For further information regarding issues identified in this profile or if you are seeking information on issues not included please contact the Social Planning Team on 02 9839 6420.
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Executive summary

This profile outlines the major social issues currently facing people with disability in Blacktown City. It explores the key issues for 11 priority areas being the social gradient, stress, early life, social exclusion, work, unemployment, social support, addiction, food, transport options and service development. It also provides a snapshot of community strengths and needs for people with a disability.

The profile is a resource to support planning and research. It is a tool for strategic planning, reviewing strategic plans and should be used along-side consideration of the policies and activities of organisations, Local, State and Federal governments.

The executive summary provides an overview of findings from research and community engagement conducted in 2014/15 and identifies the following key issues and strengths for people with disability:

Issues

• We estimate over 50,763 people in Blacktown City (15.8%) are living with a disability.
  - 19,574 (6.1%) have a profound severe disability, 6,940 (2.60%) have a moderate disability, 14,955 (4.7%) have a mild disability.
  - The proportions ranged from a low of 1.9% in Stanhope Gardens to a high of 8.3% in Whalan.

• In 2011, 24,663 carers in Blacktown City provided unpaid assistance to a person with a disability, long-term illness or old age. 1,813 were young people.

• Residents of Blacktown City say there are cost barriers when living on a disability pension, for example, “paying bills, buying things you need”, this often means people go without the things they need or want. Across Australia, people with disability are twice as likely to be in the bottom 20% of gross household incomes.

• In Blacktown City there were more people with disability in rental housing, than in New South Wales and less people with disability who owned who owned their dwelling.

• Employment services say there is a double disadvantage experienced by unemployed people with a disability. People with disability have both lower participation (53%) and higher unemployment rates (9.4%) than people without disability (83% and 4.9% respectively).

• Recreational, wellbeing and inclusion are important for quality of life. Compared with the whole population, people with disability participate less than those without disability.
• Services in Blacktown City are concerned about social isolation and mental illness for people with disability.

• Mobility and transport play an essential role in social, educational and work-related activities. Across our city, there is inequity in access to public transport for people with disability. This includes affordability, service coverage and physical and geographic barriers.

• People with disability report access for people with limited mobility and in wheelchairs is still challenging in many areas of the city.

• Discrimination continues to be an issue for some of our residents with a disability.

• Residents are concerned about personal and community safety in their neighbourhoods, and around their homes.

• People are concerned about the maintenance of our parks, equipment, roads, footpaths, trees and waterways and untidiness of streets, rubbish and litter.

• Services are at capacity and do not have the resources to meet current needs.

• There is concern about capacity of National Disability Insurance Scheme to meet individual needs.

• The need for information in community languages for people with disability.

**Strengths**

• Residents with disability say accommodation, having a home, living close to work, supported accommodation and having carers to provide support is important.

• There are a high number of residents who identify that the convenience and availability of shops and services is the thing they like best about living in the city.

• Many residents say there are plenty of recreational, sporting, social, religious or cultural activities, with lots of things for different age groups and backgrounds.

• Many residents report that they like where they live because it is quiet but this is matched equally by residents who dislike the noises in their neighbourhoods.

• Many residents report that their neighbourhood is a friendly place with community spirit

• There are great disability services that respond to needs, provide a network of support, teach people with disabilities about their rights and responsibilities, safety in the community and in the home
Recommendations

• Children with a disability need to have access to recreational activities.

• Increased opportunities for employment for residents with disabilities.

• Increased access to recreational facilities and programs for residents with disabilities.

• Public transport should equally accessible for all residents.

• Provision of support for people with disability, their carers’ and workers in the disability sector as they adjust to a different model of care through the National Disability Insurance Scheme.
1. Introduction

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.

This profile, focused on people with disability, presents research from the Blacktown City Social Profile 2016 and provides a more detailed understanding of the social situation for people with disability in Blacktown City.

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

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

The profile is a resource to support planning and research. It is a tool for strategic planning, reviewing strategic plans and should be used along-side consideration of the policies and activities of organisations, local, state and federal governments.

