lesbian, gay, bisexual, transgender, intersex and questioning) communities who provided information for the profile.
- o Information from the three precincts within the city, Blacktown, Mount Druitt and North West precinct (Table 1).

- Key findings

Details of our response to the issues identified can be found in the section ‘responding to the social profile’. Further information on social indicator data and community engagement can be found in the additional appendices to the profile. These are listed in the Appendix 6 – other documents available on request.

Constraints in the data

A large amount of data is available at national and state level. Not all data is collected or broken down into local government area reports and more information was available for some priority areas than for others. The indicators selected were easy to understand and allowed for comparisons.

Advantages in using the priority area approach

The priority area approach recognises many issues, for example housing, access, and community safety, are common to all target groups across the community. It is also important to analyse responses for target groups, to build a snapshot of experiences and compare differences. The priority area approach has allowed these issues to be considered, yet has maintained and in some cases increased the focus on the critical areas for each target group.

How did we develop the social profile?

The Blacktown City Social Profile 2016 was developed through community engagement and research including:

- Community engagement with over 2,155 people participating in social profile surveys, focus groups, stakeholder forums and service interviews. A detailed summary of findings is contained in the Community Engagement Report - Blacktown City Social Profile 2016.
- Research into key social indicators for the City informed in part by research from Westir Ltd. A detailed summary of results are contained in the Social Indicator Report - Blacktown City Social Profile 2016.
- Demographic analysis (see Appendix 3 - A demographic profile of Blacktown City).
- Review of the Blacktown City Social Plan 2012.
- Analysis and a look to the future issues and needs of the City.

“Over 2,155 people participated in the development of our profile”

Australian Bureau of Statistics Census data

- The social profile draws on the 2011 Australian Bureau of Statistics Census. Relevant demographic data will be updated with the release of the 2016 Australian Bureau of Statistics Census.
- The report identifies Australian Bureau of Statistics Census Data using Statistical Level Areas. These mostly align with the precincts identified in Table 1. There were some boundary differences but the information provided closely aligned to the precincts. In the profile some precincts are identified with dual names being Blacktown North / North West Precinct, Blacktown South East / Blacktown Precinct and Blacktown South West / Mount Druitt Precinct.

Table 1: Precincts in Blacktown City

Mount Druitt Precinct	Blacktown Precinct	North-West Precinct
Bidwill, Blackett, Dean Park, Dharruk, Emerton, Glendenning, Hassall Grove, Hebersham, Lethbridge Park, Minchinbury, Mount Druitt, Oakhurst, Plumpton, Rooty Hill, Ropes Crossing, parts of St Marys, Shalvey, Tregear, Whalan and Willmot.	Arndell Park, Blacktown, Bungarribee, Doonside, Eastern Creek, Huntingwood, Kings Langley, Kings Park, Lalor Park, Marayong, Prospect, Seven Hills, Toongabbie and Woodcroft .	Acacia Gardens, Colebee, Glenwood, Kellyville Ridge, Marsden Park, Parklea, Quakers Hill, Riverstone, Rouse Hill, Schofields, Shanes Park, Stanhope Gardens, The Ponds and Vineyard.

Community engagement

This profile is result of community engagement and research with a diverse range of participants and stakeholders representative of people living and working in Blacktown City.

- A quality of life survey was completed by 1225 participants in English and 12 community languages - Arabic, Dari, Dinka, Farsi, Hindi, Nepali, Punjabi, Samoan, Spanish, Tagalog, Traditional Chinese and Urdu.
- 31 focus groups were attended by over 725 individuals from different communities, target groups and locations across the city.
- Two forums were attended by over 176 community service workers.
- Interviews were conducted with 29 representative local services.

The findings within this profile reflect the views expressed by the community which on some issues appeared to be contradictory. For example, some issues are identified both as strengths and as barriers or challenges that impact on the quality of life for many residents. This means within the summary of key findings there are occasions where there is a contradiction between positive statements and those that identify barriers and problems.



the social profile

the social profile

Each of the eleven priority area chapters contains the following:

- A definition of the priority area and why is it important?
- What does the data say?
- What did the community and service providers say (by place and target group)?
- Key findings.

Further detailed discussion of the data and community engagement is found in additional appendices to the profile. These are listed in Appendix 5 – Other documents available on request.



the social gradient

“Poor social and economic circumstances affect health throughout life. People further down the social ladder usually run at least twice the risk of serious illness and premature death as those near the top....the social gradient in health runs right across society....Both material and psychosocial causes contribute to these differences and their effects extend to most diseases and causes of death....

Disadvantage has many forms and may be absolute or relative....disadvantages tend to concentrate among the same people, and their effects on health accumulate during life....

Life contains a series of crucial transitions: emotional and material changes....Each of these changes can affect health by pushing people onto a more or less advantaged path.

People who have been disadvantaged in the past are at the greatest risk in each subsequent transition..... Societies that enable all citizens to play a full and useful role in the social, economic and cultural life of their society will be healthier than those where people face insecurity, exclusion and deprivation.”

- Wilkinson & Marmot 2003

Why the social gradient and why is it important?

“Social gradient” is a term used to describe the relationship between inequality in social status and the inequalities in the health and well-being of individuals and communities. The range of circumstances and life-experiences, of an individual or a community are co-related with their life conditions and sense of well-being and are all part of the social gradient.

Social gradient is important because people who are disadvantaged are more likely to be at risk of serious health conditions and have lower life expectancy than those living with advantages. Disadvantage can also compound over time since people who already experience one type of disadvantage, (e.g. low income) are at a greater risk of exposure to other types of disadvantage (e.g. poor housing).

The satisfaction people experience in the places they live, the schools their children attend and material and psycho-social evidence related to where they see themselves on the ‘social ladder, all contribute to an individual’s or a community’s place on the social gradient. Standardised indices such as the Socio-Economic Indexes for Areas (SEIFA), higher education attainment and adequate housing help us measure the social gradient.

What does the data say?

Socio-Economic Indexes for Areas (SEIFA)

There are four Socio-Economic Indexes for Areas indices, with the average of each standardised to 1,000 for easy comparison. Anything falling below 1,000 is considered to indicate a level of disadvantage.

In 2011, Blacktown City’s index for Relative Socioeconomic Disadvantage indicated that, compared to Greater Western Sydney and Greater Sydney, incomes and educational attainment levels remained low. Blacktown City had a lower disadvantage SEIFA index than other areas in Greater Western Sydney, indicating high levels of disadvantage. Blacktown City also had a low advantage-disadvantage SEIFA index score, indicating the negative impacts of factors disadvantaging residents out-weighed the positive (the advantages). While the Economic Resources SEIFA index for Blacktown City was close to the standardised average, indicating only marginal disadvantage in terms of financial mobility or other economic assets, the relatively low education and occupation SEIFA index for Blacktown City indicated lower attainment of post-school qualifications, employment in menial occupations and high unemployment.

When compared to Blacktown City’s index values in 2006, the score and rank had dropped from 983 (Rank 101) to 974 (Rank 93) (Table 2). There are 200,511 people, 66.6% of the city, who fall below 1,000 on the relative socio-economic advantage and disadvantage index.

Table 2: SEIFA index summary, Blacktown City and Statistical Local Areas, 2011

Area	Relative Socio-Economic Advantage and Disadvantage		Relative Socio-Economic Disadvantage		Economic Resources		Education and Occupation		Usual Resident Population
	Score	Rank in NSW	Score	Rank in NSW	Score	Rank in NSW	Score	Rank in NSW	
Blacktown City	974	93	968	77	995	102	954	77	301,125
Blacktown North	1068	175	1052	173	1088	189	1023	148	102,790
Blacktown South-East	961	99	962	86	966	72	957	101	97,686
Blacktown South-West	891	11	890	10	929	22	880	3	100,649
Source: Australian Bureau of Statistics, Census of Population and Housing 2011. AUSSTATS 2015									

When looking at SEIFA index values for suburbs across the city, the suburb with the least disadvantage value in 2011 was The Ponds 1124.9 and the lowest value was Bidwill 622.7 (See Table 3 below). Of the total of 48 suburbs, 22 had values above the Australian 1002 and New South Wales 995.8 indices with the 11 suburbs within the Mount Druitt precinct the most disadvantaged in the city.

Table 3: SEIFA index of relative socio-economic disadvantage, Blacktown City, and selected areas, 2011

Area	Index	Area	Index
The Ponds	1124.9	Seven Hills	981.5
Kellyville Ridge	1111.2	Blacktown Precinct	974.1
Stanhope Gardens	1096.3	Rooty Hill - Eastern Creek	973.5
Glenwood	1088.5	Greater Western Sydney	972.1
Kings Langley	1086.7	Riverstone - Vineyard	969.0
Acacia Gardens - Parklea	1086.2	Blacktown City	968.5
Woodcroft	1068.2	Blacktown	955.6
North West Precinct	1065.8	Marayong	939.5
Kings Park	1060.2	Lalor Park	923.2
Quakers Hill	1041.7	Mount Druitt	896.3
Prospect - Huntingwood - Arndell Park	1039.8	Mount Druitt Precinct	892.4
Minchinbury	1027.2	Doonside	889.4
Schofields - Rouse Hill	1015.5	Dharruk	882.0
Greater Sydney	1011.3	Hebersham	847.1
Glendenning	1009.6	Blackett	775.8
Plumpton	1004.6	Shalvey	775.5
Marsden Park - Shanes Park - Colebee - Ropes Crossing	1003.2	Emerton	764.6
Australia	1002.0	Whalan	763.3
New South Wales	995.8	Tregear	742.0
Oakhurst	993.9	Lethbridge Park	734.0
Toongabbie	993.9	Willmot	718.2
Hassall Grove	993.7	Bidwill	622.7
Dean Park	983.1		

Source: Australian Bureau of Statistics, Census of Population and Housing 2011. Compiled and presented in profile.id by .id, the population experts.<http://www.id.com.au>



Education

The highest level of schooling across Blacktown City improved with more people achieving year 12 or equivalent showing a trend of steady improvement since 2006 (Table 4). This improvement has also seen significant increases in enrolment in higher education (Table 5) and in post-school qualifications (Table 6).

The level of educational attainment is a strong predictor of long term health and quality of life. However, the lower educational attainment in Blacktown City, compared to Greater Sydney, indicated an ongoing challenge for individuals, limiting their future choices and opportunities in life in terms of employment.

Table 4: Highest level of schooling completed, Blacktown City and selected regions, 2006, 2011

Level of schooling	2006			2011			Change
	Blacktown City		Greater Sydney	Blacktown City		Greater Sydney	
	Number	%	%	Number	%	%	
Year 8 or below	14,293	7.0	5.6	13,440	5.9	4.8	-853
Year 9 or equivalent	16,278	7.9	6.0	16,100	7.0	5.5	-178
Year 10 or equivalent	53,703	26.2	21.5	54,079	23.5	19.6	+376
Year 11 or equivalent	12,588	6.1	5.5	13,565	5.9	5.3	+977
Year 12 or equivalent	85,420	41.7	49.1	112,089	48.8	55.0	+26,669
Did not go to school	2,218	1.1	1.4	2,557	1.1	1.3	+339
Not stated	20,388	10.0	10.8	17,809	7.8	8.5	-2,579
Total persons aged 15+	204,888	100.0	100.0	229,639	100.0	100.0	+24,751

Source: Australian Bureau of Statistics, Census of Population and Housing 2006 & 2011, Compiled and presented by id, the population experts.
<http://www.id.com.au>

Table 5: Higher education enrolments by commencement status, Blacktown City, 2001-2011

Higher education enrolment type	2001		2006		2007		2008		2009		2010		2011		Increase	2001-2011
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Commencing students (school leavers)	904	10.9	1,186	12.1	1,263	11.9	1,333	11.8	1,456	11.8	1,482	11.1	1,696	12.1	792	87.6
Other commencing students (including mature age students)	2,221	26.8	2,594	26.5	2,645	24.8	3,083	27.3	3,517	28.4	3,905	29.2	3,699	26.4	1,478	66.5
Students not commencing (continuing enrolments)	5,174	62.3	6,021	61.4	6,751	63.3	6,865	60.9	7,394	59.8	7,967	59.7	8,594	61.4	3,420	66.1
Total higher education enrolments	8,299	100	9,801	100	10,659	100	11,281	100	12,367	100	13,354	100	13,989	100	5,690	68.56

Source: DEWR, Custom Data

Table 6: Highest qualification achieved, Blacktown City and selected regions, 2006, 2011

Qualification level	2006			2011			Change 2006 to 2011
	Blacktown City		Greater Sydney	Blacktown City		Greater Sydney	
	Number	%	%	Number	%	%	
Bachelor or Higher degree	26,700	13.0	20.0	39,401	17.2	24.1	+12,701
Advanced Diploma or Diploma	13,099	6.4	8.1	17,719	7.7	9.0	+4,620
Vocational	33,896	16.5	14.9	39,178	17.1	15.1	+5,282
No qualification	104,065	50.8	42.7	109,222	47.6	40.5	+5,157
Not stated	27,133	13.2	14.3	24,120	10.5	11.3	-3,013
Total persons aged 15+	204,893	100.0	100.0	229,640	100.0	100.0	+24,747

Source: Australian Bureau of Statistics, Census of Population and Housing 2006 and 2011. Compiled and presented by .id, the population experts.
<http://www.id.com.au>



Housing

Housing satisfies the fundamental need for shelter along with many other basic human needs. Housing type has a major influence on the socioeconomic status of an area. In 2011, 23.2% of private dwellings in Blacktown City were fully owned (a drop from 31.5% in 2001), 43.6% were being purchased (an increase from 31.9% in 2001) and 30.1% rented (Table 7). More than half of all private dwellings in Blacktown North / North West precinct, were being purchased, 53.4%, which was higher than Blacktown City 43.6% and much higher than Greater Sydney 34.8%. This is indicative of an area with large areas of new development.

Table 7: Tenure type by number of occupied dwellings, Blacktown City, SLA's and selected regions, 2011

Region	Total rented		Owned outright		Owned with a mortgage		Other tenure type		Tenure type not stated		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Blacktown City	28,171	30.1	21,763	23.2	40,871	43.6	493	0.5	2,359	2.5	93,657	100
Blacktown North	6,858	21.7	7,175	22.7	16,895	53.4	135	0.4	586	1.9	31,649	100
Blacktown South-East	10,311	31.9	8,777	27.2	12,149	37.6	176	0.5	895	2.8	32,308	100
Blacktown South-West	11,000	37.0	5,817	19.6	11,832	39.8	178	0.6	882	3.0	29,709	100
Greater Western Sydney	175,292	28.6	173,803	28.4	243,645	39.8	4,172	0.7	15,889	2.6	612,801	100
Greater Sydney	480,604	31.6	462,139	30.4	529,919	34.8	11,792	0.8	36,950	2.4	1,521,404	100
NSW	743,050	30.1	820,006	33.2	824,293	33.4	20,418	0.8	63,529	2.6	2,471,296	100
Source: ABS Census 2011 (a) Excludes 'Visitors only' and 'Other non-classifiable' households (b) Includes dwellings being purchased under a rent/buy scheme. (c) Comprises dwellings being rented from a parent/other relative or other person. (d) Comprises swellings being rented through a 'Residential park (includes caravan parks & marinas)', 'Employer - Government (includes Defence Housing Authority)' and 'Employer - other employer'.(e) Includes dwellings being occupied under a life tenure scheme.												

The proportion of public housing rentals in Blacktown City 8.7% was higher than Greater Western Sydney 6.4% and much higher than Greater Sydney 4.5%. This has traditionally been taken as an indicator of the low socio-economic status of an area. However recent data on the proportion of public housing indicates that the proportion of public housing rental dwellings in the city has fallen by something in the order of 25% in the decade to 2011. This probably reflects an increase in the number of new, private dwellings constructed and a decrease in the number of dwellings directly managed by Family and Community Services, Housing New South Wales (due to stock transfers to other social housing providers, sale and other means of disposal). Within Blacktown City, the highest proportion of public housing rentals was in Blacktown South-West/Mount Druitt precinct 14.6% compared to the rate for Blacktown North/North West precinct 2.5% (Table 8).

Table 8: Rental properties by landlord type, Blacktown City and selected regions, 2011

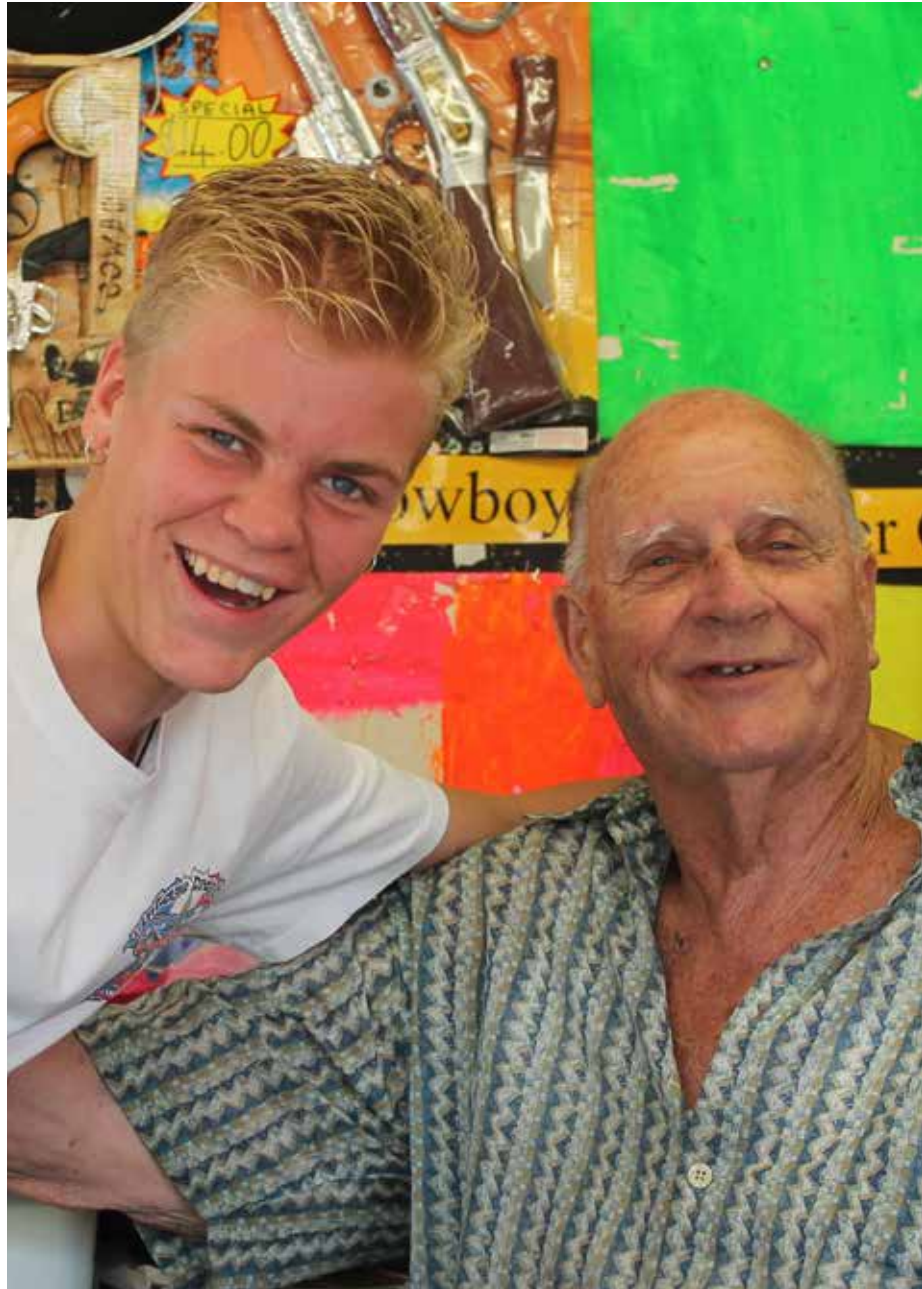
Region	Rented by landlord type											
	Real estate agent		State or territory housing authority		Person not in same household (c)		Housing co-operative/ community/church group		Other landlord type (d)		Landlord type not stated	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Blacktown City	14,194	15.2	8,147	8.7	4,277	4.6	483	0.5	699	0.7	371	0.3
Blacktown North	4,303	13.6	803	2.5	1,220	3.9	103	0.3	335	1.1	94	0.3
Blacktown South-East	5,087	15.7	2,998	9.3	1,691	5.2	204	0.6	189	0.6	142	0.4
Blacktown South-West	4,804	16.2	4,349	14.6	1,359	4.6	178	0.6	173	0.6	137	0.5
GWS	95,321	15.6	39,059	6.4	28,323	4.6	4,026	0.7	5,648	0.9	2,915	0.5
Greater Sydney	299,851	19.7	69,045	4.5	82,570	5.4	9,866	0.6	11,724	0.8	7,548	0.5
NSW	430,133	17.4	108,841	4.4	144,050	5.8	17,199	0.7	27,425	1.1	15,402	0.6
Source: ABS Census 2011 (a) Excludes ‘Visitors only’ and ‘Other non-classifiable’ households (b) Includes dwellings being purchased under a rent/buy scheme. (c) Comprises dwellings being rented from a parent/other relative or other person. (d) Comprises swellings being rented through a ‘Residential park (includes caravan parks & marinas)’, ‘Employer - Government (includes Defence Housing Authority)’ and ‘Employer - other employer’.(e) Includes dwellings being occupied under a life tenure scheme.												

Homelessness

Homelessness is another key example of disadvantage in the community and the result of varied complex factors including but not limited to domestic violence, unemployment, mental illness, family breakdown, addiction and a shortage of affordable housing. Determining the number of people who are homeless or in marginal housing within Blacktown City is challenging. The 2011 Census produced estimates of levels of homelessness and these indicate a growing issue. This is confirmed by reporting from local service providers. In 2011, it was estimated that 1,411 people in Blacktown City were homeless and 1,711 people were living in other crowded dwellings. The key groups impacted were homeless youth, people displaced due to domestic violence and Aboriginal and Torres Strait Islander peoples.

Life expectancy

Life expectancy measures how long, on average, a person is expected to live, based on current age and sex-specific death rates. It varies according to social, economic and environmental factors. Life expectancy improves with higher income levels and better healthcare, nutrition, living conditions and health promoting behaviours. Improving life expectancy has social and economic benefits for individuals and the wider community. In Blacktown City life expectancy is 76 years, compared to 81 years for New South Wales and Australia (Table 9). It is 72 years for males (78 years New South Wales/ Australia) and for females 80 years (84 years New South Wales/Australia). For the Aboriginal and Torres Strait Islander population, born in 2010–2012, life expectancy was estimated to be significantly lower than non-Aboriginal and Torres Strait Islander people (males 69.1 and females 73.7).



“Life expectancy in our city is lower than the New South Wales average”

Table 9: Median age at death, Blacktown City and selected regions, 2009-2012

Region	Males		Females		All Persons	
	No. of deaths	Median age (yrs)	No. of deaths	Median age (yrs)	No. of deaths	Median age (yrs)
Auburn	646	75	587	83	1,234	80
Bankstown	2,472	79	2,293	84	4,766	81
Blacktown City	3,039	72	2,647	80	5,685	76
Blue Mountains	1,056	77	1,156	84	2,212	81
Camden	505	77	588	84	1,094	82
Campbelltown	1,498	71	1,439	80	2,937	75
Fairfield	2,174	76	1,910	82	4,084	79
Hawkesbury	686	75	667	83	1,353	79
Holroyd	1,220	78	1,161	83	2,382	80
Liverpool	1,716	74	1,482	79	3,198	76
Parramatta	1,917	77	2,058	84	3,975	81
Penrith	1,774	73	1,700	81	3,473	77
The Hills Shire	1,359	77	1,357	84	2,715	80
Wollondilly	499	73	404	80	903	76
Greater Sydney	52,960	78	52,850	84	105,810	81
Rest of New South Wales	45,937	78	42,605	83	88,542	81
New South Wales	99,235	78	95,641	84	194,876	81
AUSTRALIA+	295,906	78	282,325	84	578,231	81

Source: Social Atlas of Australia 2015, Public Health Information Development Unit (PHIDU), Medicare Local (online) At: <http://www.adelaide.edu.au/phidu/maps-data/data/> (accessed April 2015).

What do the community and service providers say?

Place

Blacktown Precinct

- The area is affordable and allows for a good lifestyle.
- Housing is mostly affordable and improving in quality.
- Those on lower incomes say the cost of living is too high.
- Concern about housing (rental and purchasing) becoming increasingly unaffordable.
- The increase in houses and apartments will lead to more people, more cars and overcrowding.
- Services in Blacktown City are seeing an increase in the number of people who are homeless.

Mount Druitt Precinct

- The cost of living in the area is affordable and allows for a good lifestyle.
- Those on lower incomes however, say the cost of living is too high.
- Housing is mostly affordable and improving in quality.
- People want a greater mix of housing type rather than areas with large concentrations of social housing.

- Concern about social disadvantage remaining unchanged for decades in some suburbs.
- Education is valued by some in the community but not by all and attainment rates for young people reflect this.
- Many homes do not have access to the internet and this remains a major disadvantage to learning for children and young people.

North West Precinct

- Newer estates are well planned with paths, cycle-ways, parks and great liveable spaces.
- The heritage of Riverstone, the open spaces and the ‘country feel’ are valued by the local community.
- Newer estates value the nearby ‘clean’ and ‘smart’ shopping centres. However those in rural areas say that their neighbourhood areas and shops are in poor condition.
- Concern that housing (rental and purchasing) is becoming increasingly unaffordable.
- Perceptions in rural areas that increasing urban development means loss of heritage and ‘peaceful’ neighbourhoods.

