Families and Family Support in Gold Coast City

Prepared by Ian O'Reilly

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Contact Us:
The Social Research Section
Social Planning and Research Branch
Community Services Directorate
Gold Coast City Council

Tel: (07) 5581 6023
Fax: (07) 5581 5203

Address: PO Box 5042 Gold Coast Mail Centre Qld 9729

Email: socialresearch@goldcoast.qld.gov.au
Internet: www.goldcoast.qld.gov.au/socialresearch

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Foreword

I am proud to present *Families and Family Support in Gold Coast City*.

Gold Coast City is one of the fastest growing regions in Australia, with an increasing number of families leading to rising demand for services and support. In order to meet this demand we need a clear understanding of the diversity of families in the City, their needs and the requirements of the services and organisations that support them. This document makes an important step towards achieving this objective and addressing Council's Strategic Priority for Community Health and Individual Well-being in Gold Coast City. It identifies challenges that families are facing and a range of ways that Council and other agencies can respond to improve support for families.

I encourage community organisations across the City, together with government organisations, to draw on this resource and continue working collectively towards developing sustainable family support networks and strategies for our region.

Cr. Ron Clarke
Mayor

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Contents

1 Executive summary 1

2 Introduction 5

2.1 Method for developing the profile 5

3 People, families and households in Gold Coast City 6

3.1 Indigenous families 8

3.2 Birthplace 8

4 Changes and trends affecting families 10

4.1 Population growth 10

4.2 Changing families 10

4.3 Changing work 13

4.4 Housing and mobility 14

4.4.1 Homelessness 16

4.5 Changes and challenges for family support agencies and workers 17

5 The nature of family support work 18

5.1 Prevention and early intervention 18

5.1.1 What is prevention and early intervention work? 18

5.2 Enhancing health and wellbeing 19

5.2.1 A strengths-based approach 19

5.3 Holistic approaches, collaboration and flexibility 19

5.3.1 Place management 22

5.4 Participation 23

6 Challenges for families and pressures for developing support 25

6.1 Indicators of crisis 25

6.1.1 Child protection trends 25

6.1.2 Sexual abuse and sexual assault 25

6.1.3 Domestic violence data 26

6.1.4 Kids Help Line data 26

6.1.5 Understanding the extent of crisis 26

6.2 Families and children with disabilities 27

6.3 Children of parents with a mental illness 27

6.4 Social isolation 28

6.5 One-parent families 28

6.6 Challenges for Indigenous families 28

6.7 Families from Culturally and Linguistically Diverse (CALD) backgrounds 30

6.8 Young people, their families and education 30

6.9 Young parents 32

6.9.1 Pregnant and parenting students 33

6.10 Families and work 34

6.10.1 Unemployment and underemployment 35
6.10.2 Labour mobility: changing jobs 35
6.10.3 Balancing family and work demands 36

6.11 Poverty, exclusion and disadvantage 40
6.11.1 Poverty 40
6.11.2 Exclusion 43
6.11.3 Disadvantage 43

6.12 Transport 44
6.12.1 Motor vehicle ownership 44

6.13 Planning and developing family friendly places 45

6.14 Respite 46

6.15 Childcare and early childhood services 46
6.15.1 Results from the Australian Child Care Survey 46
6.15.2 Childcare and early childhood services - issues 47

6.16 Child protection and safety 49
6.16.1 Changes in policies and practices 49
6.16.2 A child's right to safety 50
6.16.3 The future for child protection and safety in Queensland 50

6.17 Carers in families 52
6.17.1 Grandparents raising grandchildren 52

6.18 Shortage of General Practitioners 54

6.19 Other identified issues 55

7 Child and family development and wellbeing 56

7.1 Fathers 57

8 Information, access, awareness of services 58

8.1.1 Broadening access to services – some recent studies 59
8.1.2 Priorities for improving access to and awareness of family support 60
8.1.3 Identifying critical transition points and stages in child and family development 61

9 Developing universal family support 63

9.1 Structural challenges and opportunities for supporting families 63

9.2 The Queensland Government Putting Families First Policy Statement 64

10 Ongoing research and planning requirements 66

10.1 Projects and processes 66

10.2 Other considerations and ideas for further research and planning 66

11 References 68

12 Appendix 1 – Companion demographic profile: families and households in Gold Coast City 75

List of figures

Figure 1: Family and household types for dwellings, 2001 6
Figure 2: People, families and households in Gold Coast City 7
Figure 3: Change in household and family types, 1996 to 2001 11
Figure 4: Estimated poverty rates for individuals in one-parent families and couple families with children by number of children, Australia, 2000 41

List of tables

Table 1: Indigenous families as a proportion of each family type, 2001 8
Table 2: Household and family type by country of birth, Gold Coast City, 2001 9
Table 3: Children and dependent types for couple families by social marital status of parents, Gold Coast City, 2001 12
Table 4: Dwelling type by family and household type, Gold Coast City, 2001 14
Table 5: Tenure by family type, Gold Coast City, 2001 14
Table 6: Mobility indicator by family and household type, Gold Coast City, 2001 16
Table 7: Poverty in Australia in 2000, NATSEM/Smith Family estimates 41
Table 8: Profile of exclusion in Australia, 1998-99 43
Table 9: SEIFA Disadvantage Index variables and weights, 2001 44
Table 10: Number of motor vehicles per dwelling by family and household type, Gold Coast City, 2001 45
Table 11: Age of carers and relationship to recipient of care, Australia, 1998 52

1 Executive summary

Families and households in Gold Coast City

- There were 154,492 family, group and lone person households in Gold Coast City at the 2001 Census. This comprised 43,952 couple families with children, 43,548 couple families without children, 18,879 one-parent families, 37,145 lone persons, 9,152 group households and 1,815 other families.
- From 1996 to 2001 in Gold Coast City the proportion of one-parent families and lone person households increased while couple families with and without children and group households decreased. At 2001 Gold Coast City recorded higher proportions of couple families without children, one-parent families and group households, and a lower proportion of couple families with children than Queensland and Australia.

Changing families in Australia

- Changes in the structure of Australian families include decreasing household size, a shift away from nuclear families, and decreasing fertility/birth rates and rates of registered marriage.

Mobility and social isolation

- Mobility is higher in Gold Coast City than across Australia. This is particularly evident for one-parent families with only 27.9% having no resident change address in the five years preceding the 2001 Census, compared to 38.8% for all households and couple families with children.
- High mobility in the City contributes to social isolation for many families, particularly for families who have recently moved to the City and have little access to support networks or extended family.
- A health assessment of families with children under five years identified a concerning level of social isolation in the Gold Coast region. 17% of respondents indicated they had no support and 39% reported having little or no support. The study found their sense of isolation decreased with participation in parent support or play groups.

Work

- Changes in the Australian labour market affecting families include:
  - increasing part-time employment and casualisation of work;
  - the demise of standard hours for full-time workers and polarisation of the workforce into under-employed part-time and over-worked full-time workers; and
  - a growth in service industries that has lead to increased demand for flexible labour and rising casual and part-time work. This is particularly evident in Queensland.
- There are 15,497 families with children in Gold Coast City with no resident parent employed. This represents 24.5% of families with children, higher than for Queensland (21.9%) and Australia (21.8%). Gold Coast City recorded 18,815 dependent children with no resident parent employed.
- There are 8,417 dependent children in the City living in a family with at least one parent unemployed at the 2001 Census. In Gold Coast City at 2001 the unemployment rate for usual residents in couple families with children was 7.7% of persons in the labour force. In one-parent families the unemployment rate was 20.1%.

- In September 2002 in Australia 22% of part-time workers wanted to work more hours and 57% of those wanted to work full-time. The median period of insufficient work was 26 weeks, and even higher for lone parents at 30 weeks.
- While part-time work can allow flexibility to meet family and other life demands there is evidence to suggest it is less likely to provide opportunities for promotion or development. Part-time career opportunities are needed that allow for a workload that might change from year to year as other life demands change.

Housing and poverty

- Home purchase and rental costs continue to record increases across the City.
- Homelessness is increasingly affecting families and well-educated people who have experienced difficult life events such as unemployment or health problems.
- Almost one in eight Australians (13%) were living in income poverty in 2000 when the poverty line is set at half the average family income for all Australians. This is up from 11.3% in 1990. The proportion of children living in poverty increased from 14.3% to 14.9% over the decade to 2000.
- In Australia estimated poverty rates for one-parent families are much higher than those for couple families.
- High housing costs and low household incomes are reported for Gold Coast City in 2001 Census data. This suggests that rates of poverty in the City are likely to be higher than those for households and families across Australia.
- There is evidence that the strong economic gains of the past two decades have not been shared fairly. From 1994-95 to 2000-01, average income in the top quintile increased by $111, which is more than eight times the increase in the lowest quintile of $13 per week.
- Lack of adequate public transport services impacts negatively on individuals, families and communities in Gold Coast City.
- 10.2% of one-parent families in Gold Coast City report having no motor vehicle at the 2001 Census compared to only 1.4% of couple families with children.

Family support work

- Family support work is increasingly focusing on prevention and early intervention, enhancing health and wellbeing, strengths-based and holistic approaches, collaboration, flexibility and participation.

Child protection

- Child protection notifications and substantiations are increasing. Changes in policies and practices relating to child protection and safety are also evident. Need for reform of child protection in Gold Coast City and across Queensland is clearly documented. A new Department of Child Safety has been established in Queensland in response to recommendations from a Crime and Misconduct Commission (CMC) Inquiry to focus exclusively upon core child protection functions.

Carers in families

- 13% of children in Australia who live with a parent with a disability provided some type of informal care for this parent.
- The prevalence of grandparents raising grandchildren is becoming more apparent both locally in Gold Coast City and across Australia. A range of issues are being identified including legal issues and supporting grandparents who take on the important work of full-time care of their grandchildren.

Need for specialist support and families facing particular challenges

- This profile identifies a number of groups of families facing particular challenges and requiring specialist support to meet those challenges. These include families with children with disabilities, families with parents or children experiencing mental illness, grandparents who are responsible for the care of their grandchildren, young parents, one-parent families, Indigenous families and families from culturally and linguistically diverse backgrounds.

GPs

- There is a shortage of General Practitioners (GPs) in many parts of Gold Coast City. This leads to patients waiting longer to get appointments or travelling further to find a GP who can see them. New residents are reported to have trouble finding a local GP who has not closed off their books to new patients. Declining availability of bulk billing is also impacting on families in the City.

Child and family development and access to services and information

- There is growing support for fostering quality early learning experiences for children in all environments from birth.
- Parents have identified three factors that are important for their own wellbeing and achieving better outcomes for their children:
  - Learning and being prepared for parenthood.
  - Maintaining a good relationship with their partner.
  - Having access to information, support and services.
- Parents report that most of the information available at childbirth focuses on medical aspects of birth and child health. In addition, they want information to help prepare them for the demands of parenthood and the lifestyle and relationship changes associated with having a child.

  Parents have identified a need for information about child development and about services available to them, and getting the right information at the right time in the right way. Parents would prefer to receive information through a variety of channels in places they normally go to.
- Access to affordable childcare is identified as a critical need for families in Gold Coast City, especially for those who are not able to rely on support from extended family networks.
- Access to affordable respite services is identified as a need for families in the City, particularly for families who have a child with a disability.
- Across Australia parents have reported that formal childcare plays a valuable role in preparing children for school, while parents without this link had limited awareness of support and services available. Parents without jobs reported cost as a barrier to accessing early learning programs. Lack of childcare services prevented some parents from returning to work.

Universal support

- There is strong support for a multi-level approach to supporting families providing universal support to all families alongside more intensive support for those in crisis or in need of particular responses. Programs should be available to all families, not just those *at risk*.

  Parents have reinforced the view that encouraging wider, more universal use of programs could help to reduce stigma associated with some services.

- A number of agencies and groups in the City are working to provide support to families. This includes universal support that is available to all families, as well as intensive support for families in crisis or in need of particular responses. While some individual agencies are responsible for planning and delivering particular services, improved coordination and planning between service areas is required.

- The *Putting Families First* policy statement is the key social policy of the Queensland Government. It is a long-term policy to support development of responses to the needs of children, families and communities. Implementation of the policy is the shared responsibility of state and local government, the non-government and business sectors, local communities, families and the people of Queensland. The Gold Coast Regional Managers Coordination Network, in partnership with these stakeholders, has responsibility for developing local initiatives to respond to the needs of families, evaluating local activity in relation to the outcomes of the policy and identifying how services in the City can be more family friendly and supportive.

Ongoing research and planning requirements

1. Undertake analysis of Gold Coast City's labour market and how it impacts on individual, family and community wellbeing.
2. Develop responses to issues relating to housing stress and homelessness among families in Gold Coast City.
3. Undertake analysis of support for families in Gold Coast City leading into an ongoing research and reporting process to identify and describe issues, needs and resources relating to supporting families in the City. .
4. Building from point 3 there is a need to develop an integrated approach to planning, development and delivery of family support – including prevention and early intervention programs and intensive support for families.

2 Introduction

This document presents a demographic profile of families in Gold Coast City and analysis of trends, needs and issues relating to families and family support. The Social Research Section, Gold Coast City Council (GCCC) was asked to undertake this research by the Gold Coast Child and Family Support Services Network (CFSSN) and the Community Services Directorate, GCCC. The profile was prepared with support from the CFSSN and is intended for use as a resource to support planning, development and delivery of services and support for families in the City, and as an educational resource for students.

The scope of the profile is families with children under 18 years of age, including resources, support, needs and issues. Limiting the scope of this profile was a difficult task. While the scope is clear in terms of whom it relates to, there is an endless list of issues affecting families and support services that this paper could cover. Therefore, rather than attempting to be comprehensive, this profile seeks to focus on critical core issues and provide information about changes and trends affecting families, the nature of family support work and how it is changing, challenges for families and the policy context that provides for a more universal approach to family support.

A number of questions about further work are raised throughout the profile. These questions are presented at the end of the document, as opportunities for consideration by Council and other agencies and individuals with an interest in supporting families in Gold Coast City.

2.1 Method for developing the profile

A reference group was established to support the project comprising members nominated by the Gold Coast CFSSN. The project was undertaken in two stages. The first stage included: analysis of data from the 2001 Census on Population and Housing; and review of literature and existing work documenting trends and issues relating to families and family support. This information was sourced locally in Gold Coast City, across Queensland and Australia and in some cases from overseas. A summary of the demographic analysis was published in the Second edition of *Our Community: A Social Profile of Gold Coast City* (GCCC 2003a) available at www.goldcoast.qld.gov.au/socialresearch.

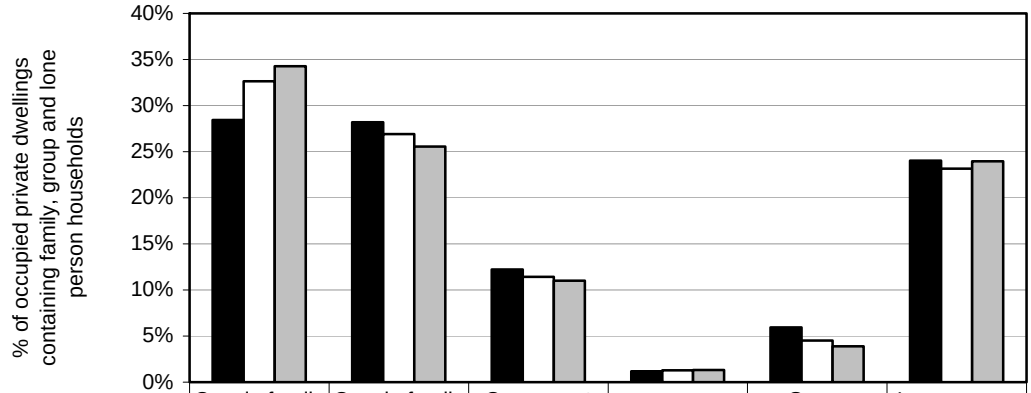
The review of literature and existing work was distributed as a draft discussion paper to approximately 500 contacts sourced through community services networks across the City. The discussion paper presented an analysis based on information from a range of literature and projects. Rather than a comprehensive analysis, the discussion paper presents a starting point for workers and agencies in the family support sector to provide comment and input on what other issues needed to be covered. The paper was on review for a period of three weeks and late comments were also accepted. A workshop was held with a cross section of workers from the family support sector to review the paper. The project reference group identified workers from the family support sector to invite to the workshop. Fifty-two people were invited and 21 attended. A broad range of feedback on the discussion paper was received from the workshop and through individual contributions.

The task for the second stage of the project was to prepare a draft of the final profile incorporating the review of literature and existing work in the draft discussion paper, a summary of the demographic analysis, some stories about families' experience of life in Gold Coast City and feedback on the discussion paper. Feedback on the discussion paper confirmed that it did not provide a comprehensive analysis. New data from support workers was added to most sections of the paper and some additional sections were included. Stories about families' experience have been included and provide a limited description of life in Gold Coast City from a families' perspective. While this profile draws on a range of literature and work that include input from families, further research is required to provide a more comprehensive description of families' experience of life in Gold Coast City.

3 People, families and households in Gold Coast City

On Census night 2001 there were 154,492 occupied private dwellings containing family, group and lone person households in Gold Coast City. Figure 1 shows family and household types in Gold Coast City, Queensland and Australia in 2001. The most common family or household type in Gold Coast City was couple families with children representing 28.4% of all dwellings (43,952 dwellings). Couples with children were followed by couples without children with 28.2% (43,548 dwellings), lone persons with 24% (37,145 dwellings), one-parent families with 12.2% (18,879 dwellings), group households with 5.9% (9,152 dwellings) and other families with 1.2% (1,816 dwellings).

Figure 1: Family and household types for dwellings, 2001



	Couple family with children	Couple family w/out children	One parent family	Other family	Group household	Lone person household
Gold Coast City	28.4%	28.2%	12.2%	1.2%	5.9%	24.0%
Queensland	32.7%	26.9%	11.4%	1.3%	4.5%	23.2%
Australia	34.3%	25.5%	11.0%	1.3%	3.9%	24.0%

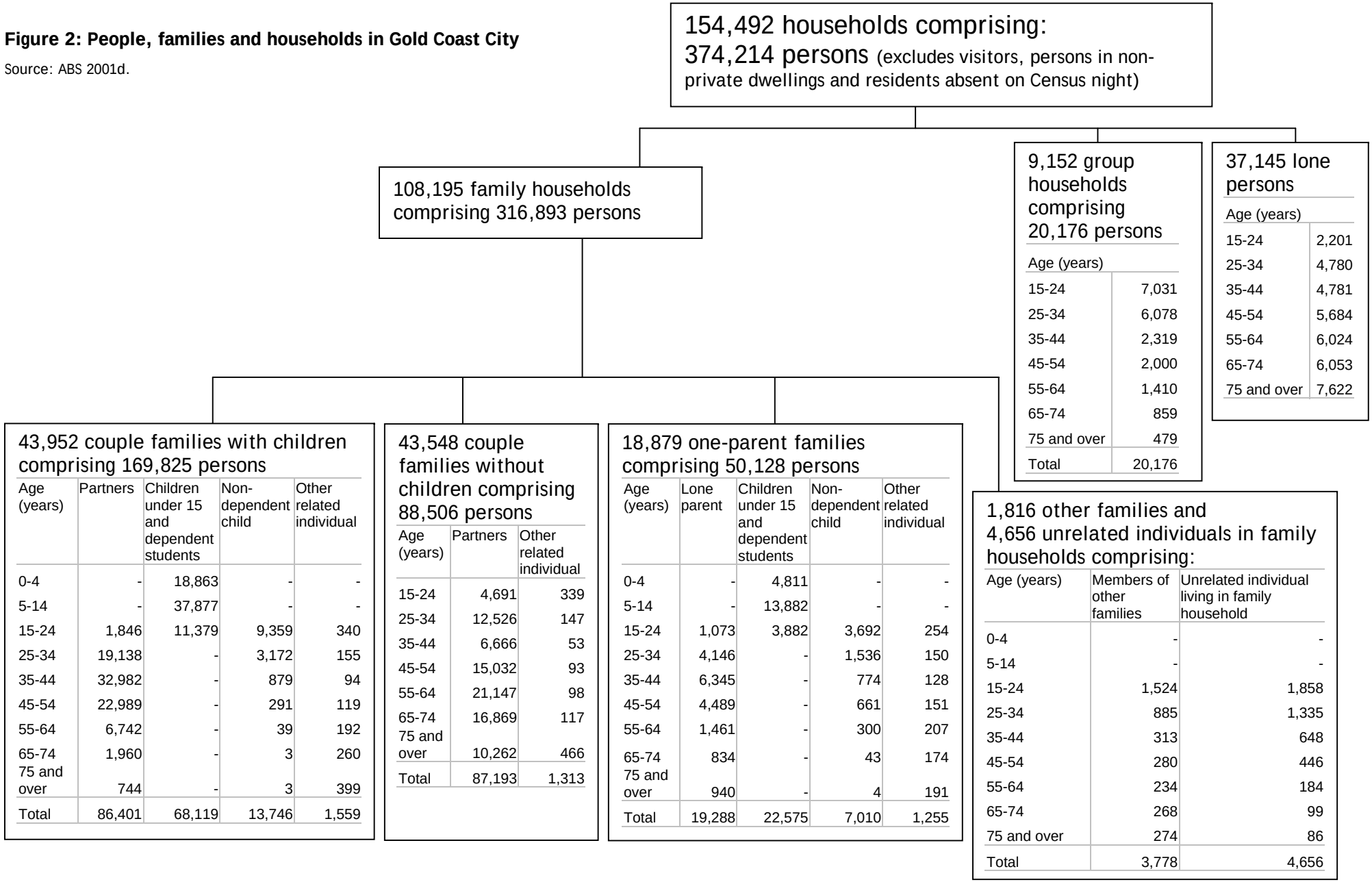
Original data source: Expanded Community Profile (ABS 2001d).