The social profile of people with disability includes the following sections:

- What does the data say? The key social indicators for people with disability
- What do the community and service providers say? A summary of the priority issues people with disability identified in our community engagement.

How did we develop the social profile?

The Blacktown City Social Profile 2016 is a key reference document for developing our community strategic plan. It was developed through community engagement and research. We engaged with over 2,155 people who participated in social profile surveys, focus groups, stakeholder forums and service interviews.

The target groups consulted are in line with the New South Wales Department of Local Government mandatory target groups and included Aboriginal and Torres Strait Islander People, children, men, older people, people with disability, people from culturally and linguistically diverse background, women and young people.
Approximately 17.8% of survey participants reported living with disability, compared to the 20% for Blacktown City as a whole.

**Figure 1: Survey participants with disability**

The survey was provided on-line, used face to face interviews at key festivals and events, distributed through Blacktown City administration, libraries, community organisations, social groups and clubs and was translated into 12 community languages.

A detailed summary of findings is contained in the Community Engagement Report - Blacktown City Social Profile 2016.

We researched key social indicators for the city and were 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.

The Blacktown City Social Profile 2016 can be found at:


**Additional resources in this series include:**

- The Blacktown City Social Profile 2016
- Blacktown City Social Profile 2016 Community Engagement Report
- Blacktown City Social Profile 2016 Social Indicator Report
- A social profile - Blacktown Precinct
- A social profile - Mount Druitt Precinct
• A social profile - North West Precinct
• A social profile - Aboriginal and Torres Strait Islander communities
• A social profile - Children
• A social profile - Culturally and linguistically diverse people
• A social profile - Older people
• A social profile – Women
• A social profile - Young people.
2. What does the data say?

This section includes Australian Bureau of Statistics, Census of Population and Housing, 2006 and 2011 data. This data and analysis was compiled and presented by .id, (profile.id.com.au, forecast.id.com.au and atlas.id.com.au).

Findings for Blacktown City have been benchmarked with Greater Sydney and/or New South Wales where this data has been available.

The report identifies Australian Bureau of Statistics Census data using Statistical level areas and precincts. Statistical level areas mostly align with the precincts identified in Table 1.

Table 1: Statistical local areas and precincts in Blacktown City

<table>
<thead>
<tr>
<th>Blacktown South West</th>
<th>Blacktown South West</th>
<th>Blacktown North</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mount Druitt Precinct</td>
<td>Blacktown Precinct</td>
<td>North-West Precinct</td>
</tr>
</tbody>
</table>

In 2016, Blacktown City was the second largest and the fastest growing local government area in New South Wales. There was an estimated 350,000 residents and we have a projected population of 520,000 by 2036. The city is growing rapidly through urban development in the North West Growth Centre and established centres such as Blacktown, Mt Druitt, Rooty Hill and Seven Hills.

2.1 Definition of disability

A disability is any condition that restricts a person’s mental, sensory or mobility functions. It may be caused by accident, trauma, genetics or disease. A disability may be temporary or permanent, total or partial, lifelong or acquired, visible or invisible. (ABS 2012)

2.2 People with disability – population and age structure, Blacktown City

The Australian Bureau of Statistics Survey of Disability, Ageing and Carers (SDAC), collects self-reported information from people living with disability. In 2012 this survey found:

- An estimated 4.2 million Australians had a disability - approximately 1 in 5 people.
• The proportion of the population with disability has remained stable over time. Approximately 19% of the population had a disability in 2009 and 2012.

• 43% of people over 55 years have one or more disabilities.

• 2.2 million Australians of working age (15 – 64 years) have disability.

• In 2012, nearly one-quarter (23.4%) of Aboriginal and Torres Strait Islander people living in private dwellings had a disability. After adjusting for differences in the age structure of the two populations, Aboriginal and Torres Strait Islander people were 1.7 times as likely as non-Indigenous people to have disability. (ABS 2014)

In 2012, the modelled estimated total population of people with any kind of disability living in a private dwelling in the Blacktown local government area was 50,763 (15.8%). This number can be broken up into the following groups:

• 19,574 (6.1%) have a profound severe disability

• 6,940 (2.60%) have a moderate disability

• 14,955 (4.7%) have a mild disability.