“Housing is mostly affordable and improving in quality”

Target group

Aboriginal and Torres Strait Islander peoples

- The cost of living (housing, utilities and food) is beyond those on low incomes.
- Concern about affordable housing, rental discrimination and homelessness (including couch surfing and sleeping rough).
- A need to focus on school readiness, social skills, literacy, having Aboriginal school counsellors and compulsory Aboriginal and Torres Strait Islander peoples’ studies to help our Aboriginal students stay in school.
- Provision of mentoring or promotion of successful Aboriginal and Torres Strait Islander people (solicitors, politicians, professional sports people, doctors) for children and young people.
- Concern about employment.

Children (0–11)

- Children are mostly positive about school, parks, play areas and where they live.
- Friends and family were the most important people associated with where they live.
- Services are concerned that some primary students do not have breakfast regularly and this affects their education.

Men

- Concern about concentrations of social/public housing.
- Affordability of many services and activities is a challenge for men with children.

Older people

- Concern about areas with large concentrations of social housing and perceived antisocial behaviour associated with these areas.

People from culturally and linguistically diverse communities

- There was evidence of motivation to improve English proficiency and gain new skills to settle into the community.
- Balancing competing demands for limited financial resources is challenging particularly for those who have obligations to family members overseas.
- Children and young people find adjusting to the education system difficult.
- There is a lack of suitable housing for large migrant families.
- Renting is challenging for people on low incomes with no job or credit history.

People with disability

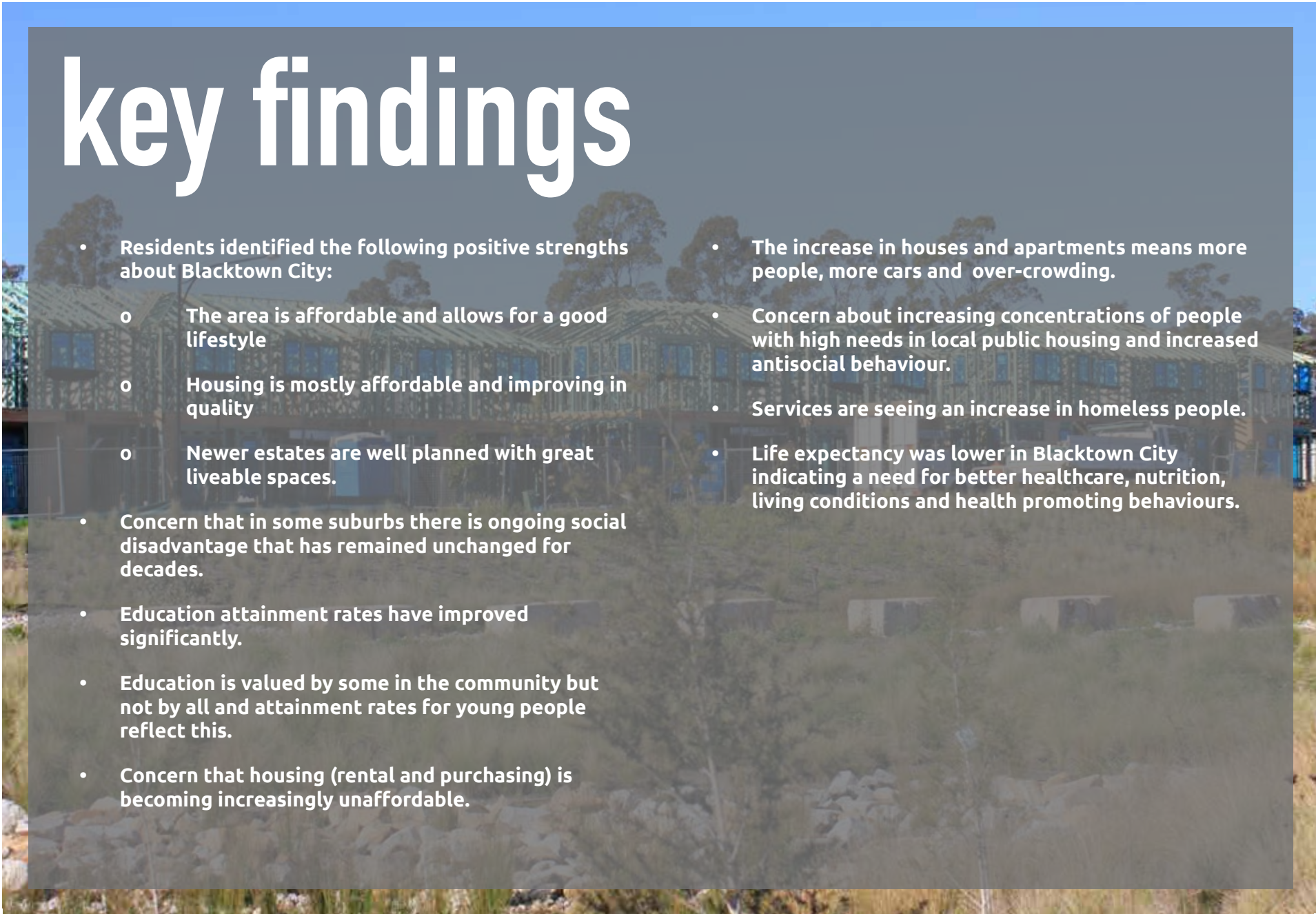
- Primary issues are related to accommodation, living close to work and having carers that provide support.
- Living on a disability pension often resulted in people going without the things they need or want.

Women

- The area is affordable and allows for a good lifestyle, in particular food, services, shopping and entertainment.
- The cost of living is high and beyond the budgets of single women living alone.
- Affordability of many services and activities is a challenge for women with children.

Young people (12 – 24)

- The cost of renting is out of reach.
- Growing up in public housing amounts to a ‘life sentence’ which some feel they cannot escape.
- Homelessness, sleeping in cars and couch surfing is increasing.
- Some people make deliberate choices to go on benefits as many entry positions pay less than a government benefit/pension (e.g. Newstart).
- Concern about the number of people who are unable to read and write and do not value education.
- Promoting education success stories and mentoring might improve how young people view education.
- Young people in Riverstone who wish to do year 11 and 12 have to travel to Quakers Hill.



key findings

- Residents identified the following positive strengths about Blacktown City:
 - o The area is affordable and allows for a good lifestyle
 - o Housing is mostly affordable and improving in quality
 - o Newer estates are well planned with great liveable spaces.
- Concern that in some suburbs there is ongoing social disadvantage that has remained unchanged for decades.
- Education attainment rates have improved significantly.
- Education is valued by some in the community but not by all and attainment rates for young people reflect this.
- Concern that housing (rental and purchasing) is becoming increasingly unaffordable.
- The increase in houses and apartments means more people, more cars and over-crowding.
- Concern about increasing concentrations of people with high needs in local public housing and increased antisocial behaviour.
- Services are seeing an increase in homeless people.
- Life expectancy was lower in Blacktown City indicating a need for better healthcare, nutrition, living conditions and health promoting behaviours.



stress

“Social and psychological circumstances can cause long term stress. Continuing anxiety, insecurity, low self-esteem, social isolation and lack of control over work and home life, have powerful effects on health... and increase the chances of poor mental health and premature death... psychosocial factors affect physical health... Although the stresses of modern urban life rarely demand strenuous or even moderate physical activity, turning on the stress response diverts energy and resources away from many physiological processes important to long-term health maintenance.

Both the cardiovascular and immune systems are affected ... if people feel tense too often or the tension goes on for too long, they become more vulnerable to a wide range of conditions including infections, diabetes, high blood pressure, heart attack, stroke, depression and aggression.”

- Wilkinson & Marmot 2003

Why stress and why is it important?

Increased stress levels are often linked with a range of negative impacts on a person’s well-being and the overall health of communities. It is the unspecific physiological and psychological reaction to perceived threats to our physical, psychological or social integrity. Stress comes from many sources and in many forms. Urban living can be threatening if individuals perceive that they do not have enough space for themselves, if they feel unsafe or face economic insecurity. Stress increases with the anticipation of adverse situations and the fear of not having the adequate resources to respond to them. (Urban Stress and Mental Health, Cities, Health and Well-being, Hong Kong, 2011).

At the same time, many individuals who live in large urbanised areas enjoy positive health and quality of life impacts brought about by the improved physical and social, health care, cultural and educational infrastructure available to them.

While there are clearly many potential sources of stress, our social profile looks at housing stress, psychological distress, issues related to urban living, perceptions of safety and incidents of violence.

What does the data say?

Housing stress

The costs associated with housing make up a large proportion of ongoing expenses incurred by individuals and families during their lifetime. In Australia, New South Wales and especially Sydney, the scarcity of housing and rising housing prices and expenses have been linked to increasing levels of housing stress.

Households are defined as experiencing housing stress if more than 30% of their disposable income is spent on housing costs and they are in the bottom 40% of income distribution. In Blacktown City, 39.2 % of low income households were estimated to be in housing (mortgage and rental) stress with 12.8% experiencing mortgage stress and 27.4% experiencing rental stress respectively. Rates of housing stress have increased from 2006 from 10.2% for mortgage stress and 25.5% for rental stress in 2006 (Tables 10 and 11).

Table 10: Low income households with housing stress, Blacktown City and selected regions, 2011

Region	Mortgage stress			Rental stress			Financial stress from mortgage or rent		
	Low income households with mortgage stress	% low income households with mortgage stress	Total mortgaged private dwellings	Low income households with rental stress	% households with rental stress	Total rented private dwellings	Low income households under financial stress from mortgage or rent	% households with financial stress from mortgage or rent	Total low income households
Blacktown City	5,258	12.8	40,952	7,769	27.4	28,346	13,027	39.2	33,255
Greater Sydney	59,504	11.2	532,052	120,202	24.7	487,424	179,706	37.7	476,145
New South Wales	92,054	11.1	828,141	199,398	26.3	756,829	291,452	32.9	885,063
Australia	286,292	10.5	2,723,565	593,085	25.2	2,348,896	879,377	31.7	2,774,181

Source: Social Health Atlas of Australia: Public Health Information Development Unit (PHIDU).Medicare Local (online). At: <http://www.adelaide.edu.au/phidu/maps-data/data/> (accessed April 2015). Definition: Low Income Households = Households in the bottom 40% of income distribution. +Includes external territories (where data coded), not included in State/ Territory totals

Table 11: Low income households with housing stress, Blacktown City, 2006

Region	Mortgage stress			Rental stress			Financial stress from mortgage or rent		
	Low income households with mortgage stress	Total mortgaged private dwellings	% low income households with mortgage stress	Low income households with rental stress	Total rented private dwellings	% households with rental stress	Low income households under financial stress from mortgage or rent	Total low income households	% households with financial stress from mortgage or rent
Blacktown City	3,646	35,614	10.2	6,751	26,494	25.5	10,397	..	..

Source: Social Health Atlas of Australia: Public Health Information Development Unit (PHIDU), Medicare Local (online). At: <http://www.adelaide.edu.au/phidu/maps-data/data/> (accessed April 2015). Definition: Low Income Households = Households in the bottom 40% of income distribution. +Includes external territories (where data coded), not included in State/ Territory totals.

“Managing urban stress is a growing challenge in our city”



Psychological distress

High and sustained experience of stress leads to psychological distress and ultimately mental illness and antisocial behaviours. During the period 2011 to 2013, the rate of people in Blacktown City suffering ‘high’ or ‘very high’ levels of psychological distress was 10.8%. This was higher than levels for Sydney Statistical Division 10.0% and New South Wales 10.5% (Table 12). Within Greater Western Sydney, Fairfield had the highest proportion of the population suffering ‘high’ or ‘very high’ levels of psychological distress 13.5%, followed by Bankstown 12.3% and Auburn 11.9%. While this is a concern, overall psychological distress rates have reduced over the last decade.

Mental health related hospital admissions are another measure of psychological distress. In 2011/2012 there were 4,807 admissions of Blacktown City residents for mental health related conditions (Public Health Information Development Unit 2011/2012). The rate of death from suicide and self-inflicted harm within New South Wales and Western Sydney has been dropping over the past 20 years and can be an indicator of mental health. During 2008-2012, Blacktown City recorded 137 suicide deaths and had a lower rate than the national average of 12 per 100,000. Blacktown South East/Blacktown precinct had the highest rate within the city (11 per 100,000) and Blacktown North/North West had the lowest (8 per 100,00

Table 12: Estimated number of persons with high or very high psychological distress, Blacktown City and selected regions, 18 years and over, 2007-2008, 2011-2013

Region	2007-08		2011-13	
	Number	Rate per 100	Number	Rate per 100
Blacktown City	27,580	15.2	24,690	10.8
Sydney Statistical Division	404,216	11.9	337,047	10
NSW	641,378	12.8	580,108	10.5

Source: Social Health Atlas of Australia: Public Health Information Development Unit (PHIDU), Medicare Local (online). At: <http://www.adelaide.edu.au/phidu/maps-data/data/> (accessed April 2015).

Urban living

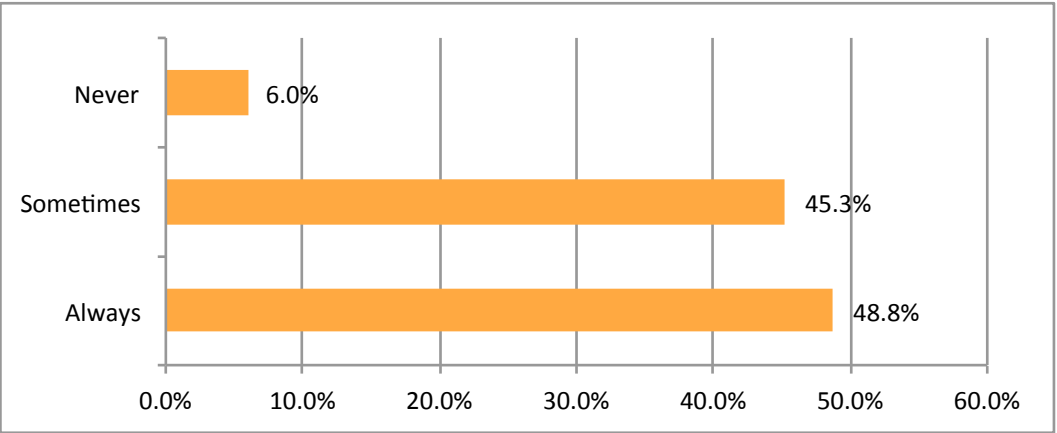
Urban living is on the rise and rural living is becoming less common. The rapid pace of urbanisation in Blacktown City is evident in the significant urban development in new estates and the early stages of urban development close to our major centres. The link between city living, stress and mental health is becoming increasingly evident with city dwellers experiencing higher levels of daily noise, crime, pollution, congestion and overcrowding than those outside urban areas.

A significant majority of responses to the community engagement undertaken for the social profile related to urban living stresses of noise, crime, congestion, antisocial behaviour, maintenance and rubbish (amenity).

Safety

Perceptions of safety may be shaped by a person’s personal experience of crime and by the number and type of problems reported in their neighbourhood in addition to individual characteristics such as age, sex, ethnicity, education, health and economic status. The built environment and the design and maintenance of neighbourhoods, also impact on perceptions of safety and are key factors in improving feelings of safety within communities.

In 2015, we surveyed residents on their perception of being safe walking down their street. This was the first time this question was included in a survey of residents and it provides a baseline for comparison for future surveys. Nearly half of those surveyed said they ‘always’ felt safe walking down their street (Figure 1). It is possible to compare our findings with results from a similar question in the ABS 2010 General Social Survey, which specified ‘after dark’. This survey estimated the number of Blacktown City adults (per 100) who ‘felt very safe or safe’ while walking alone in their local area after dark was lower 46.2 than for Sydney Statistical Division 47.8, New South Wales 49 and Australia as a whole 47.



When individuals are exposed to prolonged or excessive levels of anxiety or stress they may experience an inability to cope along with a range of negative emotions including fear, irritability and anger. Aggression can come in many forms, with violence against other persons being a commonly measured indicator.

Figure 1: I feel safe walking down my street. Social plan survey 2015, Blacktown City

Incidence of domestic violence related assaults in 2013 show Blacktown City recorded a total of 1,858 during this time (Table 13). The rate, per 100,000, had fluctuated between 584.2 and 619.7 since 2009 and rankings have dropped from 22 (2009) to 32 (2013) out of 139 local government areas. Whilst Blacktown City’s ranking in NSW was lower, the number of domestic violence related assaults were the highest in any urban local government in New South Wales. In 2014 the recorded rate of assault - non-domestic violence ranked Blacktown City 44 out of the 139 local government areas (NSW Bureau of Crime Statistics and Research 2014).

Table 13: Incidents of domestic violence related assault as recorded by New South Wales Police Force, Blacktown City and selected regions, 2009-2013

Local Government Area	2009			2010			2011			2012			2013		
	Total	Rate per 100,000 population	Rank	Total	Rate per 100,000 population	Rank	Total	Rate per 100,000 population	Rank	Total	Rate per 100,000 population	Rank	Total	Rate per 100,000 population	Rank
Auburn	277	368.5	67	297	385.7	59	274	350	75	350	432.7	58	362	447.5	55
Bankstown	643	346.6	74	674	358.9	68	766	401.8	64	731	378.6	68	888	459.9	51
Blacktown City	1,795	600.4	22	1,791	584.2	25	1,898	607.4	28	1,968	619.7	25	1,858	585.1	32
Blue Mountains	223	286.2	92	260	333.1	75	297	378.9	65	232	295.6	94	242	308.3	92
Camden	163	294.8	87	180	317.1	81	179	306.6	90	151	249.8	103	156	258.1	104
Campbelltown	1,112	741.8	12	1,038	690.7	17	985	651.4	23	908	595.1	28	960	629.2	25
Fairfield	697	360	71	740	378.9	61	724	368.2	66	736	371	69	809	407.8	65
Hawkesbury	256	403.2	60	240	375.8	62	235	365.8	68	238	369.3	70	293	454.7	52
Holroyd	425	425.4	55	446	437.9	51	438	421.7	55	433	409.4	63	417	394.2	68
Liverpool	716	394.3	61	798	432.1	53	836	444.5	54	882	461.4	52	967	505.9	42
Parramatta	651	390.9	63	627	367.5	66	707	405	63	767	430.4	59	774	434.3	57
Penrith	863	474.6	48	943	515.5	35	1,011	547.4	35	879	470.2	47	999	534.4	38
The Hills	322	186.3	120	284	162.2	124	260	146.9	131	264	146.6	128	263	146	131
Wollondilly	144	335	78	163	373.5	64	153	344.6	77	140	310.5	90	172	381.4	72
Total NSW*	26,218	370.8		26,151	366		26,905	373.1		27,543	377.8		28,287	388	

Source: NSW Bureau of Crime Statistics and Research (Dec 2013 data). * Excludes incidents occurring in correctional facilities. Rates are calculated using the population data obtained from the Australian Bureau of Statistics publication: Regional Population Growth, Australia, 2011-2012 (cat. no. 3218.0). For this reason, Sydney LGA and LGAs with no rates calculated are excluded from the ranking of these rates.



Place

Blacktown Precinct

- The area was a friendly place with community spirit.
- Places to sit and gather informally, especially in our main town centres, were valued. The Village Green and Showground were best practice example of these places.
- There were plenty of recreational, sporting, social, religious or cultural activities.
- The Arts Centre, libraries and aquatic centre offered good services.
- A major strength of the city was the number of beautiful, natural and green spaces with trees and wildlife.
- In some areas there were not enough open and green spaces, parks, playgrounds and reserves.
- People who said the area was quiet and those who dislike the noises in their neighbourhoods were evenly divided.
- There were some clean, neat and tidy places in the city.
- There was wide spread concern about the poor condition of city centres and/or neighbourhood shopping areas.
- Main Street in Blacktown central business district was seen as unappealing and this impacted on how safe people felt.
- A perceived lack of higher end shops, cafes and restaurants in the central business district.

- Concern about maintenance of parks, equipment, roads, footpaths and trees.
- Concern about antisocial behaviour in neighbourhoods, shopping centres, parks and transport interchanges (drinking alcohol, drug-taking, abusive language and swearing).
- Vandalism and graffiti made some areas look run-down and people report feeling unsafe.
- Stress and concern about overcrowding, in shopping centres, recreational areas, events, on roads and within housing estates.
- Wide spread concern that many streets are untidy and dirty with rubbish and litter.
- Perception of high crime levels which makes people feel unsafe.
- Some community tensions arising from the cultural diversity of neighbourhoods.
- The negative media perception of Blacktown was a concern.

Mount Druitt Precinct

- The area had communities that were resilient, resourceful, connected and willing to share their life experience with others.
- Natural and green areas were valued but there were not enough parks, playgrounds and reserves.
- Festivals and art projects were good ways to involve the community and encourage participation.
- There needed to be more community spaces for residents to meet and gather.

“Our city has many beautiful, natural and green spaces with trees and wildlife”



- More services were needed for people with mental illness.
- A need to change the negative image and perception of the area.
- The condition and look of neighbourhood shops and main shopping centres was unappealing and impacted on how safe people felt.
- Wide spread concern many streets were untidy and dirty with rubbish and litter.
- Concern about antisocial behaviour, in neighbourhoods, shopping centres, parks and transport interchanges (drinking alcohol, drug-taking, abusive language and swearing).
- Concern about personal safety at transport interchanges, railway stations and walking at night time.
- Vandalism and graffiti made some areas look run-down lead to people feeling unsafe.
- Noise was a frequent cause of complaint with barking dogs, road noise, motorbikes, fighting and violence in some neighbourhoods.
- Some community tensions arising from the cultural diversity of neighbourhoods with reports of racism and discrimination.
- A long way to travel to the major shopping centre or central business district for some people (Willmot).

North West Precinct

- The area was “quiet and peaceful with a strong rural feel” (northern fringe).
- An even divide between those saying the area was quiet and those who disliked noise in their neighbourhoods.
- The convenience and availability of shops and services (new estates).
- Stress caused by the long trips to major shopping centres or business districts (Riverstone).
- There were plenty of recreational, sporting, social, religious or cultural activities (New estates).
- A need for more local infrastructure including pedestrian crossings, footpaths, cycle-ways, roads, bridges, railway stations or lighting. The railway crossing in Riverstone was a concern.
- Concern about the condition and look of neighbourhood shops (Riverstone).
- Regular police patrols make people feel safe.
- There was a perceived divide between areas maintained to a high level (new estates) and others that do not get much maintenance.
- Wide spread concern many streets were untidy and dirty with rubbish and litter.

“The city has communities that are resilient, resourceful and connected”

Target group

Aboriginal and Torres Strait Islander peoples

- Having close access to work, facilities and services (libraries, education, shops, health, community).
- Open space, sports and recreation facilities, community centres, arts and cultural programs (for example the Blacktown Arts Centre) are important.
- A lack of affordable venues for recreation, leisure and meet together with fellow community members.
- More cultural events were needed.
- Concern about antisocial behaviour.
- Perceptions of high crime levels led to people feeling unsafe.
- Concern for vulnerable community members including Elders, people with mental illness and people with a disability.
- Concern about life expectancy and prisoner rates for Aboriginal and Torres Strait Islander people.
- Concern community members are still dying too young too often.
- Some community tensions arising from the cultural diversity of neighbourhoods.

Children (0–11)

- Children were positive about parks, schools and play areas.
- Concern about the number of reports of child abuse.
- Children, in some areas, had a daily experience of family violence, mental health issues and drugs and alcohol.
- Concern about unsupervised children on the streets, particularly at night time.
- Children felt uneasy about going to the shops.
- Opinions about the availability of a good range of activities and family friendly parks and facilities (e.g. the Showground Precinct) in the city are evenly divided.
- Children wanted facilities like a skate park, pools and play areas close to where their live.
- Children felt safe and part of the community reporting ‘people who live near their house would help them if they needed’.

Men

- A need to increase the willingness of men to seek help from community services when they need it (including newly arrived migrants).
- Perceptions of high crime levels which caused them to feel unsafe.
- There was a reasonable amount of things to do and plenty of facilities.

Older people

- The numbers of people saying their area was quiet and those who disliked the noises in their neighbourhoods were evenly divided.
- Concern about antisocial behaviour towards older people (disrespecting people and property, drinking alcohol, drug-taking and swearing).
- The condition and look of neighbourhood shops and main shopping centres was unappealing and impacted how safe people felt.
- Concern about maintenance of parks, equipment, roads, footpaths, trees and waterways.
- Concern streets were untidy and dirty with rubbish and litter.
- The convenience and availability of shops, libraries and services.
- There were plenty of recreational, sporting, social, religious or cultural activities.
- Concern about social isolation and mental illness.
- A lack of toilet amenities and drinking water in parks.
- An equal divide between those who saw the city as a safe place to live and those who had concerns about perceived high crime levels, personal and community safety.

People from culturally and linguistically diverse communities

- An even divide between those saying the area was quiet and those who disliked the noises in their neighbourhoods.
- Shops, libraries and services were convenient.

“Vandalism and graffiti make some areas look run down and people feel unsafe”

- There are plenty of recreational, sporting, social, religious or cultural activities.
- An equal divide between those who saw the city as a safe place to live and those who had concerns about perceived high crime levels, personal and community safety.
- Residents reported being victims of discrimination and racism.
- Concern about antisocial behaviour.
- Concern that streets were untidy and dirty with rubbish and litter.
- Safety and personal security was a concern in transport interchanges and railway stations.
- More psychological support for trauma and mental health for refugee communities.

People with disability

- The convenience and availability of shops, libraries and services.
- There were plenty of recreational, sporting, social, religious or cultural activities.
- An even divide between those who said the area was quiet and those who disliked the noises in their neighbourhoods.
- Concern about antisocial behaviour around shopping centres, parks and transport interchanges.
- Concern that streets were untidy and dirty with rubbish and litter.
- Perceptions of high crime levels.
- Concerned about the maintenance of footpaths.
- Concern over mental illness in those with disability.