Gold Coast City reported higher proportions of couples without children, one-parent families and group households, and a considerably lower proportion of couples with children than Queensland and Australia (Figure 1).

Figure 2 shows the number of households and people in Gold Coast City by age and relationship in household at the 2001 Census. Please note this data excludes visitors, persons in non-private dwellings and residents absent on Census night.

Figure 2: People, families and households in Gold Coast City

Source: ABS 2001d.



Age (years)	15-24	25-34	35-44	45-54	55-64	65-74	75 and over	Total
	7,031	6,078	2,319	2,000	1,410	859	479	20,176

Age (years)	15-24	25-34	35-44	45-54	55-64	65-74	75 and over
	2,201	4,780	4,781	5,684	6,024	6,053	7,622

Age (years)	Partners	Children under 15 and dependent students	Non-dependent child	Other related individual
0-4	-	18,863	-	-
5-14	-	37,877	-	-
15-24	1,846	11,379	9,359	340
25-34	19,138	-	3,172	155
35-44	32,982	-	879	94
45-54	22,989	-	291	119
55-64	6,742	-	39	192
65-74	1,960	-	3	260
75 and over	744	-	3	399
Total	86,401	68,119	13,746	1,559

Age (years)	Partners	Other related individual
15-24	4,691	339
25-34	12,526	147
35-44	6,666	53
45-54	15,032	93
55-64	21,147	98
65-74	16,869	117
75 and over	10,262	466
Total	87,193	1,313

Age (years)	Lone parent	Children under 15 and dependent students	Non-dependent child	Other related individual
0-4	-	4,811	-	-
5-14	-	13,882	-	-
15-24	1,073	3,882	3,692	254
25-34	4,146	-	1,536	150
35-44	6,345	-	774	128
45-54	4,489	-	661	151
55-64	1,461	-	300	207
65-74	834	-	43	174
75 and over	940	-	4	191
Total	19,288	22,575	7,010	1,255

Age (years)	Members of other families	Unrelated individual living in family household
0-4	-	-
5-14	-	-
15-24	1,524	1,858
25-34	885	1,335
35-44	313	648
45-54	280	446
55-64	234	184
65-74	268	99
75 and over	274	86
Total	3,778	4,656

3.1 Indigenous families

The 2001 Census counted 1,373 Indigenous families[1] representing 1.3% of all families in Gold Coast City[2]. This is lower than the proportion for Queensland (3%) and Australia (2.1%). Table 1 shows Indigenous families as a proportion of each family type in Gold Coast City, Queensland and Australia.

Table 1: Indigenous families as a proportion of each family type, 2001

Families in occupied private dwellings.

Family type	Gold Coast City		Queensland	Australia
	No.	*%*	*%*	*%*
Couple family with dependent children and or students	594	1.6	3.4	2.3
Couple family with non-dependent children only	62	0.8	1.9	1.3
Couple family without children	359	0.8	1.6	1.2
One-parent family with dependent children and/or students	283	2.0	6.6	5.0
One-parent family with non-dependent children only	54	1.1	3.1	2.0
Other family	21	1.2	4.4	2.9
Total	1373	1.3	3.0	2.1

Original data source: Indigenous Community Profile (ABS 2001f).

Across Gold Coast City the highest proportions of dwellings containing Indigenous households were found in Eagleby (3.6%, 100 households), Beenleigh (2.5%, 71 households) and Edens Landing-Holmview (2.5%, 40 households) Statistical Local Areas (SLAs). Highest numbers of Indigenous households were found in Nerang (100, 1.5%), Eagleby (100, 3.6%) and Southport (96, 1.1%) SLAs.

3.2 Birthplace

Table 2 shows household and family type by birthplace for usual residents in occupied private dwellings in Gold Coast City at the 2001 Census. One-parent families recorded the highest proportion of residents born in Australia. Couple families without children recorded the highest proportion of residents born overseas in Main English Speaking (MES) and non-MES countries.

[1] An Indigenous family is a family where either the reference person and/or spouse/partner is of Aboriginal and/or Torres Strait Islander origin.

[2] The total number of Indigenous families in Gold Coast City is higher than the total number of dwellings containing Indigenous family households because a household can comprise more than one family.

Table 2: Household and family type by country of birth, Gold Coast City, 2001

Usual residents in occupied private dwellings.

Household and family type		Birthplace				
		Australia	Other Main English Speaking Countries (a)	Non Main English Speaking Countries	Birthplace not stated (b)	Total
Couple family with children	*No.*	127,495	23,429	13,738	5,163	169,825
	%	*75.1*	*13.8*	*8.1*	*3.0*	*100.0*
Couple family without children	*No.*	55,337	19,950	10,744	2,475	88,506
	%	*62.5*	*22.5*	*12.1*	*2.8*	*100.0*
One-parent family	*No.*	38,870	5,685	3,215	2,358	50,128
	%	*77.5*	*11.3*	*6.4*	*4.7*	*100.0*
Other family	*No.*	2,738	453	385	202	3,778
	%	*72.5*	*12.0*	*10.2*	*5.3*	*100.0*
Group household	*No.*	14,299	3,108	2,393	829	20,629
	%	*69.3*	*15.1*	*11.6*	*4.0*	*100.0*
Lone person household	*No.*	26,467	6,969	4,181	1,561	39,178
	%	*67.6*	*17.8*	*10.7*	*4.0*	*100.0*

(a) Canada, Ireland, UK, New Zealand, South Africa and USA.
(b) Includes 'Inadequately described', 'At sea' and 'Not elsewhere classified'. Note: this data counts usual residents in occupied private dwellings and numbers differ from data for all usual residents.

Original Data Source: Customised data (ABS 2001).

4 Changes and trends affecting families

Ongoing social, environmental and economic changes are affecting families in a variety of ways. Changing family structures, work and caring arrangements, rapid population growth and increasing housing costs are presenting families in Gold Coast City with considerable challenges. This chapter draws on existing policy, strategy and research to explore these changes and their impact on families across Australia and in Gold Coast City.

4.1 Population growth

Gold Coast City is one of the fastest growing Local Government Areas (LGAs) in Australia. In recent years it has consistently recorded the second largest resident population increase for a LGA in terms of absolute numbers, after Brisbane City[3]. The resident population of Gold Coast City is estimated to have grown by an average annual rate of 3.6% from 1998 to 2003. In the 2002-03 financial year this rate was even higher at 3.7% (16,099 persons), considerably higher than for Queensland (2.3%) and Australia (1.2%) (ABS 2004a). Most of Gold Coast City's growth is attributed to migration. In the 2002-03 financial year migration accounted for 88.0% of resident population growth in Gold Coast City compared to only 72.3% for Queensland (QDLGP 2004).

4.2 Changing families

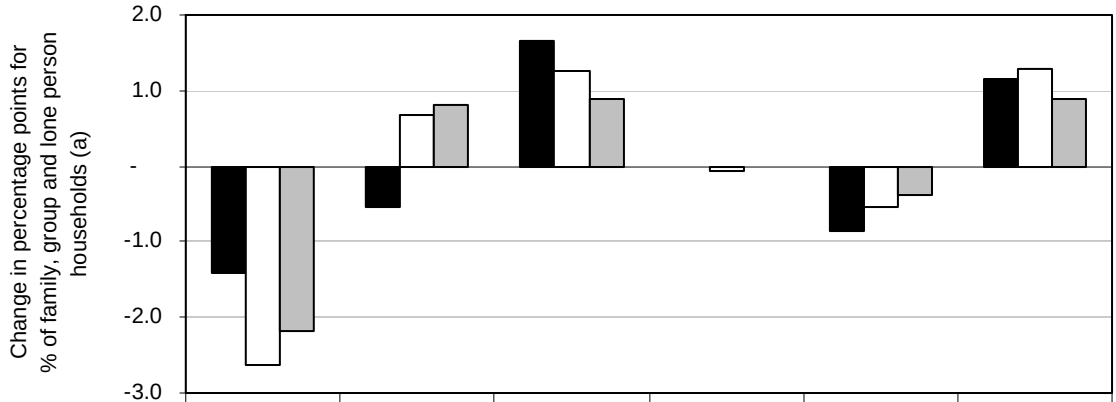
Changes in the structure of Australian families are characterised by decreasing household size (ABS 2001b), a shift from nuclear families (Queensland Department of Education 2000), decreasing fertility/birth rates (Stone 2000; The Melbourne Institute 2002) and decreasing rates of registered marriage (ABS 2001b; Stone 2000).

Children have fewer siblings and families are becoming smaller (Queensland Department of Education 2000). This is supported by ABS Census data, which shows the average number of persons per household in Australia decreasing from 2.88 persons at the 1986 Census to 2.58 at the 2001 Census. Gold Coast City consistently records smaller households than Australia with 2.63 persons per household at 1986 and 2.43 at 2001. While the average household size for Gold Coast City is smaller than for Australia, this gap is closing with the average household size in Gold Coast City decreasing at a slower rate (ABS 1996b; ABS 2001b). Other demographic changes for families relating to household size include children staying at home longer and more families caring for older relatives (Queensland Department of Families 2000a).

Australian Bureau of Statistics (ABS) 1996 and 2001 Census data report changes in family and household types across Australia (Figure 3). These include increasing proportions of couple families without children, one-parent families and lone persons, alongside decreasing couple families with children and group households. However, in Gold Coast City the results differ from Australia, with a small decrease in couple families without children, a smaller decrease in couple families with children, a larger decrease in group households, and larger increases for one-parent families and lone persons (ABS 1996a; ABS 2001d).

3 Brisbane City has the largest resident population of all LGAs in Australia with an estimated 938,384 persons at June 2003. Brisbane City also recorded the highest increase in estimated resident population in absolute numbers for the 2002-03 financial year (20,808). However, growth in percentage terms was lower for Brisbane (2.3%) than for Gold Coast City (3.7%).

Figure 3: Change in household and family types, 1996 to 2001



	Couple family with children	Couple family without children	One-parent family	Other family	Group household	Lone person household
■ Gold Coast City	-1.4	-0.5	1.7	0.0	-0.9	1.2
□ Queensland	-2.6	0.7	1.3	-0.1	-0.5	1.3
▨ Australia	-2.2	0.8	0.9	0.0	-0.4	0.9

(a) 1996 data counts households and excludes multi-family households; 2001 data counts dwellings containing households and reports multi-family households under the family type of the first family in the household.

Original data source: Basic Community Profile (ABS 1996a), Expanded Community Profile (ABS 2001d).

Marriage rates are declining. In Gold Coast City the proportion of persons aged 15 years and over in registered marriages decreased from 57.6% in 1991 to 50.3% in 2001 (ABS 2001b). Stone (2000) suggests that the decline in marriage rates is explained in part by the delays in the age at which people marry, and that legal marriage is increasingly being preceded by cohabitation. Divorce rates are also historically high (Stone 2000). In Gold Coast City the proportion of persons aged 15 years and over who are divorced increased from 6.6% in 1991 to 9.5% in 2001 (ABS 2001b).

Table 3 shows social marital status of parents for various children and dependent types in couple families across Gold Coast City. Highest proportions of de facto marriages are recorded for couple families without children and couple families with children under 15 years without non-dependent children.

Table 3: Children and dependent types for couple families by social marital status of parents, Gold Coast City, 2001

Couple families.

Children and dependent types		Registered marriage	De facto marriage	All couple families
Children under 15 & non-dependent children	*No.*	1,602	167	1,769
	%	90.6	9.4	
Children under 15 without non-dependent children	*No.*	20,811	3,947	24,758
	%	84.1	15.9	
Dependent student (15-24) and non-dependent children	*No.*	1,722	64	1,786
	%	96.4	3.6	
Dependent student (15-24) without non-dependent children	*No.*	2,881	222	3,103
	%	92.8	7.2	
Child under 15 & dependent student & non-dependent children	*No.*	693	37	730
	%	94.9	5.1	
Child under 15 & dependent student without non-dependent children	*No.*	3,797	289	4,086
	%	92.9	7.1	
Non-dependent children only	*No.*	7,433	404	7,837
	%	94.8	5.2	
No children (a)	*No.*	36,169	8,229	44,398
	%	81.5	18.5	
Total	*No.*	75,108	13,359	88,467
	%	84.9	15.1	

(a) Includes couple families with or without relatives.

Original data source: Expanded Community Profile (ABS 2001d).

Women in Australia are having fewer children. In 1970, Australian women were likely to have 2.9 children on average. Thirty years later this rate has fallen to 1.7 children (The Melbourne Institute 2002). Many people are also delaying having children (Stone 2000). The first year of data from the Household Income and Labour force Dynamics of Australia (HILDA) Survey reflects this trend of declining birth rates, reporting that younger women are planning or expecting to have fewer children. Women aged 65 years and over are likely to have had an average of three children, while those aged 18 to 24 years are planning to have an average of two children. The HILDA Survey also reports that of younger women expecting to have two children many give birth to only one or no children. On average young men were more likely to report not wanting children than women, which may be one reason why women are not having as many children on average as they report they would prefer (The Melbourne Institute 2002).

While fertility rates for women under 30 years of age are falling, those for women in their early thirties and forties are increasing. Consistent with changing fertility rates, the age of first birth for women in Australia is increasing. In 1993, 15 to 24 year olds represented 37.3% of women having their first baby, decreasing to 31% in 1999. Women aged 30 years and over represented 27.6% of women having their first baby in 1993, increasing to 34% in 1999 (ABS 2001g). In the 2001 calendar year there were 4,911 babies born in Gold Coast City, with a total fertility rate[4] of 1.97 for Gold Coast City Part A (north of the Pimpama River) and 1.53 for Gold Coast City Part B (south of the Pimpama River) (ABS 2002a).

[4] The average total fertility rate over the three years 1999 to 2001. The fertility rate refers to the average number of children born per woman.

4.3 Changing work

Alongside the changing nature of families in Australia, many families are being affected by the changing nature of the labour market. 'A high level of precariousness and uncertainty dominates many workplaces and working lives' (Stone 2000).

Changes in the labour market that are affecting families include:

- Increasing part-time employment (ABS 2001b; National Institute of Labour Studies 2001, cited in Giles Consulting International 2001, p15; McDonald and Siemon 2000; Russell and Bowman 1999);
- Demise of standard hours for full-time workers and polarisation of the workforce into under-employed part-time and over-worked full-time workers (Russell and Bowman 1999);
- Casualisation of work (Stone 2000; National Institute of Labour Studies 2001, cited in Giles Consulting International 2001, p15; McDonald and Siemon 2000; Russell and Bowman 1999). In Queensland in particular, growth in service industries is leading to increased demand for flexible labour and rising casual and part-time work (Queensland Department of the Premier and Cabinet 2003);
- Job insecurity or uncertainty (Russell and Bowman 1999);
- Increasing female participation in the labour force (National Institute of Labour Studies 2001, cited in Giles Consulting International 2001, p15; McDonald, *et al*. 2000);
- Increase in one-parent families and increase in couple families with both parents working (McDonald, *et al*. 2000);
- Parents are older and working more (Queensland Department of Education 2000);
- Globalisation is leading to intense competition and affecting the demands placed on many employees, for example, being required to travel and be accessible 24 hours a day (Russell, *et al*. 1999);
- Focus on flexibility in industrial relations (Stone 2000);
- Increasing labour productivity and downsizing; and
- Growth in high to medium skilled occupations, but little growth in low-skilled jobs (National Institute of Labour Studies 2001, cited in Giles Consulting International 2001, p15). McDonald, *et al*. (2000) suggest that employment is insecure as a pathway out of poverty for those whose labour and skills were once in high demand but now are not.

Analysis of Census data suggests many families in Gold Coast City are likely to be experiencing these labour market changes. For example, the part-time employment rate in Gold Coast City increased from 29.1% in 1991 to 36.1% in 2001, along with increases in proportions of employed persons working in service industries such as Retail Trade; Accommodation, Cafes and Restaurants; and Health and Community Services (ABS 2001b).

The 204 Senate Inquiry into Poverty and Financial Hardship recommends a Commonwealth review into the dynamics of the labour force, along with an Inquiry into low-paid employment to examine, inter alia: 'the nature and extent of low-paid employment in Australia'; 'the problem of casualisation and employment security'; 'the feasibility of attaching standards for wages and conditions to Government funding of services'; and 'wages and conditions for contract labour'. The Inquiry also recommends that the Australian Industrial Relations Commission establish a new minimum wage that will enable a single full-time worker to achieve 'an adequate standard of living relative to contemporary community standards' (Community Affairs References Committee 2004, p xxviii).

4.4 Housing and mobility

Table 4 shows family and household type by dwelling type for dwellings in Gold Coast City. While separate house is the most common dwelling type for all family and household types, substantial numbers of couple families without children, one-parent families, other families, and group and lone person households live in semi-detached dwellings and flats, units and apartments. There were also 467 caravans, cabins and houseboats containing couple families without children and 980 containing lone person households.

Table 4: Dwelling type by family and household type, Gold Coast City, 2001

Occupied private dwellings containing family, group and lone person households.

Dwelling type	Couple family with children		Couple family without children		One-parent family		Other family		Group household		Lone person household	
	No.	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*
Separate house	37,907	*86.2*	29,194	*67.0*	11,491	*60.9*	977	*53.8*	3,769	*41.2*	14,016	*37.7*
Semi-detached, row or terrace house and townhouse	3,760	*8.6*	6,459	*14.8*	4,782	*25.3*	371	*20.4*	2,135	*23.3*	8,700	*23.4*
Flat, unit or apartment	1,834	*4.2*	6,908	*15.9*	2,335	*12.4*	433	*23.8*	3,023	*33.0*	12,689	*34.2*
Caravan, cabin, houseboat	83	*0.2*	467	*1.1*	96	*0.5*	11	*0.6*	65	*0.7*	980	*2.6*
Improvised home, tent, sleepers out	4	*0.0*	19	*0.0*	3	*0.0*	0	*0.0*	3	*0.0*	49	*0.1*
House/flat attached to shop etc	50	*0.1*	60	*0.1*	24	*0.1*	3	*0.2*	26	*0.3*	101	*0.3*
Not stated	314	*0.7*	441	*1.0*	148	*0.8*	21	*1.2*	131	*1.4*	610	*1.6*
Total	43,952	*100.0*	43,548	*100.0*	18,879	*100.0*	1,816	*100.0*	9,152	*100.0*	37,145	*100.0*

Original Data Source: Expanded Community Profile (ABS 2001d).

Tables 5 shows tenure type by household and family type in Gold Coast City at the 2001 Census. Couple families with children are most likely to be purchasing their home, couple families without children are most likely to own their home and one-parent families are most likely to be renting their home.

Table 5: Tenure by family type, Gold Coast City, 2001

Families in occupied private dwellings.

Family type		Fully owned	Being purchased (a)	Rented	Other tenure type (b)	Not stated
Couple families with children	*No.*	11,179	19,543	12,096	620	630
	%	*25.4*	*44.3*	*27.4*	*1.4*	*1.4*
Couple families without children	*No.*	22,550	10,075	10,115	849	812
	%	*50.8*	*22.7*	*22.8*	*1.9*	*1.8*
One-parent families	*No.*	3,822	3,588	11,178	302	400
	%	*19.8*	*18.6*	*57.9*	*1.6*	*2.1*
Other families	*No.*	483	248	979	49	66
	%	*26.5*	*13.6*	*53.6*	*2.7*	*3.6*

(a) Includes being purchased under a rent/buy scheme.
(b) Includes being occupied rent-free and being occupied under a life tenure scheme.

Original data source: Expanded Community Profile (ABS 2001d).

Increasing housing costs are placing considerable pressure on families with family support workers reporting that some families in our City are choosing between paying rent and buying food (Strengthening Families Forum, 18 August 2003, Studio Village Community Centre). Family support workers providing input to this study also highlighted the impact of redevelopment of low-cost accommodation in the City including caravan parks and motels. These forms of accommodation provided a low-cost option for some families in the past and their redevelopment is resulting in reduced supply and diversity of low-cost housing options in Gold Coast City. Workers have also identified need for accommodation for single fathers with children, including fathers and children experiencing crisis.

Home purchase and rental costs continue to increase across the City. The median purchase cost for houses in Gold Coast City increased from $175,000 for the 12 months to June 1999 to $360,000 for the 12 months to June 2004. The median purchase cost for units and townhouses increased from $162,000 to $250,000 over the same period. Data based on new rental bond lodgements shows increases in rental costs from the June quarter 2003 to the June quarter 2004. Over this period, median weekly rents increased from $270 to $290 for three bedroom houses and from $220 to $240 for two bedroom units (REIQ 2004).

In Gold Coast City 22,496 households were estimated to be in housing stress[5] at the time of the 2001 Census. This represents 35.9% of households renting their home at 2001, which is much higher than for Queensland (30.2%) and Australia (28.7%), and 12.1% of households purchasing their home, again higher than for Queensland (9.8%) and Australia (9.2%) (based on data from ABS 2001a, cited in GCCC 2003a, p102).

Housing affordability in Gold Coast City has received considerable media attention in 2003. The Gold Coast Sun (22nd October 2003, *A double blow hits first home hunters*, p7) reported that younger people and people on lower incomes are facing rising house prices as well as rising rents, as investors seek a return on their investment. This article reports that lower income workers, single income couples and families are reporting being locked out of the real estate market, leading to concern that 'the Coast could face a shortage of workers particularly in the hospitality industry which is not well paid'.

More than one-quarter (27.1%) of residents in Gold Coast City who moved address (changed address) in the five years preceding the 2001 Census moved within Gold Coast City (ABS customised data 2001). In planning consultations undertaken on behalf of GCCC in 2003, family support workers in Gold Coast City reported that lower income families are being pushed into fringe areas, resulting in a mismatch between the location of services and the people who need them most.