2.3 Gender

Across Australia, disability rates remain stable with 19% of men, and 18% of women living with disability. In the Blacktown local government area in 2012, the number and rate of disability types varied by gender as follows:

• physical disability - males 16,285 (10.2%) females 19,705 (12.3%)

• sensory disability - males 8,253 (5.2%), females 5,800 (3.6%)

• acquired brain Injury - males 2,203 (1.4%) females 1,560 (1.0%)

• intellectual disability – males 6,999 (4.4%) females 4,611 (2.9%)

• psychological disability - males 8,592 (5.4), females 7,928 (4.9%).

2.4 Age

In 2011, the number and rate of profound or severe disability in Blacktown City was increased with age:

• 7,537 (2.8%) persons aged 0 to 64 years were living with a profound or severe disability. This included people living in long-term accommodation.
7,431 (2.7%) persons aged 0 to 64 years were living with a profound or severe disability in the community.

6,290 (23.3%) persons 65 years and over were living with a profound or severe disability. This included people living in long-term accommodation.

5,036 (18.6%) persons aged 65 years and over, were living with a profound or severe disability in the community.

**Figure 2: Need for assistance**

Analysis of the population needing assistance in Blacktown City in 2011 compared to Greater Sydney shows that there was a higher proportion of females in the younger age groups (under 15) and a lower proportion of females in the older age groups (65+). Overall, 11.5% of the population needing for assistance was aged between 0 and 14, and 45.3% were aged 65 years and over, compared with 7.8% and 56.3% respectively for Greater Sydney.

The major differences between the age structure of the population needing assistance in Blacktown City and Greater Sydney were:

- a larger percentage of people aged 60 to 64 (9.0% compared to 7.3%)
- a larger percentage of people aged 5 to 9 (5.0% compared to 3.3%)
- a smaller percentage of people aged 80 to 84 (9.4% compared to 12.0%) and 85 and over (12.1% compared to 20.4%).
From 2006 to 2011, Blacktown City's female population needing assistance increased by 3,632 people (35.6%). This represents an average annual population change of 6.28% per year over the period.

The largest changes in age structure of the population needing assistance in this area between 2006 and 2011 were in the age groups:

- 85 and over (+560 persons)
- 65 to 69 (+440 persons)
- 60 to 64 (+438 persons)
- 70 to 74 (+253 persons).