Women

- In some areas, shops are limited or non-existent.
- Convenience and availability of shops and services was a priority and good in many parts of the city.
- A lack of higher end shops, cafes and restaurants in the central business district.
- Wide spread concern about shopping centres closing down or in poor condition.
- Widespread positivity about the range of activities and family friendly facilities in the city (like the Blacktown showground).
- Concern for the environment and a willingness to learn more about environmental to increase sustainable, environmentally friendly living.
- The Blacktown Arts Centre had a great variety of initiatives and exhibitions and supports the arts in the city.
- Concern about antisocial behaviour.
- Concern about safety in public and, for some, in their own homes.
- Domestic violence and its impact on women and families.

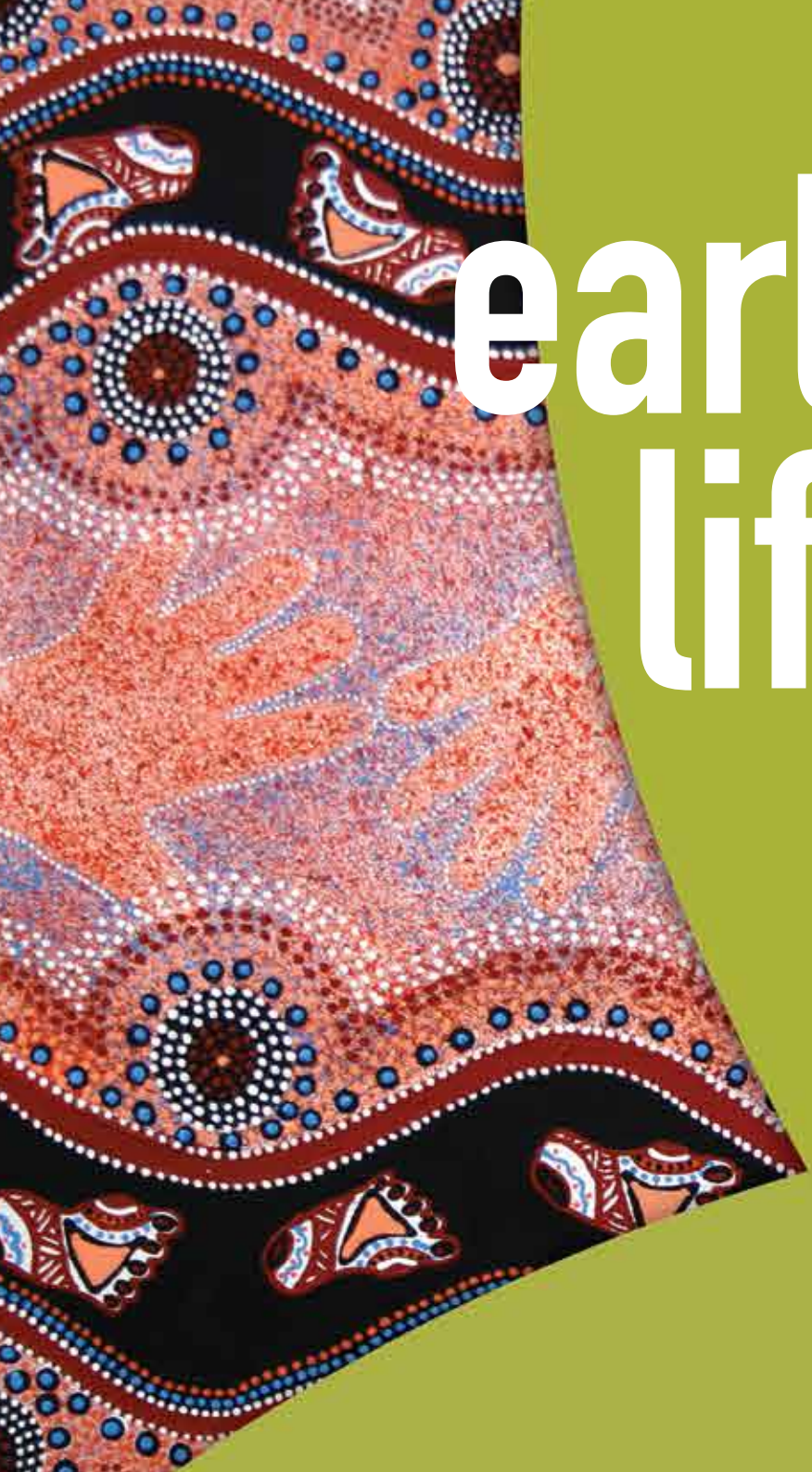
Young people (12 – 24)

- An even divide between those who said there were plenty of recreational and sporting activities or there were not enough affordable activities.

- Having close access to work, facilities and services (libraries, education, shops, health, community).
- Concern about a lack of public spaces to gather and feel safe without either the police or other groups of young people intimidating them.
- An even divide between those who said the area was quiet and those who disliked the noises in their neighbourhoods.
- Concern about antisocial behaviour towards young people.
- Vandalism and graffiti made some areas look run-down and people felt unsafe.
- Young people were very aware of high crime rates and had concerns about personal and community safety.
- Concern about online safety and the use of social media to harass and bully.
- There was a stigma associated with living in particular suburbs or being young and perceived by the community as ‘threatening’.
- The distance to travel for work, services, friends and family was a concern.
- Concern about the increase of young people in groups out on the streets at night unsupervised.
- Support for those with mental illness, anxiety disorders, very low self-esteem and more information about how to find these services.
- Concern about climate change, conservation, restoration and limiting impacts on the environment.

key findings

- Residents identified the following positive strengths about Blacktown City:
 - o The area was a friendly place with community spirit.
 - o Places to sit and gather informally, such as parks gardens and open spaces were valued, especially in our main town centres. Residents would like to see more of them.
 - o There were plenty of recreational, sporting, social, religious or cultural activities (including Blacktown Arts Centre, libraries and aquatic centres).
 - o The natural and green spaces with trees and wildlife.
 - o Having close access to work, facilities and services.
- Increased levels of housing stress.
- Increased reporting of urban living stresses including higher levels of daily noise, crime, pollution, congestion and overcrowding.
- An even divide between those saying the area was quiet and those who dislike the noise in their neighbourhoods.
- Concern about maintenance of parks, equipment, roads, footpaths, trees and waterways.
- Wide spread concern many of our streets were untidy and dirty with rubbish and litter.
- There was wide spread concern that the city centre and/or neighbourhood shops were in poor condition.
- Concern about antisocial behaviour, in neighbourhoods, shopping centres, parks and transport interchanges (drinking alcohol, drug-taking, abusive language and swearing).
- Domestic violence rates were a significant concern.
- Perceptions of personal and community safety including concern about graffiti, vandalism and violence.
- Mental health was a primary issue in the city.
- Vulnerabilities to exploitation and personal violence in some communities (children, people with disability, women, gay/lesbian/bi-sexual/transgender/inter-sex and young people).



early life

“The foundations of adult health are laid in early childhood and before birth. Slow growth and poor emotional support raise the lifetime risk of poor physical health and reduce physical, cognitive and emotional functioning in adulthood. . . . Poor circumstances during pregnancy can lead to less than optimal foetal development via a chain that may include deficiencies in nutrition during pregnancy, maternal stress, a greater likelihood of maternal smoking and misuse of drugs and alcohol, insufficient exercise and inadequate prenatal care.

Poor foetal development is a risk for health in later life. Infant experience is important to later health because of the continued malleability of biological systems. As cognitive, emotional and sensory inputs program the brain’s responses, insecure emotional attachment and poor stimulation can lead to a reduced readiness for school, low educational attainment, and problem behaviour, and the risk of social marginalisation in adulthood. . . . the risk of illness in adulthood.”

- Wilkinson & Marmot 2003

Why early life and why is it important?

Early life covers the period from before birth until at least 8 years of age. Experiences in those years determine both the cognitive and motor skills crucial to the individual’s capacity for resilience and to live full, healthy lives. Carefully selected early life indicators provide an insight into the individual life chances of infants and children as well as the capacity and resilience of parents on whom childhood well-being depends. Child health is an important indicator of the health and well-being of the community.

What does the data say?

Fertility rate

Blacktown City continued to be a youthful city, with higher birth rates than many parts of Australia. At a time when many communities have a focus on ageing communities, Blacktown City needs to focus not only on aging but also on responding to the service demands of children and families. Total fertility is an indicator of the immediate and longer term need for services within a community. In 2013 Blacktown City (2.24) had a markedly higher total fertility rate (TFR) than either Greater Sydney (1.85)or New South Wales (1.95) (Table 14). Within the city, the South West/Mount Druitt precinct continues to have the highest total fertility rate, highlighting a continuing high level demand for early childhood services in this area.

Table 14: Total fertility rate, Blacktown City and selected regions, 2010-2013

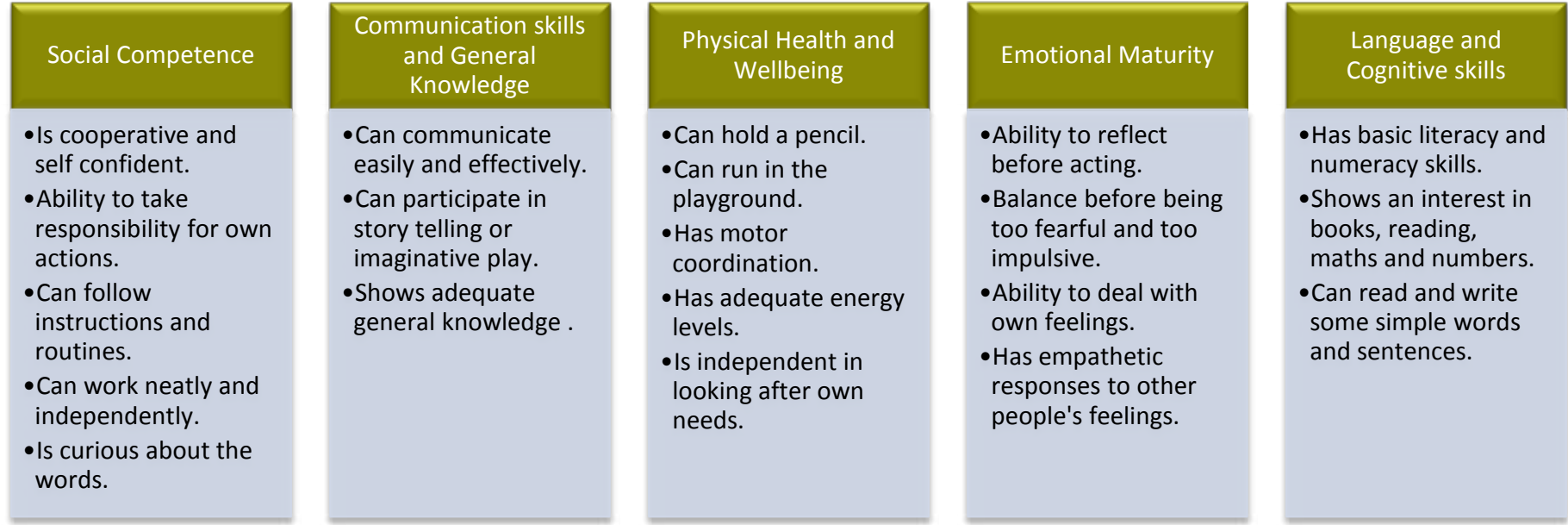
Region	2010		2011		2012		2013	
	No. of births	TFR	No. of births	TFR	No. of births	TFR	No. of births	TFR
Blacktown City	5,136	2.13	5,602	2.2	5,462	2.28	5,568	2.24
G/Sydney	65,106	1.83	66,448	1.83	66,470	...	66,868	1.85
NSW	95,918	1.86	99,054	1.91	98,508	1.97	100,462	1.95

Source: ABS National Regional Profile

Australian Early Development Index

The Australian Early Development Index is a measure of children’s development. It provides a national picture of children’s health and development. The index works by measuring the progress of children across five domains: social competence, communication skills, physical health, emotional maturity and language and cognitive skills.

Figure 2: Five domains of the Australian Early Development Index, Falzon, S (2011)



In 2012, the Australian Early Development Index was undertaken nationally for the second time with 5,149 five year old children in Blacktown City participating, (96% of all 5 year olds). Overall 23.9% of children were found to be developmentally vulnerable in one or more domains (Table 15). While there have been some improvements since 2009 there are still some suburbs of concern (Dean Park, Doonside, Hebersham, Lethbridge Park, Mount Druitt, Tregear, Whalan, Willmot and Woodcroft).

In terms of comparisons, Blacktown City had a proportionally higher number of vulnerable children in two or more domains than Greater Sydney and New South Wales (Table 16). Scores in Australian Early Development Index by a specific community or suburb were found to be linked with the SEIFA index and to the proportion of children who had participated in non-parental early childhood education or care. Knowing which areas need targeted assistance is critical for improving outcomes for these children and their families. In 2012, 89.6% of 5 year olds in Blacktown City who took part in the Australian Early Development Index had attended early education compared to 94.9% for New South Wales and 94.8% for the whole of Australia.

Table 15: Australian Early Development Index, suburbs in Blacktown City, vulnerable on one or more domains, %, SEIFA index score, 2009-2012

Local community	2009	2012	SEIFA index (score) - 2012	Local community	2009	2012	SEIFA index (score) - 2012
Acacia Gardens	8.9	13.2	1086	Oakhurst	37.7	27.5	994
Bidwill	45.7	34.0	623	Parklea	12.1	17.5	1094
Blackett	27.4	23.4	776	Plumpton	34.6	16.9	1005
Blacktown	30.1	24.3	956	Prospect	20.8	21.4	1040
Dean Park	16.3	37.8	983	Quakers Hill	30.3	20.0	1042
Dharruk	15.4	17.8	882	Riverstone/ Marsden Park/ Shanes Park	32.0	34.1	1003
Doonside	28.6	30.1	889				
Eastern Creek	16.7	Not available	949	Rooty Hill	18.8	21.3	974
Emerton	35.1	32.6	755	Schofields	17.2	16.1	1016
Glendenning	26.5	24.5	1010	Seven Hills	25.1	20.0	982
Glenwood	13.7	17.9	1089	Shalvey	43.1	31.6	776
Hassall Grove	39.0	21.9	994	St Marys surrounds	29.4	38.7	..
Hebersham	32.9	36.4	847	Stanhope Gardens	20.5	14.7	1096
Kellyville Ridge	23.6	13.6	1111	Tregear	25.8	40.3	742
Kings Langley	15.5	13.1	1087	Whalan	45.0	46.6	763
Kings Park	24.3	14.0	1060	Willmot	33.3	42.1	718
Lalor Park	14.4	14.0	923	Woodcroft	16.7	29.3	1068
Lethbridge Park	31.8	33.7	734	Blacktown City	26.9	23.9	968.5
Marayong	34.3	29.0	940	Greater Sydney	20.9	19.3	1011
Minchinbury	25.3	20.3	1027	New South Wales	21.3	19.9	995.8
Mount Druitt	26.6	28.4	896	Australia	23.6	22	1002

Source: AEDI Community Profile - Blacktown Community, 2009 & 2012

Table 16: Australian Early Development Index, suburbs in Blacktown City, vulnerable on two or more domains, %, SEIFA index score, 2009-2012

Local community	2009	2012	SEIFA index (score) - 2012	Local community	2009	2012	SEIFA index (score) - 2012
Acacia Gardens	8.9	5.3	1086	Oakhurst	23.0	15.3	994
Bidwill	31.9	20.8	623	Parklea	3.1	7.0	1094
Blackett	14.9	10.9	776	Plumpton	13.8	8.1	1005
Blacktown*	13.1	9.7	956	Prospect	7.5	12.3	1040
Dean Park	2.3	25.0	983	Quakers Hill	14.2	9.6	1042
Dharruk	10.3	6.7	882	Riverstone/ Marsden Park/ Shanes Park	18.6	14.8	1003
Doonside	13.7	17.2	889				
Eastern Creek	12.5	Not available	949	Rooty Hill	8.4	9.3	974
Emerton	19.4	19.6	755	Schofields	6.8	6.5	1016
Glendenning	14.2	10.2	1010	Seven Hills	14.6	9.4	982
Glenwood	5.9	7.2	1089	Shalvey	15.4	17.1	776
Hassall Grove	17.1	12.5	994	St Marys surrounds	5.9	19.4	N/A
Hebersham	17.7	17.2	847	Stanhope Gardens	10.7	5.5	1096
Kellyville Ridge	10.9	6.9	1111	Tregear	12.9	24.7	742
Kings Langley	5.4	3.3	1087	Whalan	25.0	27.2	763
Kings Park	8.1	4.0	1060	Willmot	20.8	26.3	718
Lalor Park	1.0	5.0	923	Woodcroft	9.1	12.2	1068
Lethbridge Park	14.8	20.2	734	Blacktown City	13.2	11.5	968.5
Marayong	18.3	10.8	940	Greater Sydney	9.6	8.6	1011
Minchinbury	12.0	11.1	1027	New South Wales	10.3	9.2	995.8
Mount Druitt	14.1	14.5	896	Australia	11.9	10.8	1002

Source: AEDI Community Profile - Blacktown Community, 2009 & 2012

Families

The number of one parent families continues to be high. We have 14,642 one parent families in our City (15.2%), higher than Greater Sydney (10.8%)(Table 17). This reflected concentration of public and social housing stock where many one parent families lived.

Table 17: Household by family type, Blacktown City and selected regions, 2006, 2011

Households by family type	2006			2011			Change 2006 to 2011
	Blacktown City		Greater Sydney	Blacktown City		Greater Sydney	
	Number	%	%	Number	%	%	
Couples with children	37,822	42.5	34.1	42,249	43.8	34.8	+4,427
Couples without children	16,927	19.0	22.0	18,330	19.0	22.6	+1,403
One parent families	13,630	15.3	10.6	14,642	15.2	10.8	+1,012
Other families	1,107	1.2	1.4	1,244	1.3	1.4	+137
Group household	1,924	2.2	3.9	2,090	2.2	4.1	+166
Lone person	14,199	15.9	21.6	15,103	15.7	21.5	+904
Other not classifiable household	3,073	3.5	5.6	2,381	2.5	4.1	-692
Visitor only households	353	0.4	0.8	361	0.4	0.9	+8
Total households	89,035	100.0	100.0	96,400	100.0	100.0	+7,365
Source: Australian Bureau of Statistics, Census of Population and Housing 2006 and 2011. Compiled and presented by .id, the population experts. Http://www.id.com.au							

Immunisation

Rates of immunisation for the most common childhood diseases is an indicator of the immediate and longer term health and well-being of the whole community. The immunisation rate in our City in 2011 to 2012 was 89.9%, marginally lower than New South Wales but a higher rate than most Greater Western Sydney local government areas with the exception of Auburn 87.9% and the Blue Mountains 85.4%.

“Our City is a youthful City with higher birth rates than many parts of Australia”



What do the community and service providers say?

Place

Blacktown Precinct

- There were plenty of family friendly activities and facilities (e.g. the Blacktown Showground Precinct).

Mount Druitt Precinct

- A lack of early childhood education and care programs to engage Aboriginal and Torres Strait Islander families.
- Concern about children unsupervised on the streets, particularly at night time.
- Child protection rates remain unacceptably high.
- Some parents lacked basic life skills and need intensive family support.
- There were still areas with many developmentally vulnerable children.
- Single mothers wanted a chance for education, low cost-housing, childcare and social support groups to give them and their children the best opportunities.
- Children in some areas experienced daily family violence, mental health, drug and alcohol issues.
- Parental lifestyle factors including smoking and poor nutrition had a negative influence on the pre-natal and post-natal experience of infants.

North West Precinct

- There were still areas with many developmentally vulnerable children.
- Residents were overwhelmingly positive about the range of activities and family friendly facilities in the city.
- The need for both parents to work drives extended hours of care for young children.

Target group

Aboriginal and Torres Strait Islander peoples

- Services noted the current measures of early childhood development do not always work with Aboriginal communities.
- A need for early childhood education and care programs to engage Aboriginal and Torres Strait Islander families.
- A need for targeted programs to support the development of healthy parenting practices.
- Services to support parents wanting to be involved in their child’s development.
- Elders said cultural heritage education for all the community, as well as local Aboriginal and Torres Strait Islander people, would be valuable, so culture was not lost.
- Teachers need to be trained about Aboriginal and Torres Strait Islander peoples’ culture and to share what they learn. Education should allow for participation from parents and other children.

“Residents are positive about family friendly activities and facilities in our City”

Children (0–11)

- Children were positive about places like schools, parks and where they live.
- Children felt uneasy about going to the shops.
- Children wanted facilities like a skate park, pools and play areas.
- Children felt safe and part of the community reporting people who live near their house would help them if they needed assistance.

Men

- Concern about long travel times and long working hours with children spending long periods in care.

Older people

- Unsupervised children and their exposure to negative influences was of concern to some residents.

People from culturally and linguistically diverse communities

- Accessing childcare was complex and challenging for many refugees and asylum seekers.
- Newly arrived migrant communities often required parental support.
- Family reunification was becoming more difficult.

People with disability

- Children with disability needed opportunities to be involved in recreational activities.

Women

- There was an even divide between those who were positive about childcare affordability and those who said we needed more child care places and affordable childcare in some areas of the city.
- Single mothers wanted a chance for education, low cost-housing, childcare and social support groups to give them and their children the best opportunities.
- A need for more intensive family support for parents who lack basic life skills.
- The need within families for both parents to work was driving extended hours of care for young children.

Young people (12 – 24)

- Targeted, intense support was needed for young parents who were at home and in schools.
- Single parents and young parents continued to need services to support them.
- Affordable, accessible childcare for young parents made their participation in community life easier.



key findings

- There were still areas where we have lots of developmentally vulnerable children.
- There were 12,319 children living in poverty (see social exclusion chapter).
- A need for more intensive family support for parents who lack basic life skills.
- Targeted, intense support was needed for parents with specific needs (young parents, refugees and Aboriginal and Torres Strait Islander families).
- Single parents and young parents continued to need services to support them.
- Services noted the current measures of early childhood development did not always work with Aboriginal communities.
- Child protection rates remained unacceptably high.
- Children in some areas experienced daily family violence, mental illness and drug and alcohol issues.
- Some residents expressed concern about the incidence of children being unsupervised and their exposure to negative influences.
- The need within families for both parents to work, long travel times and long working hours was driving extended hours of care for young children.



social exclusion

“Poverty relative deprivation and social exclusion have a major impact on health and premature death, and the chances of living in poverty are loaded heavily against some social groups ... The stresses of living in poverty are particularly harmful during pregnancy, to babies, children and older people. Social exclusion results from racism, discrimination, stigmatization, hostility and unemployment.

These processes prevent people from participating in education or training, and gaining access to services and citizenship activities. They are socially and psychologically damaging, materially costly, and harmful to health ... The greater the length of time that people live in disadvantaged circumstances, the more likely they are to suffer from a range of health problems.”

- Wilkinson & Marmot 2003

Why social exclusion and why is it important?

A socially inclusive society is defined as one ‘where all people feel valued, their differences are respected, and their basic needs are met, so they can live in dignity. Social networks can provide social support, social influence, opportunities for social engagement and meaningful social roles as well as access to resources and intimate one-on-one contact’ (Berkman LF & Glass T 2000).

Social exclusion is ‘the process of being shut out from the social, economic, political and cultural systems which contribute to the integration of a person into the community’. (Cappo D, 2002) Individuals may be socially excluded as a consequence of racism, discrimination, stigmatisation, poverty and unemployment. People experiencing social isolation and social exclusion may experience low levels of personal control, loneliness and unhappiness. They have also been found to experience high levels of stress and depression, higher mortality rates for all causes of death, and have a greater need for mental health services.

What does the data say?

Poverty

Poverty restricts the social mobility of individuals as well as their ability to provide for themselves. It is estimated that in 2011 we had 40,422 people, including 12,319 children, living in poverty with rates higher than a number of Greater Western Sydney local governments, New South Wales and Australia (Table 18).

The Melbourne Institute of Applied Economic and Social Research define poverty lines according to family type and labour force status. For a single adult in the workforce in Australia, the level was at \$511 per week (December quarter of 2014) and \$414 for a person not in the workforce. For a couple with two children the equivalent figures were \$961 and \$864; for a single parent family with two children, the figures are \$795 and \$698 respectively (Table 19). Using these benchmarks, the data shows that in Blacktown City in 2011, there were comparatively higher proportions of households across most categories with weekly incomes below the poverty line. For income levels the South West / Mount Druitt precinct was the most disadvantaged.

Table 18: Disadvantage indicators by Blacktown City and selected regions, 2011

Region	Persons living in poverty		Children in poverty 0 to 14 years		Child social exclusion Index dependent children aged 0-15 years	
	Number	Rate (%)	Number	Rate	CSE dependent children	CSE Index weighted quintile
Auburn	11,932	16.7	3,771	26.1	30.93	1
Bankstown	..	..	..	..	28.42	1
Blacktown City	40,422	13.6	12,319	17.3	25.87	1
Blue Mountains	7,868	10.7	1,592	10.8	6.82	5
Camden	4,620	8.3	1,222	8.9	8.42	4
Campbelltown	22,154	15.4	6,451	20.2	31.69	1
Fairfield	..	..	..	..	36.05	1
Hawkesbury	7,089	11.7	1,673	12.6	11.44	4
Holroyd	14,843	15.2	4,200	20.3	24.55	2
Liverpool	18,112	17.4	4,639	19.4	24.54	2
Parramatta	17,769	14.0	3,993	17.2	22.35	2
Penrith	21,246	12.2	5,881	15.3	19.21	2
The Hills	14,070	8.5	3,716	10.3	3.28	5
Wollondilly	4,379	10.3	1,184	11.9	9.35	4
New South Wales	..	12.8	..	13.8	..	..
AUSTRALIA	..	10.2	..	11.6	..	..

