Section 5

Summary and next steps

In this section …

- Summary of findings
- Addressing health inequalities
- Action following on from this report
- Sources of information
Summary of findings

The information presented in the previous section identifies substantial inequalities in the distribution of income, employment and labour force participation and participation in education. These inequalities are evident both in Adelaide and across the rest of the State.

The patterns of variation in the maps and graphs of the indicators of health and wellbeing are also strikingly similar to those shown for social and economic inequalities. The extent of this association between social inequality and health and wellbeing in Adelaide is supported by further analysis.

The most striking associations within Adelaide are between areas characterised by high proportions of low income families, high unemployment rates and relatively high proportions of Indigenous population, and areas where rates of child abuse and neglect and smoking during pregnancy are also high. Notably, these areas also have the lowest rates of participation in schooling at age 16 and low labour force participation. An overview of the results of this additional analysis is shown in Table 4, with the detailed version in the Appendix.

The summary measure of disadvantage, the Index of Relative Socio-Economic Disadvantage (IRSD), is also highly correlated with high rates of child abuse and neglect and smoking during pregnancy.

There is also evidence in the country of an association at the small area level between the indicators of social inequality and the indicators of health and wellbeing; however, the association is weaker than in Adelaide, in part because of the smaller populations in these areas. The most notable associations are between areas characterised by high unemployment rates and high proportions of dwellings without a motor vehicle, and areas where rates of child abuse and neglect and smoking during pregnancy are high. Areas with low rates of participation in schooling at age 16 and areas with relatively high proportions of Indigenous population also have high rates of smoking during pregnancy. An overview of the results of this additional analysis is shown in Table 5, with the detailed version in the Appendix.

### Table 4: Key relationships between indicators for Statistical Local Areas in Adelaide

<table>
<thead>
<tr>
<th>Variable</th>
<th>Low income families</th>
<th>Children in low income families</th>
<th>School participation at age 16</th>
<th>Labour force</th>
<th>Dwellings without a motor vehicle</th>
<th>Indigenous population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offences involving apprehension</td>
<td>S</td>
<td>M</td>
<td>S</td>
<td>S</td>
<td>S</td>
<td>M</td>
</tr>
<tr>
<td>Gambling</td>
<td>W</td>
<td>W</td>
<td>W</td>
<td>W</td>
<td>W</td>
<td>W</td>
</tr>
<tr>
<td>Smoking during pregnancy</td>
<td>S</td>
<td>S</td>
<td>S</td>
<td>M</td>
<td>S</td>
<td>-</td>
</tr>
<tr>
<td>Low birthweight babies</td>
<td>M</td>
<td>M</td>
<td>W</td>
<td>W</td>
<td>W</td>
<td>M</td>
</tr>
<tr>
<td>Child abuse &amp; neglect</td>
<td>S</td>
<td>S</td>
<td>S</td>
<td>S</td>
<td>S</td>
<td>M</td>
</tr>
<tr>
<td>Overweight &amp; obese</td>
<td>W</td>
<td>W</td>
<td>W</td>
<td>-</td>
<td>-</td>
<td>W</td>
</tr>
<tr>
<td>Relative disadvantage (IRSD)</td>
<td>S</td>
<td>S</td>
<td>M</td>
<td>M</td>
<td>S</td>
<td>W</td>
</tr>
</tbody>
</table>

S: Strong association; M: Moderate association; W: Weak association; see Additional Data section of the Appendix

1 IRSD: Index of Relative Socio-Economic Disadvantage; see Notes on the Data section of the Appendix

### Table 5: Key relationships between indicators for Statistical Local Areas in country South Australia

<table>
<thead>
<tr>
<th>Variable</th>
<th>Low income families</th>
<th>Children in low income families</th>
<th>School participation at age 16</th>
<th>Labour force</th>
<th>Dwellings without a motor vehicle</th>
<th>Indigenous population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smoking during pregnancy</td>
<td>-</td>
<td>M</td>
<td>-</td>
<td>W</td>
<td>W</td>
<td>W</td>
</tr>
<tr>
<td>Child abuse &amp; neglect</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>W</td>
<td>W</td>
<td>-</td>
</tr>
<tr>
<td>Overweight &amp; obese</td>
<td>-</td>
<td>-</td>
<td>W</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Relative disadvantage (IRSD)</td>
<td>M</td>
<td>W</td>
<td>M</td>
<td>M</td>
<td>S</td>
<td>M</td>
</tr>
</tbody>
</table>

S: Strong association; M: Moderate association; W: Weak association; see Additional Data section of the Appendix

1 IRSD: Index of Relative Socio-Economic Disadvantage; see Notes on the Data section of the Appendix
Addressing health inequalities

In conclusion, these findings paint a concerning picture of social inequality in this State, particularly for Aboriginal South Australians who are the most disadvantaged citizens in the population. It is a situation that is both avoidable and unfair.