Table 2: People with a need for assistance, by age groups, 20016, 2011

<table>
<thead>
<tr>
<th>Blacktown City - Need for assistance</th>
<th>2011</th>
<th></th>
<th>Greater Sydney</th>
<th>2006</th>
<th></th>
<th>Greater Sydney</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Five year age groups (years)</td>
<td>Number</td>
<td>%</td>
<td>%</td>
<td>Number</td>
<td>%</td>
<td>%</td>
<td>2006 to 2011</td>
</tr>
<tr>
<td>0 to 4</td>
<td>284</td>
<td>2.1</td>
<td>1.5</td>
<td>213</td>
<td>2.1</td>
<td>1.5</td>
<td>+71</td>
</tr>
<tr>
<td>5 to 9</td>
<td>690</td>
<td>5.0</td>
<td>3.3</td>
<td>525</td>
<td>5.1</td>
<td>3.0</td>
<td>+165</td>
</tr>
<tr>
<td>10 to 14</td>
<td>617</td>
<td>4.5</td>
<td>3.0</td>
<td>442</td>
<td>4.3</td>
<td>2.7</td>
<td>+175</td>
</tr>
<tr>
<td>15 to 19</td>
<td>468</td>
<td>3.4</td>
<td>2.4</td>
<td>301</td>
<td>2.9</td>
<td>2.1</td>
<td>+167</td>
</tr>
<tr>
<td>20 to 24</td>
<td>312</td>
<td>2.3</td>
<td>1.8</td>
<td>249</td>
<td>2.4</td>
<td>1.8</td>
<td>+63</td>
</tr>
<tr>
<td>25 to 29</td>
<td>280</td>
<td>2.0</td>
<td>1.8</td>
<td>228</td>
<td>2.2</td>
<td>1.7</td>
<td>+52</td>
</tr>
<tr>
<td>30 to 34</td>
<td>341</td>
<td>2.5</td>
<td>2.0</td>
<td>230</td>
<td>2.3</td>
<td>2.1</td>
<td>+111</td>
</tr>
<tr>
<td>35 to 39</td>
<td>359</td>
<td>2.6</td>
<td>2.4</td>
<td>331</td>
<td>3.2</td>
<td>2.5</td>
<td>+28</td>
</tr>
<tr>
<td>40 to 44</td>
<td>510</td>
<td>3.7</td>
<td>3.2</td>
<td>393</td>
<td>3.8</td>
<td>3.2</td>
<td>+117</td>
</tr>
<tr>
<td>45 to 49</td>
<td>651</td>
<td>4.7</td>
<td>4.0</td>
<td>492</td>
<td>4.8</td>
<td>4.0</td>
<td>+159</td>
</tr>
<tr>
<td>50 to 54</td>
<td>807</td>
<td>5.8</td>
<td>5.2</td>
<td>557</td>
<td>5.5</td>
<td>4.8</td>
<td>+250</td>
</tr>
<tr>
<td>55 to 59</td>
<td>1,006</td>
<td>7.3</td>
<td>5.9</td>
<td>755</td>
<td>7.4</td>
<td>6.0</td>
<td>+251</td>
</tr>
<tr>
<td>60 to 64</td>
<td>1,250</td>
<td>9.0</td>
<td>7.3</td>
<td>812</td>
<td>8.0</td>
<td>6.3</td>
<td>+438</td>
</tr>
<tr>
<td>65 to 69</td>
<td>1,082</td>
<td>7.8</td>
<td>6.7</td>
<td>642</td>
<td>6.3</td>
<td>6.1</td>
<td>+440</td>
</tr>
<tr>
<td>70 to 74</td>
<td>1,048</td>
<td>7.6</td>
<td>7.7</td>
<td>795</td>
<td>7.8</td>
<td>7.6</td>
<td>+253</td>
</tr>
<tr>
<td>75 to 79</td>
<td>1,159</td>
<td>8.4</td>
<td>9.5</td>
<td>992</td>
<td>9.7</td>
<td>10.8</td>
<td>+167</td>
</tr>
<tr>
<td>80 to 84</td>
<td>1,298</td>
<td>9.4</td>
<td>12.0</td>
<td>1,133</td>
<td>11.1</td>
<td>14.0</td>
<td>+165</td>
</tr>
<tr>
<td>85 and over</td>
<td>1,678</td>
<td>12.1</td>
<td>20.4</td>
<td>1,118</td>
<td>11.0</td>
<td>19.8</td>
<td>+560</td>
</tr>
<tr>
<td>Total people</td>
<td>13,840</td>
<td>100.0</td>
<td>100.0</td>
<td>10,208</td>
<td>100.0</td>
<td>100.0</td>
<td>+3,632</td>
</tr>
</tbody>
</table>
2.5 Income

Across Australia, people with disability are twice as likely to be in the bottom 20% of gross household incomes.

In 2015, findings from the Australian Institute of Health and Welfare report on diversity and disadvantage showed a government pension or benefit to be the main source of income for 43% of those with disability, with a further 37% reporting wages or salary as their main source of income. There were differences in income source by disability severity—for example, for 81% of those with a profound or severe disability, a government pension or allowance was reported as the main source of income, with 7% reporting wages or salary.