NATSEM, University of Canberra 2013 National Centre for Social and Economic Modelling ACT 2601 AUS

Table 19: Weekly income by family type, Blacktown City and selected regions, 2011

Region	\$0-\$399		\$400-\$999		\$1000 or more		Total
	No.	%	No.	%	No.	%	
	Couple family without children						
Blacktown City	1,257	6.6	6,696	35.4	10,970	58.0	18,923
Blacktown North	387	4.5	1,800	20.8	6,458	74.7	8,645
Blacktown South East	497	7.2	2,655	38.5	3,745	54.3	6,897
Blacktown South West	374	7.2	2,243	43.3	2,567	49.5	5,184
GWS	8,701	6.6	48,844	36.9	74,981	56.6	132,526
Sydney SD	19,826	5.6	110,415	31.1	224,480	63.3	354,721
	Couple family with children						
Blacktown City	1,017	2.8	5,275	14.6	29,741	82.5	36,033
Blacktown North	243	1.6	1,233	8.4	13,275	90.0	14,751
Blacktown South East	355	3.0	1,896	16.1	9,562	80.9	11,813
Blacktown South West	410	3.5	2,151	18.6	9,027	77.9	11,588
GWS	6,788	2.9	37,142	15.9	190,118	81.2	234,048
Sydney SD	11,765	2.4	61,981	12.6	417,182	85.0	490,928
	Single Parent						
Blacktown City	2,076	15.0	3,762	27.3	7,961	57.7	13,799
Blacktown North	396	11.4	1,345	38.9	1,719	49.7	3,460
Blacktown South East	396	8.7	2,299	50.4	1,863	40.9	4,558
Blacktown South West	1,172	20.6	2,691	47.4	1,814	32.0	5,677
GWS	13,229	20.1	33,923	51.7	18,512	28.2	65,664
Sydney SD	23,648	14.8	63,461	39.8	72,526	45.4	159,635
	Other						
Blacktown City	91	8.0	370	32.4	682	59.7	1,143
GWS	700	9.2	2,546	33.6	4,335	57.2	7,581
Sydney SD	2,226	11.0	5,999	29.7	11,978	59.3	20,203

Source: Australian Bureau of Statistics, Census of Population and Housing 2011. Compiled and presented by .id, the population experts.
Http://www.id.com.au

“In 2011, around 12,000 children were living in poverty”



Migrant settlement

Recent arrivals to a new country often feel socially excluded from the broader community due to various reasons including language and cultural differences and barriers, lack of understanding of local systems and processes and in some cases racism and stigmatisation. These exclusions are often more overwhelming for newly-arrived humanitarian entrants fleeing from countries because of war, religious or ethnic persecution and political strife. Settlement numbers in Blacktown City have been decreasing since 2011 with the largest reduction occurring in the ‘skilled’ migration stream. Still we remain a favoured destination for recent arrivals in all migration categories (Table 20). However, this cannot be taken as evidence that social exclusion for recent arrivals is diminishing, especially when evidence about racism and other forms of exclusionary experience from our community engagement is taken into account.

English language proficiency among residents of our City had changed slightly with the proportion of residents speaking ‘English only’ falling from 62.2% to 58.9% between 2006 and 2011. However, the majority of the fall appears to be associated with an increase in the proportion of the population speaking another language but also speaking English very well, which increased in the same period from 28% to 32.2%.

Internet connectivity

Another important indicator of social exclusion is the level of internet connectivity across the city. A significant proportion of residents reported no internet connection of any type in their home (34.4%) at the last census and this was significantly higher than the proportion for Greater Sydney overall 27.9%. However, internet connectivity at home may now be a less effective indicator of social exclusion, given the rise of wireless internet access not fixed to particular locations and the use of smart phones. Both of these options are often the preferred platforms for access among people.



Table 20: Settlement data by migration stream, Blacktown City and selected regions, 2011- 2014

Region	2011		2012		2013		2014	
	No.	%	No.	%	No.	%	No.	%
Humanitarian								
Blacktown City	444	14.4	362	12.1	417	15.7	340	16.1
Sydney SD	4,293	8.6	3,818	7.2	4,094	8.3	3,583	10.2
NSW	4,798	8.1	4,555	7.0	4,838	8.0	4,433	9.8
Family								
Blacktown City	1,248	40.5	1,209	40.5	1,117	42.0	781	37.0
Sydney SD	19,928	39.8	19,468	36.7	18,928	38.5	11,971	34.1
NSW	22,951	38.8	22,727	35.1	22,523	37.4	15,050	33.4
Skilled								
Blacktown City	1,086	35.2	920	30.8	484	18.2	211	10.0
Sydney SD	19,735	39.4	16,733	31.6%	17,751	36.1	5,242	14.9
NSW	24,064	40.7	21,912	33.8%	11,193	18.6	7,034	15.6
Other								
Blacktown City	5	0.2	-	0.0	-	0.0	-	0.0
Sydney SD	6	0.0	7	0.0	3	0.0	1	0.0
NSW	7	0.0	7	0.0	3	0.0	1	0.0
Unknown								
Blacktown City	301	9.8	493	16.5	642	24.1	776	36.8
Sydney SD	6,072	12.1	12,971	24.5	8,397	17.1	14,312	40.8
NSW	7,335	12.4	15,593	24.1	21,736	36.1	18,564	41.2
Total								
Blacktown City	3,084	100.0	2,984	100.0	2,660	100.0	2,108	100.0
Sydney SD	50,034	100.0	52,997	100.0	49,173	100.0	35,109	100.0
NSW	59,155	100.0	64,794	100.0	60,293	100.0	45,082	100.0

Source: DIAC Settlement Database

What do the community and service providers say?

Place

Blacktown Precinct

- Access for people with limited mobility and in wheelchairs was still challenging in many areas of the city.
- Cultural diversity made some residents uncomfortable but many residents valued Blacktown’s cultural diversity.
- Concern about the media portrayal of Blacktown City.

Mount Druitt Precinct

- Lifts were a priority at a number of railway stations including Rooty Hill and Doonside.
- Some residents reported unequal access to computers, relevant skills and network speeds.
- The implementation of MyGov services, with federal government agencies, was challenging for people who lack computer skills.
- Cultural diversity made some residents uncomfortable.
- There was intergenerational disadvantage and welfare dependency in some families and locations.
- There were negative perceptions about people who were socially disadvantaged.

- People who identify as socially disadvantaged felt they were not treated well in the community.
- Concern about negative stereo-typing of people who lived in the area.

North West Precinct

- Cultural diversity made some residents uncomfortable but many residents in new estates valued diversity.
- There were still areas with poor internet connection, even in new estates. The National Broadband Network roll out was a long wait for some.

“People who identify as socially disadvantaged felt they were not treated well in the community”



Target group

Aboriginal and Torres Strait Islander peoples

- The implementation of MyGov services, with federal government agencies, was challenging for people who lack computer skills.
- Cultural diversity made some residents uncomfortable.
- A lack of cultural sensitivity training run by Aboriginal and Torres Strait Islander peoples.
- Elders said cultural heritage education was needed for the whole community, as well as local Aboriginal and Torres Strait Islander people, and would ensure that Aboriginal and Torres Strait Islander culture was not lost.
- Concerns about an increase in public abuse directed at Aboriginal and Torres Strait Islander people.
- Many Aboriginal and Torres Strait Islander people were concerned that partnerships between their community and government were not meaningful.
- Acknowledgement of Aboriginal ‘country’, flying the Aboriginal and Torres Strait Islander flags, signage and preservation of heritage was important.
- A need to break the cycle of welfare dependency which had entered the second and third generations in some families.
- There was conflict within the community about issues of Aboriginal and Torres Strait Islander peoples’ identity particularly in relation to recognition of Darug peoples.

Children (0–11)

- Concern about bullying and racism in schools.
- Representatives from Parents and Friends of Lesbians and Gays, a support group, said children from lesbian, gay, bi-sexual, transgender, inter-sex and ‘questioning’ communities were often victims of prejudice, (social, political and economic).

Lesbian, gay, bi-sexual, transgender, inter-sex and questioning (LGBTIQ)

- A lack of information about the needs and issues facing our lesbian, gay, bi-sexual, transgender, inter-sex and ‘questioning’ communities.
- Concern about homophobia.

Men

- People want a greater mix of housing types rather than concentrations of social housing.
- Concern about intergenerational relationships between older and young people.

Older people

- Access for people with limited mobility and in wheelchairs was still challenging in many areas of the city.
- Residents report lifts were a priority at a number of stations including Rooty Hill, Doonside and Toongabbie.
- The implementation of MyGov services, with federal government agencies, was challenging for many who lacked skills using computers.

“Many described Blacktown City as a harmonious multicultural and diverse community”

- Cultural diversity made some residents feel uncomfortable.
- A need for facilities and activity spaces which can be used for community activities including worship, learning and socialising.

People from culturally and linguistically diverse communities

- Incidents of discrimination, public abuse and racism.
- Language difficulties were a barrier and a lack of interpreter services.
- Low levels of English literacy excluded new arrivals from participating in society.
- Difficulties in understanding cultural ‘norms’ and the ‘Australian service system’.
- Many described Blacktown City as a harmonious multicultural and diverse community.
- A lack of language skills and racism isolated young people at school.

People with disability

- Access for people with limited mobility and in wheelchairs was still challenging in many areas of the city.
- Discrimination continued to be an issue for some of our residents with a disability.
- Young people with a disability wanted to be included into mainstream services.
- Social exclusion can be more than just physical access and needs, it also included involving and employing people with a disability in the full spectrum of activities.

Women

- Concern about tension in communities due to media and government focus on terrorism and migration.
- There was intergenerational disadvantage and welfare dependency in some families and locations.

Young people (12 – 24)

- Living in the rural areas of the city was a perceived and real barrier to participating in activities and accessing services (Riverstone).
- Young people reported feeling excluded if they do not fit in with the youth sub-cultures around them.
- Stereotyping of young people as 'ratbags' and 'threatening' made many feel excluded and unsafe.
- It was important for young people with a disability to be included into mainstream services.



key findings

- A large number of people and children in Blacktown City faced social exclusion due to living in poverty.
- Intergenerational disadvantage with welfare dependency in some areas was a concern.
- There was an ongoing need to build relationships, trust and partnerships between Aboriginal and Torres Strait Islander peoples, governments and others.
- Supports were required for newly arrived communities, especially humanitarian migrants and asylum seekers.
- Language skills and a lack of information in community languages remained a barrier for migrants and refugees.
- Incidents of discrimination, public abuse and racism were an increasing concern.
- Cultural diversity made some residents uncomfortable but many residents valued Blacktown's cultural diversity.
- Concern about tension in communities due to media and government focus on terrorism and migration was an emerging concern.
- Discrimination continued to be an issue for some of our residents with a disability.
- Concern about homophobia and the lack of information about the needs and issues facing our lesbian, gay, bi-sexual, transgender, inter-sex and 'questioning' communities was raised.
- Concern about the media portrayal of Blacktown City.
- Unequal access to computers, relevant computer skills, internet and network speeds to support work and recreation.



work

“Stress in the workplace increases the risk of disease ... In general, having a job is better for health than having no job ... stress at work plays an important role in contributing to the large social status differences in health, sickness absence and premature death ... the psychosocial environment at work is an important determinant of health and contributor to the social gradient in ill health.”

- Wilkinson & Marmot 2003

Why ‘work’ and why is it important?

Individuals and families need work that is sufficiently paid, meaningful and safe for health and well-being. There are significant economic implications where individuals and families do not have work. This is a major challenge in the current working environment in Australia as many workers are unable to find work that is appropriate to their needs.

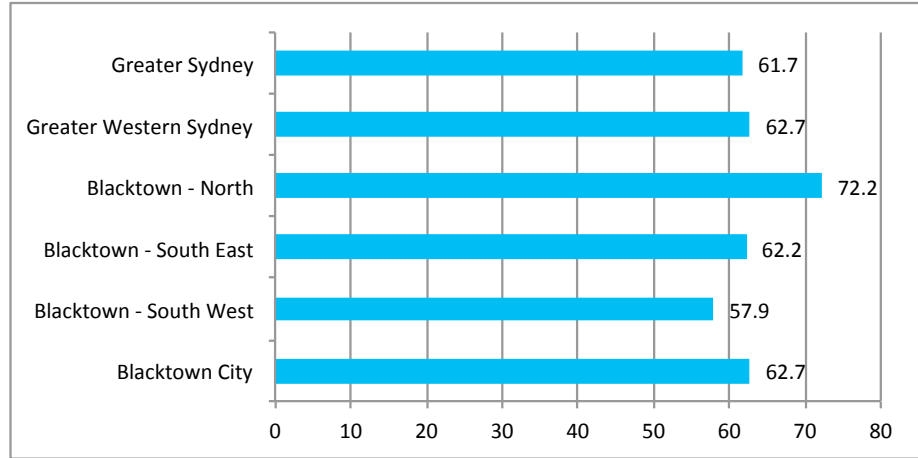
Work is an important social determinant of health, providing people with meaningful occupations, opportunities for social engagement and financial and personal autonomy. However, it can be a two-edged sword as stress at work plays an important role in contributing to major social status differences in health, sickness, absence and premature death. The psycho-social environment at work is an important determinant of health and contributor to the social gradient in ill health.

What does the data say?

Workforce participation

The labour force participation rate refers to the proportion of the population aged 15 years and over that was employed or actively looking for work. Our participation rates show we are well connected to the workforce. The 2011 census results show a participation rate of 62.7% higher than Greater Sydney’s 61.7% (Figure 3). We have improved from a participation rate of 61.8 in 2006.

Figure 3: Labour force status (participation), all persons, Blacktown City and selected regions, ABS Census, 2011



“Workforce participation in our City is increasing”



Employment status

We had more people employed and working full-time, (63.6%), compared to Greater Western Sydney (62.9%) and Greater Sydney (62.1%). The proportion identified as unemployed and looking for work however was slightly higher in Blacktown (7.1%) than Greater Western Sydney (6.5%) and Greater Sydney (5.7%) (Table 21). Consistent with other data, the measures of disadvantage were most pronounced for the residents of the Mount Druitt precinct where participation rates were lower and unemployment rates higher.

There was a difference between the labour force status of males and females. In 2011, the number of males who were employed and worked full time was 57,801 compared to 33,818 females. At the same time, the number of females who worked part-time was 22,492 compared to 11,395 males. The different trends in labour force status between males and females in Blacktown City mirrored the trends across Greater Sydney and New South Wales.



Table 21: Employment status, all persons, Blacktown City and selected regions, ABS Census, 2006, 2011

Employment status	2006				2011			
	Blacktown City		Greater Western Sydney	Greater Sydney	Blacktown City		Greater Western Sydney	Greater Sydney
	Number	%	%	%	Number	%	%	%
Employed	118,052	93.2	93.4	94.7	133,788	92.8	93.5	94.3
Employed full-time	82,139	64.9	62.0	63.0	91,619	63.6	62.9	62.0
Employed part-time	31,479	24.9	28.8	28.9	38,510	26.7	27.3	30.1
Hours worked not stated	4,434	3.5	2.6	2.8	3,659	2.5	3.3	2.1
Unemployed (Unemployment rate)	8,605	6.8	6.6	5.3	10,310	7.2	6.5	5.7
Looking for full-time work	5,652	4.5	4.0	3.3	6,472	4.5	4.2	3.3
Looking for part-time work	2,953	2.3	2.6	2.1	3,838	2.7	2.3	2.4
Total Labour Force	126,657	100.0	100.0	100.0	144,098	100.0	100.0	100.0

Source: Australian Bureau of Statistics, Census of Population and Housing 2011. Compiled and presented by .id, the population experts. [Http://www.id.com.au](http://www.id.com.au)

Hours worked are a likely indicator of poor work-life balance and workplace stress. Although no formal benchmark for overwork is used, it is important to note that 30.8% of female workers and over 54.9% of male workers in our City reported working 40 hours per week or more at the last census. In contrast, only 5.9% of females worked 49 hours or more per week compared to 17.3% of male, both of these lower than rates in comparative regions and New South Wales.

Occupations

Occupations are often associated with a person’s income and social mobility. Skilled occupations or professions are more likely to contribute to a higher income levels and greater social mobility than less skilled or unskilled occupations. The occupational mix for our residents remained somewhat skewed toward the lower end of the skills hierarchy with comparatively fewer people employed in skilled occupations than in Greater Western Sydney or Greater Sydney (Table 22).

It is important to note the differences in occupational categories between the three Blacktown City precincts compared to the city as a whole and Greater Sydney. These reflected structural changes at an industry level with some industries recording falls in employment (agriculture) and others reporting rises (community and personal service workers). The 2016 census will provide us more information on these changes.

In addition there continued to be a gender bias across many of the occupations, for example very few females employed as technicians and trades workers and fewer males employed as clerical and administrative workers. Male dominated occupations and female dominated occupations were evident in most parts of Australia.



Table 22: Occupation by number of persons, Blacktown City and selected regions, 2011

Region	Managers	Professionals	Technicians & trades workers	Community & personal service workers	Clerical & admin. workers	Sales workers	Machinery operators and drivers	Labourers	Occupation inadequately described	Not stated	Total
Number of persons											
Blacktown City	12,085	23,336	18,126	11,953	24,432	12,409	14,565	14,052	1,435	1,392	133,785
Blacktown North	6,313	11,248	6,852	4,271	9,779	4,919	3,782	3,827	508	389	51,888
Blacktown South-East	3,406	7,479	6,137	3,943	8,011	3,941	4,678	4,780	525	514	43,414
Blacktown South-West	2,366	4,609	5,137	3,739	6,642	3,549	6,105	5,445	402	489	38,483
GWS	85,927	148,489	117,758	71,785	142,129	75,875	74,279	79,178	8,913	8,712	813,045
Greater Sydney	273,917	526,563	251,472	182,059	333,434	185,950	118,137	151,325	22,493	17,918	1103994
% of persons											
Blacktown City	9.0	17.4	13.5	8.9	18.3	9.3	10.9	10.5	1.1	1.0	100.0
Blacktown North	12.2	21.7	13.2	8.2	18.8	9.5	7.3	7.4	1.0	0.7	100.0
Blacktown South-East	7.8	17.2	14.1	9.1	18.5	9.1	10.8	11.0	1.2	1.2	100.0
Blacktown South-West	6.1	12.0	13.3	9.7	17.3	9.2	15.9	14.1	1.0	1.3	100.0
GWS	10.6	18.3	14.5	8.8	17.5	9.3	9.1	9.7	1.1	1.1	100.0
Greater Sydney	13.3	25.5	12.2	8.8	16.2	9.0	5.7	7.3	1.1	0.9	100.0

Source: 2011 Census of Population and Housing

What do the community and service providers say?

Place

Blacktown Precinct

- Proximity to work was valued.

Mount Druitt Precinct

- Residents reported they would like to work more but “there were not the jobs locally”.
- There were many people who wanted to work and valued the availability of local jobs.
- Transport was a barrier to being able to get a job for people who lived in isolated areas (Bidwill, Willmot).

North West Precinct

- Proximity to work was valued.
- Some residents travelled a long way to work.
- Transport was a barrier to being able to get a job for people who live in isolated areas (Riverstone).

Target group

Aboriginal and Torres Strait Islander peoples

- There were barriers to employment and education.
- Employment of Aboriginal and Torres Strait Islander people in mainstream positions, traineeships/apprenticeships, opportunities for young people and a focus on improving skills.
- Having ‘identified’ Aboriginal and Torres Strait Islander positions improved employment outcomes.

Children (0–11)

- Not reported in community engagement.

Men

- Proximity to work was valued.
- Many respondents believed work should be available locally and there were opportunities because of the development of employment lands in the south of the city.
- Transport was a barrier to being able to get a job for people who lived in isolated areas (Riverstone, Bidwill and Willmot).
- Some residents had to travel a long way to work.

Older people

- Job services said there was underemployment of mature aged residents willing to work.

“More local job opportunities are needed in our City”



People from culturally and linguistically diverse communities

- Work was a priority, to support obligations for family here and overseas, ahead of study or strengthening skills and employability.
- There were different attitudes towards workplace practice across cultural groups leading to misunderstandings and difficulties.
- Harassment and discrimination existed in some workplaces.
- Skills training and support in relation to the “Australian way of life” was needed.

People with disability

- Work provided more than an income, it was also an opportunity for socialising and participating.
- Access for people with limited mobility and in wheelchairs was still a barrier to getting a job.

Women

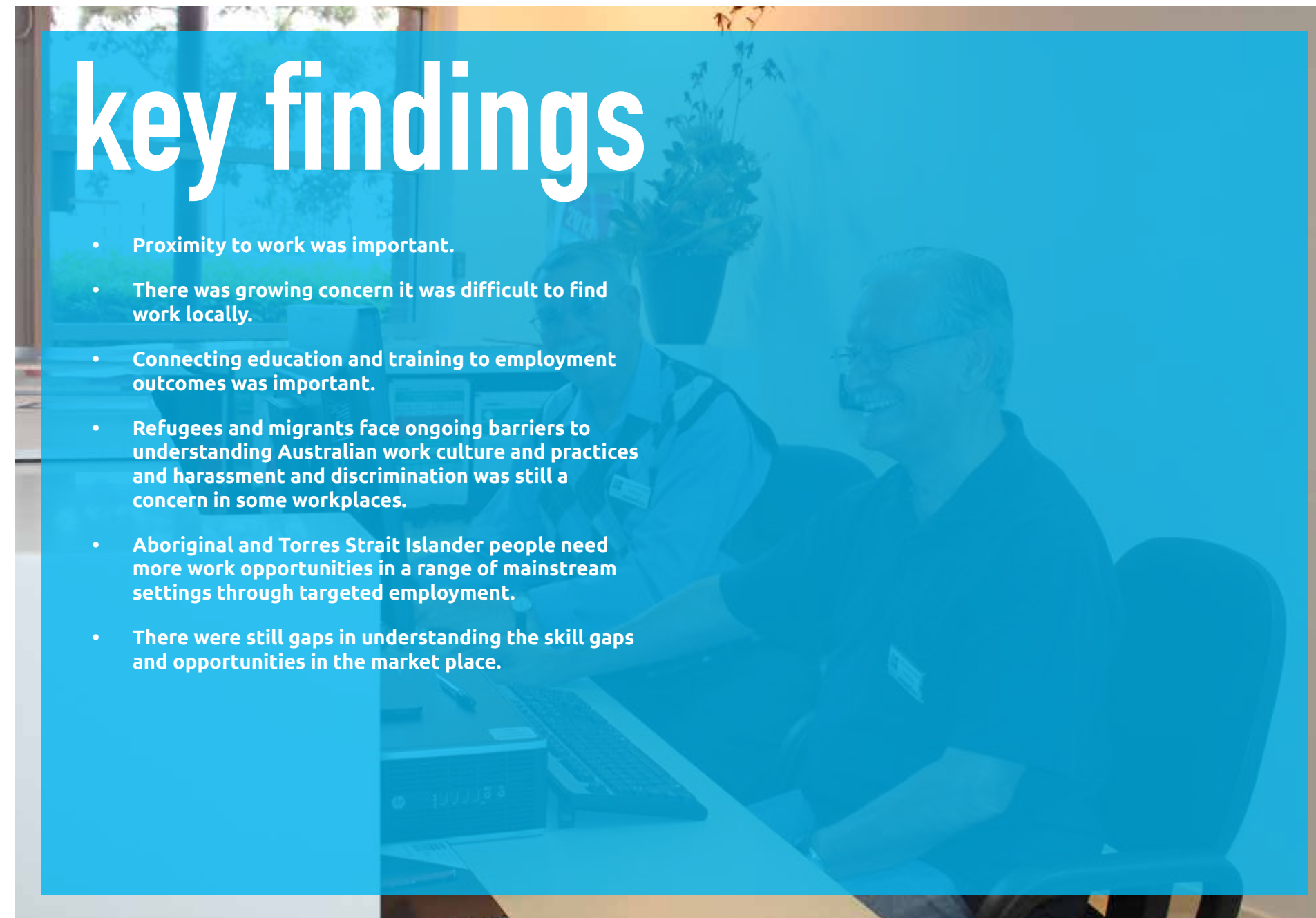
- A shortage of affordable child care impacted some people’s availability for work.

