



# SPRC

Social Policy Research Centre

## **EXPERIENCING POVERTY: THE VOICES OF LOW-INCOME AUSTRALIANS**

### **TOWARDS NEW INDICATORS OF DISADVANTAGE PROJECT STAGE I: FOCUS GROUP OUTCOMES**

PETER SAUNDERS AND KELLY SUTHERLAND  
WITH PETER DAVIDSON, ANNE HAMPSHIRE,  
SUSAN KING AND JANET TAYLOR

**Social Policy Research Centre**

Australian Council of Social Service  
Mission Australia  
Brotherhood of St Laurence  
Anglicare (Diocese of Sydney)

March 2006

## Contents

<b>1</b>	<b>Introduction to the Project .....</b>	<b>1</b>
<b>2</b>	<b>Methodology.....</b>	<b>3</b>
<b>3</b>	<b>Focus Group Outcomes.....</b>	<b>7</b>
3.1	Financial Resources .....	7
3.2	Employment.....	9
3.3	Education .....	13
3.4	Health and Health Care.....	16
3.5	Housing.....	19
3.6	Location .....	25
3.7	Transport.....	27
3.8	Social and Civic Engagement .....	27
3.9	Care and Support .....	29
<b>4</b>	<b>Summary of Main Findings.....</b>	<b>34</b>
	<b>Appendix A: Group Coding Scheme and Participant Characteristics.....</b>	<b>40</b>
	<b>Appendix B: Summary Characteristics of Service User Participants .....</b>	<b>41</b>

## 1 Introduction to the Project

The research reported here forms the first stage of a project designed to develop new indicators of disadvantage for Australia in the new millennium. The research is funded by Australian Research Council Linkage project grant LP0560797 and is being conducted at the Social Policy Research Centre with the Australian Council of Social Services (ACOSS), the Brotherhood of St Laurence, Mission Australia and Anglicare, Sydney as Industry Partners.

The research is drawing on the concepts of deprivation and social exclusion to develop indicators that can form the basis of a new approach to the conceptualisation, identification and measurement of poverty. A supplementary goal is to pave the way for a large-scale nationally representative sample of the general population that will gather new information on aspects of deprivation and exclusion and allow the methods developed here to be applied more widely, in ways that can add to the research base and inform policy.

Despite the widespread dissatisfaction with existing poverty research in Australia, little research has been undertaken using either of the two main alternative paradigms: social exclusion and material deprivation. Although the recent Senate Report into *Poverty and Financial Hardship* argued that poverty is ‘fundamentally about a lack of access to the opportunities most people take for granted [including] food, shelter, income, jobs education, health services, childcare, transport and safe places for living and recreation’ (p. 3), and used the term poverty to refer to ‘a concept of deprivation, lack of opportunity to participate fully in society, of social isolation and exclusion’ (p. 3), there is still a gap in conceptual thinking and empirical research.<sup>1</sup>

In filling this gap, this project is addressing the following specific research questions:

- What do Australians in general, and low-income Australians in particular, regard as the essential components of a socially acceptable minimum standard of living and community participation today, for children, adults and households?
- Is there a broad consensus about what constitutes exclusion and deprivation, and if not, are there any systematic differences in the views held by different groups about these issues?
- What is the extent of social exclusion and material deprivation experienced by different groups of financially vulnerable people and what are the main contributing factors?
- What is the relationship between these necessities and the overlapping concepts of social exclusion, deprivation and income (or resource) poverty?
- What insights and policy implications follow from the findings?

---

<sup>1</sup> Senate Community Affairs References Committee (2004), *A Hand Up Not a Hand Out: Renewing the Fight against Poverty: Report on Poverty and Financial Hardship*, The Senate, Parliament House, Canberra.

A major motivation for the design and conduct of the project is to respond to the criticisms that have been levelled at poverty lines for being arbitrary and disconnected from the actual experience of poverty. By building a new approach based on the knowledge and insights of those in poverty, the goal is not to capture only those aspects that define that poverty in the minds of those who experience it, but to give greater credibility to the instruments that are produced by grounding them in the lived experience of poverty.

The centrepiece of the research involves the conduct of two linked surveys that build on and combine the earlier Australian work on deprivation with the more recent international emphasis on the role of agency, relativism and dynamic processes in causing and perpetuating social exclusion, and the development of indicators drawn from public opinion surveys and other expert knowledge.

Stage I involved a series of focus group discussions with clients of selected welfare programs that were designed to investigate, in detail, how people experience and cope with low income, social exclusion and deprivation. These discussions were also aimed at identifying the pathways into exclusion and the barriers (material and attitudinal, external and internal) that prevent excluded people from reintegrating into key economic and social processes.