However, it is not an inevitable one. The findings in this report highlight areas where further action is needed and there is much that can be done. There is a growing body of knowledge that can provide direction for developing policies to reduce inequities. The socioeconomic environment is a powerful and potentially modifiable factor and public policy is a key instrument to improve this environment, particularly in areas such as housing, taxation and social security, work environments, urban design, pollution control, educational achievement, and early childhood development (5).

The following four stories are examples of how information about inequalities can underpin the planning and implementing of projects aimed at reducing existing inequities.

1. Housing improvements and health in New Zealand

People who live in overcrowded and poorly heated housing tend to have more respiratory complaints and more admissions to hospital.

Research into housing insulation and health being undertaken in Wellington, New Zealand is benefiting many disadvantaged older people. The research program is working in partnership with community and other organisations to undertake a study of the health benefits of insulated homes (1).

Baseline data collected in the winter of 2002 showed that about 70 per cent of participants taking part in the study reported that their houses were cold, and about 40 per cent said they were cold and damp “mostly” or “always” during the winter months (2).

Information is now being collected about how adding insulation can improve the living conditions and health of elderly people on low incomes for whom heating costs are a large part of a tight budget. The aim is to provide convincing evidence to government of the health and economic benefits of supporting schemes to retrofit insulation into existing homes. Funding and resources for the study have come from the University, the government, the local council, community organisations and private enterprises (2).

2. Educational strategies to increase school retention rates in SA

In South Australia currently, only two thirds of our young people who start year 7 complete year 12. The proportion of Aboriginal young people finishing year 12 is even lower. Some regions – both metropolitan and regional – also have very poor school retention rates.

The SA Government has developed a $28.4 million plan, funded over four years, to help lift the school retention rate back to the level of the early 1990s, when 93 per cent of the State’s secondary students were finishing Year 12 (4). The State average since has dropped to 69.5 per cent.

Futures Connect is an initiative aimed at increasing learning opportunities for students through a collaborative, cross-agency approach to services that assist young people to make the transition from school. It links with and complements the range of other strategies used to enhance the provision of education and care for children from birth through the primary years of schooling (7).

Schools across the state will draw upon the Futures Connect strategy to help young people in mapping options and directions that will assist their transition from adolescence to adulthood. Schools will work with students to ensure that curriculum provision meets their needs and connects them with their community and future aspirations (7).

Futures Connect will result in schools and local service providers joining their resources to provide young people and their families with:
- improved career and transition services;
- more opportunity to learn about and work in their local industries;
- greater access to community support and services for students while at school and beyond; and
- increased education and training choices.

These alternative approaches to education and training also rest on social partnerships involving industry, local community and education providers (3). They depend upon different kinds of relationship building, between students and teachers, between the social partners and between central and local government agencies. These reconfigured relationships are aimed at sustaining innovative learning practices, particularly for those young people and adults ‘at risk’ of social exclusion – those who fall between the cracks of employment, education and training (3).
3. Aboriginal family projects in country areas

There are a number of pilot programs, operating within Aboriginal communities in South Australia, which promote models of good practice. These include the Port Augusta Families project, the Kinship program, and the Murray Bridge Aboriginal Family Team – all funded through the then SA Department of Human Services.

The Port Augusta Aboriginal Families Project is a joint venture undertaken by the South Australian Housing Trust, Family and Youth Services and the Port Augusta Hospital. It is aimed at providing support and care to Aboriginal families who are experiencing many serious challenges and who have been involved with numerous agencies over a long period of time (6). More recently, the Project has begun working in a preventative way with Aboriginal families who have single problems and involvement with one agency.