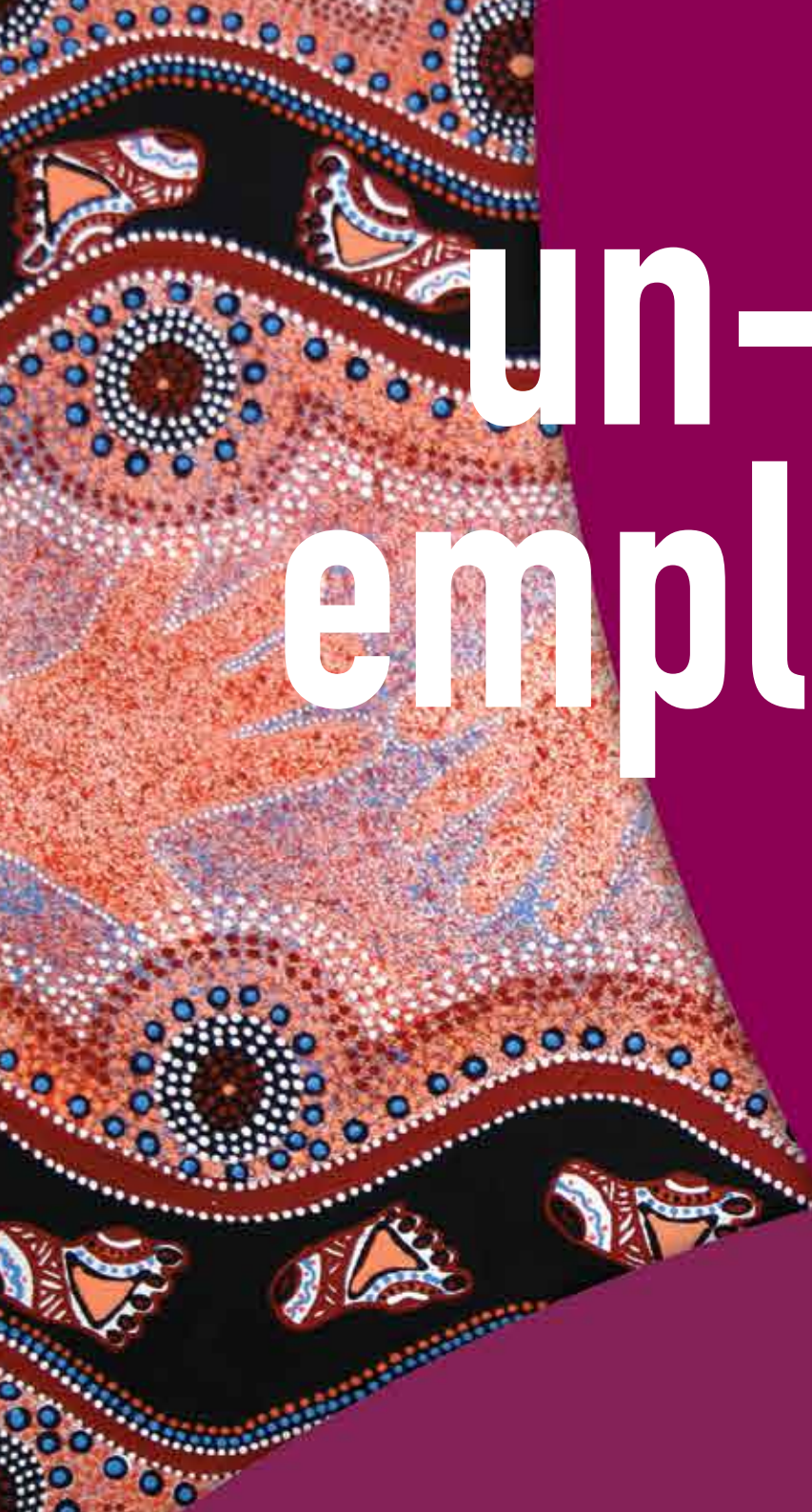
Young people (12 – 24)

- Not reported in community engagement.

key findings

- Proximity to work was important.
- There was growing concern it was difficult to find work locally.
- Connecting education and training to employment outcomes was important.
- Refugees and migrants face ongoing barriers to understanding Australian work culture and practices and harassment and discrimination was still a concern in some workplaces.
- Aboriginal and Torres Strait Islander people need more work opportunities in a range of mainstream settings through targeted employment.
- There were still gaps in understanding the skill gaps and opportunities in the market place.





un- employment

“Unemployment puts health at risk, and the risk is higher in regions where unemployment is widespread ... The health effects of unemployment are linked to both its psychological consequences and the financial problems it brings – especially debt ... Job security has been shown to increase effects on mental health... unsatisfactory or insecure jobs can be as harmful as unemployment ... job quality is also important.”

- Wilkinson & Marmot 2003

Why ‘unemployment’ and why is it important?

Unemployment has immediate and long term impacts on individuals, their families and the wider community and may even result in intergenerational disadvantage.

People who were unemployed are at a greater risk of poverty due to a lack of income, which over time can lead to economic and other hardships. They may also miss out on social contact and networks that are an important part of being in the work environment. Living with financial and other disadvantage can also make it harder for unemployed persons to gain employment and escape from that hardship by any kind of social mobility. In these circumstances, the social life of communities can also deteriorate with increasing antisocial behaviour, vandalism, malicious damage and petty theft.

What does the data say?

Unemployment

Unemployment in Blacktown City remained higher compared to Greater Sydney, New South Wales and Australia (Table 23). Unemployment rates and numbers varied considerably across Blacktown City. There were sharp differences in unemployment rates for each small area market within the city and this highlights the areas that were experiencing greater financial and social hardship. In March 2015 the unemployment rates in Bidwill/Hebersham/Emerton 20.7%, Lethbridge Park – Tregear 19.3% and Mount Druitt – Whalan 15% were markedly higher than in most areas of the city (Table 24). Parklea - Kellyville Ridge had the lowest rate at 1.7%. The trend was concerning with the improvements seen during 2012 to 2013 disappearing.

“Unemployment rates vary considerably across our city”



Table 23: Unemployment, small area labour markets, Blacktown City and selected regions, number and rate, quarterly, 2010-2015

Period		Blacktown City			Greater Sydney	New South Wales	Australia
Year (June quarter)	Quarter	Unemployed persons	Workforce	Unemployment rate %	Unemployment rate %	Unemployment rate %	Unemployment rate %
2010	December	10125	159829	6.3	5.0	4.9	5.0
2011	December	9342	161382	5.8	5.1	5.2	5.2
2011	September	9425	161416	5.8	4.9	5.3	5.2
2011	June	9462	161553	5.9	4.8	5.2	5.0
2011	March	9878	160612	6.2	4.9	5.0	4.9
2012	December	7510	161749	4.6	4.8	5.1	5.4
2012	September	7181	160146	4.5	5.0	5.0	5.3
2012	June	7732	159460	4.8	5.1	5.0	5.2
2012	March	8623	160367	5.4	5.1	5.0	5.1
2013	December	12323	166572	7.4	5.4	5.7	5.8
2013	September	11632	167179	7.0	5.1	5.8	5.7
2013	June	9651	165618	5.8	4.9	5.6	5.7
2013	March	8256	163745	5.0	4.9	5.4	5.5
2014	December	11374	172016	6.6	5.2	6.0	6.2
2014	September	12136	168362	7.2	5.3	5.9	6.2
2014	June	13322	166578	8.0	5.4	5.7	6.1
2014	March	12291	165132	7.4	5.4	5.5	5.9
2015	March	11914	174247	6.8	5.2	6.0	6.1

Source: Australian Bureau of Statistics, Labour force survey catalogue number 6202.0, and Department of Employment, Small Area Labour Markets, Q4 2011 and Q4 2014. Compiled and presented by .id The population experts. <http://www.id.com.au>

Table 24: Smoothed Unemployment Rate (%), small area markets, Blacktown City small areas, 2010-2015

Statistical Area Level 2 (SA2)	Mar-11	Jun-11	Sep-11	Dec-11	Mar-12	Jun-12	Sep-12	Dec-12	Mar-13	Jun-13	Sep-13	Dec-13	Mar-14	Jun-14	Sep-14	Dec-14	Mar-15
Blacktown (East) - Kings Park	6.2	6.2	6.1	5.9	5.5	5.0	4.6	4.9	5.3	6.1	7.2	7.6	7.4	7.9	7.0	6.4	6.6
Blacktown (North) - Marayong	6.5	6.2	6.3	6.3	5.9	5.2	4.6	4.7	5.2	6.2	7.6	8.3	8.6	9.2	8.2	7.6	7.8
Blacktown (South)	6.0	5.7	5.7	5.6	5.2	4.6	4.3	4.6	5.0	5.8	6.9	7.2	7.2	7.8	7.0	6.5	6.8
Doonside - Woodcroft	7.1	6.7	6.7	6.7	6.3	5.7	5.3	5.4	5.9	6.8	8.1	8.6	8.6	9.3	8.4	7.7	8.0
Lalor Park - Kings Langley	4.6	4.4	4.4	4.4	4.1	3.7	3.5	3.5	3.8	4.4	5.3	5.6	5.6	6.1	5.6	5.2	5.4
Seven Hills - Toongabbie	4.5	4.3	4.2	4.1	3.8	3.4	3.1	3.2	3.6	4.2	5.2	5.6	5.6	5.8	5.1	4.6	4.7
Glenwood	1.7	1.6	1.6	1.6	1.5	1.4	1.3	1.3	1.4	1.6	1.9	2.1	2.2	2.3	2.1	1.9	1.9
Parklea - Kellyville Ridge	1.4	1.3	1.3	1.3	1.2	1.1	1.0	1.1	1.2	1.3	1.6	1.6	1.7	1.9	1.7	1.6	1.7
Quakers Hill - Acacia Gardens	2.6	2.4	2.4	2.4	2.3	2.1	2.0	2.0	2.2	2.6	3.1	3.4	3.4	3.6	3.2	2.9	3.0
Riverstone - Marsden Park	5.3	5.0	5.0	5.0	4.6	4.2	4.0	4.2	4.8	5.7	6.8	7.3	7.2	7.7	6.8	6.0	5.9
Bidwill - Hebersham - Emerton	17.8	17.0	17.2	17.1	15.8	14.3	13.2	13.3	14.6	16.7	19.6	21.0	21.1	23.0	21.1	19.9	20.7
Glendenning Dean Park	4.5	4.3	4.4	4.5	4.3	3.9	3.6	3.5	3.6	4.3	5.2	5.6	5.6	5.9	5.1	4.5	4.6
Hassall Grove - Plumpton	4.5	4.4	4.3	4.2	3.8	3.3	3.1	3.3	3.6	4.1	5.0	5.3	5.5	6.2	5.7	5.3	5.4
Lethbridge Park - Tregear	19.6	18.3	17.9	17.6	16.1	14.7	13.7	14.0	14.9	17.0	20.2	21.6	21.9	23.4	20.7	18.8	19.3
Mount Druitt - Whalan	12.3	11.9	12.0	11.9	11.3	10.2	9.4	10.0	10.9	12.6	15.2	16.1	16.1	17.2	15.6	14.2	15.0
Rooty Hill - Minchinbury	4.5	4.2	4.2	4.1	3.9	3.6	3.3	3.5	3.8	4.4	5.3	5.6	5.6	5.9	5.3	4.9	5.2

Source: Department of Employment, Labour Market Analysis ,Labour Market Research and Analysis Branch, 2015

Youth unemployment

Youth unemployment has become a major issue both in Australia and internationally in recent decades. Young people are often transitioning between employment and education and this can make it difficult to assess their employment status. In December 2014, the unemployment rate for persons aged 15-24 in Blacktown City was 12.1%, an increase of 3.3% from January 2012 (Table 25). While the rate was higher than Greater Western Sydney (11.4%) and Greater Sydney (11.1%) it was lower compared to New South Wales (12.4%) which included rural and regional areas which were experiencing higher rates of unemployment than many urban centres.

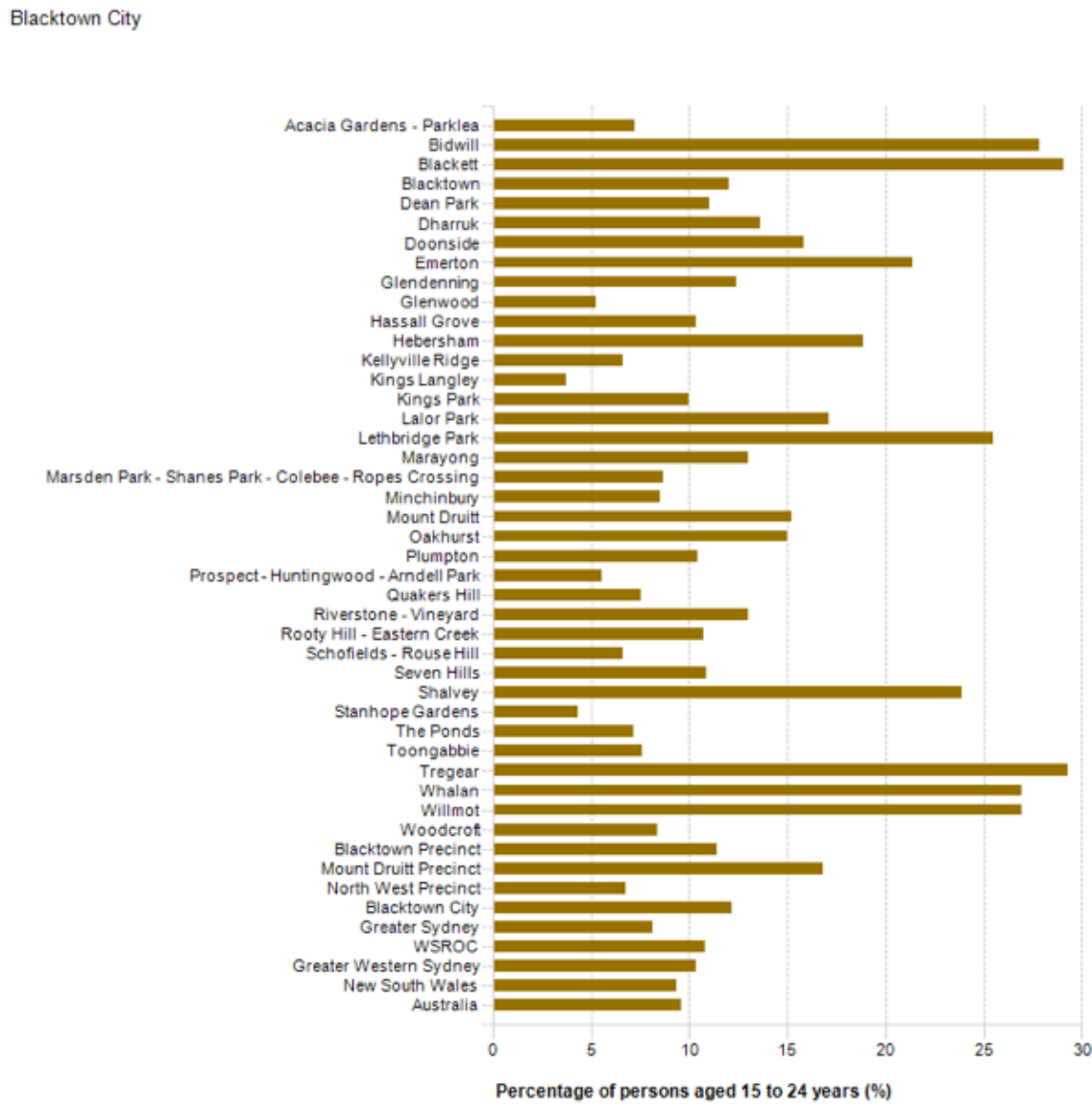
The census provided information on youth disengagement (not employed and not in education) confirming engaging young people is important to respond to youth unemployment (Figure 4). There were very different rates of disengaged young people at a suburb level with 17 of our suburbs having higher rates than 12% - the overall rate for Blacktown City. Tregear (29.3%), Blackett (29.1%), Bidwill (27.9%), Whalan (26.9%), Willmot (26.9%) and Lethbridge Park (25.5%) all had over a quarter of their young people not working and not in school.



Table 25: Labour force status for Blacktown City and selected regions, persons aged 15-24 years, 2012-2014

Month and Year	Blacktown City		Greater Western Sydney (includes Inner South West which also includes non-Greater Western Sydney areas)		New South Wales	
	Unemployment rate %	Participation rate %	Unemployment rate %	Participation rate %	Unemployment rate %	Participation rate %
January 2013	11.0	70.1	14.7	62.9	12.7	66.9
February 2013	9.0	68.0	12.6	63.3	13.1	66.8
March 2013	13.7	66.3	13.7	61.7	12.0	65.3
April 2013	11.9	67.3	11.2	59.8	10.3	63.9
May 2013	13.6	62.7	13.0	61.0	11.4	64.2
June 2013	16.2	63.2	11.5	60.2	10.7	64.2
July 2013	10.7	65.4	12.1	62.4	11.3	64.8
August 2013	18.3	68.7	13.7	61.1	12.3	63.6
September 2013	21.6	67.1	14.7	60.2	11.8	64.5
October 2013	20.3	62.1	15.5	58.7	12.8	64.7
November 2013	16.9	61.9	15.8	56.7	11.4	63.0
December 2013	24.2	63.5	14.9	58.9	12.1	65.7
January 2014	12.9	60.7	14.9	60.9	12.4	65.6
February 2014	19.4	54.8	15.8	59.4	13.7	64.7
March 2014	9.5	53.9	13.2	58.9	12.1	63.4
April 2014	12.4	65.2	15.0	61.8	12.0	63.8
May 2014	19.5	61.3	13.8	58.9	12.4	63.1
June 2014	17.7	65.1	12.0	60.0	12.0	63.1
July 2014	15.4	60.2	12.4	60.4	11.5	62.3
August 2014	11.5	62.8	12.0	59.4	11.5	62.2
September 2014	8.5	64.3	11.8	61.5	12.5	62.6
October 2014	15.8	62.4	14.6	59.2	13.3	63.6
November 2014	12.9	65.8	12.6	60.7	12.3	65.8
December 2014	12.1	69.9	11.4	63.7	12.4	67.7

Figure 4: Disengaged youth (aged 15-24 not employed or in education), Blacktown City, 2011



Source: Australian Bureau of Statistics, Census of Population and Housing, 2011 (Enumerated data)
Compiled and presented in atlas.id by .id, the population experts.

“Many of our young people are disengaged from education and employment”



What do the community and service providers say?

Place

Blacktown Precinct

- Minimal reporting of this issue in community engagement.

Mount Druitt Precinct

- A major concern in this precinct is that long term unemployed, and people with a drug addictions or mental health or disability issues face greater challenges and fewer opportunities to find work.
- A lack of education made it difficult for many to get a job.
- People would like to work more but “there were not the jobs”.
- Perception that getting a job was not always a high priority, particularly if there were no working role models in the family and community.
- Current courses and training did not alone lead to work.
- There were lots of young people not working and not in education.

North West Precinct

- Minimal reporting on this issue in community engagement.

Target group

Aboriginal and Torres Strait Islander peoples

- Aboriginal people were still highly represented amongst the unemployed.
- There were fewer opportunities for disadvantaged groups (Aboriginal and Torres Strait Islander peoples, young people, and long term unemployed).

Children (0–11)

- Not reported in community engagement.

Men

- Unemployment among older men was a problem, particularly if they had families.
- Services found it challenging getting jobs for long term unemployed including those in generational unemployment, with addiction or mental health or disability issues.
- Men with criminal records found it hard to get a job.

Older people

- Unemployed older people found it difficult to get work.

“Courses and training alone do not lead to work”

People from culturally and linguistically diverse communities

- Language skills excluded many from accessing services and employment.
- Lack of recognition for overseas qualifications and experience disadvantaged migrants and refugees when seeking work.
- Employment services said some migrants and refugees found difficulty acquiring job readiness and labour market skills.

People with disability

- It was difficult to get employers to give opportunities to people with a disability.

Women

- A lack of support for women returning to work after having children.
- Diversity of culture could be a disadvantage when finding work.

Young people (12 – 24)

- There were fewer local job opportunities for young people.
- For some young people getting a job was not a high priority, particularly if there were no working role models in their family and community.
- Current courses and training do not always lead to work.
- There were lots of young people not working and not in education.



A poster for the Blacktown Job & Training Expo. The central text reads "BLACKTOWN JOB & TRAINING EXPO" in large, bold letters. Above the text is a row of eight diverse people's portraits. To the left of the text is a network diagram with nodes and lines. Below the text is a row of four more diverse people's portraits. At the bottom right, a green box contains the text "Thursday 27 Aug 2015 10am - 2pm".

BLACKTOWN
JOB & TRAINING
EXPO

Thursday
27 Aug 2015 10am - 2pm

key findings

- Unemployed people were at a greater risk of poverty.
- Fewer opportunities existed for long term unemployed, drug addicted and those with mental health or disability issues.
- Lack of education impacted employability.
- There was a mismatch between workplace requirements and the skills base of potential workers.
- Current courses and training did not always lead to work.
- Lack of recognition for overseas qualifications and experience disadvantaged migrants and refugees.
- Aboriginal people were still highly represented amongst the unemployed.



social support

“Social support and good social relations make an important contribution to health. Social support helps give people the emotional and practical resources they need. Belonging to a social network of communication and mutual obligation makes people feel cared for, loved, esteemed and valued ... Support operates on the levels both of the individual and of society.

Social isolation and exclusion are associated with increased rates of premature death and poorer chances of survival after a heart attack ... Social cohesion ... the quality of social relationships and the existence of trust, mutual obligations and respect in communities or in the wider society, helps to protect people and their health. Inequality is corrosive of good social relations.”

- Wilkinson & Marmot 2003

Why social support and why is it important?

Access to social support is a key component of individual and community health and well-being. Social support is any kind of communication that helps individuals feel more certain about a situation and therefore feel that they have control over the situation. Social support can be in the form of emotional support, information and material and practical help. The capacity of a community to provide social support to residents is an indicator of the social capital and quality of life in an area.

What does the data say?

Social capital

Support takes a number of forms, but reliable local data on the general support index used for the 2007 Social Plan is no longer available. A survey of residents undertaken in 2011 and repeated in 2015 partially fills this gap. The survey included several questions seeking to measure social capital. The results provide a snapshot of the changes in belonging and connections within neighbourhoods across the city.

There was an increase in people who felt a sense of belonging 'in their neighbourhood', since 2011, with 36.1% residents 'strongly agreeing' that they felt like they belonged in their neighbourhood, a further 42.9% 'agreed' and less than 5% either 'disagreed or strongly disagreed' (Figure 5).

Approximately half (49.2%) of all surveyed residents were 'satisfied' with Blacktown area as 'a place to live and spend time' and a further 18.4% were 'very satisfied'. This was a marginal increase from 2011. Dissatisfaction responses are very similar to 2011 (Figure 6).

Figure 5: I feel like I belong in this neighbourhood Social plan survey 2011, 2015, Blacktown City

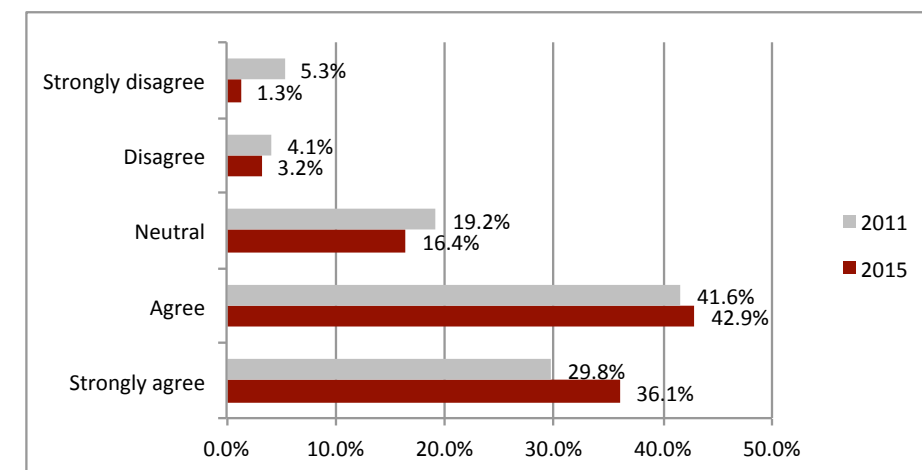
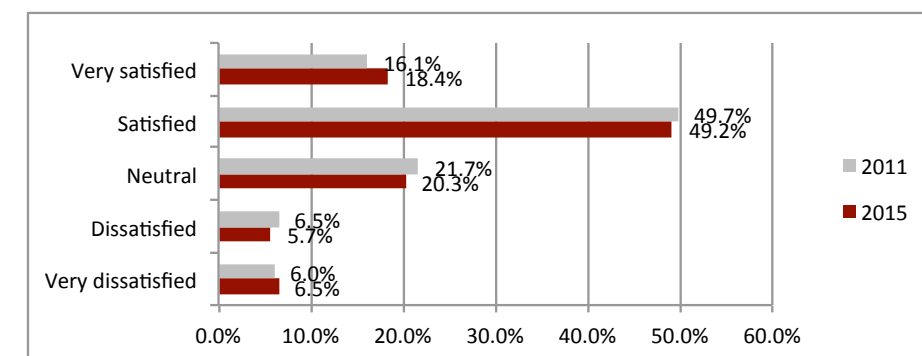


Figure 6: How satisfied are you with your local area as a place to live, work and spend time? Social plan survey 2011, 2015, Blacktown City



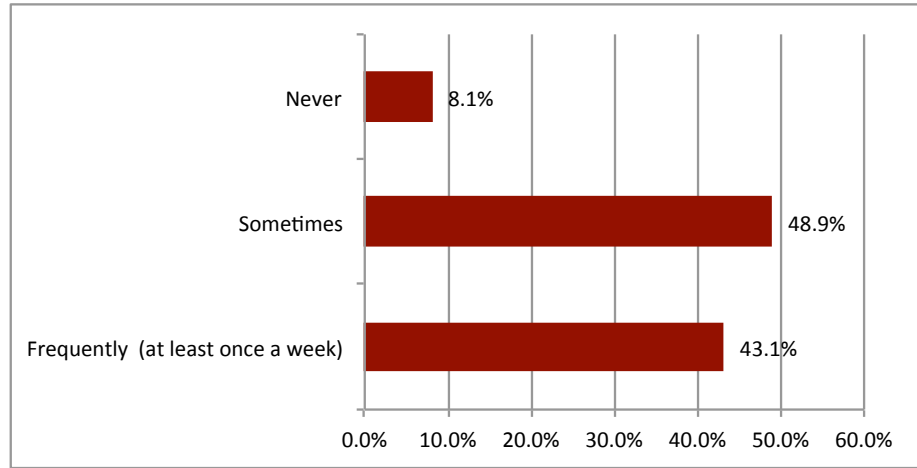
"Most residents (79%) felt a sense of 'belonging' in their neighbourhood"



BLACKTOWN CITY COUNCIL

This was the first time this question was included in the survey and it provides a baseline for comparison for future surveys. Approximately half (48.9%), of all surveyed residents, spoke with their neighbours ‘sometimes’. A further 43.1% spoke with their neighbours ‘frequently’. Overall, respondent residents appeared to have high levels of community connectedness and social capital (Figure 7).

Figure 7: I speak with my neighbours – frequently, sometimes, never. Social plan survey 2011, 2015, Blacktown City



We can measure support by asking residents whether they are able to get support in times of crisis from persons outside their household or from their neighbours. The Australian Bureau of Statistics General Social Survey 2010, estimated 89.7 out of every 100 adults in Blacktown City would be able to get support in a crisis. This rate was lower than New South Wales (91.2), Sydney Statistical Division (90.9) and Blacktown North (90.9) (Table 26).