2.6 Need for assistance by household type and housing tenure

In 2011, 39.5% of people reporting a need for assistance were in couple families with a child or children, and 23.5% were in one-parent families, compared with 34.5% and 19.2% respectively for Greater Sydney. Overall, the proportion of people with a need for assistance in lone person households was 11.9% compared to 17.4% in Greater Sydney while the proportion in couples without children was 20.5% compared to 24.3% in Greater Sydney.

Between 2006 and 2011 the largest changes in the family/household types of people reporting a need for assistance in Blacktown City were:

- couples with children (+1,401 persons)
- one parent family (+956 persons)
- couple without children (+556 persons)
- lone person household (+376 persons).
Table 3: Need for assistance by household type, 2006, 2011

<table>
<thead>
<tr>
<th>Households by type</th>
<th>2011</th>
<th>Greater Sydney</th>
<th>2006</th>
<th>Greater Sydney</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>%</td>
<td>Number</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>Couple with children</td>
<td>4,870</td>
<td>39.5</td>
<td>3,469</td>
<td>39.1</td>
<td>29.1</td>
</tr>
<tr>
<td>Couple without children</td>
<td>2,535</td>
<td>20.5</td>
<td>1,979</td>
<td>22.3</td>
<td>29.5</td>
</tr>
<tr>
<td>One parent family</td>
<td>2,900</td>
<td>23.5</td>
<td>1,944</td>
<td>21.9</td>
<td>16.7</td>
</tr>
<tr>
<td>Other family</td>
<td>205</td>
<td>1.7</td>
<td>131</td>
<td>1.5</td>
<td>1.5</td>
</tr>
<tr>
<td>Group household</td>
<td>357</td>
<td>2.9</td>
<td>249</td>
<td>2.8</td>
<td>3.6</td>
</tr>
<tr>
<td>Lone person household</td>
<td>1,469</td>
<td>11.9</td>
<td>1,093</td>
<td>12.3</td>
<td>19.5</td>
</tr>
<tr>
<td>Other non-classifiable household</td>
<td>0</td>
<td>0.0</td>
<td>6</td>
<td>0.1</td>
<td>0.1</td>
</tr>
<tr>
<td>Total people counted in private dwellings</td>
<td>12,336</td>
<td>100.0</td>
<td>8,871</td>
<td>100.0</td>
<td>100.0</td>
</tr>
</tbody>
</table>


In Blacktown City 59.4% of people reporting a need for assistance were in households they were purchasing or fully owned their home, 15.8% were renting privately, and 21.1% were in social housing in 2011.

Overall, 31.9% of people reporting a need for assistance were in households who owned their dwelling; 27.5% were purchasing, and 37.4% were renting, compared with 42.9%, 21.5% and 31.3% respectively for Greater Sydney. This means there was a smaller proportion of people with a need for assistance in households who owned their dwelling; a larger proportion purchasing their dwelling; and a larger proportion who were renters.

In Blacktown City between 2006 and 2011, the total number of people reporting ‘a need for assistance’ increased by 3,476. The major changes in housing tenure categories of people reporting a need for assistance in Blacktown City between 2006 and 2011 were as follows:

- mortgaged dwellings (+1,181 persons)
- fully owned (+867 persons)
- renting - private (+723 persons)
- renting - social housing (+651 persons).
2.7 Education

People with disability may have restrictions relating to schooling or employment. In 2012, 69% of Australians with disability aged 5-64 reported having a specific schooling or employment restriction (ABS 2013).

2.8 Employment of people with disability

People aged between 15 and 64 years with disability have both lower participation (53%) and higher unemployment rates (9.4%) than people without disability (83% and 4.9% respectively).

Australia’s employment rate for people with disability (47.75% in 2012) is on par with developed countries such as Canada (49% in 2011), United Kingdom (48.9% in 2012), Luxembourg (48% in 2011), New Zealand (45% in 2013), Denmark (43.90% in 2013), Norway (43% in 2013).

In 2011, the 92.8% of the total labour force of Blacktown City was in employment and 7.2% were unemployed.