Census data shows that mobility is higher in Gold Coast City than across Australia. At the 2001 Census only 37.9% of usual residents aged five years and over in the City were still resident at the same address as five years before the Census compared to 52.7% for Australia (ABS 2001c). Mobility is particularly high for one-parent families in the City. Only 27.9% of one-parent families in the City had no resident move address in the five years preceding the 2001 Census, compared to 38.8% for all households and couple families with children (ABS customised data 2001).

Table 6 shows mobility by family and household type. It counts dwellings and describes whether some or all residents (aged five years and over) in the dwelling moved address in the five years before the 2001 Census.

The first field, 'No residents moved' shows that lowest mobility (or highest stability) is recorded for lone person households and couple families without children. High mobility is recorded for group households, other families and one-parent families.

[5] Households deemed in 'housing stress' are those in the bottom 40% of income units paying greater than 30% of their gross income on rent or mortgage payments. However, as data available from the 2001 ABS Census of Population and Housing only allows limited segregation of income units, the households included in this analysis are the bottom 38% of income units; those receiving gross incomes less than $600 per week.

Table 6: Mobility indicator by family and household type, Gold Coast City, 2001

Dwellings.

Mobility indicator for families and households	Family and household type													
Address five years before the 2001 Census for residents aged five years and over	Couple family with children		Couple family without children		One-parent family		Other family		Group household		Lone person household		All Households	
	No.	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*
No residents moved	17,070	*38.8*	19,292	*44.3*	5,265	*27.9*	381	*21.0*	1,002	*10.9*	16,980	*45.7*	59,990	*38.8*
Some residents moved: within Gold Coast City	800	*1.8*	542	*1.2*	469	*2.5*	66	*3.6*	425	*4.6*	0	*0.0*	2,302	*1.5*
All residents moved: within Gold Coast City	11,296	*25.7*	9,053	*20.8*	5,736	*30.4*	345	*19.0*	1,629	*17.8*	9,270	*25.0*	37,329	*24.2*
Some residents moved: into Gold Coast City	1,006	*2.3*	658	*1.5*	511	*2.7*	116	*6.4*	445	*4.9*	0	*0.0*	2,736	*1.8*
All residents moved: into Gold Coast City	10,578	*24.1*	10,533	*24.2*	4,812	*25.5*	464	*25.6*	2,822	*30.8*	9,241	*24.9*	38,450	*24.9*
Some residents moved: some within & some into Gold Coast City	70	*0.2*	32	*0.1*	38	*0.2*	12	*0.7*	28	*0.3*	0	*0.0*	180	*0.1*
All residents moved: some within and some into Gold Coast City	1,710	*3.9*	2,077	*4.8*	863	*4.6*	230	*12.7*	1,808	*19.8*	0	*0.0*	6,688	*4.3*
Some or all residents moved: some within and some into Gold Coast City	1,780	4.0	2,109	4.8	901	4.8	242	13.3	1,836	20.1	0	0.0	6,868	4.4
Total households where some or all residents moved	25,460	57.9	22,895	52.6	12,429	65.8	1,233	67.9	7,157	78.2	18,511	49.8	87,685	56.8
Not stated	1,422	*3.2*	1,361	*3.1*	1,184	*6.3*	201	*11.1*	993	*10.9*	1,654	*4.5*	6,815	*4.4*
Total	43,952	*100.0*	43,548	*100.0*	18,878	*100.0*	1,815	*100.0*	9,152	*100.0*	37,145	*100.0*	154,490	*100.0*

Note: Some residents would have moved more than once in the five years before the 2001 Census. This data is based on where residents lived five years before the 2001 Census.

Original data source: Customised data (ABS 2001).

Among households where all residents moved in the five years before the 2001 Census, families with children are more likely to have moved within the City, while other households are more likely to have moved into Gold Coast City from other areas. One-parent families are even more likely to have moved within the City than couple families with children. Family support workers who provided input to this profile highlighted social and financial impacts of mobility for families including changing friends, becoming isolated from networks and extended family, and costs of moving.

4.4.1 Homelessness

The nature of homelessness in Gold Coast City is changing. Evidence from support workers suggests homelessness is increasingly affecting families and the current supply of emergency accommodation is unable to meet demand.

> *The Community needs to realise that homelessness is no longer about stereotypes of drunks in the gutter. It is increasingly affecting middle-class, well-educated people with university degrees hit by life events such as unemployment or health problems. …many people are 'working poor', who could not afford health and dental care and with rents going up on the Coast coupled with many people in casual work homelessness could happen to anyone* (Elizabeth Fritz, Blair Athol Accommodation and Support Service, quoted in The Gold Coast Sun, 20th August 2003, *Homeless crisis is increasing,* p3).

The 2004 Senate Inquiry in Poverty and Financial Hardship (Community Affairs References Committee 2004) recommends increasing base funding arrangements for public housing

under the Commonwealth-State Housing Agreement. It also recommends developing a national housing strategy to, inter alia, 'develop specific strategies to achieve growth in the supply of affordable housing' and review 'effectiveness of Commonwealth Rent Assistance in providing affordability and access to the private rental market' (p 141).

4.5 Changes and challenges for family support agencies and workers

The Australians Living on the Edge Survey (ACOSS 2003a) identifies a range of issues impacting on community support agencies and workers in Australia. These include:

- rising demand for assistance from community welfare agencies;
- increasing operating costs;
- one-third of respondents reported difficulty obtaining insurance in 2001-02 with 71% reporting cost as the major difficulty;
- 66% reported insurance increases from 2001-02 to 2002-03 averaging $5,287 per agency;
- Increasing complexity of client needs;
- workers working on their own time to meet increasing demand, which is bad for the long-term health of workers and quality of service;
- only 2% of responses indicated no increase in pressure; and
- overall results suggest an increasing number of organisations are looking to forms of income other than government funding, client fees and business contributions.

A number of issues affecting family support organisations and family support worker's individual working practice were identified in a 2003 email survey. This survey was distributed to workers and agencies in the Gold Coast Child and Family Support Services Network (CFSSN). While the number of responses was small, some important issues were identified. Issues affecting family support worker's individual working practice include:

- health service locations and decentralised offices and information;
- ethical responsibilities and appropriate professional boundaries around clients with family court issues;
- sharing protocols across services;
- cost of professional development that is not funded well by employers; and
- waiting lists.

Issues impacting on organisations include:

- identifying numbers and locations of families in crisis;
- insufficient child, young people and family counsellors;
- need for more support groups for children, young people and families; and
- insufficient staff (unpublished data, Gold Coast CFSSN 2003).

Section 5 presents a broader analysis of the nature of family support work and how it is evolving.

5 The nature of family support work

The nature of family support work continues to evolve. In a paper exploring how well family support needs are being met in Australia, Tomison (2002) identifies trends that are shaping efforts to support families, including:

- focus on prevention and early intervention (Tomison 2002);
- enhancing child and family health and wellbeing (Tomison 1997, cited in Tomison 2002, p5; Tomison and Wise 1999, cited in Tomison 2002, p5);
- holistic approaches and cross-sectorial collaboration; and
- focus on participation and ownership (Tomison 2002).

This section explores issues and trends in family support work identified by a range of sources including research, policies and plans.

5.1 Prevention and early intervention

While there is pressure to commit more resources to crisis responses in many critical areas of family support, pressure for early intervention and prevention approaches to supporting families continues to be strong. A range of strategies, policy and research at all levels of government and community acknowledge and/or encourage a prevention and early intervention focus in the work of supporting families and communities in Australia and in Gold Coast City[6].

The value of prevention and early intervention is well documented. Tomison and Wise suggest early intervention strategies are '…one of the most effective ways to prevent the occurrence of social ills or problems' (cited in Tomison 2002, p5). Prevention and early intervention is also identified as cost-effective (Tomison 2002; Shonkoff and Phillips 2000, cited in Sanson and Lewis 2001, p4). Bartlett's Perry Preschool Study calculated that by age 27 years, there had been a 'saving of seven dollars in health, welfare, criminal justice and social security expenditure', for every dollar spent on preschool children enrolled in the Perry Preschool early intervention program (cited in Tomison 2002, p5).

5.1.1 What is prevention and early intervention work?

The focus of prevention and early intervention can range from training and development work with families early in the lifespan before problems arise, to intervening early before problems escalate, to supporting families to remain outside of particular service systems. Some specific descriptions of prevention and early intervention include:

- Helping families and communities deal with issues before they become serious problems (Commonwealth Government Stronger Family and Communities Strategy 2000-2004, www.facs.gov.au accessed in 2003); and
- Providing vulnerable people support to 'remain out of statutory, crisis and intensive services systems' (Queensland Department of Families 2003a, p14).

An agency's description of the aims of early intervention and prevention generally reflects the focus of that agency's work with families. Work that some may consider to be early intervention could be considered by others as responding to crisis.

As part of a national audit of child abuse prevention programs, Tomison and Poole (2000, cited in Tomison 2002, p14) identified agencies operating programs aiming to prevent child abuse where the agencies or workers did not view their work as prevention. Tomison (2002) suggests failure to acknowledge prevention as an aim within services is likely to impact on access to interagency support and feedback on the value and relevance of their work, and the agency's contribution to development of the child abuse prevention field.

[6] AIHW 2001; Australian Government Task Force on Child Development, Health and Wellbeing 2003; Byrne 1998; Commonwealth Government Stronger Families and Communities Strategy (www.facs.gov.au); Queensland Department of Families, Youth and Community Care 2000; Ibrahim 2000; Neville 2003; Poole and Tomison 2000; QCOSS 2002; Queensland Department of Education 2000; Queensland Department of Families 2003a; Sanson and Lewis 2001; YARA 2003.

While prevention and early intervention can be beneficial at any age across the lifespan, the perinatal period has become a predominant focus (Tomison 2002). It is acknowledged that during pregnancy and the immediate post-natal period there is opportunity to do prevention work, when 'parents have regular contact with health professionals and are often motivated to learn' (Australian Government Task Force on Child Development, Health and Wellbeing 2003). Holden, Willis & Corcoran identify infancy as an ideal opportunity to 'enhance parental competencies and to reduce risks that may have implications for the lifelong developmental processes of both children and parents' (cited in Tomison 2002, p5).

5.2 Enhancing health and wellbeing

A focus on enhancing health and wellbeing in supporting families is evident in a wide range of research, policy and practice. It is argued that along with prevention of social ills, promotion of health and wellbeing should be incorporated in early intervention approaches (Tomison 2002). Queensland Government policy supports this focus on enhancing health and wellbeing. Examples include:

- The Queensland Health (2002) Strategic framework for children and young people's health, which focuses specifically on improving health and wellbeing; and
- Queensland Department of Families (2003a) Strategic Plan 2003-2008 identifies that it funds and delivers services relating to the Government's priority on better quality of life.

See also Section 7 Child and family development and wellbeing.

5.2.1 A strengths-based approach

The South East Queensland (SEQ) 2021 project discussion paper on social justice and human services identifies 'taking a strengths or resilience-based approach to policy making and program development' as a driver for policy options for social justice and human services in the region (QDLGP 2003, p 23). Strengthening the capacity of families and communities to manage their own needs is identified as critical to developing strong families and communities. A strengths-based approach seeks to build on the strengths in families rather than focusing on dysfunctional aspects of their lives (AIHW 2001). This approach is evident in family support agencies who have refocused their work to empower families and focus on potential for change rather than on problems (Tomison 2002). A focus on strengths in families does not deny their shortcomings. Rather, it suggests that 'focusing on the shortcomings is often not a helpful way in which to address them' (Scott and O'Neill 1996, p xiii, cited in Tomison 2002, p10).

5.3 Holistic approaches, collaboration and flexibility

This section refers to a range of strategies, policy and research from various levels of government and community-based agencies that call for, inter alia, holistic approaches, collaboration and flexibility in the work of supporting families. Partnerships between agencies are becoming more important. There is a focus on seeing clients in the context of their family and families in the context of their communities (AIHW 2001). It is recognised that one initiative in isolation cannot provide adequate family support (Tomison 2002).

A Queensland Department of Local Government and Planning (2003) discussion paper, argues for two streams of individual and family support. The first is program oriented and targeted to achieve more equitable outcomes for families and individuals who are most disadvantaged. The second is a broader approach focusing on 'building capacities, changing cultures, and empowering people to be active and functional parts of wider communities of interest' (p19). Collectively, these reflect a holistic approach to family support, responding to particular and urgent needs alongside developmental approaches to build the capacity of communities.

At the Commonwealth level the National Agenda for Early Childhood Consultation Paper reports:

> *There is wide agreement that the best outcomes for children will be achieved by a national approach that involves collaboration and cooperation between those with a stake in the future of children: governments, non-government organisations, industry, business, communities and families* (Australian Government Task Force on Child Development, Health and Wellbeing 2003, p9).

In feedback on the consultation paper a range of strategies was suggested for improving cohesion and access, including more effective referral mechanisms, better outreach to families in need and new ways to encourage services to work together and share resources. A review of family support services in Australia (AIHW 2001) found integration is a key aim of family support services. The Commonwealth Stronger Family and Communities Strategy also has a clear focus on collaboration and encouraging partnerships between all levels of government, community, individuals and business (Department of Family and Community Services 2004a; 2004b).

At state level in Queensland, and in Gold Coast City, collaborative and integration focussed approaches are acknowledged or encouraged in a range of policy and research[7]. In Gold Coast City, a number of organisations and networks have acknowledged the importance of collaboration in their work supporting families. These include, among others, the Gold Coast Domestic Violence Integrated Response (Domestic Violence Service Gold Coast 2004), Youth At Risk Alliance (2003), Gold Coast North DYAP (2003), Gold Coast City Council Community Health Plan (GCCC 1997) and Gold Coast Youth Commitment (2002). While these collaborations have demonstrated considerable benefits of this approach, in the review of the discussion paper for this project it was noted that collaboration across services does not always lead to increased levels of service delivery. However, the objectives of collaboration can extend beyond increases in quantity of service. For example, enhanced support and advocacy, and improvements in the quality and efficiency. The following case study describes a range of objectives and outcomes from an ongoing local collaboration.

Gold Coast Domestic Violence Integrated Response

The Gold Coast Domestic Violence Integrated Response (GCDVIR) was developed from a broad-based community forum held in 1996 seeking to address the high incidence of domestic violence and domestic homicide on the Gold Coast. GCDVIR is a community-based integrated response to domestic violence. It is modelled on successful overseas community-based interventions and focuses on "agencies working together to provide interventions which are coordinated, appropriate and consistent within a justice reform model" (Domestic Violence Service Gold Coast 2004, p 2).

The project has a coordinating committee with members from: Domestic Violence Service, Gold Coast; Queensland Police, Gold Coast District; Police Prosecutions, Southport; Community Corrections, Southport and Burleigh Heads; Legal Aid Queensland, Southport Office; Southport Magistrates Court; Majella House Women's Refuge; MacLeod Women's Refuge; Sanctuary 7 Women's Refuge; and the Queensland Departments of Communities and Child Safety.

The aims of Gold Coast Domestic Violence Integrated Response are:

1. To enhance the safety of victims and their children;
2. To hold perpetrators of domestic violence accountable for their behaviour; and
3. To provide a multi-agency response to domestic violence on the Gold Coast (Domestic Violence Service Gold Coast 2004).

Key Achievements of GCDVIR include:

- Interagency coordination and collaboration – cross agency protocols and training, monthly coordinating committee meetings, monthly subcommittee

[7] Boag, Hibbins, Harrington and Lloyd 2003; Fraser and St John 2001; GCCC 1997; Neville 2003; QDFYCC 2000; QDLGP 2003; Queensland Department of Education 2000; Queensland Department of Families 2000b, 2003a; YARA 2003.

meetings, cross-agency cooperation in strategy development and joint lobbying for funding;
- Innovative justice responses and responses to perpetrators;
- Enhanced victim support and advocacy;
- Redesign of the Southport Courthouse to include safe domestic violence Court Assistance area;
- Community awareness and training; and
- Resource development.

Key projects within the GCDVIR include:
- Police Fax-Back Project (Police assisted referral linking victims to support);
- Project SAFER (Police Pilot Project involving Risk Assessment);
- Domestic Violence Court Assistance Program ;
- Safety 1st Project (Project linking women who use refuges to domestic violence support); and
- Domestic Violence Offender Program (Queensland's first fully mandated Men's Domestic Violence Perpetrator Program).

The GCDVIR has received community safety awards and received the Australian Crime Prevention Award in 2002. Major parts of the project have been replicated in various communities including Logan, Caboolture, Bundaberg, Western Australia and Victoria.

Barriers and challenges for integrating service delivery identified through GCDVIR include:
- Lack of understanding of the frustrations and barriers of other agencies;
- Need for true communications between individuals and agencies;
- Lack of case management across agencies;
- Need for access to data and records of other agencies; and
- Need to have decision makers (people who can effect change) representing organisations on the coordination committee (Domestic Violence Service Gold Coast, 2004).

The GCDVIR is continually evolving and is currently working on several projects including:
- Domestic Violence Criminal Justice Project;
- Domestic Violence & Child Protection Project;
- Australian Research Council Grant Application to undertake 3 year Evaluation of the Domestic Violence Offender Program, in partnership with Researchers from University of South Australia; and
- Domestic Violence Assisted Referral Project with Gold Coast Hospital Accident and Emergency Department.

Email: info@domesticviolence.com.au
Website: http://www:domesticviolence.com.au

A broad range of research and policy acknowledges the importance of flexible or individually tailored support[8]. Flexible or alternative education options are a particular area of concern in Gold Coast City (Boag, *et al*. 2003), and this is identified as a priority in *Queensland State Education 2010* (Queensland Department of Education 2000). As well as a focus on flexible support for families and individuals, there is also a focus on flexibility in family support between regions to take account of the needs and demands of different regions (QDLGP 2003; Queensland Government 1999). More importance is also being placed on local perspectives in design and delivery of family support (AIHW 2001).

[8]AIHW 2001; Boag *et al*. 2003; GCCC 1997; Queensland Department of Education 2000; Queensland Department of Families 2001a; Queensland Government 1999; QDLGP 2003; Tomison 2002.

5.3.1 Place management

> *Before the onset of modernism… place management was… very much the norm. It was the parish or village or county…expected to be capable of running its own affairs with little reference to what was happening beyond the borders* (Stewart-Weeks 1998, p 8).

Communities once provided a complex range of services from within their own resources. However, industrialisation, communication, travel, technology and urbanisation in the modern age have rendered such efforts unworkable. New forms of managing and allocating scarce resources had to be found – 'bureaucracy, hierarchy, mass production, systemisation' (ibid p9). Changes in some of these factors, such as technology and communication, have ironically started to unravel assumptions on which systems of governance were built. 'People are less interested in being the subject of mass-produced services that can't bend a little to fit the contours of their lives and needs. They are increasingly frustrated with large, distant, unresponsive bureaucracies whose primary focus seems often to be the integrity of the system and the process rather than solving problems' (ibid 1998, p 9).

Key features of a place management approach

A place management program generally exhibits the following:

- It is project based;
- Projects focus on specific communities (neighbourhoods, towns, or remote areas);
- Projects aim to address key social or economic issues which seriously impact on general community wellbeing;
- Projects promote a cross-government agency approach to planning and services provision, and, in some cases, an active cross-sectoral approach;
- Project practices, if proven effective, should be informing long-term changes to the core planning and service provision activities of agencies, and partnerships with other sectors, within communities (NSW Premier's Department 2001).

Place management case studies

Case study 1

In 1999, Brisbane City Council initiated dialogue with the Queensland Government about a place management approach to addressing locational disadvantage in Brisbane. The goals of the project that was developed are listed below.

Goals of the Brisbane places for people project

- Measurable and sustainable improvement in quality of life for most disadvantaged residents in 3 target communities
- Improve coordination and collaboration between and within governments, business and community at local and agency levels
- Build on community strengths and increase capacity of community to identify and respond to their own problems and meet aspirations
- Develop innovative solutions to entrenched locational disadvantage by linking economic, social and environmental issues and responses (Bourke 2003, p 2).

Case study 2
The Goodna Service Integration Project (SIP) is a whole of government project, operating within a place management framework to improve community wellbeing in Goodna (near Ipswich). Project members in the Goodna SIP comprise Ipswich City Council, Centrelink, the Ipswich and Regional Area Consultative Committee, 12 State Government departments and agencies, the University of Queensland (UQ) and Bremer Institute of TAFE.

Project management is undertaken through a collaborative arrangement between various members of the West Moreton Regional Managers Forum operating as the SIP Project Team, chaired by the CEO of Ipswich City Council. The project is funded by the Department of Housing's Community Renewal Program and the Departments of Families and Employment and Training, with in kind contributions from UQ Ipswich and Ipswich City Council. The project focuses on a range of locally identified needs and issues and links to State Government priorities (Goodna SIP 2002).

5.4 Participation

There has been a strong move to embrace participation within the work of supporting Australian families (Tomison 2002). In their core values, the International Association of Public Participation (IAP2 2000, p29) state that 'the public should have a say in the decisions that affect their lives', and this principle can apply to the decisions affecting families, individuals and particularly children. Feedback on the consultation paper for the national agenda for early childhood recognises that 'children are active participants in their own development and contribute to society in many ways' (Australian Government Task Force on Child Development, Health and Wellbeing 2003, p 4).

In the important area of child protection, the Queensland Child Protection Strategic Plan (Queensland Government 1999) places priority on young people and families participating in case decision-making. Greater involvement of all family members is identified as a strategy for improving access to family support (Australian Government Task Force on Child Development, Health and Wellbeing 2003). At a local level, planning consultations with family support workers undertaken on behalf of GCCC in 2003 identified engaging families in planning and decision-making as a priority. As a principle, community participation was recognised in GCCC policy, in the City of Gold Coast Community Health Plan (1997), Council's Community Consultation Vision and Strategy (GCCC 2000) and Council's latest Corporate Plan (GCCC 2003b).