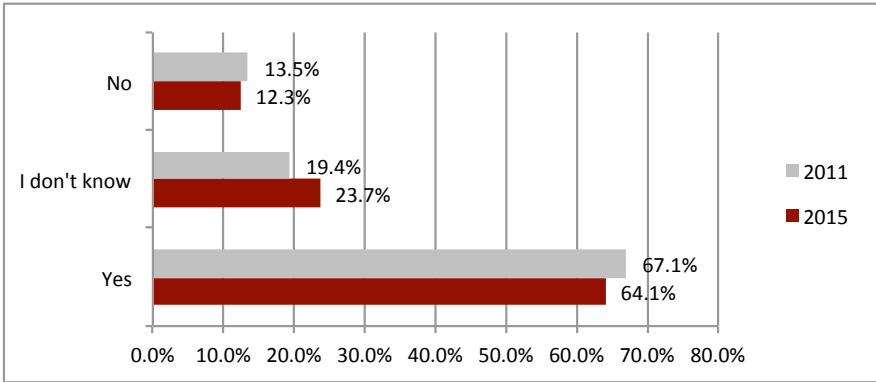
In 2011 and 2015, we asked our residents a similar question. The proportion of surveyed residents who agreed they could ‘count on one of their neighbours for help’ (64.1%) decreased marginally since 2011 (Figure 8). Only 23.7% of residents neither ‘agreed nor disagreed’. There was a marginal decrease in those who said they could ‘not rely on neighbours’.

Table 26: Persons aged 18 years and over who are able to get support in times of crisis from persons outside the household, ABS General Social Survey, 2010

Region	2010		
	Number	ASR per 100	SR
Blacktown City	201,135	89.7	97.3
Blacktown (C) - North	69,618	91	98
Blacktown (C) - South-East	67,032	89.6	97.2
Blacktown (C) - South-West	64,485	88.80	96.38
Sydney SD	3,226,371	90.9	98.7
NSW	5,086,427	91.2	99
Australia	15,725,093	92.1	100

Source: Social Health Atlas of Australia: Public Health Information Development Unit (PHIDU). Medicare Local (online). At: <http://www.adelaide.edu.au/phidu/maps-data/data/> (accessed April 2015)

Figure 8: If you had a problem, could you rely on one of your neighbours to help you? Social plan survey 2011, 2015, Blacktown City



Volunteering

One common proxy for community engagement (itself a proxy for access to social support) is the prevalence of volunteering. Volunteering contributes to civil society and active participation in building strong, inclusive, and resilient communities. Blacktown City, while recording a marginal increase since 2006, and higher rates than some Greater Western Sydney local governments, still had volunteering rates below Greater Sydney and New South Wales (Tables 27 and 28).

The results were strongly associated with the Socio-Economic Indexes for Areas scores of Blacktown North, South West and South East Statistical Local Areas: low SEIFA scores indicate high levels of socioeconomic disadvantage, which were in turn strongly associated with lower levels of social capital (Table 2). This association was consistent with the results in comparative local government areas across Greater Western Sydney, Auburn and Bankstown all recording comparatively low rates of volunteering among their residents.

Table 27: Voluntary work for an organisation or group, Blacktown City, 2006, 2011

Volunteer status	2006			2011			Change2006 to 2011
	Blacktown City		Greater Sydney	Blacktown City		Greater Sydney	
	Number	%	%	Number	%	%	
Volunteer	22758	11.1	14.8	26606	11.6	15.1	+3,848
Not a volunteer	161797	79.0	74.6	184621	80.4	76.5	+22,824
Volunteer work not stated	20333	9.9	10.6	18410	8.0	8.4	-1,923
Total persons aged 15+	+204,888	100.0	100.0	+229,637	100.0	100.0	+24,749

Source: Australian Bureau of Statistics, Census of Population and Housing 2006 and 2011. Compiled and presented by .id, the population experts. <http://www.id.com.au>

Table 28: Proportion of population by volunteering status, Blacktown City and selected regions, 2011

Region	Volunteers %	Not volunteers %	Not stated %	Total %
Auburn	9.6	77.7	12.7	100.0
Bankstown	10.1	80.3	9.6	100.0
Blacktown City	11.6	80.4	8.0	100.0
Blacktown North	13.5	80.1	6.4	100.0
Blacktown South East	11.8	80.0	8.1	100.0
Blacktown South West	9.3	81.0	9.6	100.0
Blue Mountains	23.4	69.7	6.9	100.0
Camden	14.6	79.4	6.0	100.0
Campbelltown	11.8	79.6	8.6	100.0
Fairfield	7.3	84.0	8.7	100.0
Hawkesbury	17.6	75.0	7.3	100.0
Holroyd	10.5	80.2	9.3	100.0
Liverpool	9.5	80.8	9.7	100.0
Parramatta	13.2	77.5	9.2	100.0
Penrith	11.6	80.5	7.9	100.0
The Hills	19.6	75.7	4.7	100.0
Wollondilly	16.6	76.7	6.6	100.0
Greater Sydney	15.1	76.5	8.4	100.0
NSW	16.9	74.8	8.4	100.0

Source: ABS Census 2011, Table B19

“In 2011, 26,000 residents volunteered for an organisation or group”



Support by government

Social support is also provided by government which has a responsibility for income support to people who for reasons of age, disability or caring responsibilities, are unable to provide for themselves (either wholly or in part). There was a marginal increase in recipient numbers, as a percentage of the estimated resident population, who got the age pension 6.8% - 7.3% or carers payment 1.1% - 1.5% (Table 29). The disability support pension recipient numbers remained broadly steady at 3.4% respectively.

Table 29: Selected government pensions, number and % of estimated resident population (ERP), Blacktown City - June 2010, March 2014

Age pension					
2010			2014		
No.	% of ERP	ERP	No.	% of ERP	ERP
21,003	6.8	307,816	24,236	7.30	332,424
Carers payment					
2010			2014		
No.	% of ERP	ERP	No.	% of ERP	ERP
3,379	1.1	307,816	5118	1.50	332,424
Disability support pension					
2010			2014		
No.	% of ERP	ERP	No.	% of ERP	ERP
10,574	3.4	307,816	11,395	3.40	332,424
Source: Department of Social Services, Payment Demographic Data, Payment recipients by 2014 Local Government Area and payment type, March 2014 https://data.gov.au/dataset/dss-payment-demographic-data					

What do the community and service providers say?

Place

Blacktown Precinct

- People felt positive about their neighbourhood.
- The city had lots of great services and organisations that know the community well.
- The area provides convenient access to services (health and community).
- Family was a great support in times of difficulty and living close to family was important.
- A lack of services and supports for many people including: homeless people, refugees and migrants, young people, people with mental illness, general practitioners, domestic violence.

Mount Druitt Precinct

- Family was a key point for community strength.
- A need for policies, targeting disadvantaged groups, to include strategies to resource families and existing support networks.
- Neighbours supported each other despite their own difficult circumstances.
- Isolated communities did not have local shops and services (Willmot).
- An even divide between those who described a strong sense of community spirit and others who said there was no community spirit or pride.
- Neighbourhood disputes caused tension and isolation for some individuals.
- A lack of services and supports for many people including: homeless people, refugees and migrants, young people, people with mental illness, general practitioners, domestic violence.

North West Precinct

- People felt positive about their neighbourhood.
- People said they liked living close to friends and family.
- The community development workers in new estates (provided by developers) helped build communities by providing opportunities for people to get to know each other and services available to them.
- Isolated communities did not have local shops and services (Riverstone and rural fringes).

Target group

Aboriginal and Torres Strait Islander peoples

- Family was a key point for community strength and policies targeting Aboriginal communities needed to include strategies to resource families and existing support networks.
- Aboriginal and Torres Strait Islander peoples self-determination was based in “acknowledgement and learning from Elders, people’s experience of family and community, people telling their stories, sharing knowledge and listening to each other”.
- A need for services to build relationships with our Aboriginal and Torres Strait Islander communities.
- There were good Aboriginal and Torres Strait Islander managed services but more were needed.
- Education, events and cultural celebrations developed a positive profile of Aboriginal and Torres Strait Islander people.

Children (0–11)

- Friends and family were the most important to children.
- Many children felt confident people who lived near their house would help them if they needed help.
- The majority of children reported feeling they were part of their community and their street was a good place to live.
- Targeted, intense support was needed for young parents at home and in their schools.
- Some parents lacked basic life skills, were unable to teach these to their children, and needed intensive family support.
- A lack of intense family support for parents in crisis.
- Family reunification was currently more difficult under present government policy.
- Single mothers wanted opportunities for education, low cost-housing, childcare and social support groups.
- Single parents and young parents continued to need services to support them.

Lesbian, gay, bi-sexual, transgender, inter-sex and questioning (LGBTIQ)

- A lack of information about the needs and issues facing our lesbian, gay, bi-sexual, transgender, inter-sex and ‘questioning’ communities.
- There were very few local services for our lesbian, gay, bi-sexual, transgender, inter-sex and ‘questioning’ community who often have to travel to Sydney central business district to access appropriate support services and networks.

Men

- Services said men being released from custody were particularly vulnerable and had few supports and social contacts.
- There was a shortage of men’s community services, in particular mental health services.

Older people

- Many residents reported their neighbourhood was a friendly place with community spirit.
- People felt positive about their neighbourhood.
- Some described an old fashioned sense of neighbourhood - “Westie Pride”.
- Family was a great support in times of difficulty and living close to family was important.
- Residents said the city had lots of great services and organisations who know the community well.
- The area provided convenient access to services (health and community).
- Perceptions local hospitals did not have the services and facilities some people needed. People also described long waiting times.
- In isolated areas it was difficult for frail aged people to access services.
- Older people had concern about service availability.

“People said they liked living close to family and friends”

People from culturally and linguistically diverse communities

- People felt positive about their neighbourhood.
- There were some intergenerational tensions as children and young people adapted faster to living in Australia.
- A need for more activities to develop community respect and understanding.
- The experience of cultural and social dislocation with fewer supports to help people cope.
- A shortage of specialist and mainstream services for refugee and migrant communities.
- A lack of health care workers, doctors and nurses who speak community languages.
- More library community language resources are needed.
- Families where parents and children were separated by distance or by dislocation from their traditional cultures were at risk of broken social support structures.

People with disability

- Many residents reported that their neighbourhood was a friendly place with community spirit.
- Services were important to respond to need, provide a network of support, teach people with disabilities about their rights and responsibilities, safety in the community and in the home.



“Many residents reported their neighbourhood was a friendly place with community spirit”

Women

- People said they liked being close to their friends and family.
- Family was a great support in times of difficulty. Living close to family was important to many of our residents.
- The city had lots of great services and organisations who know the community well.
- There was a shortage mental health services.
- A lack of services to assist people facing domestic violence.

Young people (12 – 24)

- Having supporting families, friends and schools was likely to be the most effective way of intervening to help young people.
- There were not enough programs or services to help young people.
- Many young people saw their parents as not supportive or understanding.
- A local service had seen an increase in young people at risk of suicide and self-harm due to family and relationship breakdown.
- Residents said they valued the city as being youthful and friendly with family and close friends living nearby.



key findings

- The people make Blacktown City a great place to live.
- People said they liked to live close to family and friends.
- Residents were positive about the friendliness of their neighbourhoods.
- Family was a key source of strength and support.
- Volunteering continued to be an important social support across the city.
- There were some communities where there was community tension and neighbourliness was weak.
- There were some intergenerational tensions, especially among recent arrivals, as children and young people adapted faster to living in Australia.
- Men released from custody had few supports and social contacts.
- Refugees experienced cultural or social dislocation and had fewer supports to help them.
- Demand for services and supports particularly for: homeless people, refugees and migrants, young people, people with mental illness, lesbian, gay, bi-sexual, transgender, inter-sex and 'questioning' communities, general practitioners and domestic violence.



addiction

“Drug use is both a response to social breakdown and an important factor in worsening the resulting inequalities in health. Alcohol dependence, illicit drug use and cigarette smoking are all closely associated with markers of social and economic disadvantage ... Social deprivation ... is associated with high rates of smoking and very low rates of quitting. Smoking is a major drain on poor people’s incomes and a huge cause of ill health and premature death.”

- Wilkinson & Marmot 2003

Why addiction and why is it important?

Addiction is both a cause and a symptom of the difficulties experienced by many of our residents. Social breakdown; whether due to stress, social exclusion, or general adversity is sometimes seen along-side addiction. The most common forms of addiction are smoking, alcoholism, illicit drugs and gambling. While none of these behavioural disorders are particular to Blacktown City, there is a reasonably strong association between them and lower socio-economic status and a stronger association with reduced well-being and life expectancy.

What does the data say?

Smoking

The biggest risk factor for preventable cancer is tobacco smoking. Smoking causes around 1 in 5 cancer deaths (Australian Institute of Health and Welfare (AIHW) 2012). Between 2011 and 2013, Blacktown City had an estimate of 39,551 smokers. A rate of 16.5 smokers per 100 residents compared to 13.8 for the Sydney Statistical Division and 16.2 for New South Wales. The rate of smoking was in decline, from 2004 to 2013, showing a substantial drop from 24.7 to 16.5 (Table 30). The impacts of smoking often present later in life and over extended periods, with many smoking related illnesses continuing to surface.



Table 30: Estimated number of current smokers aged 18 years and over, by local government area, 2004-2005, 2007-2008, 2011-2013

Local government area	2004-5		2007-8		2011-13	
	Number	Rate per 100	Number	Rate per 100	Number	Rate per 100
Auburn	10,430	19.5	11,859	20.2	9,560	15.0
Bankstown	30,064	23.6	27,455	20.6	23,270	16.4
Blacktown City	51,431	24.7	46,130	21	39,551	16.5
Blue Mountains	12,754	22.8	10,537	18.6	8,767	15.2
Camden	8,250	22.4	8,030	20.4	6,928	15.9
Campbelltown	31,223	28.0	25,123	22.3	21,357	18.3
Fairfield	36,226	25.5	31,372	21.7	26,519	17.5
Hawkesbury	12,081	26.0	10,057	21.4	8,709	18.0
Holroyd	17,009	24.1	15,278	20.2	13,234	15.8
Lithgow	3,990	26.7	3,785	25.0	3,357	22.6
Liverpool	31,184	24.5	28,357	21.3	24,391	16.9
Parramatta	25,938	21.2	23,564	18.3	19,482	14.1
Penrith	37,681	27.7	30,699	22.1	27,181	19.0
The Hills	19,288	15.8	18,493	14.3	15,026	11.2
Wollondilly	7,253	24.4	6,592	21.1	5,974	18.0
Sydney Statistical Division	681,064	20.62	626,858	18.2	473,376	13.8
NSW	1,115,825	21.93	1,052,940	19.9	890,091	16.2

Source: Social Health Atlas of Australia: Public Health Information Development Unit (PHIDU). Medicare Local (online). At: <http://www.adelaide.edu.au/phidu/maps-data/data/> (accessed April 2015).

Alcohol

Alcohol, when consumed at harmful levels can damage nearly every organ and system in the body. Its use contributes to more than 60 diseases and conditions. Health and social problems, caused by drinking, often affect entire families and communities. Alcoholic beverages can take a significant portion of the family budget.

The estimated number of adults consuming harmful levels of alcohol in Blacktown City remained at a similar number and rate in the decade from 2004 to 2013 (Table 31). During 2011 to 2013 around 10,000 people aged 18 years and over were drinking at harmful levels. The rate per 100 was 4.7 compared to 4.5 for Sydney Statistical Division and 4.8 for New South Wales.

Alcohol use was also associated with criminal offences especially those involving vehicles. From April 2007 to March 2012, we recorded the highest numbers of drivers exceeding the prescribed content of blood alcohol of any local government area in Greater Western Sydney. However, over the same period, the number of cases in Blacktown City had also declined (from 875 cases in April 2007 to 679 in April 2011) and this may reflect the impact of improved policing and social awareness (NSW Bureau of Crimes Statistics and Research 2012).



Table 31: Estimated number of people consuming harmful levels of alcohol, aged 18 years and over, by local government area, 2004-13

Local government area	2004-05		2007-08		2011-13	
	Number	Rate per 100	Number	Rate per 100	Number	Rate per 100
Auburn	811	1.6	1,630	2.8	2,753	4.5
Bankstown	4,142	3.2	5,039	3.8	6,561	4.7
Blacktown City	9,592	4.7	9,245	4.3	10,888	4.7
Blue Mountains	3,254	5.7	3,212	5.6	2,746	4.6
Camden	2,500	7.0	2,096	5.5	2,075	4.9
Campbelltown	5,620	5.1	5,459	4.8	5,633	4.9
Fairfield	3,303	2.3	4,463	3.1	7,208	4.8
Hawkesbury	2,854	6.2	3,378	7.2	2,451	5.1
Holroyd	2,509	3.6	2,973	4.0	3,718	4.6
Liverpool	4,248	3.4	5,296	4.1	6,520	4.6
Parramatta	4,004	3.4	4,826	3.8	6,194	4.6
Penrith	7,435	5.6	7,468	5.4	7,127	5.0
The Hills	6,842	5.5	5,705	4.4	5,618	4.2
Wollondilly	2,214	7.5	2,820	9.0	1,721	5.1
Sydney Statistical Division	154,580	47.3	154,267	4.5	151,442	4.5
NSW	270,103	52.9	299,722	5.7	264,177	4.8

Source: Public Health Information Development Unit (PHIDU). Social Health Atlas of Australia: Medicare Local (online).
At: <http://www.adelaide.edu.au/phidu/maps-data/data/> (accessed April 2015).

Illicit drugs

Illicit drug use is another indicator of addiction and associated social dysfunction. Illicit drugs are usually consumed in private spaces so they are difficult to measure. One way to measure the scale of the problem is to look at formal drug offenses. The number of drug possession offences fluctuated in the years from 2010 to 2014 with an increase in possession of cocaine, cannabis and amphetamines (NSW Bureau of Crime Statistics and Research 2014). We can interpret this fluctuation in a number of ways. It could indicate either a variation in the incidence and rate of use, availability of a particular drug and/or stronger drug offence enforcement initiatives.

Problem gambling

Problem gambling has a high social cost and includes suicide, depression, relationship breakdown, lower work productivity, job losses, bankruptcy and crime. For every problem gambler up to ten more people suffer. Most commonly affected are the family, children, friends and colleagues of the gambler. Many people with a gambling problem also have a coexisting mental health problem (Productivity Commission, 2010).

In 2014, Blacktown City was classified by the Independent Liquor and Gaming Authority as a Band 2 local government area with ‘moderate gaming machine density, moderate gaming machine expenditure and a moderate Socio-Economic Indexes for Areas score’ (NSW Government Independent Liquor and Gaming Authority, 2014). No data for problem gambling within Blacktown City was available at this time.

What do the community and service providers say?

Place

Blacktown Precinct

- The impact of alcohol and drugs in the community associated with particular antisocial behaviour.
- There were gaps in treatment and supports for people with addiction issues.
- Drug users had a high visibility around Blacktown Station and many residents felt unsafe in the area as a result.
- Pokies in clubs concern some residents.

Mount Druitt Precinct

- People used alcohol and other drugs to manage the stress in their lives.
- The impact of alcohol and drugs in the community in particular antisocial behaviour.
- Services reported an increase in the number of people with ICE addiction.
- There was a demand for treatment and harm minimisation options for ICE addicts.
- The availability of drugs and drug taking was a concern for residents.

“Many residents are concerned about antisocial behaviour caused by drug and alcohol use”



North West Precinct

- The impact of alcohol and drugs in the community in particular antisocial behaviour.

Target group

Aboriginal and Torres Strait Islander peoples

- The impact of alcohol and drugs in the community in particular antisocial behaviour.
- Services reported an increase in the number of people with ICE addiction.
- Concern the Australian culture of drinking hides addictive behaviours including binge drinking.
- There were health issues, as a result of drugs and alcohol dependence, evident in the community.

Children (0–11)

- Services noted maternal smoking was still a problem including smoking during pregnancy.
- Many services said children in some areas of Mount Druitt observed drug and alcohol issues on a daily basis.

Men

- Services reported men often used alcohol and other drugs to help them cope with the stresses in their lives.

Older people

- The impact of alcohol and drugs in the community in particular antisocial behaviour.

People from culturally and linguistically diverse communities

- The impact of alcohol and drugs in the community in particular antisocial behaviour.

People with disability

- Not reported in community engagement.

Women

- The impact of alcohol and drugs in the community in particular antisocial behaviour.

Young people (12 – 24)

- Minimal reporting in consultations.

key findings

- People used alcohol and other drugs to manage the stress in their lives.
- Concern the Australian culture of drinking hides addictive behaviours including binge drinking.
- People did not like the impact of alcohol and drugs in the community, in particular antisocial behaviour in public.
- Services reported an increase in the number of people with ICE addiction and increased demand for treatment and harm minimisation options for ICE addicts.
- Drug users had a high visibility around Blacktown Station and many residents felt unsafe in the area as a result.
- There were gaps in treatment and supports for people with addiction issues.
- More information was needed about problem gambling rates and impacts within Blacktown City.



food

“A good diet and adequate food supply are central for promoting health and well-being. A shortage of food and lack of variety cause malnutrition and deficiency diseases. Excess intake contributes to cardiovascular diseases, obesity and dental cavities ... The important public health issue is the availability and cost of healthy, nutritious food.

Access to good affordable food makes more difference to what people eat than health education ... Social and economic conditions result in a social gradient in diet quality that contributes to health inequalities. The main dietary difference between social classes is the source of nutrients ... People on low incomes, such as young families, elderly people and the unemployed, are least able to eat well.”

- Wilkinson & Marmot 2003

Why food and why is it important?

To have an active healthy life we need to have physical, social and economic access to sufficient, safe and nutritious food. This can be defined as food security (Food and Agriculture Organization of the United Nations, 2008). It is an emerging issue for Blacktown City due to rapid local urban development and population growth, increasing levels of socioeconomic disadvantage, transport barriers and the growing dependence on fast and take away foods. Our disadvantaged areas often have lower levels of supermarket access, higher takeaway density around schools, higher concentrations of convenience store and alcohol outlets, higher number of emergency food relief programs, school breakfast clubs compared to high income areas.

Community gardens are adding to the mix of market gardens, farmer’s markets, fruit and vegetable shops and supermarkets in providing healthy fresh foods. Growing food at home or in local community gardens is becoming increasingly popular as one way to increase consumption of fresh fruit and vegetables and improve nutritional health. Community gardens contribute to overall community well-being by increasing access to locally grown fresh foods, providing opportunities for regular physical activity and strengthening social networks (Sydney Food Fairness Alliance, 2007).

While a combination of good diet and adequate exercise contribute significantly to good health, it is a combination the population of Blacktown City continues to lack.

What does the data say?

Fruit and vegetables

The recommended daily fruit and vegetable intake is two serves of fruit and five serves of vegetables per day (National Health and Medical Research Council, 2014). Recent data on the consumption of fruit and vegetables is currently only available at a local health district level. It shows rates of adequate fruit consumption in Western Sydney Local Health District had decreased over the past 5 years and recommended vegetable consumption remained low (Centre for Epidemiology and Evidence 2015). On the positive side, nutrition levels in the health district had improved over the last decade.

The most recent data specific to Blacktown City is fruit consumption for 2007 to 2008. Among young people aged 5 to 17 years, the proportion of those who meet the recommended daily consumption of fruit was slightly higher than rates recorded across Greater Western Sydney and Greater Sydney.

For adults, 49.3 % consumed two or more serves a fruit daily which fell slightly under rates recorded in Greater Western Sydney and Greater Sydney (Table 32). This is a very important health and well-being indicator and while it was updated at a Western Sydney Local Health District level in 2015 (with a small sample size), it is regrettable it had not been updated at a local level.

“Fruit & vegetable consumption is low in our City”

Table 32: Estimated number of people with usual daily intake of two or more serves of fruit, children and adults, Blacktown City and selected regions, 2007-08

Region	Children (5 to 17 years)		Adult (18 years and over)	
	2007-08		2007-08	
	Number	Rate per 100	Number	Rate per 100
Auburn	7,010	57.0	26,783	50.9
Bankstown	19,050	56.8	69,424	51.9
Blacktown City	33,671	57.1	99,562	49.3
Blacktown (C) - North	11,157	60.5	32,799	49.7
Blacktown (C) - South-East	9,479	55.1	35,458	50.5
Blacktown (C) - South-West	13,036	56.0	31,305	47.6
Blue Mountains	8,340	60.5	30,012	50.9
Camden	6,776	59.7	17,766	48.8
Campbelltown	17,162	55.7	50,463	48.1
Fairfield	19,943	55.9	71,821	51.2
Hawkesbury	7,723	60.9	21,985	48.6
Holroyd	8,856	54.9	37,583	51.9
Liverpool	20,987	57.9	62,008	50.8
Parramatta	14,469	58.9	63,260	51.9
Penrith	21,282	60.8	62,209	48.3
The Hills	19,642	59.8	65,550	52.3
Wollondilly	5,467	61.1	14,529	48.5
Sydney Statistical Division	426,447	59.3	1,718,608	51.5
NSW	693,294	58.6	2,689,778	50.5

Source: Social Health Atlas of Australia: Public Health Information Development Unit (PHIDU). Medicare Local (online). At: <http://www.adelaide.edu.au/phidu/maps-data/data/> (accessed April 2015).

Over the past 25 years, the number of people considered obese has increased rapidly around the world. The World Health Organisation has declared obesity is a disease of pandemic significance, which threatens the developing world, as well as developed countries (World Health Organisation, 2013).

There are many causes of overweight and obesity, including genetics, unhealthy diets and lack of regular physical activity. It is particularly prevalent among the most disadvantaged socio-economic groups, people without post-school qualifications, Aboriginal and Torres Strait Islander communities and people born overseas. Health problems and other consequences of obesity include muscular-skeletal problems, cardiovascular disease, many cancers, sleep apnoea, type 2 diabetes and hypertension (Australian Department of Health, 2006).