2.9 Where do people with a disability live?

In 2011, 4.6% of Blacktown City’s population was in need of assistance compared to 4.4% in Greater Sydney. This population is defined as people in Blacktown City who need assistance in their day to day lives with any or all of the following activities – self-care, body movements or communication – because of a disability, long-term health condition, or old age.
While Blacktown City had a higher proportion of persons in need of assistance, it is important to note that this varied across the city. In 2011, proportions ranged from a low of 1.9% in Stanhope Gardens to a high of 8.3% in Whalan.

The five areas with the highest percentages were:

- Whalan (8.3%)
- Marayong (7.6%)
- Bidwill (7.3%)
- Rooty Hill - Eastern Creek (6.9%)
- Lethbridge Park (6.9%).

Figure 4: People in need of assistance due to disability, by suburb, 2011
2.10 Income support

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%. The disability support pension recipient numbers remained broadly steady at 3.4% respectively.

Table 4: Selected government pensions, number and % of estimated resident population

| Blacktown City, June 2010, March 2014 Selected government pensions |
| Age pension |
| 2010 | 2014 |
| No. | % of ERP | ERP | No. | % of ERP | ERP |
| 21,003 | 6.8 | 307,816 | 24,236 | 7.3 | 332,424 |
| Carers payment |
| 2010 | 2014 |
| No. | % of ERP | ERP | No. | % of ERP | ERP |
| 3,379 | 1.1 | 307,816 | 5118 | 1.5 | 332,424 |
| Disability support pension |
| 2010 | 2014 |
| No. | % of ERP | ERP | No. | % of ERP | ERP |
| 10,574 | 3.4 | 307,816 | 11395 | 3.4 | 332,424 |


The majority of people with disability live in households (98%); of these, 1 in 4 (26%) reported that they received assistance with core activities, and of these, 6% reported needing more assistance. About 3% of people with disability reported needing assistance with core activities, but did not receive it.
2.11 Carers

In Blacktown City there were 24,663 carers providing unpaid assistance to a person with a disability, long-term illness or old age in 2011. The number of people who provided unpaid assistance to a person with a disability, long-term illness or old age in Blacktown City increased by 5,036 between 2006 and 2011. The number of females who provided unpaid assistance to a person with a disability, long-term illness or old age in Blacktown City increased by 2,959 between 2006 and 2011.

Table 5: Unpaid Care in Blacktown City and Greater Sydney, 2011

In the same year, there were 1,813 carers aged 18 to 24 years in Blacktown City providing unpaid assistance to a person with a disability, long-term illness or old age. Analysis of the unpaid care provided by people aged 18 to 24 years in Blacktown City in 2011 compared to New South Wales shows that there was a higher proportion of persons who provided unpaid care to either family members or others. Overall, 6.2% of the population aged 18 to 24 years provided unpaid care compared with 5.6% for New South Wales. (Australian Bureau of Statistics, Census of Population and Housing, 2011/Compiled and presented in profile.id by .id, the population experts)

2.12 Lifestyle

Being active can provide a huge range of positive experiences, make a person feel good, improve their health, and is a great way to relax and socialise. Many people participate in sport to enhance a healthy lifestyle and for the social opportunities it provides. People with disability show they are also keen to participate even though they may experience constraints (Australian Sports Commission 2012).
• In 2010, 68% of people with a disability (4.6 million) participated in sport, lower than the 79% of people without a disability (7.9 million).

• Both males and females with a disability had lower participation rates (68% and 67% respectively) than those without a disability (82% and 76%).

Compared with the whole population, people with disability participate less than those without a disability. However, overall the data show that over two thirds of people with a disability participated in sport and physical recreation activities in the 12 months prior to interview. These results are an encouraging sign that the majority of people with a disability are active.

Leisure describes a wide variety of free time activities including sport, hobbies or simply a walk in the park. People who engage in regular exercise as a form of leisure, experience reduced stress, improved sleeping patterns, improved concentration and a better outlook on life.