A recent study in the UK (Ridge 2003) focuses on children's experience of poverty. While a large body of research focuses on the outcomes of childhood poverty for later life, this study focuses on childhood poverty as a lived experience. Demonstrating the benefits of children's participation in this research, the study found that the children experiencing poverty were active social agents, who engaged with their lives and developed ways and means of participating in work and play where and when they could.

While the benefits of children, parents and families participating in and engaging with services and support are clearly documented this is not always simple to achieve. Some workers who contributed to this profile expressed concern about not being able to engage families who need the most support. They suggested that often the people who have the most serious problems and need support the most don't come. These workers highlighted the value and success of going to families to support them, rather than expecting families to come to a program or service. However, they also identified the resource constraints associated with this – that an increase in resources is required to meet demand for this kind of family support.

The case study below presents a local parent's reflection on getting involved in her local community and the challenges she has faced.

Getting involved – a local mum's reflection on getting involved in her community

I moved to the Gold Coast with my husband 10 years ago. We came from a small community up north where we knew everyone. I worked from home in our family business, which kept me really busy, especially when our two children came along. We had a son and then a daughter two years later.

When our daughter was two we sold our business. This was a big change for me. None of our friends had children. While everyone else was working I was at home with two children and not much to do. I would take my children for walks to visit my mum but there wasn't much else to do. We only had one income so I didn't want to spend money on entertainment. I was bored and isolated and this went on for over six months.

Then my son started preschool. This was another big change for me, but a good one. It gave me the chance to meet other parents and make new friends with common interests. I started helping out in class. I could bring my daughter along too, which was great for everyone. It was great to belong. After a while I started going to the P&C meetings. They were a little scary because they were really formal. I wasn't used to formal meetings and I didn't feel welcome but I was determined to stick with it. So I persevered and I'm glad I did because it did get better. I can remember serving the school principal at a sausage sizzle one day. I was so nervous I was shaking. Now I have built a lot more confidence. Through working together with other parents, teachers and the principal I have made some great friends and I am comfortable getting involved.

One of good things about all this is how much I've learned about what's going on in my children's school and our community. We can find the best deals for kids sport because we share information with each other. We have also been able to improve our children's education by having input into school curriculum and reporting. Their school reports weren't telling us enough so when I was on the School Council we worked with the school to change them. I've gone from being some who was isolated to someone who knows people from all different walks of life and is asked for her opinions. I can't even go out now without running into someone I know.

I see a lot of parents coming to P&C. They often remind me of how scary it was when I first came. So I try to find ways to fast track them past the scary part and get them involved. If I approach someone individually they usually jump at the chance to help. I think it works because they usually want to get involved and a personal invitation is not as intimidating as asking for volunteers from a group. I also try to create opportunities for parents to meet each other in an informal setting, like our playgroup.

I have learned that it's important to give my husband the chance to get involved too. I was running around doing everything to do with our children's school and he wasn't getting the chances to meet people. Then I thought about how good it is for me to be involved and meet new people. I knew he was capable of doing more so I encouraged him to do more and now he has had to step up and share the load. This has been great for us because we share our work as parents and we both enjoy doing things with our children, with other parents and with our local community.

6 Challenges for families and pressures for developing support

Families face a range of challenges relating to housing, employment, relationships and accessing services and support. Family support workers and other workers providing input to this profile have identified concern about families in Gold Coast City who are experiencing crisis. Workers also report that they have observed an increase in numbers of children and young people experiencing problems and challenges, as well as an increase in the complexity of the problems they face.

6.1 Indicators of crisis

6.1.1 Child protection trends

Child protection notifications and substantiations[9] in Queensland and Gold Coast City have risen in recent years. In the year ending in June 1998 there were 10,243 child protection notifications in Queensland, increasing to 16,723 notifications in 2003. Substantiated cases in Queensland also increased from 6,323 to 12,203 over the same period. Many cases involved more than one child and the number of children involved in substantiated cases increased from 4,360 children for the year ending in June 1998 to 9,032 children for the year ending in June 2003.

The Gold Coast Department of Communities Region, which includes the Gold Coast City and Redland Shire Local Government Areas, consistently records the highest number of child protection notifications and substantiations of all Department Regions in Queensland. In the year ending in June 2003 the Gold Coast region recorded 3,045 notifications representing 18.2% of notifications in Queensland and 2,323 substantiated child protection cases representing 19% of substantiations in Queensland, an increase on the previous year (1,645 cases, 16.4% of Queensland substantiations) (Queensland Government 2004a).

6.1.2 Sexual abuse and sexual assault

In 2002 police recorded 17,850 cases of sexual assault across Australia, an increase of 6% from 2001. There were 91 victims of sexual assault reported per 100,000 population, 145 per 100,000 females and 33 per 100,000 males. Girls aged 10-14 years recorded the highest rate of reported sexual assault at 462 per 100,000. Among males, highest rates recorded were for males under 15 at about 90 per 100,000. More than one in five sexual assaults in Australia were perpetrated by a member of the victim's family (Australian Institute of Criminology 2003). In 2003 offenders were family members of 29% of victims. Sexual assault remains one of the most underreported of all personal crimes and police statistics underestimate its extent. ABS Crime and Safety Survey provides a profile of reported and unreported sexual assault for people aged 18 years and over, relying on postal questionnaires returned by willing participants. The 2002 survey reports 33,000 persons aged 18 years and over in Australia were victims of at least one sexual assault in the 12 months prior to the survey (Australian Centre for the Study of Sexual Assault 2004). This is much higher than the number reported to police.

[9] 'Notifications' refers to the number of reports of child maltreatment. A report will be recorded as a notification when there is reasonable cause to believe that, due to an act of commission or omission by either a parent or other person living within the child's home, a child has suffered or is likely to suffer harm.

'Substantiations' refers to the number of cases where, in the professional opinion of the officers concerned, there is reasonable cause to believe that the child has been significantly harmed. The number of substantiated cases presented here includes cases of substantiated risk, where it is possible to substantiate the presence of risk factors which place a child at risk of significant harm. (Queensland Department of Child Safety 2004, http://www.communities.qld.gov.au/department/ig/shared/childprot/glo_cp_dd.html#not accessed 07-10-2004).

In the year ending in June 2003 the Gold Coast Department of Communities Region recorded 67 substantiated child protection cases where sexual abuse was the most serious type of harm (Queensland Government 2004a). Workers providing input to this profile identified a range of issues relating to sexual abuse, its impact on children and families and related services and support. Local issues and concerns expressed are listed below.

- Inadequate supply of support and therapeutic response for survivors and victims of sexual abuse. Some workers expressed concern that this discourages reporting of abuse. Support services for adult male victims of sexual assault are particularly limited.
- Impact of being a tourist destination with big events such as Indy and the Schoolies Festival. Tourist population increases demand for support across a range of services.
- There is scope for improved coordination of support in this area and review of models for sustainable funding, training and retention of qualified staff is urgently needed. It is also important to keep prevention and community education on the agenda.
- Sexual abuse or assault can cause other acute and/or long-term problems for survivors and their families, including problems with relationships and family functioning, depression and drug and alcohol abuse.

A new Child Protection Unit has been established within the Gold Coast Hospital. This unit plays an important role in providing and coordinating support for children and families affected by abuse (including sexual abuse) and is expected to be fully operational in early 2005. Functions of the unit include supplying forensic services, providing advice and education to hospital staff about dealing with abuse and participating in the Suspected Child Abuse and Neglect (SCAN) Team, which manages and coordinates support for children involved in reported cases of abuse and their families.

6.1.3 Domestic violence data

The number of domestic violence orders in Queensland continues to rise. In the year ending in June 1998 there were 9,512 orders issued. This increased to 11,336 in the year ending in June 2003. Some 7,080 temporary protection orders were also issued in the year ending in June 2003. Courts within Gold Coast City[10] account for 23.2% of temporary protection orders and 16.1% of protection orders issued in Queensland. Of all courts in the State (year ending in June 2003) Southport Court recorded the highest number of temporary protection orders (903) and protection orders (944), followed by Beenleigh Court (627 and 763 respectively). A further 112 temporary protection orders and 120 protection orders were issued by Coolangatta Court in the year ending in June 2003 (Queensland Government 2004a).

6.1.4 Kids Help Line data

In 2003 Kids Help Line (KHL) received 186,412 calls from Queensland. KHL answered 85,788 of these calls, an increase of around 15,000 from 2002, and 66,702 calls were logged in the KHL database. Of all calls logged in the KHL database 12.3% came from Gold Coast. The most common concerns young people contacted KHL about were family relationships (17.6%), peer relationships (13.8%), partner relationships (10%), bullying (6.6%) and emotional/behavioural management (5.6%). Calls in a number of problem areas recorded increases over the decade to 2003 including relationships with friends and partners, bullying, mental health, grief and loss, and suicide (KHL 2003).

6.1.5 Understanding the extent of crisis

While data is available about numbers of families who have contact with specific agencies and crisis services, there is not a clear picture of the extent of crisis families are experiencing across the City. Workers contributing to this profile highlighted the importance of developing a more comprehensive understanding of crisis in the City.

[10] Southport Court, Beenleigh Court and Coolangatta Court are the courts within Gold Coast City.

Information requirements include numbers and locations of families in crisis, how long families are in crisis and strategies that help families overcome crisis.

6.2 Families and children with disabilities

Families and children with disabilities face particular challenges accessing services and support, and participating in community life. In *Towards a Gold Coast for All: Disability Strategy Plan* GCCC (2001) reports that while Gold Coast City is considered to be a good place to live by general standards, there are 'many limitations to quality of life for people with a personal disadvantage such as a disability' (p 24).

> *Access to leisure, education, sports and the arts is directly dependent upon physical and financial factors. For those with some disabilities these effects are heavily compounded – physical disability frequently produces a high direct financial cost… Most disabilities negatively affect one's level of disposable income* (GCCC 2001, p 24).

Family support workers providing input to this profile identified a number issues and challenges for families with children with disabilities. One-parent families with a child or parent with a disability are identified as facing even greater challenges. Specific issues and challenges for families with children with disabilities include accessing support for children with disabilities within generic services such as childcare and school, accessible after-school and vacation care, and affordable specialist counselling for people with disabilities and supporting children of parents with mental illness.

Identifying the needs of children with particular disabilities, such as autism spectrum disorders, was also identified as important by workers. The transition of starting school was identified as particularly challenging for children with disabilities and their families. The case study below describes a program being developed to address this transition in Gold Coast City.

The Gold Coast Family Support Group (GCFSG) Inc has developed a new program called *Starting School* that aims to promote a positive transition to school for young children with disabilities or difficulties in learning or behaviour. *Starting School* is a six week program that includes using puppets to address challenges children may face when beginning school.

Key objectives of the program are summarised below.

- Plan and promote successful transition to school.
- Ensure families are provided with information, support and opportunities to participate in partnerships to plan their child's transition to school.
- Promote communication and collaboration among the child's support people.
- Provide schools with relevant information for teachers and parents regarding the child's specialised needs.
- Provide practical programs and learning experiences for children in child care centres, as well as for children not attending childcare, to promote greater understanding of starting school.
- Provide practical programs and learning experiences.

GCFSG hopes to start this program in Gold Coast City in 2006.

GCCC's Disability Profile is due to be updated following release of the results from the 2003 National Survey of Disability, Ageing and Carers undertaken by the Australian Bureau of Statistics.

6.3 Children of parents with a mental illness

In the review of the discussion paper for this project it was suggested that children of parents with a mental illness are among the most isolated and at risk children in our community. The Gold Coast Integrated Mental Health Service (IMHS) is developing a new project, in collaboration with a number of other government and community-based support agencies, to strengthen and support families and children of parents with a mental illness

living on the Gold Coast. The Children Of Parents with a Mental Illness (COPMI) project was initiated in response to a policy decision from the IMHS and aims to enhance individual, family and community protective factors that contribute to the mental health of children of parents with a mental illness.

6.4 Social isolation

In planning consultations undertaken on behalf of GCCC in 2003, social isolation was identified as a particular issue affecting families in Gold Coast City, especially for families who have recently moved to the City, often in pursuit of affordable housing or employment, with little access to support networks or extended family.

A health assessment of families with children under five years identified concerning levels of isolation in the Gold Coast region with 17% of respondents indicating they had no support and 39% reporting they had little or no support, 'indicating that there is a significant group of vulnerable families in the region' (Fraser and St John 2001, p48). Both key stakeholders and families participating in the project identified isolation as an issue. While the study identified participants who reported feeling isolated or lonely, it also found their sense of isolation decreased with participation in parent support or play groups.

6.5 One-parent families

At the 2001 Census 19,290[11] one-parent families were counted in Gold Coast City. This represents 17.6% of families in the City, higher than for Queensland (16%) and Australia (15.4%) (ABS 2001d). There are a number of challenges that one-parent families may face. Harding, Lloyd and Greenwell (2001) found one-parent families across Australia experience much higher levels of poverty than couple families with children (see Section 6.11.1). In a needs analysis undertaken in 2004 for a family support project within Gold Coast City a number of needs and issues affecting one-parent families were identified. These include:

- Building the family after break up – defining new roles/relationships;
- Financial support;
- Legal support, custody issues;
- Loss of personal networks after separation – linking back into community – meeting new people;
- Employment readiness;
- Child care;
- Transport;
- Grief and loss; and
- Increase specific support for single mums, single dads and young single parents.

6.6 Challenges for Indigenous families

This profile does not include a detailed analysis of issues affecting Indigenous families in Gold Coast City. It identifies some issues impacting on Indigenous families and support workers and some of the changes being considered to improve support for Indigenous children and families across Queensland. Further work is required to explore issues relating to Indigenous families in our City.

The general resident population of Gold Coast City grew by an estimated 16,099 residents in 2002-03 (ABS 2004a) and migration accounts for a large majority of this growth[12] (see

[11] The number of one-parent families reported here varies from that is Section 4, which presents the number of dwellings containing one-parent families (18,879 dwellings).

[12] In the 2002-03 financial year migration accounted for 88.0% of resident population growth in Gold Coast City compared to only 72.3% for Queensland (QDLGP 2004).

also Section 4.1). The Indigenous population in the City is also experiencing growth increasing from 1,611 Indigenous people counted in the 1991 Census to 3,101 in the 1996 Census and 4,721 in the 2001 Census (ABS 2001b). Workers supporting Indigenous families in the City estimate the City's Indigenous population to be much higher than this, and they report that migration from other states and regions is contributing to growth in the City's Indigenous population. This growth is placing increasing pressure on housing and support services for Indigenous families in a region where demand for these services already exceeds supply. Declining affordability of housing in the City (see *Section 4.4 Housing and mobility*) contributes to this pressure.

Alongside housing related issues, Indigenous families and children in Gold Coast City face challenges accessing services and support. The capacity of local services to support Indigenous families is increasingly strained as demand for support continues to outstrip supply. Workers report increases in demand for support for Indigenous families. The workload of the Aboriginal and Islander Child Care Agency (AICCA) in the City has quadrupled over four years with around 40 children and young people supported in care and a further 140 kept out of care through early intervention and prevention work.

Workers supporting Indigenous families, who provided input to this profile, identify awareness of Indigenous culture in the general community as a critical issue for Gold Coast City. Lack of awareness and understanding of Indigenous culture presents ongoing challenges for Indigenous people, families and support workers.

The Crime and Misconduct Commission (CMC 2004) and Murray (2003) list recommendations relating to improving support and services for Indigenous children in Queensland. The Queensland Government has responded to these recommendations in the *Blueprint*[13] for implementation (Queensland Government 2004b), which maps out implementation of these recommendations over a two-year period. The *Blueprint* reports on initial analysis by the non-government Service Directorate, indicating 'Indigenous children and young people do not have a fair share of resources…' (Queensland Government 2004b, p 169). Some of the key changes and priorities set out in The Blueprint are listed below.

- Improve resources and support for existing AICCAs and identify and fund a network of Indigenous community-based organisations to provide more comprehensive services to Indigenous children and families at risk.
- Expand the existing network of AICCAs.
- The Blueprint recommends a service and funding model that includes five distinct but integrated programs: family restoration and support, primary prevention, parenting support and early intervention using a community development model; child advocacy; placement services; carer support; and child advocacy/statutory advice. Smaller AICCAs have been undertaking work across these program areas with only one or two staff. Caseloads are too high for staff to meet demand. There is urgent need to improve funding to existing AICCAs and develop separate programs with specialised staff.
- Cross Cultural awareness training for staff of the Queensland Departments of Child Safety and Communities. Many departmental staff currently lack knowledge and understanding of Indigenous perspectives in the following areas:
    - *culturally appropriate risk assessment;*
    - *child rearing practices, kinship systems and the complex nature of family relationships and obligations;*
    - *communicating effectively with Aboriginal and Torres Strait Islander people;*

[13] For the full range of recommendations and priorities refer to the *Blueprint* (Queensland Government 2004b).

  - *the complex needs of Aboriginal and Torres Strait Islander people and their communities;*
  - *the impact of past policies of child removal and the ongoing socio-economic disadvantage experienced daily by Indigenous families; and*
  - *the rights, interests and knowledge of Indigenous people* (Queensland Government 2004b, p 171).

- Recruitment and community awareness campaign for Indigenous foster carers.
- Establish Indigenous support and development units/branches within the Department of Child Safety with a primary role in assisting capacity building and maintenance of: a peak body for 'recognised agencies'; recognised agencies; and Indigenous organisations with complimentary child protection roles.

6.7 Families from Culturally and Linguistically Diverse (CALD) backgrounds

Workers who provided input to this profile have identified a range of specific issues and challenges CALD families are facing. Families from diverse cultures experience challenges in relation to language, differences in parenting expectations, settlement processes, a lack of extended family support and isolation. Families moving to the City under Australia's Humanitarian Program[14] may face ongoing torture and trauma issues. Some families also experience intergenerational and intercultural conflict. CALD families sometimes face challenges accessing information and mainstream or generic services. Workers also identified residential care for older people from CALD backgrounds as a specific issue affecting families in Gold Coast City.

This profile identifies some issues from a family support workers' perspective and further work is required to explore these and other issues relating to culturally diverse families.

6.8 Young people, their families and education

Many young people and their families in Gold Coast City face challenges participating successfully in their education. Workers contributing to this profile have identified a range of issues relating to young people and their capacity to engage with education[15]. These include:

- When resources are directed to the most serious crises a less serious situation needs to get worse before support can be made available. As a result some children and young people are unable to access the support they need.
- In some cases young people disengage socially while remaining engaged academically and as a result their support needs are missed. This can result in early intervention opportunities being missed and lead to more serious crises later on. Workers identified that it is important to do early intervention work with students while they are still in primary school - to support them in the transition to high school to prevent disengaging from school later on.
- Some young people could benefit from opportunities to take time out from school to address issues in their lives so they can then re-engage positively in school.
- Support for parents to develop negotiation skills, two-way respect with their children and learning how to deal with issues such as young people experimenting and trying things out. Workers suggested some parents could benefit from support to understand social and cultural changes that have occurred since they were young.

[14] Information about Australia's Humanitarian Program is available from the Commonwealth Department of Immigration and Multicultural and Indigenous Affairs (http://www.immi.gov.au/index.htm accessed 15-10-2004).

[15] It is acknowledged that the perspective of young people is missing in this analysis. Further work is required to develop a more comprehensive analysis of issues relating to young people disengaging from school. See also *Section 9 Information, access, awareness of services*, which presents further discussion about the roles and potential roles of schools and other agencies in supporting families.

- High mobility – moving house frequently affects students' ability to integrate into the school community.
- Some parents do not value education and this impacts on students' experience of and attitudes to school.
- Parents' fear of being perceived as bad parents and fear of perceptions about abuse and neglect. This can lead to poor relationships between some parents and schools.
- There are many young people in years 8 and 9 not attending school. It is difficult to locate them to give them support, and when they can be found support is often refused.

A recent study exploring the leisure lifestyles of young people aged 15 to 17 years in Gold Coast City reports some of the problems perceived by young people in the City. Many of the problems identified impact on young people in their family contexts. They include: drug taking, gang violence, family breakdown and bullying; and lack of public transport, emergency accommodation, appropriate counsellors, diverse employment opportunities and information. The study recommends consideration of recruitment, training and hiring appropriate and qualified counsellors for young people in the City (Boag, *et al.* 2003).

Many schools in Gold Coast City are undertaking specific initiatives to support students and families in their school. To inform this profile, the Gold Coast Community Participation Officer from Education Queensland emailed state primary and high school principals in the Gold Coast North and South Districts and asked them to list things their school has in place to support families. A range of initiatives was identified including those listed below. One principal indicated that this request encouraged them to get started on initiatives to support families.

- Regular parent forums.
- Meaningful partnerships with parents.
- Information about activities through regular newsletters.
- Extended opening hours for the school library.
- Running a playgroup.
- Encouraging second hand uniform sales.
- Uniform borrowing shop.
- Using a wide range of family-friendly communication strategies between teachers and families.
- Learning support programs including 'support a reader'.
- Parenting programs including parenting skills training.
- Parent individual support on request.
- Counselling at school for students and parents.
- Referral information and support in transition to other support agencies including family support services and programs.
- A support services folder with information about services that support families.
- Behaviour management support for parents.
- A 'meeting other parents' group.
- Breakfast provided by tuckshop.
- After school care.

- A weekly parent support group lead by a psychologist (volunteer) who is supported by staff teachers and the guidance officer. This group is well attended by parents/carers who need support in a variety of ways.
- A parent liaison officer**.** This position is funded by Lifeline for 7 hours per week and is involved in facilitating a range of initiatives including assistance accessing other government agencies, organising respite, tax assistance and financial planning and a breakfast club.
- Aboriginal Student Support and Parent Awareness Committee supported in the school.
- Support from guidance officers and the behavioural adjustment team.
- Support programs for parents of children with disabilities.

See *Section 8 Information, access and awareness of services* for discussion about the role and potential role of schools in improving access to support for children and families.