A smaller number of focus groups with staff working in these agencies provided additional information on the issues identified by services users as well as validating the views expressed by the clients. Both sets of groups were asked about what constitutes disadvantage in contemporary Australia and provided feedback on the usefulness of some of the questions already used in national surveys (e.g. *The Household Expenditure Survey*, HES, and the *Household, Income and Labour Dynamics in Australia*, HILDA) to identify aspects of hardship or financial stress.

Stage II of the research will involve a random national postal survey of around 6,000 adults that will explore community understandings of, and attitudes to different dimensions of social exclusion and deprivation. The survey will be informed by the outputs of Stage I and will be administered on a substantial sub-sample of around 900 welfare agency clients (accessed through the Industry Partners and engaged at the point of service use) in order to assess whether their understandings of exclusion and deprivation differ from those of the general population.

Results from the survey will give a preliminary indication of the extent of deprivation and exclusion in Australia and the instrument can be regarded as a prototype for a full-scale survey of Australian living standards that could be undertaken as part of future research, or by a body like the Australian Bureau of Statistics.<sup>2</sup>

This report summarises the information that was produced from the focus group discussions conducted in Stage I of the project. In describing the findings, every effort has been made to protect the privacy of participants, with each group identified by a number (further details of the composition of each group is provided in [Appendix A](#)). The report indicates where reference is made to comments made in the staff groups, and all instances where the quotations cited emerged from one of the staff focus groups are also identified.

---

<sup>2</sup> Surveys of this type have been undertaken by government agencies in a range of countries, including New Zealand and Britain.

## 2 Methodology

Stage I of the research project was conducted over a 3-month period between May and July 2005. It involved discussions with participants in 13 focus groups throughout New South Wales and Victoria, including:

- 10 groups of service users (agency clients) who were considered to have a high risk of exposure to exclusion and deprivation; and
- 3 groups of service providers (agency staff) working within organisations that provide services to people experiencing disadvantage and deprivation.

Of these 13 groups, the Brotherhood of St Laurence, Mission Australia and Anglicare each contributed 3 client groups and 1 staff group. Mission Australia was also responsible for the pilot focus group (which has been included, as the piloting process did not result in any changes to the approach used in later groups).

Because it was not possible to cover all at-risk client groups, each of the three participating service provider agencies were responsible for selecting appropriate services from which to recruit client participants:

- The three services nominated by the Brotherhood of St Laurence were located across various suburbs on the outskirts of Melbourne. These groups covered public housing tenants, long-term unemployed and sole parents undergoing training.
- Mission Australia chose one service from Sydney and three services from rural/regional NSW. In this case, the four client groups covered homeless adults, unemployed young people, Year 9 Indigenous students and young people in crisis accommodation.
- The services nominated by Anglicare included two from Sydney suburbs and one from the South Coast of NSW, covering new migrants/refugees and emergency relief clients.

For the staff groups, the Brotherhood of St Laurence and Anglicare nominated service level staff from a range of different programs whilst the Mission Australia group covered senior operations level staff from different services across Australia.

A detailed list of the group characteristics, location and the responsible service provider can be found in [Appendix A](#).

### Preliminary Visits

After the identification of the service user groups were finalised, a familiarisation visit was made to each of the services to provide a preliminary understanding of the different services chosen, the type of clients they assist, the location in which the services operate and any potential issues that could arise during the conduct of the focus groups.

This proved to be an especially valuable activity as the feedback received during these preliminary visits assisted with the design of the focus group questions. The preliminary visits also enabled the focus group facilitator to develop a strong rapport with the services and their staff during the early stages of the project, thereby assisting in the efficient conduct of the group discussions.

### **Recruitment of Participants**

The nominated services were responsible for recruiting the participants for the client groups. This involved a deliberately purposive sampling approach, as it was imperative that participants were able to communicate their ideas within a group environment. There was thus no attempt to achieve a representative sample, but rather to include those who were best able to communicate their knowledge through a focus group format.

No other prerequisites for participation were imposed, although budget and time constraints prevented the inclusion of those requiring the assistance of an interpreter. Each of the Partner Investigators was responsible for recruiting staff participants.

There was a total of 98 participants, including 71 agency clients and 27 agency staff. Group size varied from 3 to 10 participants with each discussion running for approximately 1½ hours. All of the client participants received a \$35 voucher to compensate them for their time and any travel and other expenses.

The service client participants were also asked to complete a small questionnaire about their personal characteristics and the information collected is summarised in Appendix B.

Briefly, the data summarised there indicates that almost half (45.1 per cent) of the clients were aged 25 or under, half were single, and although almost two-thirds (64.2 per cent) had year 10 or less schooling, almost two-fifths (39.4 per cent) had some form of qualification or training. In terms of family composition, they were very mixed, with the majority (58.3 per cent) having no children, and almost one-fifth (18.4 per cent) with 4 or more children. Very few (6.1 per cent) were working, almost one-third (31.4 per cent) was unemployed, the same number were studying, and four-fifths had a Centrelink payment as their main source of income.