Linked to this is the overall access to open space areas that can be used for recreation, exercise and socializing, as well as having environmental and health benefits by providing a contrasting environment for humans, plant and animal life. Access to open space can be impacted by location, proximity, management and design. (Australian Sports Commission 2012)

Residents of Blacktown City value the availability of a wide range of leisure opportunities with the city (Blacktown City Social Profile 2016 - Social Profile Community Engagement Survey 2015).

Having affordable and accessible leisure services in the community increases the opportunities for vulnerable and special need groups to take part. Blacktown City’s leisure centres are affordable and accessible for older people, people with a disability, people living on low incomes, young people and families with small children who usually face a number of barriers to taking part in leisure and community activities. (Blacktown City Social Profile 2016 - Social Profile Community Engagement Survey 2015)

2.13 Access to transport

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. Across our city, there is significant inequity in people’s ability to access public transport networks. Transport disadvantage prevents individuals 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 transport disadvantage due to factors including affordability, service coverage and physical and geographic barriers. People living in rural and fringe areas face longer distances when using transport services (ABS, 2006, General Social Survey)
2.14 Social capital for people with disability

Social capital is a term used to describe particular social relationships within a group or community. This includes levels of trust between people; whether they have a shared understanding of how they should behave towards, and care for one another and participation in civic organisations, such as sporting clubs and school councils. It is also used to describe the resources available within communities that are built from networks of mutual support, reciprocity, trust and obligation. It can be accumulated when people interact with each other in families, workplaces, neighbourhoods, local associations and a range of informal and formal meeting places. (ABS, 2000) It can be measured by surveying residents about levels of community belonging, trust, safety, participation and harmony.

Regular community surveys across the city provide a snapshot of community belonging and see how community perceptions vary for each community and target group over time. In previous surveys (2006, 2011), residents from across the city have reported positive levels of ‘feeling that they belong to their community’.

During March-May 2015, Blacktown City engaged 2155 residents from across the city in a Social Plan 2016 “Have Your Say” survey. The survey included the following social capital questions:

- I feel like I belong in this neighbourhood.
- If you had a problem, could you rely on one of your neighbours to help you?
- I feel safe walking down my street.
- I speak with my neighbours – frequently, sometimes, never.
- How satisfied are you with your local area as a place to live, work and spend time?

The following results are from respondents to the survey who identified as people with disability.

I feel like I belong in this neighbourhood

The majority of participants with disability reported feeling “they belonged in their neighbourhood” (78%), compared to 79% for all participants. This is response was higher than in 2011, when 72.2% of people with disability reported feeling “they belonged in their neighbourhood”.
Speaking with neighbours

This was the first time this question was included in the survey and it provides a baseline for comparison for future surveys. People with disability were only marginally less likely to speak to a neighbor at least once a week (42%) when compared to all participants (43.1%).

Satisfaction with neighbourhood

The majority of people with disability were satisfied with their neighbourhood as a place to live work and spend their time (43%) compared to 49.2% for all participants. 19% were very satisfied compared with 18.4% of all participants. In 2011, 41.7% were satisfied and 28.3% were very satisfied.
Figure 7: Satisfied with their local neighbourhood

If you had a problem, could you rely on a neighbour for help?

The majority (61%) reported being able to "rely on a neighbour for help with a problem". This compared to 64.1% for all participants. In 2011, 70.6% said they could rely on a neighbour.

Figure 8: Could you rely on neighbours?

Feeling safe walking down their street

This was the first time this question was included in the survey and it provides a baseline for comparison for future surveys. Less people with disability (44%) reported always feeling safe walking down their street compared to 48.8% for all participants. People with disability had a higher rate of "never" feeling safe (13%) when compared to all participants (6%).
Figure 9: Perceptions of safety

- 43% Always
- 44% Never
- 13% Sometimes

People with disability – A social profile
3. What do the community and service providers say?

The results of our community engagement (with residents, workers and service providers) are presented using the World Health Organisation Social Determinants of Health (Wilkinson & Marmot 2003). The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between communities.

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 food and 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.

3.1 Social gradient

- Residents with a disability say accommodation, having a home, living close to work, supported accommodation and having carers that provide support are all important.