6.9 Young parents

While some specific support for young parents is provided in Gold Coast City, family support workers report there is not enough support to meet demand. The supply of supported accommodation for young people who are pregnant or parenting is a concern. There is no specialist supported accommodation in the City for parents under 18 years and their children. Workers contributing to this study report that they are often unable to place pregnant women under 18 years in supported crisis accommodation. As a result young people who are pregnant or parenting and unable to stay with their parents are left with inappropriate accommodation options such as moving from one friend's house to another or staying in garages.

The challenge of finding appropriate and affordable accommodation is particularly difficult for young people who are pregnant and unemployed. Young people receiving Youth Allowance are generally required to continue looking for work until six weeks before their baby is due[16], and parenting and birth payments are not available until the baby is born. Workers contributing to this profile who support young parents report that not receiving these payments until after birth of the baby makes it difficult for young people to prepare for the arrival of their baby, including buying the things they will need to care for the baby and finding appropriate and affordable accommodation. It often takes up to six months to find suitable accommodation. As a result, young parents can be forced into paying unaffordable rent at the cost of other essential items in their budget. The case study below describes a new organisation in Gold Coast City working to support young parents.

> Lifehouse is a new organisation in Gold Coast City supporting young parents. They are currently developing a new supported accommodation program for young parents and young people who are about to become parents. The program will provide a case manager to support the young parents over a six-month period. During this time they will be supported to establish their home and develop skills they need as new parents. After six months the program aims to hand the lease of the property over to the young parents so they can continue living in their established home. This way the family is not required to leave their home and start again. The program moves to another property rather than moving the family.

Other challenges for young parents identified by support workers contributing to this profile include:

- Lack of awareness of their tenancy rights and legislative changes regarding tenant databases.

[16] Unless they have an activity test exemption on the grounds of incapacity (Social Security Act 1991).

- A reluctance by some parents to engage with government support services based on fear of perceptions about abuse and neglect or being perceived as inadequate parents. Young parents often feel stigmatised and are reluctant to engage with mainstream services and support for this reason. For example a 15-year-old mum may feel stigmatised in a general playgroup where many of the mums are 30 and older.
- Young parents can become isolated after having their baby. In an analysis undertaken by Youth Health and Education Service (YHES House) in Southport, young people who were about to have a baby were asked how many friends or people they thought they would be able to call on for support after they have their baby. The average response was around four to six. When they were asked the same question six months later the average response was zero or one. This highlights the need for additional support for young parents in the City. In addition, limited access to transport is identified as contributing to isolation for young parents, particularly those who do not drive or do not have a car. Even if access to a bus service is available this form of travel is particularly challenging when managing young babies, toddlers and prams.
- Younger parents generally face greater challenges with their own personal development than older parents. In addition, young people generally have lower paid jobs as well as less experience with budgeting and other life skills.
- There is inadequate supply of specialist health support for young people and young parents in the City. One worker who contributed to this study reported a four-fold increase in the number of client contacts in two years.
- Parents also face challenges when their own children become parents, facing new boundaries and relationships. It can be difficult for a new grandparent to make the transition to a new relationship with their child who has become a new parent.

6.9.1 Pregnant and parenting students

The support pregnant and parenting students have to complete their secondary education has implications for young people and their children. Young mothers who leave school early generally face greater hardship and poverty than young people who complete their education. They are also more likely to face social isolation, have a second pregnancy during their teenage years, have a higher risk of being involved in unstable or violent relationships and experience poorer than average health, welfare and educational outcomes for their children (AWE 2000). In 1999 Education Queensland developed a policy that commits to identifying and addressing aspects of schooling that prevent pregnant and parenting students completing secondary school. The policy seeks to encourage flexibility in school policies and practices relating to curriculum design, teaching and learning strategies, assessment, classroom and school management, uniform and dress codes, and temporary alterations in attendance patterns. The policy also seeks to discourage discrimination on the basis of pregnancy and parental status and requires that principals support staff to access information to assist them in enhancing school retention for pregnant and parenting students (Queensland Department of Education 1999).

The Association of Women Educators documents work that schools in Australia are doing to support pregnant and parenting students to finish their secondary education. They have also developed a policy that aims to provide a framework for schools and education systems to use in developing their own policy and guidelines for effective practice to help schools to initiate and implement programs (http://www.awe.asn.au/projects.php).

A young mum's story

The story below presents a young mum's account of her experience becoming a parent and balancing parenting and education.

> I was 17 when I found out I was pregnant, I couldn't believe it. I thought mum and dad would go ballistic. They did for a while, but then supported my decision to have my daughter. My boyfriend stayed with me during my pregnancy, but once my daughter was born stopped coming around and returning my calls.
>
> Friends visited me in hospital and were very excited about my new little girl. Many offered to baby-sit and lend a hand when I needed it. But then came the dirty nappies, cancelled dates (getting a baby sitter is not that easy) and I suppose I wasn't that great to be around either. I will never take sleeping in for granted again.
>
> I eventually moved out of my parents' house and into a small flat of my own. I couldn't wait to have my own place with my little girl and parent the way I wanted to and do my own thing. Suddenly I found I was alone 24-7 no one to talk to but a six month old who while I love dearly, kept me up all night, demanded my attention constantly, and cost so much money.
>
> Rent and food took most of my money and buying a car was a dream that I thought would never come true. People asked me how old my sister was when we went shopping and a smile turned to a look of horror when I said she was my daughter.
>
> Eventually I went to a young mothers group at YHES House and met other young parents, made friends and even went back to school there. I finished my year 12 and am now in my first year of nursing at uni. Being a young single parent is still hard and some days you can get very low but I have goals and I am working slowly towards them. I love being a mother and with support I know I can do it and you never know I might even be able to buy that car one day.

6.10 Families and work

Work is a major concern for families. In the Listening to Queenslanders Study, the Queensland Department of Families (2001b) describes issues relating to family and work identified by Queensland families, including getting work at all, not spending enough time with family or quality time with children, and earning enough to support the family. Others include arranging suitable working hours and working long hours, the stress of working and coping with family responsibilities, and issues about childcare such as cost, access and availability.

Employment opportunities in South East Queensland are not equitably divided across locations in the region (QDLGP 2003). Local studies identify concerns about employment opportunities in Gold Coast City (Giles, 2001; Fraser, *et al*. 2001; Boag, *et al*. 2003). Family support workers contributing to this profile identified that unemployment among young people impacts considerably on families in the City as well as directly on young people. Workers also identified need for educational institutions in Gold Coast City to respond to the local labour market – providing education opportunities that reflect local opportunities.

The Queensland Government Community Training Partnerships Program seeks to match education with local labour markets by funding organisations to identify training and employment strategies and purchase training to meet the current and future needs of local industry and the local workforce. It aims to provide workers and job seekers with flexible, accessible and user-friendly vocational education and training. A detailed description of this program is available at http://www.trainandemploy.qld.gov.au/client/funding_incentives/gfp/ctp/ (accessed 12-01-2005).

The 2004 Senate Inquiry into Poverty and Financial Hardship (Community Affairs References Committee 2004) recommends developing a national jobs strategy to, inter

alia, ensure substantial investment in education, training and skill development and improve assistance to young people in transition from school to work, training or further education to prevent lifelong disadvantage.

6.10.1 Unemployment and underemployment

Along with many other developed countries, Australia has become increasingly polarised in recent decades into households with all adults working or no adults working (Melbourne Institute 2002). At the 2001 Census in Gold Coast City there were 15,497 families with children with no resident parent employed, representing 24.5% of families with children, higher than for Queensland (21.9%) and Australia (21.8%) (includes parents who were not in the labour force[17]). Gold Coast City recorded 18,815 dependent children with no resident parent employed (including children with parents not in the labour force).

There were 5,749 dependent children in couple families with one or both parents unemployed, and 2,668 dependent children in one-parent families living with a parent who is unemployed. This represents 8,417 dependent children in the City living in a family with at least one parent unemployed at the 2001 Census (ABS 2001d).

In Gold Coast City at 2001 the unemployment rate for usual residents in couple families with children was 7.7% of persons in the labour force. In one-parent families unemployment was much higher at 20.1% (ABS 2001, customised data). See companion demographic profile at Appendix 1 for more detail on unemployment by family and household type.

Underemployment also presents challenges for families. While specific data is not available for Gold Coast City, some results from the Australian underemployed workers survey (ABS 2003a) are presented below. Higher rates of part-time employment in Gold Coast City suggest that underemployment is likely to have a considerable affect on families in the City.

The underemployed workers survey was conducted in September 2002 as a supplement to the ABS monthly Labour Force Survey and reports on employed persons aged 15 years and over. At the time of the survey there were 2,625,000 part-time workers in Australia. Of these 589,800 (22%) wanted to work more hours. Of those wanting to work more hours 57% wanted to work full-time (35 hours a week or more).

Of those employed part-time who wanted more work 242,400 (41%) were identified as a husband, wife or partner and 51,800 (9%) were lone parents. The median duration of the period of insufficient work was 26 weeks. This figure was longer for lone parents at 30 weeks.

The number of extra hours wanted by persons working part-time varies. Those wanting less than 10 extra hours per week numbered 171,500 (29%), 246,400 wanted 10 to 19 extra hours (42%), 119,500 wanted 20 to 29 extra hours (20%), and 52,400 wanted 30 or more extra hours per week (9%).

Of part-time workers who wanted more work 301,100 (51%) had been looking for work. Main reasons given for not finding work with more hours were: no vacancies in line of work (21%), lack of necessary skills or education (11%), too many applicants for available jobs (9%), no vacancies at all (9%), considered too old by employers (9%), and unsuitable hours (8%).

6.10.2 Labour mobility: changing jobs

The Labour Mobility Survey was conducted across Australia in February 2002 as a supplement to the monthly ABS Labour Force Survey and reports on employed persons aged 15 to 69 years.

[17] The labour force comprises people who are employed and those looking for work. The labour force includes children and parents aged 15 years and over.

An estimated 9,856,400 persons aged 15 to 69 in Australia worked at some time during the year ending February 2002. Of these 9,060,700 (92%) were working at February 2002. Of those working at February 2002:

- 77% had been in their current job for the whole year;
- 15% had been in their current job for less than one year and had worked in a previous job during the year (that is, they changed jobs); and
- 8% had been in their current job for less than one year and had not had a previous job during the year (ABS 2002b).

Job mobility (proportion of employed persons who changed jobs) is higher among younger people with 26% of 20-24 year olds being job mobile compared to only 6% of 55-69 year olds. Family members were less job mobile than non-family members (14% and 21% respectively) and married persons were less job mobile than those who were not married (13% and 19% respectively). Persons living alone were less job mobile than other non-family members (16% and 27% respectively) (ABS 2002b).

6.10.3 Balancing family and work demands

Balancing family and work is receiving considerable attention in policy and research. Along with the focus on work and family in the Workplace Relations Act of Australia 1996 (Russell and Bowman, 1999), researchers and policymakers are exploring how family and work are impacting on each other and how workers and employers are, or can, better manage the balance between family and work[18].

Russell and Bowman (1999) argue that work and family balance solutions cannot just be found in workplaces and homes. Employees need to live in communities that are family friendly with services and resources to support family life. Another element of this discussion is the impact of work demands on intimate relationships and the impact of relationships on work. A 1998 survey commissioned by Relationships Australia found 75% of participants acknowledged having major relationship problems, with one of the top three problems mentioned being work pressures (Hollands, cited in Russell and Bowman 1999, p22).

Children's perspectives are important in negotiating a balance between family and work. Lewis, Tudball and Hand (2001, p27) argue that children have opinions about how much time is enough to spend with parents and that 'parents may gain new insights into navigating work and family' by talking with their children about their needs.

In a study focusing on the family's perspective of family and work all participating children could identify the benefits of parental employment including financial benefits. Older children identified benefits such as increased responsibility and confidence while parents talked about the benefits of children having parents with strong self-esteem and a broad world outlook. Nearly all parents and children interviewed noted that loss of time together could follow from too much work (AIFS 2001).

The Queensland Department of the Premier and Cabinet (2003) policy scan on work and family identifies a number of benefits businesses can gain from family-friendly workplace measures including lower staff turnover, reduced absenteeism, fewer accidents, more efficient use of labour, greater flexibility of staff, attracting staff, reduced overheads and better use of capital, and an organisational culture that facilitates change and effective performance.

While there are benefits to be derived from family-friendly work practices for families and employers, not all parents are able to access these arrangements. Parents who feel they do not spend enough time with their children are often in the least flexible jobs (Russell

[18] AIFS 2001; Lewis, Tudball and Hand 2001; Gray and Stanton 2002; Earle 2002; Weston, Qu and Soriano 2002; Hand and Lewis 2002; Gray and Tudball 2002; Anderson 2002; Wise 2002; Morehead 2002; Millward 2002; Queensland Department of the Premier and Cabinet 2003.

and Bowman 1999). Other studies identify negative and perceived negative impacts for workers making use of family-friendly workplace policies including being seen as less committed or dedicated to the job or less eligible for promotion (Russell and Bowman 1999; Van Wyk 2001; AIFS 2001).

A survey in a major financial institution Russell found that while 80% of part-time employees were satisfied with their hours of work and the amount of control they had over their hours of work, 'only 50% were satisfied with their career opportunities and only 15% believed they had the same career opportunities as full-time staff' (cited in Russell and Bowman 1999, p10).

Results from the Household Income and Labour force Dynamics Australia (HILDA) Survey (The Melbourne Institute 2002, p18) indicate that between 31% and 59% of men and between 32% and 52% of women in full-time work report 'adverse consequences for family life as a result of their work commitments'. A study by the Australian Institute of Family Studies (AIFS 2001) found 'many parents in professional occupations were choosing not to work at senior levels because of the perceived cost to their families'.

For the many mothers in casual employment, balancing family and work can be particularly difficult with 'no access to paid maternity, carer's or sick leave – provisions that might facilitate work-family integration' (DEWRSBY 2002 and Buchanan and Thornthwaite 2001, both cited in Millward 2002, p40). Women are over represented in service and retail sector jobs. Heiler (1998) and Probert, *et al.* (2000) have suggested this can mean mothers are 'required to work at non-standard or unsocial times' (cited in Millward 2002, p41). Studies have shown that working part-time impacts negatively on women's training, promotion and career development opportunities (Probert 1999). The results of a 2001 study undertaken by the National Centre for Social Research in London suggest 'because mothers tended to restrict their own job choices and career aspirations in order to take the main responsibility at home, they were also compromising their future earnings potential, which could lead to financial vulnerability if they were (or became) a lone parent' (cited in Millward 2002, p47).

In Australia in 2000, 44% of male employees and 45% of female employees had access to paid maternity/paternity leave. Full-time employees were more likely to have access to paid maternity/paternity leave than part-time employees, and public sector employees were more likely to have access to this form of leave than those in the private sector. Women were more likely to be entitled to paid maternity/paternity leave than men. Employees who had been in their job for five years or more were more likely to have access to this type of leave (ABS 2003b).

A recent study (ACOSS 2004) reports that there are around 650,000 families in Australia caring for a child under three years, with about 500,000 of these needing more financial help. The particular challenges of balancing family and work for people working in small business were noted in the review of the discussion paper for this project. In particular, the longer hours often associated with small business can impact negatively on family life.

Discussion about work and family balance needs to consider more than just full-time versus part-time jobs. While part-time work can allow flexibility to meet family and other life demands evidence suggests it is less likely to provide opportunities for promotion or development. Part-time careers are needed that allow for a workload that might change from year to year as work and other life demands change (Christensen and Gomory 1999, cited in Russell and Bowman 1999, p38).

Downshifting

Downshifting is attracting considerable attention in contemporary society. This refers to people moving from more onerous to less onerous jobs (Stimpson, Western and McRea 2003). A 2003 survey in South East Queensland focusing on quality of life found 28% of respondents downshifted during the last decade. Reasons identified as important or very

important in the decision to downshift include taking time off to look after a baby (27%), spending more time with family (55%), achieving more control and personal fulfilment (66%), achieving a healthier lifestyle (57%), a less materialistic life (27%), a more environmentally friendly lifestyle (27%) and more financial independence (23%) (Stimpson, *et al*. 2003).

Managing work and caring responsibilities – ABS data

The data in this section was collected through the October 2002 Queensland Supplementary Survey, Managing Paid Employment and Unpaid Caring Responsibilities. This survey defines a carer as any person aged 18 years or over who in the last six months had a child under 15 years of age, as well as anyone who cared for someone else where this care was not done as part of paid work (ABS 2003c).

In the six months to October 2002, an estimated 1,068,300 persons aged 18 years and over in Queensland provided unpaid care for another adult or child. Among females 52.8% provided care and 41.1% of males provided care.

Of the care provided 68.8% was on an ongoing or continual basis. Occasional care was provided in 26.3% of cases and once only care accounts for 5.1% of all care.

Of the care provided 20.7% was for children aged less than six years and 20.2% was for children aged from six to less than 15 years. Elderly persons received 9.4% of the total care. More than one-third of all care (36.3%) was concerned with persons providing care for their own children only.

An estimated 518,700 carers (48.5%) were employees in paid employment; 73.8% were permanent employees and 26.2% were casual. Of the carers who were employees 36.4% had used some form of working arrangement in the last six months to help care for another person. Females were more likely to use work arrangements for caring (42%) than males (31.2%). However, this difference is more evident in the private sector (39.1% for females and 27.5% for males) than in the public sector (47.6% females and 44% for males).

The most common working arrangement used to care for another person was taking paid leave (45.8%), followed by using flex time, rostered day off or time in lieu (39.2%), informal arrangement with employer (27.3%), temporarily reducing hours of work (16.1%), working from home (15.9%) and unpaid leave (15.7%).

An estimated 68,700 carers in paid employment wanted to make more use of working arrangements to care for another person (13.2%). Women in the public sector are more likely to have reported wanting to make more use of work arrangements to care for another person (20.9%) than men in the public sector (12.6%) and women in the private sector (13.7%).

In Queensland an estimated 32,700 carers in paid employment (6.3%) reported being unable to make a change in employment because of their caring responsibilities. Desired changes inhibited by caring responsibilities include changing jobs (2.4%), applying for a promotion (2%) and changing the number of hours worked (3.6%) (ABS 2003c).

A couple's reflection on becoming parents

Kylie: When Greg and I decided to have a baby it was a big decision. We were worried about money and wondered whether we had done the right thing. Our first priority was to get a house. We managed to buy our own place just before Hannah was born. When she was born we couldn't believe we had actually become parents, that she was ours. It was a feeling of disbelief and happiness.

It was a strange feeling leaving the hospital and putting our new daughter in the car to bring her home. It was good but weird. I thought 'are they really going to let us take this person? I don't really know what I'm doing.' I was anxious about leaving the hospital, but once I got home and in my own environment I was fine. Greg says that within a week I was a pro at everything.

Greg and I moved into our new home when Hannah was two weeks old. Moving is one of the most stressful things anyway, so having a baby and our whole lives changing at the same time made it pretty huge. Once we were in our new home we settled in though. Home life was much better, knowing that no one can kick us out. With a new baby coming we wanted to customise her room and we couldn't change stuff around in the place we were renting. It wasn't homely like our home is now. The only problem with going from renting to buying our own place is that we don't get rent assistance. That extra bit of financial support would really help. It doesn't seem fair that we miss out on that when we're struggling to pay our mortgage on one wage.

In the first few weeks Hannah had Colic. This was really difficult for us. We couldn't give her any medication for it because she was so young. It made Hannah really unsettled and Greg and I had serious sleep deprivation. After going through a 30 hour labour I didn't sleep for five days, except for an hour here and there. I remember saying to Greg 'if I don't get some sleep I'm going to die'. That is really how I felt. That was a hard time. My mum had said she'd be there to help but in the beginning she was really standoffish. She said she didn't want to interfere but we needed her and she wasn't there. We were disappointed and a little bit hurt by that. It would have made a hell of a difference just to have mum take Hannah off our hands for an hour. Next time would be completely different. I'd be asking for help. If and when my sister has a baby I'll be there because I know how hard it can be.

Greg: I was never into chatting about babies and family life, but by the second or third antenatal class I was right into it. I really enjoyed going there and chatting away, finding out how people are dealing with life and what they're expecting. It was great. Lots of guys at work have children around Hannah's age and we're like old hens at work, guys with beards covered in grease talking about babies, feeding and getting woken up in the middle of the night. Every day we talk about it. It's unusual for someone who hasn't had a kid to listen to us old hens talking away. For me it's great to find out what other people do and share ideas about being a parent. It shows me how everyone handles it differently.

Because my work is seasonal I spent a few months staying home to look after Hannah while Kylie went back to work. That was the best, the most rewarding job I've ever had. I think I almost cried when I had to go back to work. My mum and Kylie's mum looked after Hannah for a week each at a time. Then my mum got really sick with cancer and Kylie's mum took care of Hannah every week. I had to get up really early and get Hannah up to drive her to Kylie's mum before work. We envisaged that it would be hard with a baby but I think it's a bit harder than we imagined. All I was thinking of was driving… mum… stressing out. I was ready for a nervous breakdown. I said to Kylie 'we've got to change this. It's not working out.'

Continued over…

Kylie: When I went back to work I was lucky if I saw Hannah for an hour after work before she went to bed. When the pressure was at its peak I noticed that Greg and I were growing apart. There were obvious signs. All we were doing was coming home and telling each other how bad we felt. We were giving our care and love to Hannah but not to each other. We didn't know which way Greg's mum was going to go. When a family member gets so sick that they could lose their life it changes your whole perspective. We had to think about what was more important, money or family? We were financially comfortable with both of us working but we were unhappy. So we chose family. We decided that one of us had to give up work. I really wanted to be with Hannah so I resigned from my job.