An estimate of the number of people in Blacktown City who were overweight in 2011 to 2013, saw a substantial increased from 27.8 per 100 adults to 34.4. This was a similar rate to Sydney Statistical Division and New South Wales (Table 33). Obesity rates have also increased markedly from 20.2 per 100 to 28.2, higher than those for Sydney Statistical Division and New South Wales (Table 34). Mortality rates due to high body mass are reducing and this may be due to improvements in health care, access to health services and greater community awareness. However, hospitalisations due to high body mass have increased since 2012 and this trend is concerning.

Table 33: Estimated population who were overweight (not obese), 18 years and over, Blacktown City and selected regions, 2007-2008, 2011-2013

Region	2007-08		2011-13	
	Number	Rate per 100	Number	Rate per 100
Auburn	13,551	25.5	16,299	32.6
Bankstown	37,294	28.1	42,634	34.9
Blacktown City	57,094	27.8	66,966	34.4
Blue Mountains	17,662	30.0	18,394	35.0
Camden	11,196	30.2	13,051	36.2
Campbelltown	29,783	28.1	33,130	34.6
Fairfield	36,988	26.3	44,153	34.4
Hawkesbury	13,593	29.8	14,218	34.9
Holroyd	20,302	27.9	23,658	34.5
Liverpool	35,003	28.2	41,168	35.1
Parramatta	33,344	27.3	38,793	33.9
Penrith	37,938	29.1	41,217	35.1
The Hills	37,822	29.9	41,377	35.8
Wollondilly	9,150	30.1	10,014	35.1
Sydney Statistical Division	953,150	28.5	981,103	34.5
NSW	1,535,844	28.9	1,660,292	34.6

Source: Social Health Atlas of Australia: Public Health Information Development Unit (PHIDU). Medicare Local (online). At: <http://www.adelaide.edu.au/phidu/maps-data/data/> (accessed April 2015).

“Obesity and diabetes in our City are on the rise”



Table 34: Estimated population who were obese, 18 years and over, Blacktown City and selected regions, 2007- 2008, 2011-2013

Region	2007-08		2011-13	
	Number	Rate per 100	Number	Rate per 100
Auburn	11,274	22.0	10,844	22.4
Bankstown	28,559	21.8	34,396	28.5
Blacktown City	41,188	20.2	55,540	28.8
Blue Mountains	9,650	16.0	13,757	25.4
Camden	6,713	18.1	10,548	29.4
Campbelltown	22,518	21.3	31,214	32.5
Fairfield	26,586	18.9	38,904	30.3
Hawkesbury	8,594	18.7	12,275	29.9
Holroyd	14,444	20.2	18,232	27.3
Liverpool	26,926	21.8	35,188	30.2
Parramatta	20,982	17.6	27,483	24.5
Penrith	26,896	20.8	36,275	30.9
The Hills	20,190	15.7	26,622	22.7
Wollondilly	5,669	18.3	9,001	31.1
Sydney Statistical Division	595,156	17.9	666,491	23.5
NSW	1,010,581	19.0	1,264,360	26.4

Source: Social Health Atlas of Australia: Public Health Information Development Unit (PHIDU). Medicare Local (online). At: <http://www.adelaide.edu.au/phidu/maps-data/data/> (accessed April 2015).

Diabetes

Being overweight and obese are associated with the onset of Type 2 diabetes as well as being symptoms of poor nutrition and physical inactivity. Diabetes represents one of the most challenging public health problems of the 21st century and is reaching epidemic levels globally (Shaw, J E Sicree, R A & Zimmet, P Z, 2010). There is a growing recognition of the link between Type 2 diabetes and the conditions in which individuals are born, grow, live, work and age.

During 2007 to 2013 the diabetes rate for Blacktown City increased markedly from 3.6 per 100 to 7.8 per 100. This rate was higher than for Sydney Statistical Division and New South Wales (Table 35). At the same time the estimated number of people diagnosed with Type 2 diabetes, increased by 7,141.

“The number of food banks and breakfast programs in our City has increased”

Table 35: Estimated population with Type 2 diabetes, Blacktown City and selected regions, 2004-2005, 2007-2008, 2011-2013

Region	2004-05		2007-08		2011-13	
	Number	Rate per 100	Number	Rate per 100	Number	Rate per 100
Auburn	2,366	4.7	2,012	3.8	4,879	10.8
Bankstown	5,239	3.0	6,353	3.7	11,020	8.0
Blacktown City	7,260	3.5	7,996	3.6	15,137	7.8
Blacktown (C) - North	..	..	2,198	3.3	..	..
Blacktown (C) - South-East	..	..	3,038	3.6	..	..
Blacktown (C) - South-West	..	..	2,761	3.9	..	..
Blue Mountains	1,894	2.3	2,658	3.2	2,728	4.0
Camden	841	2.3	1,287	3.1	1,795	4.8
Campbelltown	2,942	2.7	4,139	3.5	6,593	6.6
Fairfield	7,826	4.7	6,532	3.8	17,626	12.3
Hawkesbury	1,222	2.4	1,765	3.2	2,099	4.6
Holroyd	2,503	3.0	3,166	3.7	5,611	8.2
Liverpool	3,435	2.8	4,782	3.6	11,187	9.5
Parramatta	3,986	2.9	4,960	3.5	8,034	6.8
Penrith	3,512	2.7	4,928	3.4	7,408	6.1
The Hills	3,320	2.3	4,588	2.9	6,300	4.7
Wollondilly	781	2.4	1,212	3.3	1,512	4.6
Sydney Statistical Division	112,350	2.8	135,768	3.3	195,979	6.2
NSW	193,801	2.8	243,637	3.5	324,737	5.8
Source: Public Health Information Development Unit (PHIDU). Social Health Atlas of Australia: Medicare Local (online). At: http://www.adelaide.edu.au/phidu/maps-data/data/ (accessed April 2015).						

“Fast foods are still an option used by many residents”



What do the community and service providers say?

Place

Blacktown Precinct

- Multicultural communities have given us lots of different exciting new restaurants and residents said they like affordable, multicultural dining options in shopping centres.
- Residents valued the accessibility and affordability of home delivered take-away food.
- There were residents who often do not get enough food and were reliant on food vans to eat.
- There was interest in seeing more farmers markets in the city.

Mount Druitt Precinct

- There were too many fast food outlets and few options for fresh food in many neighbourhoods.
- Fast foods were convenient and affordable. Some residents said buying fast food was cheaper than buying fresh food.
- Residents valued the accessibility and affordability of home-delivered take-away food.
- There were residents who often do not get enough food and were reliant on food vans to eat.
- Away from the central business districts, access to affordable fresh food was a problem.

- Services said in some schools over 10% of primary students did not have breakfast regularly and this affected their education.
- An absence of information about the nutritional values of fresh and unprocessed foods and the health impacts of a poor diet (especially the risks and consequences of diabetes).
- Obesity rates and diabetes rates remained high and were major problems for the community.

North West Precinct

- There was community interest in having more community gardens with residents saying community gardens were great ways to learn about growing your own food.

Target group

Aboriginal and Torres Strait Islander peoples

- Access to appropriate nutrition and issues around diabetes were a concern for many services.

Children (0–11)

- Services said in some schools over 10% of primary students did not have breakfast regularly and this affects their education.
- Childhood obesity rates and diabetes rates remain high and were major problems for the community.

Men

- Fast foods were convenient and affordable.

- Residents said buying fast food was cheaper than buying fresh food.
- Obesity rates and diabetes rates remained high and were major problems for the community.

Older people

- Obesity rates and diabetes rates remained high and were major problems for the community.

People from culturally and linguistically diverse communities

- Not reported in community engagement.

People with disability

- Access to fresh and affordable vegetables varies considerably across Blacktown City.
- Fast food is easy and quick.
- Being obese and excessively over weight is a barrier to accessing community transport services. This adds to being isolated.
- ‘All you eat’ venues encourage over eating, especially for people who do not know about healthy nutrition and portion sizes.

Women

- There was interest in seeing more farmers markets in the city.
- Community interest in more community gardens.
- There was an increasing interest in growing your own food at home.
- Fast foods were convenient, affordable and cheaper than buying fresh food.

Young people (12 – 24)

- Minimal reporting in community engagement.



key findings

- Residents identified the following positive strengths about Blacktown City:
 - o Affordable, multicultural dining choices in shopping centres.
 - o Convenient and affordable home delivered take-away food.
- Obesity and diabetes rates were increasing and were major problems for the community.
- Away from the central business district, access to affordable fresh food was a problem.
- A growing interest in community gardens and growing food at home.
- Fast foods remained a convenient and affordable option for people.
- An absence of information about the nutritional values of fresh and unprocessed foods and the health impacts of a poor diet (especially the risks and consequences of diabetes).
- A reported increase in food programs across the city (food vans/breakfast programs).



transport

“Healthy transport means less driving and more walking and cycling, backed up by better public transport. Cycling, walking and the use of public transport promote health in four ways ... provide exercise, reduce fatal accidents, increase social contact and reduce air pollution ... Regular exercise protects against heart disease and, by limiting obesity, reduces the onset of diabetes...promotes a sense of well-being and protects older people from depression ... Well planned urban environments which separate cyclists and pedestrians from car traffic, increase the safety of cycling and walking.

Cars insulate people from each other, cycling, walking and public transport stimulate social interaction on the streets ... With fewer pedestrians, streets cease to be social spaces and isolated pedestrians may fear attack ... suburbs that depend on cars for access isolate people without cars – particularly the young and old. Social isolation and lack of community interaction are strongly associated with poorer health.”

- From: The Social Determinants of Health: The Solid Facts

Why transport and why is it important?

Mobility and transport play an essential role in social, educational and work-related activities and have a direct impact on the wellbeing of individuals and communities. Healthy transport options include cycling, walking and using public transport promote health and well-being.

Transport remains a challenge for Blacktown City with the number of growth centres, poor transit infrastructure and dispersed patterns of land-use with recreational and employment opportunities in clusters far away from the places where most people live. In many instances these are the outcomes of planning strategies taking place at a state level.

There is inequity in people’s ability to access public transport networks. This transport disadvantage prevents people from accessing essential and other services and may lead to social isolation. Older people, people with disability, families with small children and people on lower incomes all experience disadvantage due to factors including affordability, service coverage and physical and geographic barriers.

All of these factors made public transport access and pedestrian and cycle mobility difficult and had the unintended effect of increased reliance on motor vehicle use

What does the data say?

Transport mode

On an average day there were approximately 1,100,000 trips made into, out of and within Blacktown City. There was a reliance on private vehicle, 77% using this mode of transport. Our use of trains and buses continued to be below Greater Western Sydney and Sydney Statistical Division rates (Table 36).

Table 36: Transport use by mode, Blacktown City and selected regions, 2010/2011

Mode4 of travel (trips)	Blacktown City		Greater Western Sydney		Sydney SD	
	No.	%	No.	%	No.	%
Private Vehicle	848,000	77.0	5,490,000	76.8	11,715,000	68.1
Train	44,000	4.0	343,000	4.8	920,000	5.3
Bus	49,000	4.0	304,000	4.3	1,007,000	5.9
Walk only	137,000	12.0	903,000	12.6	3,153,000	18.3
Other modes	22,000	2.2	109,000	1.5	407,000	2.4
Total	1,100,000	3.6*	7,149,000	3.6*	17,202,000	3.8*
ERP	305,000		1,969,000		4,507,000	
Mode4 of travel (trips)	Blacktown statistical local areas					
	Blacktown North		Blacktown South-East		Blacktown South-West	
	No.	%	No.	%	No.	%
Private Vehicle	313,000	81.0	262,000	73.0	271,000	76.0
Train	11,000	3.0	23,000	6.0	11,000	3.0
Bus	15,000	4.0	17,000	5.0	17,000	5.0
Walk only	38,000	10.0	49,000	14.0	49,000	14.0
Other modes	7,000	2.0	7,000	2.0	8,000	2.0
Total	384,000	3.7*	358,000	3.7*	356,000	3.4*
ERP	103,000		98,000		104,000	

Source: Bureau of Transport Statistics, 2010/2011, 4. Estimates of trip mode are based on unlinked trips except for walk trips. * indicates the average number of trips for each resident on an average weekday

Vehicle ownership

Car ownership was high in Blacktown City with around 96,408 households 85.4% having access to a motor vehicle (over 152,000 cars). In addition to the private vehicle fleet, the city has the largest bulk road transport hub and the largest truck fleet in the state (Blacktown City Council 2014). In 2011, 35.8% of dwellings in Blacktown had two motor vehicles and 15.1% had three or more vehicles.

Travel time and distance

Residents of Blacktown City spent a large amount of time each day on travelling. The Bureau of Transport Household Travel Survey (2012/2013) found they made a total of 1,063,000 trips on a weekday – an average of 3.4 per person (Table 37). These included 238,000 serving a passenger, 212,000 social/recreational, 185,000 commuter, 145,000 shopping, 109,000 education/child care and 94,000 work/business related trips.

The average work trip was 36 minutes and average trip length 10.5kms. Parramatta and Sydney central business district were the most popular destinations with 11% (or 12,542 people) travelling to Parramatta and 9% (or 10,159 people), travelling to Sydney. This information confirmed the reliance on private vehicles and the large amount of time our residents spend travelling each day.



Table 37: Travel time and distance of trips, 2010/11 & 2012/13

Total travel	Blacktown City		GWS	
	2010/11	2012/13	2010/11	2012/13
Total travel per person (kms)	34.1	35.7	38.3	38.5
Av. Trip length (kms)	9.9	10.5	10.8	11
Vehicle travel (VKT)	6,311,000	6,763,000	42,817,000	43,374,000
VKT per person	20.7	21.7	24.2	24.1
Total kms	10,410,000	11,139,000	69,250,000	71,059,000
Travel time (mins)				
Ave work trip duration	34	36	36	37
Av. Non work trip duration	19	19	19	20
Av trip duration -all purposes	22	23	23	23
Daily travel time per capita	77	78	81	80
Total Travel				
Trips av. weekday	1,050,000	1,063,000	6,818,000	6,824,000
Trips av. weekend day	891,000	943,000	5,936,000	5,900,000
Trips per person - weekday	3.4	3.4	3.5	3.5
Trips per person - weekend	2.9	3.0	3.1	3
Trips per household - weekday	10.4	10.5	10.3	10.1
Trips per household - weekend	8.8	9.3	8.9	8.8
Source: Bureau of Transport Statistics, 2010/2011,				

Train journeys

While train travel is an important option for Blacktown residents, there had been a concerning decrease in patronage at most stations with the exception of Schofields which had seen an increase from 168,768 to 293,596 (Table 38).

Table 38: Train journeys by stations in Blacktown City by year, 2004-2014

Station	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Blacktown	4,165,397	4,059,596	4,178,004	4,403,375	4,639,180	4,493,509	4,447,149	4,441,539	4,402,847	4,249,144	3,976,241
Doonside	655,761	618,512	649,069	661,593	747,512	735,720	795,052	823,729	825,507	782,322	726,682
Marayong	281,615	266,856	282,707	281,031	298,517	288,603	300,561	295,464	314,829	302,628	291,419
Mount Druitt	2,694,813	2,569,949	2,617,775	2,770,901	2,937,400	2,732,085	2,742,165	2,828,752	2,885,710	2,776,016	2,457,357
Quakers Hill	766,614	767,184	846,948	863,387	928,497	915,505	976,881	978,573	1,083,407	1,054,930	928,164
Riverstone	352,723	327,492	323,230	314,526	305,896	270,727	248,641	251,101	262,488	224,964	209,874
Rooty Hill	810,230	798,107	844,977	899,577	954,147	940,773	944,995	959,157	944,538	902,836	846,416
Schofields	185,524	191,036	187,290	184,423	186,513	188,585	168,768	173,084	272,721	321,211	293,598
Seven Hills	2,131,594	2,085,211	2,109,440	2,067,012	2,111,498	2,036,556	2,119,734	2,256,406	2,316,421	2,256,664	1,986,067
Total	12,044,271	11,683,943	12,039,440	12,445,825	13,109,160	12,602,063	12,743,946	13,007,805	13,308,468	12,870,715	11,715,818

Source: Bureau of Transport Statistics, Transport Patronage, 2015



What do the community and service providers say?

Place

Blacktown Precinct

- Proximity to the rail line and access to the railway stations was valued.
- Access to the M4, M7 and M2 made other parts of Sydney easier to reach.
- A lack of parking, specifically Blacktown central business district, Blacktown Hospital, around railways and bus interchange made availability of parking a frustration to many drivers.
- Concern about the number of cars parking in their streets.
- Concern about the condition of local roads.
- Widespread concern about traffic including congestion, traffic flow and disruptions from roadwork and poorly synchronised traffic lights.
- Widespread concern about speeding vehicles and perceptions of a ‘hoon’ culture amongst some drivers.
- Traffic congestion in hot-spots including Prospect Highway exit of M4, Sunny Holt Road and Richmond Road.

Mount Druitt Precinct

- Concern about areas with no footpaths or the surfaces in poor condition.
- Access to private vehicles to learn to drive was important for addressing the social exclusion experienced by refugees, young people and other disadvantaged communities.
- Access and affordability of transport especially for accessing isolated communities (Willmot).
- Widespread concern about speeding vehicles and perceptions of a ‘hoon’ culture amongst some drivers.

North West Precinct

- Concern in Riverstone traffic from the railway crossing impacts negatively on the community.
- A lack of parking in around railways and bus interchanges was a frustration to many drivers with specific concerns raised about parking in Stanhope Gardens.
- Concern about unsafe parking in school zones.
- Those who think public transport was good and others who were concerned about the lack of reliable, accessible and affordable public transport were evenly divided.
- Access and affordability of transport especially for accessing isolated communities (Riverstone).
- Widespread concern about traffic including congestion, traffic flow and disruptions from roadwork and the railway crossing.

“Residents are concerned about speeding cars on our local roads”

- Widespread concern about speeding vehicles and perceptions of a ‘hoon’ culture amongst some drivers.
- The noise of traffic impacts on communities close to the M7 and main roads.
- Traffic congestion in hot-spots including Glenwood, Riverstone, Schofields and Stanhope Gardens.

Target group

Aboriginal and Torres Strait Islander peoples

- Location was a positive, close to both town and the mountains.
- Concern about the increase in vehicles and traffic on roads.
- Widespread concern about speeding vehicles.
- Concern about access and affordability of transport for accessing isolated communities (Willmot/Riverstone).

Children (0–11)

- Not reported in community engagement.

Men

- Travel times to work were a problem whether by train or road.

Older people

- An even divide of those who thought public transport was good and others who were concerned about the lack of reliable, accessible and affordable public transport.
- Widespread concern about speeding vehicles and perceptions of a ‘hoon’ culture amongst some drivers.

- Concern about traffic congestion.
- A lack of parking, specifically Blacktown central business district, Blacktown Hospital, Stanhope Gardens and around railways and bus interchanges.
- Lifts were a priority at a number of stations including Rooty Hill, Doonside and Toongabbie.

People from culturally and linguistically diverse communities

- A lack in confidence to use public transport.
- A lack of reliable, accessible and affordable public transport.
- Widespread concern about speeding vehicles.
- Concern about traffic congestion.
- A lack of parking.
- Services said access to private vehicles to learn to drive was important for addressing the social exclusion experienced by refugee communities.

People with disability

- People with disability said they had great difficulties getting around as either pedestrians or public transport users because the physical environment was often full of obstacles and directional signage was not useful for the vision impaired.
- An even divide of those who thought public transport was good and others who were concerned about the lack of reliable, accessible and affordable public transport.

- A lack in confidence to use public transport without support.
- Widespread concern about speeding vehicles.
- Concern about traffic congestion.

Women

- Widespread concern about traffic including congestion, traffic flow and disruptions from roadwork and poorly synchronised traffic lights.
- A lack of parking.
- Concern about unsafe parking in school zones.

Young people (12 – 24)

- A lack in confidence to use public transport without support.
- Local transport was too expensive, infrequent and doesn't take young people where they want or need to go.

“There is wide spread concern about traffic congestion”





key findings

- Residents identified the following strengths in relation to transport in Blacktown City:
 - o Proximity to the rail line and access to the railway stations in the Blacktown Precinct.
 - o Access to the M4, M7 and M2 made other parts of Sydney easier to reach.
- The high use of private vehicles was a primary issue and includes:
 - o Widespread concern about speeding vehicles and traffic congestion.
 - o Availability of parking was a frustration for many drivers.
 - o Infrastructure in newer areas was designed principally for cars.
- Public transport was a primary issue and includes:
 - o A decline in patronage at train stations.
 - o Travel times to work were the same whether you travel by train or road.
 - o Lifts were a priority at a number of stations including Rooty Hill, Doonside and Toongabbie.
- Concerns about areas with no footpaths or surfaces in poor condition.



service development

“A social determinants approach considers the broad social, political, economic, cultural and environmental context in which people live and the impact these contexts have on health and wellbeing.

Effective collaboration across at all sectors, from local communities, to local, regional, state and national government and non-government agencies is essential in addressing the social factors that influence well-being, reducing health inequities and developing services that are comprehensive and responsive to people’s needs.”

- Blacktown City Community Development Team

Why service development and why is it important?

Service development means greater support for community services located and operating within Blacktown City. Bringing services together to enhance communication, networking and integration, to meet community need and develop community development strategies. In a frequently uncertain funding environment it is clear an increased focus on local community services is required to begin to address issues of gaps and unmet need in current levels of service provision and information fragmentation. This includes:

- Support for effective collaborative inter-agencies;
- Cohesion;
- Information sharing;
- Fostering engagement between services;
- Economic development in community development strategies, strategic planning, and business planning.

What do the community and service providers say?

Target group

Aboriginal and Torres Strait Islander peoples

- The Koori Interagency and network supported Aboriginal and Torres Strait Islander workers.
- Cultural competency and awareness training for non-Aboriginal and Torres Strait Islander staff working with Aboriginal communities was required.
- Demand for more Aboriginal and Torres Strait Islander specific services and support for those that do exist.
- Less consultation and more action.
- Make Aboriginal and Torres Strait Islander issues everyone's business, not just the duty statement of one position.

Children (0-11)

- Services were at capacity and do not have the resources to meet resident's needs.

General (all)

- Uncertainty of funding was impacting on service provision, clients and staff.
- Challenges in providing information to those who were disengaged and isolated.



BLACKTOWN CITY COUNCIL

- Many services were at capacity and did not have the resources to meet resident needs.
- High staff turn-over due to both the aging workforce and uncertainty of the community and human services sector.
- Concern about the stress on staff having to ‘do more with less’, an impact of funding changes and the uncertainty in the sector.
- Shortage of services for: homeless people, refugees and migrants, people with mental illness and elder abuse.

Men

- Challenges to increase male participation rates in activities and services.
- Some services said we needed more men working in the community sector.
- Some men said services were often provided inappropriately, for example targeted at families and children or during hours when men may be at work. In some instances there was no suitable help or services at all.

Older people

- The Home and Community Care forums helped planning and partnerships and improved outcomes for communities.
- Long waiting lists and/or complicated referral systems for hospitals, aged care assessment teams and occupational health services.

- Demand for community and patient transport, lawn mowing and garden maintenance, domestic assistance, personal care, social support, aged day care centres, dementia support and community aged care packages.
- Concern about the competitive tender funding model being used by governments to fund services.
- Changes in funding models impacting smaller not for profit organisations.
- Job certainty was a real concern with many staff on contracts until changes in funding models was completed by the state government.
- The need for services to keep up with social media was an important way to share information about what they do.
- Concern about the current referral system for older people.
- The challenge of engaging clients with system changes.
- Challenges transitioning existing clients over to Consumer Directed Care.
- Documentation was increasing during what should be a shift to “paperless” services/organisations.
- Governance requirements take up time that could be better spent doing face to face service provision.

People from culturally and linguistically diverse communities

- A shortage of specialist and mainstream services, interpreters and materials in community languages.

“Many services are at capacity and do not have the resources to meet resident needs”

People with disability

- Apprehension from disability services about the National Disability Insurance Scheme being implemented in July 2016.
- Changes in funding models impacting on smaller not for profit organisations.

Women

- A lack of services and supports for women escaping violence or trying to deal with drug and alcohol issues.

Young people (12 – 24)

- Service interagencies help planning, partnerships and improve outcomes for communities.
- A lack of services and supports for young people.
- Services needed to be responsive to young people - open when they need them, using the technologies they use, speaking their language.
- Issues with funding dividing mental health and drug issues despite the fact these were inextricable problems.
- Job certainty was a real concern with many staff on contracts until changes in funding models was completed by the state government.
- The need for services to keep up with social media as an important way to share information about what they do.
- It was challenging for services to keep up with sector changes and changing government priorities. This was made more difficult as there was very little information available from funding departments.



key findings

- Funding of human services including:
 - o Uncertainty of funding impacting on service provision, clients and staff.
 - o Demand outweighing availability, - services at capacity.
 - o Numerous government changes in policy, priorities and reduced funding with a lack of information from funding departments.
 - o Cost shifting placing increased demands on local government as a result of changing policy and reduction of funding to local organisations.
- Staffing of human services including:
 - o High staff turn-over due to both the aging workforce and uncertainty of the sector.
 - o Stress on staff, an impact of funding changes and the uncertainty in the sector.
- Challenges in providing information to those who were disengaged and isolated.
- Size of non-government organisations and current funding environment limits their potential to be sustainable and strategic.
- The need for community facilities and opportunities for Community Hubs, particularly in Blacktown central business district.
- Section 94 (of the Local Government Act) levy capping – no new community facilities (or venues) for service delivery in growth centre precincts.



responding to
the social
profile

responding to the
social profile

Responding to the social profile

The Blacktown City Social Profile 2016 will inform our community strategic plan, four year delivery program and annual operational plans. The Community Development Unit has a key role in implementation of these plans and responding to the issues raised. We provide the following services:

- Social planning Services:
 - o Delivering demographic information
 - o Delivering / implementing the social profiles
 - o Overseeing human service new release area planning
 - o Coordinating urban renewal planning
 - o Establishing human service planning consortiums for places or issues.
- Community development and event services:
 - o Championing issues for target group communities children, young people, older people, culturally and linguistically diverse, women, Aboriginal and Torres Strait Islander, and people with disability).
 - o Supporting the formal advisory sub-committee engagement processes.
 - o Facilitating and /or delivering community pride events and festivals (Youth Week, Harmony Day, Sorry Day, NAIDOC Week, Seniors Week, International Day for People with Disabilities, International Women’s Day, Refugee Week).
- o Facilitating and /or delivering community leadership development programs and supporting resident action group processes.
- o Planning, development and delivery of projects and new services.
- o Supporting and /or coordinating local human service sector by leading inter-agencies, providing training and development and delivering the annual Community Services Conference.
- o Coordinating the delivery of the Clubs Grants and WSAAS Community Grants programs.
- o Coordinating and supporting volunteering and volunteer programs.
- Community facility development and operational services:
 - o Identifying the need for, and viability of, community facilities
 - o Engaging with key stakeholders developing designs for new and /or renewed facilities
 - o Participating in project control groups during construction of new facilities
 - o Supporting community participation and operation of neighbourhood centres and community hubs through S355 Committees.
 - o Operating the Mount Druitt Hub and Emerton Youth and Recreation Centre.