- Residents say there are cost barriers when living on a disability pension, for example, "paying bills, buying things you need", this often means people go without the things they need or want.

3.2 Stress

- There are a high number of residents who identify that the convenience and availability of shops and services is the thing they like best about living in the city.

- Many residents say there are plenty of recreational, sporting, social, religious or cultural activities, with lots of things for different age groups and backgrounds.

- Many residents report that they like where they live because it is quiet but this is matched equally by residents who dislike the noises in their neighbourhoods.

- Residents are concerned about antisocial behaviour in their neighbourhoods, around property, drinking alcohol, drug-taking and swearing).

- There is wide spread concern that many of our streets are untidy and dirty with rubbish and litter.

- There are community perceptions of high crime levels which makes community safety a real concern.

- People are concerned about the maintenance of our parks, equipment, roads, footpaths, trees and waterways.

- Services are concerned about social isolation and mental illness for those with disability.
3.3 **Early life**

- Services note the importance of children to have opportunities to be involved in recreational activities.

3.4 **Social exclusion**

- Residents report access for people with limited mobility and in wheelchairs is still challenging in many areas of the city.
- Discrimination continues to be an issue for some of our residents with a disability.
- Services note a lack of understanding of the issues surrounding vision impairment.
- Young people with a disability want to be included into mainstream services.
- Services note social exclusion can be more than just physical access and needs. It also includes involving and employing people with a disability across all spectrums of activities and community consultations.

3.5 **Work**

- Residents report access for people with limited mobility and in wheelchairs is still a barrier to getting a job.
- Residents and services note work provides an opportunity to be occupied, have job satisfaction and a social outlet. It also provides money and income.

3.6 **Unemployment**

- Employment services say there is a double disadvantage experienced by unemployed people with a disability.

3.7 **Social support**

- Many residents report that their neighbourhood is a friendly place with community spirit.
- Services say there are great disability services that respond to needs, provide a network of support, teach people with disabilities about their rights and responsibilities, safety in the community and in the home.

3.8 **Addiction**

- Not reported in community engagement.
3.9 Food

- Not reported in community engagement.

3.10 Transport

- People with disability say they have great difficulties getting around as either pedestrians or public transport users because the physical environment is often full of obstacles and directional signage is not useful for the vision impaired.

- There are an equal number of residents who report that they like the access to public transport and those who report the lack of reliable, accessible and affordable public transport (not enough services, access to bus, trains).

- Some residents say they lack the confidence to use public transport and need support.

- There is widespread concern about speeding vehicles on local roads and what is perceived as a ‘hoon’ culture amongst some drivers in our community.

- There is widespread concern about traffic especially issues with congestion.

3.11 Service development

- Most services say that they are at capacity and do not have the resources to meet residents’ needs.

- Many services report facing uncertainty in regards of funding. This is impacting on service provision, clients and staff.

- There is some apprehension from disability services that new funding models will reduce client focus (National Disability Insurance Scheme).

- Services are concerned that the competitive tender funding model is seeing organisations working against each other and reducing partnership approaches.

- The changes in funding models particularly impacts smaller not for profit organisations.

- Services for older people provided by Home and Community Care say there needs to be greater funding in the city for aged day care centres, dementia support and community aged care packages.

- Service interviews with local organisations shows a high staff turn-over in community services due to both the aging workforce and uncertainty of the sector.

- Job certainty is a real concern with many staff on contracts until changes in funding models is completed by the state government.
• Many organisations are concerned about the stress on staff having to ‘do more with less’, an impact of funding changes and the uncertainty in the sector.

• There continue to be challenges on sharing information with the community about the services available to them. This particularly impacts those who are disengaged and isolated.

• The need for information in community languages.

• The sector is seeing big changes, particularly in the models of care. While these will improve service to clients the changes are challenging to manage.

• It is challenging for services to keep up with sector changes and changing government priorities. This is made more difficult as there is very little information available from funding departments.

• The challenges of engaging clients when there are system changes that will affect them and workers is unaware of what the future holds.