I've got a lot of pride in what I've done leaving that job. I was really nervous the day I put my notice in… excited because I knew what I was coming home to, but nervous to let the security of that job go. It was a risk because Greg's work is seasonal and he doesn't have a full-time job. Now Greg and I are much happier and that means that Hannah is happy too. Our relationship isn't perfect but it's getting better every day. While Hannah is our main priority we need to take time out as a couple. We need to have a happy relationship so we can bring her up in a happy and healthy environment.

Greg: We're so much better for having made that choice. I wish we had done it ages ago. Now I'm jealous of Kylie. I wish I could stay home and look after Hannah and let Kylie go to work. We've had good news about my mum's cancer too. The chemotherapy worked and that news has made us a lot happier.

Kylie: When I left my job I had an exit interview. The manager asked me if I would have stayed if the situation was different. I said 'yes. If I could work part-time I would stay.' But the company wouldn't give me that option. If they did it would have been great. Finances are the biggest pressure on us now and a part-time wage would provide a really good balance for our family.

Now we're hoping that Greg will get a good job that he's aiming for. I'm not looking at getting back into work for a while, just concentrating on home life.

6.11 Poverty, exclusion and disadvantage

A considerable body of evidence demonstrates that a concerning proportion of children and families across Australia are experiencing poverty and/or exclusion (for example Harding, Lloyd and Greenwell 2001). A Queensland Study has identified that while family incomes for many allow a wider set of aspirations to be met, survival on low incomes reduces opportunities for participation in community life for others (Queensland Department of Families 2000a).

6.11.1 Poverty

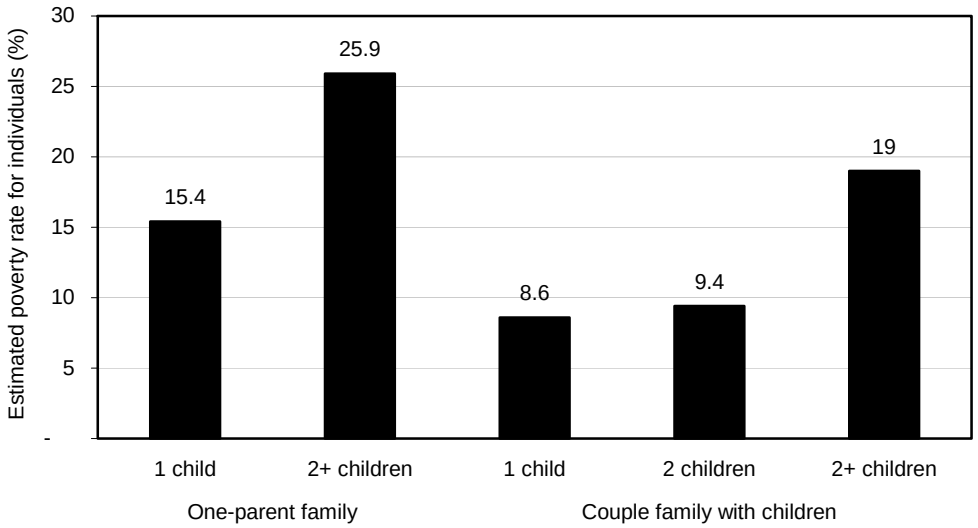
While there are a range of views on the extent of poverty in Australia and how poverty should be measured, support services are reporting increases in demand for their services from families experiencing poverty. Regardless of how we measure poverty, more people are seeking assistance to cope with it, particularly in Gold Coast City. For example, this is evident in observations about the changing nature of homelessness in Gold Coast City (See *Section 4.4 Housing and mobility*).

Almost one in eight Australians were living in income poverty in 2000 (when the poverty line is set at half the average family income for all Australians). This represents 13% of the population (2.4 million people), up from 11.3% in 1990. Using the same measure the proportion of children living in poverty increased from 14.3% to 14.9% over the decade to 2000 (Harding, *et al*. 2001).

Of all household types in 2000, individuals in one-parent families were most likely to live in poverty (21.8%), followed by single persons (18.3%), individuals in couple families with children (12.2%) and couples without children (6.4%). Figure 4 shows estimated poverty rates for individuals in one-parent and couple families with children, by the number of children in the family. Poverty rates are higher for one-parent families than couple

families and higher for families with more children. More than one in four one-parent families with 2 or more children were living in poverty in 2000.

Figure 4: Estimated poverty rates for individuals in one-parent families and couple families with children by number of children, Australia, 2000



Note: This figure is based on the before-housing half average income poverty line.
Source: Harding, et al. 2001.

This data, which sets the poverty line at half the *average* family income, has been challenged by advocates of the half average *median* income method. There is no clear consensus on how to measure poverty in Australia. Using half the median (middle) family income yields a much lower poverty line and therefore identifies less people as living in poverty. Proponents of the half average family income poverty line suggest that the median income method excludes the top half of all Australians and prefer a poverty measure that considers the incomes of all Australians. Proponents of the median income method argue that the average income method includes a small number of people with very high incomes, which increases the poverty line, therefore identifying more people as in poverty (ABC 7.30 Report 2002).

One well-known measure of poverty is the Henderson Poverty Line, which estimates the amount of money families of different sizes need to cover essential needs (BSL 2002). Table 7 shows National Centre for Social and Economic Modelling (NATSEM)/Smith Family estimates for three different poverty lines at 2000 including before housing and after housing poverty.

Table 7: Poverty in Australia in 2000, NATSEM/Smith Family estimates

Poverty line:	Henderson poverty line	50% of average household income	50% of median household income
Poverty (before housing cost)`			
People in poverty	4,378,000	2,432,000	1,628,000
Children in poverty	1,037,000	743,000	479,000
% of people	*23.4*	*13.0*	*8.7*
% of children	*20.8*	*14.9*	*9.6*
Poverty (after housing cost[19])			
People in poverty	3,554,000	3,274,000	2,526,000
Children in poverty	1,316,000	1,142,000	848,000
% of people	*19.0*	*17.5*	*13.5*
% of children	*26.4*	*22.9*	*17.0*

Source: Harding, et al. 2001, cited in this format in ACOSS 2003b, p10.

[19] Poverty after housing cost accounts for the cost of housing in calculating the poverty line.

> *Even using the most cautious estimate, more than a million and a half Australians are living below that poverty line* [half median income] *at the start of the 21st Century* (BSL 2002).

An Australian survey (Johnson 2000) reports that 83% of people believe 'no one should be living in poverty in a country like Australia', and 84% believe that if nothing is done poverty will adversely impact on the future (cited in BSL 2002, p2).

The cash income a family receives in relation to the poverty line can give an indication of their living standards. However, other factors including home ownership and housing cost, and access to services such as health, education and transport also need to be considered. The distribution of assets or wealth is also important, as they can offer some protection in an income crisis such as sudden unemployment or illness (BSL 2002). In 2001 Kelly reported that in Australia 'the top 10% of wealth holders own 45% of household wealth, while the bottom 50% own only 7% (cited in BSL 2002, p2).

The Household Income and Labour Force Dynamics Australia (HILDA) Survey (Melbourne Institute 2002) collected data on poverty and financial hardship in Australia. The survey found that 3.6% of Australians were unable to heat their home at some time during the previous 12 months, just under 5% had gone without meals and almost 19% reported that they had been unable to pay bills on time.

The 2004 Senate Inquiry in Poverty and Financial Hardship (Community Affairs References Committee 2004) found rapid growth of inequality is driving more and more Australians into deprivation and disadvantage, and growing evidence that strong economic gains of the past two decades have not been shared fairly. For example, from 1994-95 to 2000-01, average income in the top quintile increased by $111, which is more than eight times the increase in the lowest quintile ($13 per week) over the same period (Saunders 2003a). While economic indicators continue to climb, so do levels of inequality, poverty, homelessness and housing stress, long-term unemployment, suicide and child abuse (Community Affairs References Committee 2004).

Housing cost is a key factor in poverty. In Gold Coast City 22,496 households in the City were found to be in housing stress[20] at the 2001 Census. This includes 35.9% of dwellings being rented (compared to 30.2% in Queensland and 28.7% across Australia) and 12.1% of dwellings being purchased (compared to 9.8% in Queensland and 9.2% across Australia) (GCCC 2003a). Along with high levels of housing stress, Gold Coast City records low household incomes. At $700 per week, gross median household income recorded for Gold Coast City at 2001 is lower than that for Queensland ($742) and Australia ($786) (ABS 2001d). Levels of housing stress and family and household incomes vary across Gold Coast City (see GCCC 2003a for detailed analysis). High levels of housing stress and low household incomes, reported for Gold Coast City in 2001 Census data, suggest that rates of poverty in the City are likely to be higher than those described above for households and families across Australia.

The Senate Inquiry in Poverty and Financial Hardship (Community Affairs References Committee 2004) made 95 recommendations. Some specific recommendations relating to family poverty are presented here and a number of other recommendations are reported in relevant sections throughout this paper. The Inquiry's recommendations include:

- Establishing a statutory authority or unit reporting directly to the Prime Minister to develop implement and monitor a national anti-poverty strategy.
- Establishing hardship provisions for payment of public and private utilities.
- Increasing funding for financial counselling services.
- Reviewing allowances, eligibility criteria for concessions, the breaching and penalty system and social security income tests.

[20] See *Section 5.4 Housing and mobility*.

6.11.2 Exclusion

Saunders (2003b) uses indicators of hardship and financial stress from the 1998-99 Household Expenditure Survey to develop a profile of exclusion in Australia (Table 8). This analysis examines three dimensions of exclusion: lack of social interaction; domestic deprivation and extreme consumption hardship[21]. Sole parents recorded the highest levels for all forms of exclusion, with more than one in three sole parents reporting lack of social interaction and more than one in four reporting domestic deprivation. Couples with children recorded higher lack of social interaction than all households, but slightly lower domestic deprivation and extreme consumption hardship.

Table 8: Profile of exclusion in Australia, 1998-99

Form of Exclusion	All households	Couples with Children	Sole parents
	%	%	%
Lack of social interaction	15.8	19.0	34.7
Domestic deprivation	7.4	7.1	25.5
Extreme consumption hardship	3.4	2.9	11.5

Source: Household Expenditure Survey 1998-99, cited in Saunders 2003b, p12.

6.11.3 Disadvantage

The ABS has developed a tool for measuring relative disadvantage, the Socio-Economic Index For Areas (SEIFA). SEIFA combines a number of variables from the 2001 Census to allow analysis of relative disadvantage for regions and localities in Australia. Table 9 shows the variables included in the Disadvantage Index and the weight applied to each variable to calculate the index.

Gold Coast City recorded slightly lower disadvantage than Queensland, but higher disadvantage than Australia, with differences in disadvantage recorded across the City. Highest disadvantage across the City is recorded in the Statistical Local Areas (SLA) of Eagleby, Beenleigh, Stephens, Labrador and Bilinga. Lowest disadvantage is recorded in Main Beach-Broadwater, Hope Island and Benowa SLAs (ABS 2001h).

[21] Lack of social interaction: cannot afford a weeks holiday away from home each year; a night out once a fortnight; to have friends/family over for a meal once a month.

Domestic deprivation: cannot afford a special meal once a week; in the last year due to shortage of money could not pay gas, electricity or telephone on time; went without meals; unable to heat home.

Extreme consumption hardship: could not pay car registration or insurance on time; pawned or sold something; sought assistance from a welfare or community agency (ABS, cited in Saunders 2003b, p 11).

Table 9: SEIFA Disadvantage Index variables and weights, 2001

Variable	Weight
% Persons aged 15 years and over with no qualifications	0.30
% Persons with offspring having parental income less than $15,600	0.29
% Females (in Labour Force) unemployed	0.27
% Males (in Labour Force) unemployed	0.27
% Employed Males classified as 'Labourers and Related Workers'	0.27
% One-parent families with dependent offspring only	0.25
% Persons aged 15 years and over who left school at year 10 or lower	0.25
% Employed classified as 'Intermediate Production & Transport Workers'	0.24
% Families with income less than $15,600	0.23
% Households Renting (Government Authority)	0.22
% Persons aged 15 years and over separated or divorced	0.19
% Dwellings with no motor car at dwelling	0.19
% Employed Females classified as 'Intermediate Production and Transport Workers'	0.19
% Persons aged 15 years and over who did not go to school	0.18
% Indigenous	0.18
% Lacking fluency in English	0.15
% Employed Females classified as 'Elementary Clerical, Sales and Service Workers'	0.13
% Occupied private dwellings with two or more families	0.13
% Employed Males classified as 'Tradespersons'	0.11

Source: ABS 2001i.

6.12 Transport

Lack of transport services impacts considerably on individuals, families and communities in Gold Coast City. A number of research projects and plans identify the need to address transport in the City (Boag, *et al*. 2003; GCCC 1997; Gold Coast North DYAP 2003; Giles Consulting International 2001). GCCC and Griffith University have jointly funded a pilot study (2004) investigating transport exclusion in Gold Coast City.

6.12.1 Motor vehicle ownership

Table 10 shows the number of motor vehicles per dwelling by family and household type in Gold Coast City. High proportions of lone person households and one-parent families in Gold Coast City reported having no motor vehicle. High proportions of group households, other families and couple families reported having two or more motor vehicles.

Table 10: Number of motor vehicles per dwelling by family and household type, Gold Coast City, 2001

Occupied private dwellings containing family, group and lone person households. Excludes visitor only households.

Number of motor vehicles per dwelling	Couple family with children		Couple family without children		One-parent family		Other family		Group household		Lone person household		All households	
	No.	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*	*No.*	*%*
No motor vehicles and no motor bikes (includes motor bikes not stated)	607	*1.4*	1,535	*3.5*	1,934	*10.2*	199	*11.0*	779	*8.5*	7,692	*20.7*	12,746	*8.3*
No motor vehicles and one or more motor bikes	9	*0.0*	23	*0.1*	24	*0.1*	0	*0.0*	26	*0.3*	81	*0.2*	163	*0.1*
One motor vehicles and no motor bikes (includes motor bikes not stated)	8,483	*19.3*	18,432	*42.3*	10,159	*53.8*	497	*27.4*	2,776	*30.3*	22,521	*60.6*	62,868	*40.7*
One motor vehicles and one or more motor bikes	588	*1.3*	564	*1.3*	212	*1.1*	17	*0.9*	147	*1.6*	483	*1.3*	2,011	*1.3*
Two motor vehicles	22,752	*51.8*	18,568	*42.6*	4,383	*23.2*	678	*37.3*	3,826	*41.8*	2,479	*6.7*	52,686	*34.1*
Three or more motor vehicles	10,606	*24.1*	3,363	*7.7*	1,368	*7.2*	326	*17.9*	1,136	*12.4*	711	*1.9*	17,510	*11.3*
Motor vehicles not stated and no motor bikes (includes motor bikes not stated)	892	*2.0*	1,043	*2.4*	778	*4.1*	97	*5.3*	445	*4.9*	3,082	*8.3*	6,337	*4.1*
Motor vehicles not stated and one or more motor bikes	15	*0.0*	20	*0.0*	19	*0.1*	3	*0.2*	15	*0.2*	96	*0.3*	168	*0.1*
Total	**43,952**	***100.0***	**43,548**	***100.0***	**18,877**	***100.0***	**1,817**	***100.0***	**9,150**	***100.0***	**37,145**	***100.0***	**154,489**	***100.0***

Original data source: Customised data (ABS 2001).

6.13 Planning and developing family friendly places

Planning and developing communities and spaces that support families and their development and wellbeing is a critical issue identified by workers providing input to this profile. This is supported by the results of planning consultations with family support workers undertaken on behalf of GCCC in 2003. Workers in both forums were particularly concerned about the impact of built environments on the wellbeing of children, families and communities. They identified planning and design of places as important in addressing issues for families including:

- need to improve planning processes affecting families including timely provision of infrastructure;
- reducing isolation and improving interaction with neighbours;
- providing diverse housing types within neighbourhoods to encourage diverse communities and interaction between older people, families and young people and children;
- developing community/neighbourhood identity;
- functional public and recreational spaces for children and families including providing play spaces that are close to home and promote child development and interaction;
- spaces for older children to gather and socialise; and
- promoting exercise and physical activity in pedestrian and cycle friendly communities that have facilities and services within reach of neighbourhoods and reduce the need to drive.

It was noted that these social considerations are important both in the planning and development of new communities, and in changes in existing communities. Family support workers also raised the role of developers in providing resources and infrastructure to support families in local communities. Council is developing a social impact assessment policy and procedures to provide guidance on consideration of social issues and factors in the development assessment process.

Council has also completed a parks and recreation plan for the City titled *Our Natural Playground*, which acknowledges the role parks play in providing opportunities for family and community interaction and seeks to, inter alia, encourage an active and healthy community (GCCC 2004). The Gold Coast Physical Activity Alliance (GCPAA), a coalition of stakeholders dedicated to advancement of physical activity initiatives, is developing a Gold Coast Physical Activity Strategy that will provide a framework for state and local government personnel, non-government organisations and the private sector to engage with communities to increase participation in physical activity (GCPAA 2004). Partners in the GCPAA include Gold Coast City Council, Queensland Health, Education Queensland, Sport and Recreation Queensland, Griffith University and the Gold Coast Division of General Practice.

6.14 Respite

Byrne's analysis of family support and respite needs (1998) identifies critical need for respite services in Gold Coast City. In particular, Byrne identifies need for in-home and out-of-home respite for children when parents need to go to hospital, are too ill to care for children or are experiencing emotional stress, and for children with special care needs. A number of workers providing input to this study highlighted the importance of improving availability of respite for families with a particular emphasis on respite for young children and older people, weekend respite and making respite affordable or free.

6.15 Childcare and early childhood services

6.15.1 Results from the Australian Child Care Survey

The data in this section is from the Child Care Survey, which was conducted across Australia in June 2002 as a supplement to the monthly ABS Labour Force Survey. The survey reports on childcare arrangements (other than parental care) made for the care of children under 12 years of age.

Across Australia, 1,510,500 children aged under 12 years (49% of this age group) used childcare in the reference week of the survey. An estimated 787,400 children (25% of this age group) used formal childcare. The most common type of formal childcare used was long day care (10% of children under 12 years), followed by preschool (8%), before and after school care programs (6%), family day care (3%) and occasional care (1%) (ABS 2003d).

An estimated 33% of children used informal care; 19% were looked after by grandparents, 2% by siblings, 7% by other relatives and 7% by other unrelated people.

Childcare use varies with children's age. Formal care is less common for very young children (7% of children under one year), increasing rapidly from age one (27%) up to age four (83%). Formal care is less common among school-aged children with 28% of five year olds and 7% of 9-11 year olds receiving formal care. Informal care is reported as highest for one year olds and decreases as children's age increases.

The survey reports 45% of children under 12 years used childcare less than ten hours per week and 27% used childcare for 10-19 hours per week. A small proportion received care for 45 hours or more (6%). Children receiving 45 hours of childcare per week or more are more likely to have received informal care (7% of children) than formal care (2%).

Almost half of children under 12 years receiving formal childcare did so because of parents' work. This reason accounts for even higher proportions for children attending before and after school care programs (84%), family day care (60%) and long day care (55%). The most common reason for preschool and occasional care attendance is that it was beneficial for the child (73% and 37% respectively). Parents' work was also the most common reason for children attending informal childcare (46%), followed by parents' personal reasons (38%).

A large majority (92%) of children using formal childcare paid for their care. The cost was less than $20 per week for 46% and $100 or more for 8% of children receiving formal care. Highest median weekly cost is recorded for long day care ($38) and family day care ($21). The proportion of children using childcare generally increases as family income increases (ABS 2003d).

At 7 March 2003 there were 26,081 recipients of the Centrelink childcare benefit in Gold Coast City postcodes. Postcodes recording the highest numbers are 4211 (Nerang), 4207 (Beenleigh), 4214 (Ashmore, Parkwood) and 4215 (Labrador, Southport) (Centrelink 2003, Customised data).

6.15.2 Childcare and early childhood services - issues

The Queensland Child Care Act 2002 sets out guiding principles for the provision of licensed childcare services. These include:

- a focus on the best interests of the child;
- providing care in a way that protects the child from harm, respects the child's dignity and privacy, promotes wellbeing and provides positive experiences;
- providing care in a way that stimulates and develops the child's creative, emotional, intellectual, lingual, physical, recreational and social potential;
- parents have the primary responsibility for the upbringing, protection and development of their children and should be supported in that role; and
- providing care in a way that involves parents and other members of the community and reflects the multicultural and multilingual nature of the community (Queensland Government 2002).

A range of issues relating to early childhood and childcare services identified at national and state level, through the National Agenda for Early Childhood and the Queensland Child Care Strategic Plan 2000-2005, are listed below.

- Wide disparity between early learning and care services in terms of operation, quality, affordability and accessibility.
- Need for services that are able to respond in flexible ways to individual needs and resources, as well as providing education and care opportunities for children with complex needs and more culturally sensitive services for Indigenous children and children from culturally diverse backgrounds (The Australian Government Task Force on Child Development, Health and Wellbeing 2003). Other specific needs include those of parents working shift work or non-standard hours, providing emergency care and care when children are sick. Constraints of service providers to respond to changing family needs (eg inflexible regulation) are also identified (Queensland Government 1999).
- Parents reported that formal childcare played a valuable role in preparing children for school, while parents without this link had limited awareness of support and services available.
- Parents without jobs reported cost as a barrier to accessing early learning programs, while lack of childcare services prevented some parents from returning to work (The Australian Government Task Force on Child Development, Health and Wellbeing 2003). Affordability of childcare is also identified as impacting on parents' ability to remain in or enter the workforce (Queensland Government 1999).
- Need for a nationally consistent approach to early education and care, including developing a national age-appropriate play-based curriculum (The Australian Government Task Force on Child Development, Health and Wellbeing 2003). A lack of

integration between childcare and early education services, resulting in inequitable access to early education services for three to five year olds is also identified in the Queensland Child Care Strategic Plan 2000-2005.