In early 2016 we will hold a stakeholder forum to test the data and findings presented in the social profile. We will use a partnership approach to identify focus areas, actions and goals.

Stakeholders will include non-government service providers, state and federal government agencies. This will also provide an opportunity for organisations to take away the key messages for inclusion in their own planning processes.





appendices



Appendices

Appendix 1 - Acknowledgements

Ability Options

Aboriginal Advisory Sub Committee – Blacktown City

Aboriginal Community Conversation breakfast attendees

AFEA

Aftercare

Anglicare

Arts Centre – Blacktown City

Bidwill Uniting

Blacktown / Hills Home and Community Care forum

Blacktown Area Community Centres

Blacktown City Council

Blacktown Combined Interagency

Blacktown Hospital

Blacktown Migrant Interagency

Blacktown Women and Girls Health Centre

Blacktown Youth Services Association

BREED

C2770 Disability Working Group

Care Connect

Catholic Care Social Services

Catholic Health Care

Centrelink - Blacktown

Chainbreakers Recovery

Civil Maintenance – Blacktown City

Communities for Children

Community Legal Centres

Community Resource Network

Community Safety Committee – Blacktown City

Computer Pals

Connect

Department of Education and Communities

Disability Services Australia

Doonside Community Health Centre

Doonside Community Services Interagency

Early Education

Emerton Youth Recreation Centre – Blacktown City

Environmental Services – Blacktown City

F.O.C.U.S. Lalor Park

Family and Community Services NSW

Family Worker Training

Filipino Golden Seniors

Global Skills

Graceades Cottage

Greek Welfare

Hammond Care

Headspace – Mount Druitt

Hillsong City Care Youth Group

Holy Family Social Services - HIPPY

JobFind Mount Druitt

Josephite Community Aid

Kayelene Terry (Slater) - Artist

Koori Toastmasters

Legal Aid NSW

Lethbridge Park Kitchen

Mackillop Care

Marist Youth Care – Blacktown

Men’s Shed Riverstone

Mission Australia

Mission Australia Housing

Mount Druitt Blacktown Youth Services Network

Mount Druitt Community Health

Mount Druitt Drug and Alcohol – Marrin Weejali

Mount Druitt Ethnic Communities Agency– Clients and Staff

Multicultural Services Max Webber Library – Blacktown City

NCOSS

NSW Police Force Quakers Hill Command

OCTEC Work for the Dole

Red Cross

Relationships Australia – Blacktown

Richmond PRA

Rightsounds

Rivergum

Riverstone High School

Riverstone Interagency

Riverstone Neighbourhood Centre

Salvation Army Financial Counsellors

Self Advocacy Sydney – Clients and Staff

Social Traction

Sustainable Resources – Blacktown City

Sydwest Multicultural Services Clients and Staff

TAFE NSW

Ted Noffs Mount Druitt – The Street University

The Hills Shire Council

The Ponds - Meet your neighbour night

The Ponds – Over 50’s group

The Ponds Community Development Program

Tuesday Night Club – Clients and Staff

United Care Youth on Track

United Way

Uniting Care

Uniting Care Ability Links

Uniting Care Burnside

Uniting Church Bidwill

University of Western Sydney

Walkara Seniors Group

WASH House

WentWest

Wentworth Housing

Wesley Family Services Riverstone

Western Sydney Community Forum

Western Sydney Koori Interagency

Western Sydney Local Health District

Western Sydney Partnerships in Recovery

Western Sydney University, School of Medicine students

Western Sydney Information and Research Service Ltd.

Wise Employment

Woodcroft Neighbourhood Centre

Youth Advisory Sub Committee – Blacktown City

Youth of the streets - Blacktown

Youth Rezolutions

Appendix 2 - Abbreviations and acronyms

ABS -	Australian Bureau of Statistics
AEDI -	Australian Early Development Index
AIHW -	Australian Institute of Health and Welfare
ATSI -	Aboriginal and Torres Strait Islander Peoples
CALD -	Culturally and Linguistically Diverse
CBD -	Central Business District
BTRE -	Bureau of Infrastructure, Transport and Regional Economics
DEWR -	(Former) Department of Employment and Work Relations
GWS -	Greater Western Sydney
HACC -	Home and Community Care
ICE -	Crystalline form of the drug methamphetamine
IPRF -	Integrated Planning Framework
LGA -	Local Government Area
LGBTIQ -	Lesbian, Gay, Bi-sexual, Transgender, Intersex & Questioning
NATSEM -	National Centre for Social and Economic Modelling
NDIS -	National Disability Insurance Scheme
NHMRC -	National Health and Medical Research Council

NSW -	New South Wales
PFLAG -	Parents and Friends of Lesbians and Gays
SEIFA -	Socio-Economic Indexes for Areas
SD -	Statistical Division
SSD -	Sydney Statistical Division
SLA -	Statistical Local Area
SW -	South West
TFR -	Total Fertility Rate
WESTIR Ltd -	Western Sydney Information and Research Service Ltd.
WHO -	World Health Organisation
YRS -	Years



Appendix 3 - A demographic profile of Blacktown City

In 2015, Blacktown City is the largest and fastest growing local government area in New South Wales with an estimated 332,424 residents and a projected population of 415,000 by 2030. The city encompasses approximately 247 square kilometres and includes 48 suburbs. It is at the heart of Western Sydney and well serviced by employment lands, public transport and road access and supported by core infrastructure in health, education, recreation, culture and leisure.

At the time of publishing the Australian Bureau of Statistics Census 2011 provided the most current data on the community. The social profile will be updated with Australian Bureau of Statistics Census 2016 on its release.

We are located in the heart of Western Sydney and home to a young, multicultural population of more than 332,000 people. We are well connected, only 35 kilometres from the Sydney central business district with fast M2, M4 and M7 motorway connections and convenient public transport via the Western rail line.

Blacktown City is a great place to live and work. Comprising 48 suburbs, 22 employment precincts and 16 town centres, it offers a welcoming community and abundant economic opportunities for people of all backgrounds.

The city is resourced by a wide range of high quality health and education services. It also features a wide range of cultural, recreational and leisure facilities including 5 aquatic and leisure centres, 5 libraries, 32 community centres and 840 parks and reserves.

Boasting a healthy, active population and modern, internationally recognised venues, Blacktown City is the sporting capital of Western Sydney.

A growing population

Today, Blacktown City is the largest local government area by population in NSW, and the fifth largest in Australia.

Originally home to the Darug people, the first European settlement occurred locally at Prospect Hill in 1791. The city’s population began to grow after World War 2. This accelerated during the 1960s and 1970s as large-scale housing estates were built in Blacktown and Mount Druitt. Over the last 20 years, major development has occurred in suburbs such as Glenwood, Oakhurst, Plumpton, Glendenning and Stanhope Gardens.

The population of Blacktown City is expected to reach 500,000 over the next 30 years. The city’s North West Growth Centre will contain 50,000 new houses and apartments across 10,000 hectares of land. Key areas set for expansion include Kellyville Ridge, The Ponds, Colebee and Ropes Crossing. Urban renewal is also occurring in established centres such as Blacktown, Mount Druitt, Rooty Hill and Seven Hills.

A thriving economy

Blacktown City’s economy sustains about 30,000 businesses and 110,000 jobs. Of these jobs, 44% were held by local residents. The local economy produces more than \$13 billion a year in goods and services. This made our City an important contributor to the prosperity of Sydney and NSW.



Boasting a healthy, active population and modern, internationally recognised venues, Blacktown City is the sporting capital of Western Sydney.

The Australian Bureau of Statistics (ABS) including the ABS Census 2011 tells us the following:

Population growth

In 2011 Blacktown City was home to 301,096, 15.7% of Greater Western Sydney’s population. This was a 10.8% increase since 2006, and a 17.4% increase since 2001. At this time around 1 in every 71 Australians lived in Blacktown City.

Table 39: Trends population, dwelling and household size, Blacktown, ABS Estimated resident population June 2014 and ABS Census 2011

Trend	Blacktown City	New South Wales
Estimated resident population, June 2014	332,424 (4.4% of NSW)	7,515,734
Population Change 2006 - 2011	Gain of 29,385 people, 10.8% growth	5.6% growth
Dwelling change 2006 - 2011	Gain of 7,368 dwellings, 7.9% growth	5.0% growth
Average household size (persons per household)	Increase from 3.02 to 3.10	Increase from 2.58 to 2.59

Age

We are youthful with 45.3% of the population aged less than 30 years (136,411 people).

Table 40: Trends median age, 0 – 4 year olds, 50 – 64 year olds and 65 and over, ABS Census 2011

Trend	Blacktown City	New South Wales
Median age	32, stable	38, increasing
Number of 0 – 4 year olds	25,415, 8.5%, up by 3,003 increasing	6.6% increasing
Number of 50 – 64 year olds (baby boomers)	15.9%, increasing	18.3, increasing
Number aged 65+	9%, increasing	14.7%, increasing

Figure 9: 5 year age structure, ABS Census 2011

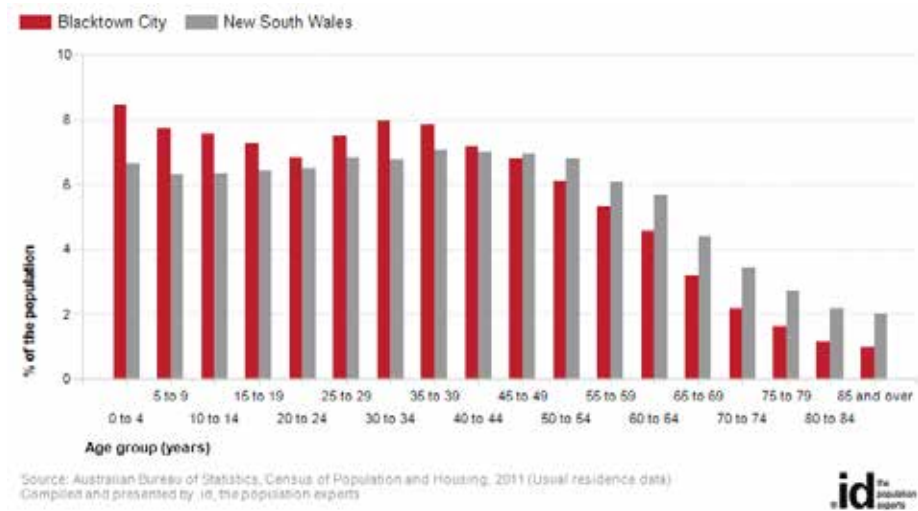
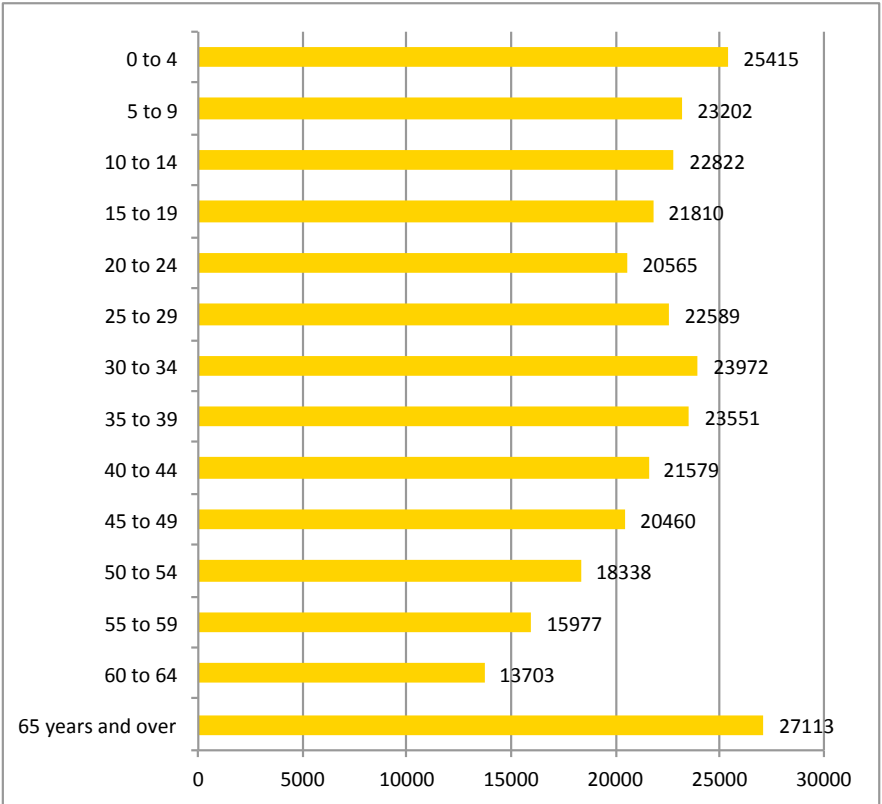


Figure 10: Age group by number of persons ABS Census 2011



Suburbs

Our largest suburbs were:

- Blacktown suburb (43,374 people, 14.4% of the Blacktown population)
- Quakers Hill (26,166 people, 8.7%)
- Seven Hills (18,824 people, 6.3%)
- Mount Druitt (15,794 people, 5.2%)
- Glenwood (15,324 people, 5.1%).

There was considerable diversity across the city. Newer suburbs were likely to be more affluent and have young families than established suburbs. Particular overseas born communities tended to gravitate towards certain suburbs and a number of suburbs had populations who are disadvantaged and under social and financial stress.

Aboriginal and Torres Strait Islander people

We had the largest urban Aboriginal and Torres Strait Islander population in NSW with 8,195 people making up 2.7% of the population (1.2% Greater Sydney and 2.5% New South Wales).

Cultural diversity

We continued to grow in diversity both in those born in other countries and people who spoke a language other than English.

Table 41: Trends overseas born, language other than English and poor English proficiency, ABS Census 2011

Trend	Blacktown City	New South Wales
% overseas born	37.6%, up from 34.2% in 2006	25.7%, up from 23.7% in 2006
% Language other than English	36.9%, up from 32.4% in 2006	22.5%, up from 20.1% in 2006
% Poor English proficiency	4.7%, up from 4.4%	3.9%, up from 3.7%

Figure 11: Country of birth, ABS Census 2011

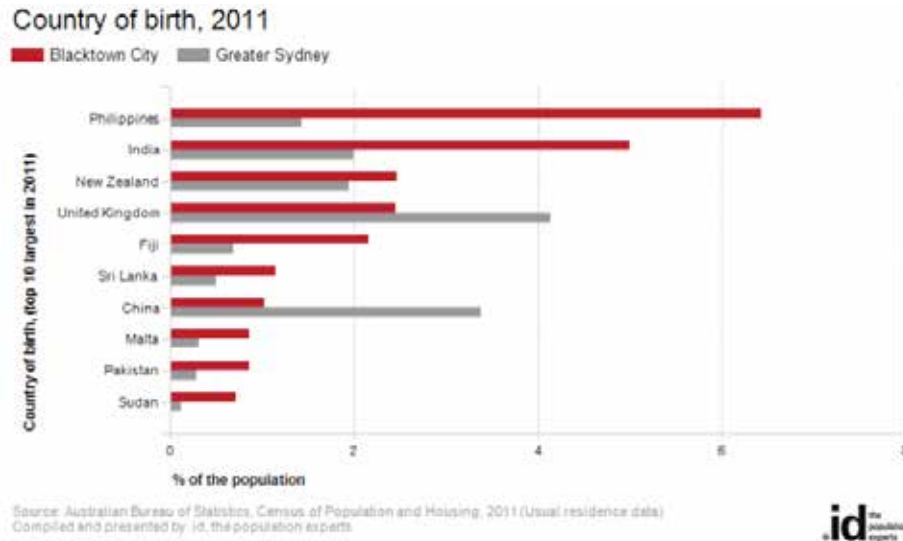


Figure 12: Country of birth by suburb, ABS Census 2011

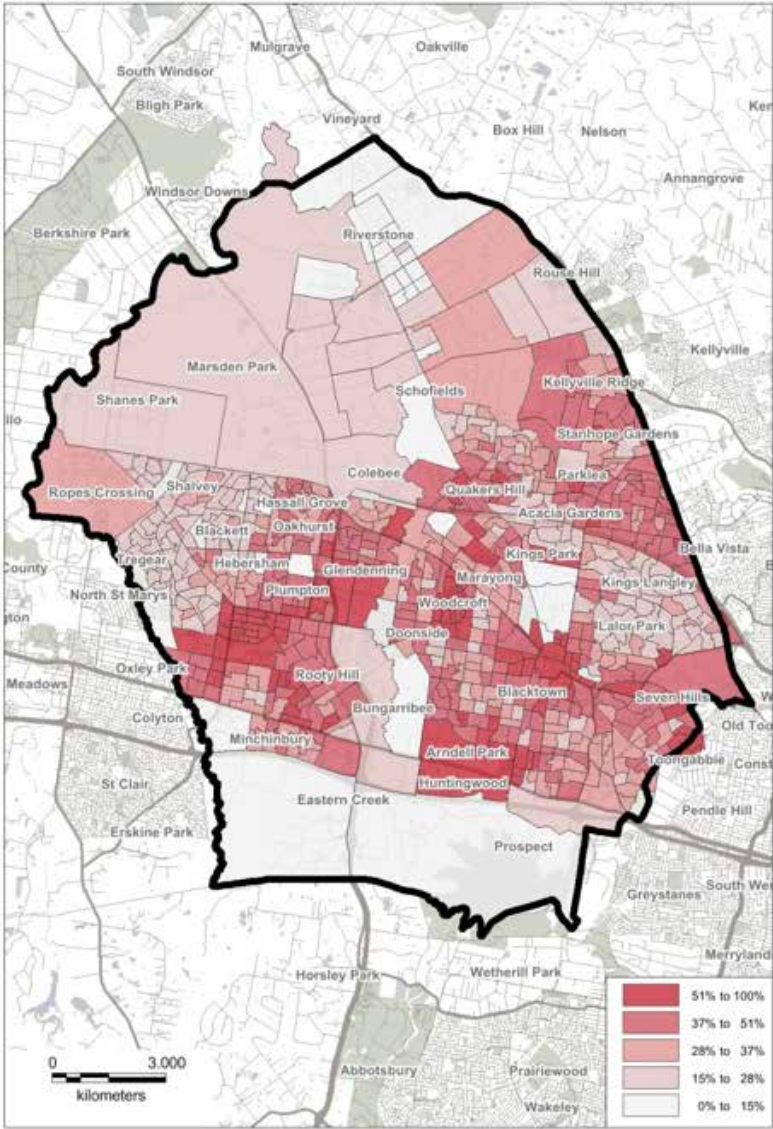
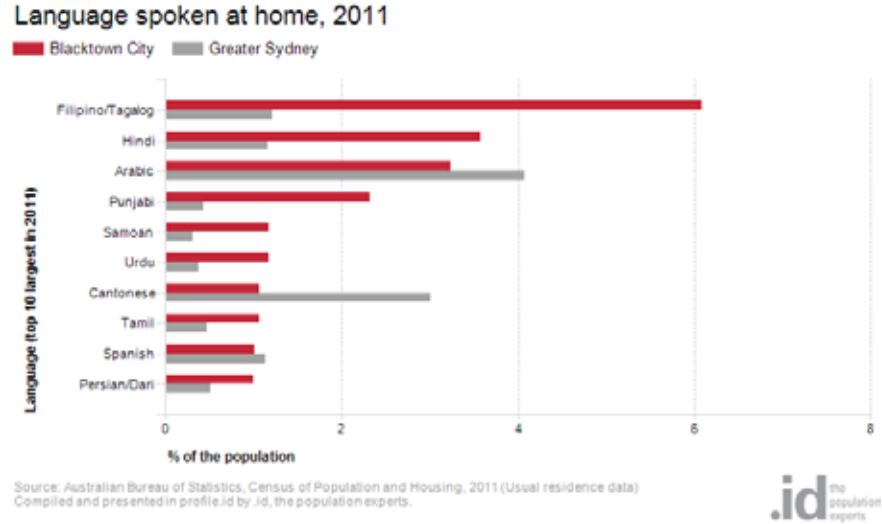


Figure 13: Language spoken at home, ABS Census 2011



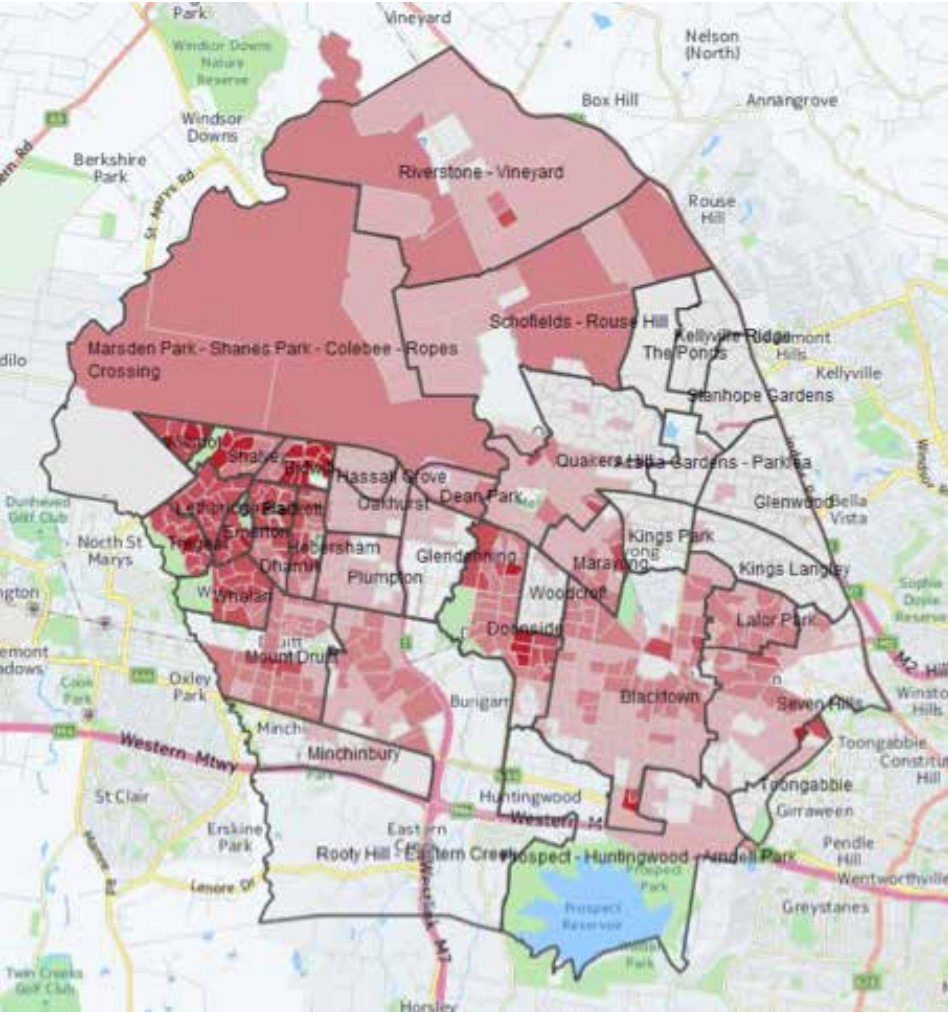
Socio-economic characteristics

- For people aged 15 years and over 58.1% did not have a post school qualification compared to 48.1% for Greater Sydney.
- Our unemployment rate (7.1%) was higher in 2011 than in Greater Sydney (5.7%).
- The greatest proportions of unemployed persons in 2011 were those from the 25-34 years age group (23%) and 35-44 years age group (18.9%).
- The most common mode of transport to work in 2011 was by car either as a driver (80,909 people, 74.3%) or as a passenger (7,856 people, 7.2%). Train was the second highest (11,529 people, 10.6%). (Based on one method of transport to work).

- In 2011, 36,651 workers (44%) lived and worked in Blacktown City.
- In 2011, 87.6% of households (82,023) have access to a motor vehicle at home.
- In 2011, the average weekly individual income was \$565. A slightly higher proportion of individuals earned less than this range (some 48.1%) than in Greater Sydney. (45%)
- In 2011, 30.1% of single-parent families earned less than \$600 a week, while only 4.8% of couple families with children earned less than \$600 a week.

The following figure shows suburbs with populations of the most socio-economic disadvantage.

Figure 14: Index of relative social disadvantage by suburb, ABS Census 2011



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Social Profile 2016

Appendix 5 - Other documents available on request

Social Indicator Report - Blacktown City Social Profile 2016

Community Engagement Report - Blacktown City Social Profile 2016

Snapshot - Blacktown Precinct

Snapshot - Mount Druitt Precinct

Snapshot - North West Precinct

Snapshot - Aboriginal and Torres Strait Islander People

Snapshot - Children

Snapshot - Culturally and Linguistically Diverse People

Snapshot – Older People

Snapshot - People with Disability

Snapshot - Women

Snapshot - Youth