The Project has proven to be a highly innovative service that has enhanced individual and community wellbeing. Results have shown that, through the project, there has been a very significant and positive impact on children - more are attending school regularly and are in better health (6). The Project has been very successful with a number of other outcomes, namely, the prevention of children entering foster care; increased stability with housing; repayment of debt; reduction of child abuse; discharging of criminal justice orders; and reductions in gambling, drug and alcohol abuse and domestic violence (6).

The Project aims to apply the principles of empowerment, participation and partnership in a creative way that is acceptable to Aboriginal families in Port Augusta (6). Furthermore, a rapidly increasing knowledge base has allowed staff to continue to trial new and creative interventions with increased levels of competence and effectiveness (6).

4. Youth Building Playford program: Creating employment pathways

The Youth Building Playford (YBP) program aims to build self-confidence and self-esteem in disadvantaged young people, through the development of building skills and teamwork, thereby leading to greater employability and motivation.

The program is funded by the Department of Further Education, Employment, Science and Technology - Office of Employment (SA Government). It is a partnership between the City of Playford, Para Worklinks Inc., Regency Institute of Technical and Further Education (TAFE) and Playford Partnership.

The Peachey belt, located around Peachey Road, in Elizabeth West and Davoren Park, is well known as an area that has experienced long term disadvantage. The aim of the program is to focus on young unemployed people living in and around this area, with a target group of 15 to 19 year olds not enrolled at school. Common barriers among young people living in and around the Peachey belt are low levels of literacy and numeracy; lack of skills; lack of transport access; fragmentation in training and employment; and inter-generational unemployment.

The YBP program seeks to address the general barriers highlighted above through mentoring, training, the development of skills, building trust and being involved in building projects, such as the construction of pergolas and paving. An important element of the course is teamwork, as well as training to focus on improving literacy and numeracy. Evidence has shown that this approach helps to build self-confidence and self-worth in the participants, leading to greater employability and motivation.

The purpose of the YBP project is to:

- create pathways for school leavers into the construction industry;
- enable Peachey belt residents to access programs which they would not otherwise access;
- generate employment outcomes for Peachey belt residents; and
- build collaborative relationships between providers in the training and employment industries.

Since the program started in February 2003, 51 individuals have commenced the program. Of these, 9 have commenced full-time pre-vocational courses at TAFE; 14 are attending training to gain a driver's licence (paid for by the program); 13 are employed; and 17 have left the program without completion.

The success of some participants has been inhibited by peripheral problems, such as homelessness, legal problems, drug and alcohol use and illness. This has resulted in some young people experiencing difficulties in completing the course. Comments from such participants include, “How do you expect me to think about getting a job when I don’t even have a place to live?”. Rather than just asking them to leave the program, the YBP training providers respond by continuing to work with these young people, with some moving onto an alternative program, the Job...
Pathways Education and Training program. This has meant that successful completion of the program is more likely to be achieved through the one-on-one support provided to the young people in assisting them to work out many of the peripheral issues in their life with the option of returning to YBP through a more focussed and supportive approach.

The benefits of the program are apparent, with the young people freely commenting at the graduation ceremonies about the journey being a positive and rewarding experience for them. Some young people mentioned that the YBP program was the first time in their life that they had ever completed something. They reportedly found pleasure in being able to stand back and look at what they had built; and there was ‘real ownership’ among them.

For success among young people in training and employment, whether from marginalised or non-marginalised communities, it is important to offer flexibility, support and individualised attention. The experiences of the YBP program provide a good example of how such a model is working to achieve improvements in the lives and future prospects of young people.

Action following on from this report

This report, Inequality in South Australia – key determinants of wellbeing, Volume 1: The Evidence, will be distributed widely to South Australian agencies and communities to assist in the development of an understanding of the extent and impact of social inequalities across the State; and to encourage the direction of greater resources to reduce these inequalities.

A second volume, containing examples of projects and programs that have been successful in addressing social inequality, will be published later in 2004. The projects and programs to be included in this companion volume will be identified through sector specific consultation workshops by an across government advisory group.

The Department of Health and Department for Families and Communities will use these two documents to redirect financial and human resources towards this end.

For further information, those interested should contact:

Chief Policy Officer
Innovation and Development Team
Health Promotion SA
Department of Health
Phone: 08 8226 6329; Fax: 08 8226 6133.

Sources of information

The following resources were used to underpin the information presented in this Section.