- Inadequate provision of school-aged care facilities on school sites.
- Need for coordination between levels of government and across government.
- Lack of relevant research and data to inform planning and decision making and signal changes that would impact on the childcare industry.
- The mechanisms for families to have a say, and to influence the provision of childcare and education services for their children are limited.
- Employers need to be more involved in planning for childcare (Queensland Government 1999).

The Queensland Department of Families (2002) Place Profile identifies problems with access to childcare for families in Gold Coast City. It identifies need for increased and flexible placements and capacity to respond to needs within the community including placements after hours, when parents are sick, respite for single parents and families with children with disabilities.

In planning consultations undertaken on behalf of GCCC in 2003, family support workers identified access to affordable childcare as a critical need for families in Gold Coast City who are not able to rely on support from extended family networks. Lack of extended family in the City increases the need for childcare services. While there is a large supply of childcare centres often spaces in childcare cannot be found. Review of the discussion paper for this project identified need to investigate demand for childcare services during non-standard hours. This was viewed as particularly relevant in Gold Coast City where large proportions of the workforce are employed in service industries.

Fraser, *et al*. (2001) suggest the role of childcare staff in providing information and education for parents could be investigated; identifying that childcare centres are a likely place to engage with working parents and assist them to access services (See also Section 8 Information, access and awareness of services).

The Queensland Department of Families initiated the Childcare and Family Support Hub Strategy as part of the Queensland Child Care Strategic Plan 2000–2005 to respond to parents' expressed need for improved access to services. A childcare and family support hub for Gold Coast City is located in Robina. The Hub Strategy aims to:

- *support communities in developing integrated early childhood services which can respond to a range of childcare and family support needs;*
- *encourage communities to discover better links between the range of existing services;*
- *promote best practice in the provision of community services which are responsive to the needs of families with dependent children;*
- *foster cross-government commitment to the provision of community services; and*
- *share key learnings about service integration through an action research framework* (Queensland Department of Families 2000b).

The recent Senate Inquiry in Poverty and Financial Hardship (Community Affairs References Committee 2004) recommends additional Commonwealth funding to increase childcare places, particularly in disadvantaged areas and to improve affordability of childcare for Indigenous children.

6.16 Child protection and safety

In Gold Coast City and across Queensland and Australia, challenges are identified for child protection and safety. Child protection notifications and substantiations are increasing and the needs of children in care are becoming more complex. Changes in policies and practices relating to child protection and safety are also evident. This section outlines some of these challenges and changes and the steps Queensland is taking in this area. See Section 6.1.1 for local and state data on child protection trends.

The Queensland Child Protection Strategic Plan identifies need for major reform in child protection for the following reasons:

- *Need for improved standards of care for children who are subject to protection orders, highlighted by the Forde Inquiry.*
- *Implementation of new child protection legislation and consequent new policy, program and practice requirements.*
- *Rapid changes in the child protection field, increasing demands and complexity, and more evidence about the interventions that work best for children, young people and families.*
- *Gaps in service provision and the inability of some existing models to respond to current and projected needs.*
- *Changes in community expectations of government services and the need for child protection to respond to calls for greater accountability and a focus on achieving outcomes* (Queensland Department of Families, Youth and Community Care 2000, p 4).

A Queensland Government consultation paper (Queensland Department of Families 2001a) acknowledged that the child protection system in Queensland is not well positioned to cope with demand for placements. The paper identifies a range of characteristics of the system including:

- inadequate numbers of carers;
- insufficient diversity in care environments to cater for the complex and varied needs of children in care;
- the needs of children in care becoming more complex;
- challenges in finding and maintaining placements for children with high levels of need; and
- insufficient numbers of suitable care environments, leading to multiple placements of related or unrelated children with the same carer.

6.16.1 Changes in policies and practices

Responses of child protection authorities generally in Australia have become less punitive over the last decade and more focussed on collaboration and helping parents. More resources are being directed towards family support services (AIHW 2001). In many jurisdictions agencies have introduced options for responding to less serious reports through family support services, along with an increasing focus on early intervention (AIHW 2004).

A study by the Victorian Department of Human Services found key underlying features that lead to some families coming into contact with child protection systems were complex and chronic. These include low income, substance abuse, mental health issues and the burdens of sole parenting. The study found that the child protection system did not often effectively deal with these problems and that families require 'more sustained and less intrusive support than the services usually provided by child protection authorities' (cited in AIHW 2004, p6).

For children who are placed on care and protection orders in Australia there is currently a policy emphasis on family preservation, prevention of separation of children from their

families and reunifying where family separation has occurred. In some jurisdictions there is also a focus on greater permanency for children who are unable to live with their parents (AIHW 2004).

6.16.2 A child's right to safety

Every child has a right to protection from harm. This is set out as the fundamental principle in the Queensland Child Protection Act 1999. Children in care are particularly vulnerable (CMC 2004) and their rights are set out in the Charter of Rights for a Child in Care, Section 71 of the Child Protection Act 1999. This Act establishes the following rights for the child:

- *To be provided with a safe and stable living environment.*
- *To be placed in care that best meets the child's needs and is most culturally appropriate.*
- *To maintain relationships with the child's family and community.*
- *To be consulted about, and to take part in making decisions affecting the child's life (having regard to the child's age or ability to understand), particularly decisions about where the child is living, contact with the child's family and the child's health and schooling.*
- *To be given information about decisions and plans concerning the child's future and personal history, having regard to the child's age or ability to understand.*
- *To privacy, including, for example, in relation to the child's personal information.*
- *If the child is under the long-term guardianship of the Chief Executive, to regularly review the child's care arrangements.*
- *To have access to dental, medical and therapeutic services, necessary to meet the child's needs.*
- *To have access to education appropriate to the child's age and development.*
- *To have access to job training opportunities and help in finding appropriate employment.*
- *To receive appropriate help with the transition from being a child in care to independence, including, for example, help about housing, access to income support and training and education* (cited in Queensland Department of Families 2001a, p3).

6.16.3 The future for child protection and safety in Queensland

> *In its 2003 Report on government services, the Productivity Commission published the following disturbing statistics (p 15-16): In Queensland, the proportion of children who were the subject of a resubstantiation [that is, another incidence of substantiated abuse or neglect] within three months after an initial substantiation in 2000–01 was 10.4 percent … the proportion who were the subject of a resubstantiation within 12 months was 24.8 percent* (CMC 2004, p 1).

In 2003 reports from a number of sources indicated that the child protection system in Queensland 'had failed many children'. In some cases evidence pointed to 'systemic failures over many years to prevent children in foster care being further abused or neglected. The CMC responded by undertaking two major misconduct investigations and an independent public inquiry: the Inquiry into Abuse of Children in Foster Care in Queensland' (CMC 2004, p 1). The terms of reference of the inquiry were:

a) *To examine any systemic factors contributing to the incidence of any abuse of children in foster care.*

b) *To examine the suitability of measures to protect children in foster care from abuse, and in particular:*
   - *the adequacy of systems and procedures to prevent and detect abuse*
   - *the adequacy of measures to respond to and deal with suspected abuse including abuse reported by foster carers.*

c) *To make any recommendations as may be considered appropriate in relation to (a) and (b), including recommendations for any necessary changes to current policies, legislation and practices (CMC 2004, p 2).*

The primary recommendation of the Inquiry is 'that a new Department of Child Safety be created to focus exclusively upon core child protection functions and to be the lead agency in a whole-of-government response to child protection matters' (CMC 2004, p6). The rationale cited in the Inquiry's report is that:

> *Only through an approach unambiguously directed towards meeting the needs of at-risk children will it be possible to make the changes necessary to deliver positive outcomes for vulnerable children, and restore public confidence in the child protection system* (CMC 2004, p6).

The new Department of Child Safety has been established. The CMC report recommends establishing an additional 160 frontline positions for the new Department of Child Safety (DCS) to increase the current number from 455 to 615 officers. This number is based on the Inquiry's calculation of staff requirements in the areas of intake, assessment, case work, relief staff and team leaders. The Inquiry's report also recommends that 'the Department of Families (or some other agency separate from the DCS) retain responsibility for delivering prevention and early intervention services, including services for all children, and for programs targeting communities or families identified as vulnerable' (p 7).

> *One of the central aims of the new model is to return a clarity of focus and purpose to child protection in Queensland. The DCS will be an agency focusing exclusively on meeting the needs of children identified as being at risk, and will concentrate on early and intensive intervention in that context* (CMC 2004, p 7).

One agency cannot be expected to deliver effective child protection. This requires a cross-government, multi-agency response. 'Effective protection of children requires a system that supports the development of all children as well as one that identifies vulnerable families for targeted interventions on behalf of at-risk children' (CMC 2004, p 3).

The primary recommendation to establishing the DCS is designed to provide a better child protection system through a specialist agency committed to:

- *Addressing the needs of children as its number one priority*
- *Providing a broad range of options for case-managing children at risk of harm*
- *Being the lead agency in a coordinated, whole-of-government response to child protection issues*
- *Using effective and sophisticated intake, assessment and investigative procedures in responding to allegations of abuse and neglect*
- *Adhering to best-practice standards in working with children in care, foster carers, biological parents, private care providers and other agencies involved in the provision of child protection services*
- *Supporting staff through appropriate induction, training and professional development opportunities*
- *Being open and accountable at all levels, both in its internal processes and through external and public scrutiny* (CMC 2004, p 4).

6.17 Carers in families

Caring responsibilities in families are an important consideration for developing support. Children are staying at home longer, more families are caring for older dependent relatives and there is stronger recognition of the role family members play in supporting people with disabilities (Queensland Department of Families 2000a). Table 11 shows age of carers in Australia by their relationship to the person they are caring for at 1998. Carers aged 15 to 44 years are most likely to be caring for a parent, while carers aged 45 to 64 years are most likely to be caring for a partner or child. Three quarters of carers aged 65 years and over were caring for a partner.

Table 11: Age of carers and relationship to recipient of care, Australia, 1998

Relationship to recipient of care	**Age of carer** (years)							
	15-44		**45-64**		**65 and over**		**Total**	
	No. (000)	%	*No.* (000)	%	*No.* (000)	%	*No.* (000)	%
Partner	39.2	24.9	80.0	41.3	72.6	75.1	191.8	42.8
Child	40.5	25.7	65.3	33.7	3.5	*3.6	109.2	24.4
Parent	58.0	36.8	29.2	15.1	9.7	10.0	96.9	21.6
Other	20.1	12.7	19.1	9.9	10.9	11.3	50.1	11.2
Total	157.7	100.0	193.5	100.0	96.7	100.0	447.9	100.0

* Relative standard error greater than 25%.
Source: ABS 1999.

In 1998 there were 106,400 children who provided some type of informal care for a parent. This represents 13% of all children living with a parent with a disability. The majority of these children (78%) were of high school age (12-17 years). Care provided to parents by children included helping the parent move around the house, shower or communicate, and general household help such as preparing and cooking meals, writing letters, checking bills, vacuuming, gardening and minor home repairs (ABS 2000).

The 1998 Survey of Disability and Carers investigated the impact of living with a parent with a disability on children's participation in education. While there is little difference in participation in education for children aged 15 to 17 years (86% who had parents with a disability were attending school or full-time study compared to 88% of other 15 to 17 year olds) the difference for 18 to 24 year olds is more apparent. Only 26% of people in this age group living with a parent with a disability were attending full-time study compared to 35% for those whose parents did not have a disability (ABS 2000).

The Commonwealth Carer Respite Centre – South Coast Region reported in mid 2004 that it is supporting almost 50 young carers aged from eight to 18 years in the Gold Coast region (including Beaudesert Shire). Some of these children and young people are primary carers of a parent. Others have a secondary caring role with caring responsibilities for brothers, sisters or grandparents with a disability, mental illness, chronic or terminal condition, or who are frail with age. There are more female than male carers in this group. This number does not account for young carers who are not accessing support from this Commonwealth Carer Respite Centre.

The recent Senate Inquiry in Poverty and Financial Hardship makes recommendations relating to support for carers including that the Commonwealth Government review:

- *the level of income support provided to carers, especially Carers Allowance;*
- *the income support and other support needs of carers with special needs, such as young carers and ageing carers; and*
- *the level of respite care provided for carers* (Community Affairs References Committee 2004, p 388).

6.17.1 Grandparents raising grandchildren

The prevalence of grandparents raising grandchildren is becoming more and more apparent both locally in Gold Coast City and across Australia. The Family Characteristics Survey (ABS 2004b) found there were 22,500 grandparent families with children aged 0 to 17 years

in Australia in June 2003, with 5,700 living in Queensland. Almost three-quarters (73%) of grandparent families in Australia reported the age of the youngest child as between 5 and 14 years. In the majority of grandparent families (61%) the younger partner or lone grandparent was aged 55 years or more. There were 31,100 children living in grandparent families and 70.6% of these visit a natural parent living elsewhere.

A range of issues are identified including legal issues and supporting grandparents who take on the important work of full-time care of their grandchildren. The Sharing the Load Forum, organised by the Council Of Grandparents (COGS) Queensland identified a range of priorities for action:

- Legal issues, including recognition of grandparents legal status as carers, recognising grandparents providing informal care so they can access financial and other assistance and access to free legal assistance;
- Access to medical and other support services; and
- Crisis or respite care when a grandparent goes to hospital (Families Australia 2003).

In 2003 the Federal Minister for Children and Youth Affairs commissioned the Councils On The Ageing (COTA) National Seniors to undertake a project to collect information from grandparents raising grandchildren and report to the Minister how all levels of government and the community can respond to the needs of grandparents (Families Australia 2003). The report (COTA National Seniors 2003) identified a range of issues many grandparents are facing including:

- The strain of children traumatised by their experiences;
- Grandchildren can arrive unexpectedly without resources such as clothing and bedding;
- Facing their own grief and loss at being placed in this situation by their own adult children;
- Additional financial, legal and social costs, often with little or no support;
- Taking their grandchildren at the request of state child protection authorities and then getting little support or recognition for it; and
- An ambiguous legal situation.

The COTA National Seniors (2003) report makes 21 recommendations. Some of the recommendations are summarised below. See the original report for the full list of recommendations.

- Recognising grandparents raising grandchildren as a special group requiring assistance.
- Providing payments and support services the same as those for foster carers.
- That Centrelink ensure grandparents receive the benefits and assistance they are entitled to.
- A community awareness campaign.
- Recognising the status and rights of grandparents in Commonwealth Family Law and State Legislation.
- Making Legal Aid available to grandchildren and grandparents involved in Family Court Matters.
- Set up procedures to establish eligibility for assistance for grandparents raising grandchildren with the informal agreement of parents and/or child protection authorities without formal court orders.
- Develop parent education programs to meet the specific needs of grandparents raising grandchildren.
- Develop early intervention and prevention programs for families at risk.
- Make funding available in each state to assist grandparent support groups.
- Sponsor further research into the long-term effects of parental drug and alcohol use including the effects on children of being raised by their grandparents and the effects on the health and wellbeing of grandparents.
- That the Commonwealth Government sponsor a conference relating to grandparents raising grandchildren within two years.

The Grandparents Assisting Grandkids Support Inc (GAGS) in Gold Coast City is a support group for grandparents raising their grandchildren and is also politically active, 'arguing for increased assistance for care giving grandparents' (Gold Coast Sun, 25th February 2004, p 32). A particular issue that has been identified as affecting grandparents in Gold Coast City is the need for additional Family Court Services. Grandparents in one family who have provided input to this report through their local community centre are advocating for a Family Court to be established in Gold Coast City. Long waiting periods for Court hearings in Brisbane is dragging out cases and having a negative impact on families.

The story below presents one grandmother's account of her experience. It is quoted from the COTA National Seniors report *Grandparents Raising Grandchildren.*

> Eight years ago my daughter gave birth to a son, his name is Peter. I was asked to come to her as she couldn't take care of him. My daughter was a drug addict at the time and there were problems. … She spent a lot of time in and out of hospital, in the psych ward of the Southport hospital. When she was released she came to get Peter with a well-meaning social worker. I knew that my grandson was in danger as there were many times I would get calls from the hospital to pick him up as my daughter had overdosed again. As I write this, she is back in jail. I was granted full custody of Peter. I didn't consider the father or his whereabouts.
>
> Five years later the father turns up and wants his son. There was a court battle. My grandson after many visits to his dad and a number of years later, now lives with him full time. I get alternate weekends and holiday time. I still take my grandson to visit his mother in jail. There is a bond between them that cannot be broken.
>
> My life fell to pieces when I gave up my grandson. I was divorced, alone and the only thing that kept me going was my church and the people in it. Now the good side of this story – Peter loves his mum and dad very much. I have become just grandma. His father and I have sorted out any differences we might have had. We do this because we both love this little man very much. …
>
> I see grandmothers every weekend visiting their children in jail with their children's children. My daughter is thirty-four. She is due for release soon - every day I pray she will take her medication and stay off drugs. She now suffers with a manic depression epilepsy drug induced psychosis. There are many grandparents I meet in my work and many cry out for help. Some are like myself, some are old – the oldest one I know here is in her seventies. (Grandmother 56; Grandchild 8) (COTA National Seniors 2003, p 19).

6.18 Shortage of General Practitioners

The Gold Coast Division of General Practice (GCDGP) has reported a shortage of General Practitioners (GPs) in many parts of Gold Coast City. 'For Australia there is one GP for every 926 people but in Gold Coast City there is only one GP for up to 9,324. This is ten times the Australian figure… there is a major problem developing in our urban communities. Population growth occurs in outlying suburbs where land is available and housing is relatively cheaper', while services are concentrated in established areas closer to the coast. While the Federal Government has developed a workforce program to increase GP services in outer metropolitan areas, the GCDGP argues that this does not benefit the Gold Coast and that though we have a large population we are discriminated against because we are not a capital city (GCDGP 2004).

State member for Broadwater, Peta Kay-Croft has called on Gold Coast Federal members to 'start sticking up for residents and our local GPs – they need to lobby the Federal Health Minister and deliver some results for the Gold Coast' (Gold Coast Sun, March 10 2004, *Doctor numbers hits crisis point*, p 5).

> *When there are not enough doctors, patients have to wait longer to get appointments. They have to travel further to find a doctor who can see them. New residents have trouble finding a local GP who has not closed off their*

> *books to new patients… We confidently predict that patients will be travelling further, waiting longer and paying more for the medical services that they need* (GCDGP 2004).

Family support workers who provided input to this profile also identified declining availability of bulk billing and need for interpreters in medical services as issues impacting on families in Gold Coast City.

6.19 Other identified issues

A number of specific issues relating to families and family support in Gold Coast City have been identified through the review of the discussion paper for this project. Many of these issues have been addressed in this profile. However, due to time and resource constraints, some issues have not been addressed in detail. These issues are listed below to inform future work in planning, research and development.

- Cost of education for families.
- Impact of crime on families.
- Analysis of health support and challenges relating to health for families, including mental health and the impact of drugs and alcohol on families and children.
- Need for additional resources to support children, young people and families in a range of areas including:
    - families in need or in crisis;
    - addressing conflict and grief in families after separation or divorce, and providing supervision for handover and access;
    - support groups;
    - parenting programs and support, including nutrition and child health;
    - affordable specialist counselling for children, young people and families; and
    - other free therapy services for all children, for example, physiotherapy, occupational therapy, etc.

7 Child and family development and wellbeing

Despite Australia's wealth and generally high level of education many health and wellbeing indicators are showing adverse trends for children and young people. The early years of development are increasingly being recognised as important across a range of life outcomes (Stanley 2001). There is evidence that critical brain development occurs before the age of three years and there is growing support for fostering 'quality early learning experiences for children in all environments from birth' (Australian Government Task Force on Child Development, Health and Wellbeing 2003, p 7).

Queensland Health's (2002, p12) Strategic Policy Framework for Children and Young People's Health outlines its policy to improve the health and wellbeing of Queensland's children and young people by:

- *giving children the best start and promoting the nurturing role of families;*
- *promoting healthy growth and development in safe, supportive environments; and*
- *ensuring quality treatment, management and monitoring*.

The policy framework focuses on:

- *the importance of the early years of life, including antenatal influences for lifelong health and wellbeing;*
- *reducing risk and enhancing protective factors during critical developmental stages and transitions;*
- *a broad understanding of health, the determinants of health and health inequalities;*
- *the importance of social justice principles of access, equity, participation and the rights of children and young people (UNICEF 1989, Convention on the Rights of the Child);*
- *promoting health, preventing illness, and early intervention to maximise health outcomes;*
- *a population health approach in which the needs of whole communities, higher risk population groups and individuals are addressed within a universal framework;*
- *an integrated service model to progress a multidisciplinary and intersectorial continuum of care; and*
- *the importance of supporting the social and cultural diversity of individuals and groups at all levels of health service development and delivery* (Queensland Health 2002, p 12-13).

A study in Western Australia found that one in four five year olds participating have developmental problems that could lead to more serious problems later in life. The study, using the Early Development Index (EDI), covered a diverse range of Perth suburbs and is reported to be suitable to be generalised across Australia. The EDI is a teacher-completed checklist measuring five developmental domains: social competence, emotional maturity, language and cognitive skills, physical health and wellbeing, and communication skills/general knowledge. Of the children participating 26% were found to be vulnerable in at least one area and 13% were considered to be at risk of having learning difficulties. The results highlight concern about an increasing number of young people who can't fully participate in society, leading to problems for the aging population (ABC Radio National 2003; Hart, Brinkman and Blackmore 2003). The EDI will be used in a number of communities across Australia. The Gold Coast area has been identified as one of seven communities participating in a project that will measure the progress of young children in a number of key developmental areas (Minister for Children and Youth Affairs 2004).

The 2004 Senate Inquiry in Poverty and Financial Hardship (Community Affairs References Committee 2004) makes a number of recommendations that seek to improve child and family development and wellbeing in Australia. These include:

- A national early childhood education program.
- Developing initiatives to improve participation in early childhood education.

- The Commonwealth to develop and contribute to the funding of early childhood education in conjunction with States and Territories.
- Develop strategies to improve access to early childhood education facilities for Indigenous children.
- Literacy programs to develop parents' skills to assist their children with early childhood learning.
- Commonwealth funding for school breakfast programs in disadvantaged areas.
- Additional Commonwealth funding for schools based on the socio-economic profile of the school community to improve services for disadvantaged students.
- Develop policy and identify successful programs to improve retention rates for those in danger of leaving school early and for re-engaging early school leavers.
- Additional Commonwealth funding for preventative health and related measures, directed particularly to areas of socio economic disadvantage.
- A national dental health scheme to improve access for people on low incomes.
- A community education campaign for new parents to improve children's nutrition.

In feedback on the consultation paper for the national agenda for early childhood, parents identified three factors that are important for their own wellbeing and achieving better outcomes for their children:

- Learning and being prepared for parenthood.
- Maintaining a good relationship with their partner.
- Having access to information, support and services.

Feedback pointed to the importance of the health of the family unit in supporting child development (Australian Government Task Force on Child Development, Health and Wellbeing 2003). Workers providing input to this study highlighted the need for free child-friendly activities in local areas to support families and child development.

Playgroups make an important contribution to child and family development and wellbeing. Parents report finding playgroups very helpful, offering children play-based learning, socialisation, as well as peer support and positive modeling for parents (Australian Government Task Force on Child Development, Health and Wellbeing 2003).

7.1 Fathers

The importance of fathers in families is becoming more apparent. The way fathers interact with infants offers something 'unique for infant development'[22]. Research has found that fathers interact with infants in a different style to mothers. 'Fathers are more physical and more playful'[23]. Play between fathers and children has been found to contribute to 'increased child social competence'[24] and 'emotional regulation'[25].

Smyth and Weston (2003) suggest that much of what we know about fathers, in areas such as divorce, fertility and caring for children, is based on discussion with mothers. There is a need for more discussion directly with fathers to explore fathers' experience and their role in families. Fathers' involvement is important in supporting families who are experiencing crisis. For example, Elder, *et al*. (1992) and Soloman, *et al*. (1993), found that 'for families considered *at risk* for social and educational problems because of poverty, fathers' involvement may be particularly important' (cited in Roggman, Boyce, Cook and Cook 2002, p 64).

[22] Pruett and Litzenburger 1992; Yogman 1981, both cited in Roggman, Boyce, Cook and Cook 2002, p 64.
[23] Lamb 1977; Lindsay, Mize, and Pettit 1997; Parke 1981; Roopnarine and Mounts 1998, all cited in Roggman *et al*. 2002, p 64.
[24] Pettit, Brown, Mize, & Lindsey 1998, cited in Roggman *et al*. 2002, p 64.
[25] Roberts 1996, cited in Roggman *et al*. 2002, p 64.

8 Information, access, awareness of services

Access to services is receiving increasing attention in discussions about meeting family needs in Australia. Families most in need of assistance or at risk of harm are often the ones who fail to gain access to it (Tomison 2002). In planning consultations undertaken on behalf of GCCC in 2003, family support workers identified access to information about services and support as an issue for families and individuals in Gold Coast City, particularly for those families that have recently moved to the City. Other sources have also identified information about, and access to services as issues for families in Gold Coast City (GCCC 1997; Fraser, *et al*. 2001).

Feedback on the consultation paper for the National Agenda for Early Childhood received from families in 2003 identified that while there is information already available for families, parents and families did not think they could get it when they need it. Parents reported that most of the information available at childbirth focuses on medical aspects of birth and child health, and they want information to help prepare them for the demands of parenthood and the lifestyle and relationship changes associated with having a child. Responses stressed the importance of getting families the right information at the right time in the right way. Parents identified need for information about child development and about services available to them. Parents reported that the most common source of information is word-of-mouth advice from family, friends and professionals. They indicated they would 'prefer to receive up-to-date, consistent, non-biased and easy to understand information through a variety of channels, and available in places they normally go to' (Australian Government Taskforce on Child Development, Health and Wellbeing 2003, p 11).

Childcare services are identified as a likely point to access and provide information to working parents (Fraser, *et al*. 2001). Schools are also a likely point to access many families. The role and the potential role of schools and childcare centres as hubs in communities was raised by a number of workers providing input to this profile. Review of the discussion paper for this project identified the potential for schools to provide family support. It was suggested that schools can be referral and service delivery points, build social networks, encourage parental participation and build the capacity of communities. The resource implications of this are acknowledged in input provided to this project, as well as the need to rethink the role of schools in the community. There are schools in Gold Coast City where work is being undertaken in many of these areas. See also *Section 6.8 Young people, their families and education*.

The Queensland Department of Education (2000) *Queensland State Education 2010* policy presents objectives and strategies relating to schools and their role in community partnerships and social outcomes for students. Some of these are listed below.

- Increase family support and parenting education offered by schools.
- Encourage schools with high proportions of students requiring special support to develop as community hubs or full-service schools.
- Support schools to 'develop as community assets that are centres for learning communities and community development…' (p 19).
- Models that are options for schools are listed below.
    - *Community hubs or full-service schools that, through links to other government and community services provide a focus for community service delivery and community development.*
    - *Vocational education and training clusters where groups of schools collaborate with employers, business and the community to promote school–industry links for the benefit of students undertaking vocational programs and making the transition to work.*

- *Community schools that involve the community in the learning program of the school and utilise community resources for learning.*
- *Schools that develop as centres for lifelong learning and centres for networked learning communities* (Queensland Department of Education 2000, p 19).

Gold Coast School and Communities Families Project (2003-04) has initiated the Schools as Community Centres Project in six primary schools in Gold Coast City. This involves employing a part-time worker in each school to support families, increase awareness of services and help families to access local services.

A number of support workers contributing to this profile identified engaging with families as a challenge for supporting families. This was noted as particularly challenging for families experiencing the most serious crises. Workers reported difficulty finding families who need the most support and in many cases families refuse support. Workers acknowledged the benefit of taking support directly to families rather than expecting families to come to a centre to attend a program. However, it was acknowledged that more resources are required to provide services and support in this way.

8.1.1 Broadening access to services – some recent studies

The Australian Government Taskforce on Child Development, Health and Wellbeing (2003) reports strong support for better access to parenting programs that help parents to improve their skills and knowledge around early learning and care. People who work with families said that these programs should be available to all families, not just those at risk. Most non-government organisations agreed that universal access to health, learning and care services is the best way to reduce stigma and ensure a minimum standard of care for all young children, particularly in disadvantaged areas. Parents reinforced the view that encouraging wider use of programs could help to reduce stigma.

The Taskforce found that in the main, a tiered approach is preferred, involving:

- increasing capacity of universal services to respond to all children;
- targeted programs for children at risk; and
- specific interventions for children and families experiencing problems (ibid).

Crisante (2003), McTaggart and Sanders (2003), Sanders (2003), and Dean, Myors and Evans (2003) report on recent studies that have provided broad community access to parent training. These studies have an early intervention focus, taking parent training beyond responding to families in crisis and making it available more generally to families in the community. The results highlight the benefits of making training and support available to all families and point to some ways in which families' awareness of services and support may be improved.

> *Prevention programs which are conducted with the school as the vehicle for accessing parents will be most effective if they are universal, and hence offer some benefit to all students rather than only those already at risk* (Blechman 1996; Kamps and Tankersley 1996, both cited in McTaggart and Sanders 2003, p2). *The screening of children to determine level of risk and the provision of services to only those who meet the risk criteria stigmatises the services provided and may result in many families missing out on services because their child is not yet showing a clinical level of behaviour problems* (McTaggart and Sanders 2003, p 2).

Crisante (2003) reports on brief behavioural interventions by 13 preschool practitioners with 39 parents in Western Sydney. Preschools and long day care centres are regarded by many parents as an appropriate place to ask for ideas about how to manage challenging behaviour. However, such requests are often seen as requiring complex skills and typically are dealt with by directors of services. Crisante suggests 'this may be due to graduates of early childhood education programs considering themselves to be poorly equipped to deal

with children's problematic behaviours' (2003, p 1). Crisante describes how intervention for primary care practitioners was introduced to the skill repertoire of 20 early childhood practitioners.

Findings suggest the practitioners responded to training in ways that enhanced their contact with parents and 'support the effectiveness of training preschool practitioners in behaviour management techniques to deal with the concerns parents have about the behaviour of their preschool aged children' (Crisante 2003, p8). Parents perceived availability of assistance in the preschool setting as helpful. Directors commented on practitioners intervening early when children misbehaved and believed this resulted in better relationships with parents, as practitioners raised concerns with parents early rather than waiting for behaviour problems to become critical. In common with other parents who do not access specialised parenting help, parents who participated reported difficulties that warranted help. The study highlights the pivotal role of primary care practitioners in 'promoting service accessibility through the provision of relevant services in locations appropriate for parents' (Crisante 2003, p 9).

In a similar study by Sanders, Tully, Turner, Maher and McAuliffe (2003) general practitioners who received training in parent consultation skills reported greater satisfaction with outcomes of their parent consultations and demonstrated improvement in their interaction skills during parent consultations.

McTaggart and Sanders (2003) report on a study evaluating the effectiveness of parent intervention in reducing child behaviour problems in the classroom. The study included 59 year one classes in the Mt Gravatt and Redlands regions in Brisbane. The schools were paired and one school was randomly chosen from each pair to be a control school, and the other an intervention school. A parenting information campaign was provided universally to all parents who had children enrolled in year one at the intervention schools. Group format behavioural family intervention was also made available to parents at the intervention schools. The results support the hypothesis that parent training would result in improved school behaviour. The study supports universal provision of information on parenting and making parent training available to all interested parents. The study also found that a universal offer of parent training in schools is feasible provided the school community is willing to take ownership of the program and commit resources such as teacher time to the program.

Sanders (2003) presents a case for a contextual approach to parenting in the population, including targeting the media, primary care services, schools and worksites as basic institutions in the community that can potentially support the task of disseminating evidence-based approaches to parenting intervention more widely. Sanders argues raising competent, well-adjusted children is a community responsibility and that 'family practitioners need to break away from a traditional delivery paradigm and adopt a far more contextual perspective in understanding and ameliorating parenting and other family difficulties in the community' (Sanders 2003, p14).

A number of service providers in Gold Coast City provide parent training. The Gold Coast School and Community Families Project is working through a number of primary schools in Gold Coast City, training local parents as facilitators for the P5 parent training program (Participatory Program Promoting Pleasurable Parenting). A key objective of this initiative is to make this training more widely available in the community in a sustainable way by skilling up local parents to provide training in their own communities.

8.1.2 Priorities for improving access to and awareness of family support

A number of questions need to be addressed to improve information, awareness and access to family services and support in Gold Coast City:

1. What are the key transition points and stages in child and family development when family service and support could have the most impact?

2. Who is responsible for providing services and support at these points, and on an ongoing basis as families develop?
3. What services and support are currently available at different points, and how is it made available to our whole population of families?
4. What information about child development and family services and support is available and how is it communicated to families? How do we ensure this information is accurate, concise, consistent, up-to–date and getting to families?

These questions are addressed in the following section (8.1.3) and in *Section 10 Ongoing research and planning requirements*.

8.1.3 Identifying critical transition points and stages in child and family development

McTaggart and Sanders argue that if support is targeted at certain transition periods, such as at the time a child starts school, 'motivation of parents may be higher than at a later time' (2003, p 2-3). This section discusses a number of transition points that are identified as opportunities for supporting families.

In Gold Coast City an early intervention program is offered through Community Child Health focusing on supporting families with new babies. This program includes intensive home visiting from child health nurses as well as providing counselling and support for families with new babies identified as at risk of domestic violence and mental health issues. This program is identified as having access to a point of change in a families' life that is very powerful and presents a rare opportunity to work with families. This is supported by feedback on the consultation paper for the National Agenda for Early Childhood.

> *Most of the organisations involved in health service acknowledged that there is a 'window of opportunity' during pregnancy, at birth and the immediate postnatal period. At times like these parents have regular contact with health professionals and are often motivated to learn. …child health nurses…are well positioned to provide holistic care and referrals. In the same way, parents said they found community health services linked to the hospital very useful in offering practical advice for coping with the demands of parenthood.* (Australian Government Taskforce on Child Development, Health and Wellbeing 2003, p5).

Infancy is also identified as an ideal opportunity to 'enhance parental competencies and to reduce risks that may have implications for the lifelong developmental processes of both children and parents' (Holden, Willis & Corcoran 1992, cited in Tomison 2002, p5).

Immunisations are identified as an effective opportunity for providing other support or intervention (Australian Government Taskforce on Child Development, Health and Wellbeing 2003). Playgroups provide help for parents and children (see *Section 7 Child and family development and wellbeing*) as well as opportunities for making information and support available to parents. Similarly, commencement at childcare and early childhood services and preschool presents opportunities for providing parents and children with support and information.

The year before school is identified as extremely important to child development and crucial for working with children who may have difficulty adjusting to the school environment. Preparing for school is about social and emotional readiness, as well as intellectual capacity (Australian Government Taskforce on Child Development, Health and Wellbeing 2003). Commencement of schooling is an important transition for parents and children (McTaggart and Sanders 2003).

Workers contributing to this profile identified the changes from primary school to high school, and then leaving school, as important transitions for young people. They suggested it is particularly important to do early intervention work with students while they are still

in primary school to support them in this time and prevent disengaging from school later on. Development of support for these transitions needs to include consideration of the whole family as well as young people themselves.

9 Developing universal family support

There is strong support for a multi-level, or multi-streamed approach to supporting families that aims to provide universal support to all families and enhance their wellbeing, alongside intensive support for people and families in crisis or in need of particular responses. Throughout this paper there are several references to studies, policies and plans supporting multi-level approaches or broadening support for families (QDLGP 2003; Australian Government Task Force on Child Development, Health and Wellbeing 2003; CMC 2004; Community Affairs References Committee 2004; Crisante 2003; McTaggart and Sanders 2003; Sanders 2003; Dean, *et al.* 2003).

This section explores some of the structural challenges and opportunities relating to supporting families identified through social planning and policy development projects, the current policy context for developing family support in Queensland and priorities for achieving more universal family support in Gold Coast City.

9.1 Structural challenges and opportunities for supporting families

While there are opportunities across agencies presented by shared values and visions, initiatives are not always well related or integrated with each other (QDLGP 2003). In planning consultations undertaken on behalf of GCCC in 2003, family support workers in Gold Coast City reported that strict conditions for funding are leading to a silo effect with services unable to respond to families holistically. Administrative arrangements between the government and non-government sectors affect the implementation of human services and other organised responses to need. The roles of government, business and community sectors and the public are becoming increasingly unclear with 'perceived government moves to further devolve human service delivery to *the community* itself' (QDLGP 2003, p 16). Lack of integration across agencies highlights the need for:

> *…a comprehensive, integrated approach to policy development and implementation for SJ+HS* [social justice and human services] *across all levels of government, in collaboration with community and business partners* (QDLGP 2003, p 9).

The South East Queensland (SEQ) 2021 project has identified a range of policy options for planning for social justice and human services in South East Queensland. The policy options are driven by three elements:

- *improving the coordination and local effectiveness of service delivery;*
- *taking a strengths or resilience-based approach to policy making and program development; and*
- *integrating SJ+HS planning and policy making with land use and transport planning and policymaking* (QDLGP 2003, p 23).

All of the options have common elements that are also relevant to developing universal support for families. These include:

- *A coordinated whole of region approach to SJ+HS policy and program development and delivery, which is backed by political and resource commitments;*
- *Agreed (commonly aligned) regional boundaries, based on the four Sub-Regional Organisations of Councils (ROCs) in SEQ;*
- *A devolution of decision making and funding responsibility to the regional and, subsequently, local levels (devolution of discretionary funds into a central regional pool);*
- *Collective ownership and shared decision-making;*
- *Flexible pool of funds to address local needs as they arise;*
- *Coordinated leadership, led by an enhanced Regional Managers Forum structure (along ROC boundaries);*
- *Enhanced bottom-up involvement in planning, service delivery, and policy advice;*
- *Place/catchment focus (e.g. Place, Local Government Area, Districts); and*

- *Increased resourcing of community and community sector involvement* (QDLGP 2003, p 23).

The 2004 Senate Inquiry into Poverty and Financial Hardship makes a specific recommendation that relates to universal services and support for families:

> Recommendation 43
> *That the Commonwealth, in cooperation with the States and Territories, develop a comprehensive system of community-based early childhood and parenting support for all families* (Community Affairs References Committee 2004, p 267).

This recommendation, from a Commonwealth Senate Inquiry, offers backing to the call for universal support for all families and individuals and the need for a mechanism to deliver on this priority.

A number of agencies and groups in the City are working to provide support to families. This includes universal support that is available to all families, as well as intensive support for families in crisis or in need of particular responses. While some individual agencies are responsible for planning and delivering particular services, improved coordination and planning between service areas is required.

9.2 The Queensland Government Putting Families First Policy Statement

In Queensland, the *Putting Families First* policy statement is the key social policy of the State Government. It was developed collaboratively by State Government departments to provide Queensland with a long-term policy to support development of responses to the needs of children, families and communities and identifies three key outcomes:

- Giving children the best start.
- Valuing and supporting the nurturing role of families.
- Creating safe, supportive communities for families (Queensland Government 2001).

This policy provides a potential mechanism for integrated planning and coordination of services and support for residents and families of Gold Coast City across the agencies and groups currently funding and undertaking this work. Implementation of the policy is the 'shared responsibility of state and local government, the non-government and business sectors, local communities, families and the people of Queensland' (ibid, p18). To support implementation of the policy all State departments are required to identify their specific outcomes and outputs that contribute to achieving the three key outcomes of the policy.

At the local level the Gold Coast Regional Manager's Forum (RMF) has responsibility for developing local initiatives to respond to the needs of families in partnership with families, the community, non-government and business sectors and other levels of government. This forum is also responsible for evaluating local activity in relation to the outcomes of the policy and identifying how services in the City can be more family friendly and supportive (ibid). The need to ensure information from this forum is transferred to operational levels within agencies was highlighted during the review of the discussion paper for this project.

After approximately 18 months of not meeting over 2002 and 2003 the Gold Coast RMF recommenced meeting in December 2003. In May 2004 a range of measures were endorsed by the Queensland Cabinet to strengthen regional engagement and coordination functions across government. These measures include changing the name of the forum to the Regional Managers Coordination Network (RMCN). This name change reflects the enhanced mandate to assist agencies to achieve their outcomes through better regional engagement and coordination. Core objectives of the RMCN are to:

- assist agencies to achieve economic, social and environmental benefits for Queensland regions through coordinating priority cross-agency initiatives at the regional level; and

- ensure that services align with Government priorities and community needs by supporting collaboration across state government agencies, and with local government, business and communities.

Each RMCN will also be required to develop an annual action plan of priority cross-agency activities (unpublished information provided by the Gold Coast Office of Regional Communities Engagement, Queensland Department of Communities June 2004).

10 Ongoing research and planning requirements

A number of questions about further work are raised throughout the profile. These questions are listed here as opportunities for consideration by Council and other agencies and individuals with an interest in supporting families in Gold Coast City.

10.1 Projects and processes

1. Undertake analysis of Gold Coast City's labour market and how it impacts on individual, family and community wellbeing. Labour market analysis could include labour supply and demand across the range of industry and occupation groups and family types, as well as labour mobility, underemployment and job security, demand for childcare outside of standard work hours and how educational institutions in the City can respond to demands of the local employment market.
2. Develop responses to issues relating to housing stress and homelessness among families in Gold Coast City.
3. Undertake analysis of support for families in Gold Coast City leading into an ongoing research and reporting process to identify and describe issues, needs and resources relating to supporting families in the City. This is provided for under Council's Capacity Building Strategic Priority in the 2003-07 Corporate Plan, which includes 'a city-wide mapping project to describe the issues, services, organisations, networks and resources available on and for the Gold Coast' (GCCC 2003b, p 23). This profile identifies a range of questions and issues that could be considered in this analysis:
    - specific analysis of who is currently funding and undertaking prevention, early intervention and more intensive support for people and families in crisis or in need of particular responses;
    - opportunities for data integration or collaborative data management across agencies;
    - informal support networks, family and community wellbeing, exclusion and disadvantage, participation in community life, and the nature and extent of crisis in Gold Coast City; and
    - what information about child development and family services and support is available and how is it communicated to families? How do we ensure this information is accurate, concise, consistent, up-to–date and getting to families?
4. Building from point 3 there is a need to develop an integrated approach to planning, development and delivery of family support – including prevention and early intervention programs and intensive support for families.

10.2 Other considerations and ideas for further research and planning

A range of other considerations and ideas for future work has been identified through the development of this profile. These are listed below.

- Community and family participation, including children's and fathers' participation, in future projects and planning processes.
- Further exploration and analysis of issues and challenges for Indigenous families and culturally and linguistically diverse families.
- Support needs and other issues for children of parents with a mental illness.
- Investigation of need and requirements for venues for playgroups and similar groups that support families, including design venues.
- Monitoring the impact of child safety reforms in Gold Coast City.
- Support needs and other issues for families with members engaged in the justice system.

- Providing support or guidance for evaluations of specific projects and needs assessments.
- Longitudinal studies about families' experience.
- Research that makes a difference to people's lives and builds on existing strengths.
- Review of evidence base for interventions and approaches relating to supporting families, including analysis of the impact of issues on the population to inform development of priorities.
- Improving information provision in relation to family support.

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12 Appendix 1 – Companion demographic profile: families and households in Gold Coast City

The companion demographic profile of families and households in Gold Coast City is available from the social research page on the GCCC website or on request from the social research section.

Contact Social Research:

www.goldcoast.qld.gov.au/socialresearch

socialresearch@goldcoast.qld.gov.au

Tel: 07 5581 6023

Notes