### **Focus Group Questions**

It was decided to avoid the explicit use of terms such as ‘deprived’, ‘excluded’ or ‘poor’ when recruiting and conducting the focus groups, because it was felt that these terms could be stigmatising in ways that were unlikely to generate an open discussion of the issues. The phrase ‘a decent standard of living’ was thus used because it was seen as a more positive description of the conditions that the participants were missing out on, but aspired to.<sup>3</sup>

---

<sup>3</sup> The phrase a decent standard of living is associated in Australia with the work of Peter Travers and Sue Richardson, whose book *Living Decently. Material Well-Being In Australia* was published by Oxford University Press in 1993.

Participants in each focus group were thus asked to share their knowledge, opinions and experience of two key issues:

1. What constitutes a decent standard of living in Australia today?
2. Who is missing out (or excluded) in these areas, and why is this happening?

The discussions were organised around eight main domains that have been identified as providing the conceptual framework for the project. A similar approach has been used in other national and international studies of the issues being examined here, and these were used to shape the initial discussion. These domains were:

- Housing
- Location
- Health and health care
- Employment
- Education
- Care and support
- Social and civic engagement
- Financial resources

The initial questions used in the Victorian focus groups (which were conducted first) made specific reference to housing, location and health care as prompts. However, after these groups were completed, it was decided to remove all prompts and allow the discussion to flow freely, following the issues and perspectives generated by participants. In practice, this did not appear to affect the issues that were raised, as topics that had been prompted in the earlier groups emerged quickly as a focus of discussion in the later groups. To ensure consistency and comparability, the focus group questions used in the staff groups were the same as those used in the client groups.

These domains have been used to structure this report, although as will become apparent, some changes have been made reflecting the nature of the discussions that are being reported. In particular, a separate section has been included on Transport, since this emerged from the discussions as sufficiently important to warrant its own section. The extended list of domains is still being reviewed and may undergo further changes as the project evolves.

In addition, the participants were asked to comment on the relevance and usefulness of some of the questions that have been used in existing surveys to find out who is missing out, experiencing hardship or living in poverty. Four key questions were selected from the 1998-99 Household Expenditure Survey, HES, covering the necessity and affordability of food, clothing, holidays and financial resources, and participants were asked to comment on how useful these questions were in identifying who is experiencing hardship or disadvantage. They were also invited to provide any further suggestions of questions they thought could be useful as a way of finding out whether or not people are disadvantaged. The responses to these particular issues are

being used to develop the research instruments that are being developed as Stage II of the project and are not discussed further here.

This report focuses primarily on the views expressed by service users, which in most cases were reinforced by the views held by the service providers. It is important to note that the use of the term 'participants' throughout this report refers to the insights generated by both client and staff participants. In situations where either clients or staff presented differing viewpoints, the phrases 'client participants' or 'staff participants' have been used, as appropriate.

### **Group Coding Scheme**

Each focus group has been assigned a group identification number and each of the included quotes has been assigned a number using this coding scheme. Groups 1-10 comprised client participants and groups 11-13 comprised the staff participants. A detailed list of the group number, characteristics, location and the responsible service provider can be found in [Appendix A](#).



### 3 Focus Group Outcomes

#### 3.1 Financial Resources

A continual theme throughout the focus group discussions was the impact that inadequate financial resources, or shortage of money, had on obtaining a decent standard of living. Many felt that a lack of financial resources reduced their choices and opportunities in life and led to a range of interconnecting problems including poor housing, limited access to health services, lower levels of nutrition, reduced social participation, poorer educational outcomes and reduced employment opportunities. Money was always at the forefront of people's minds, as they juggled what they had to try and make it cover what they needed.

“Everything comes down to money...everything costs” – Group 5

“Everything is so expensive, like meat, meat is so expensive and I live by myself and I have to pay child support and buy nappies and food for my daughter when I see her. I get money taken out from my Newstart Allowance, now they're talking about putting me on Austudy which is less and I still have to support my daughter and pay my rent, and my bills – it's impossible” – Group 4

“We barely survive week to week at the moment let alone having anything left over” – Group 10

“It's very hard to go out and meet new friends, it's close to impossible 'cause you just can't afford to do things” – Group 3

Related to the lack of money was the issue of affordability, which along with accessibility emerged from all groups as a recurrent issue across all areas. Both were constant themes in relation to housing, health care and participation, although a number of groups also emphasised the importance of accessibility to other services and the crucial role that transport and social networks play in allowing people to access what is available.

It was also clear that limited financial resources meant that many people had to make difficult choices between items that were seen as essential for a decent life, because their money would not cover basic necessities. For some this meant missing out on food (see Section 3.4) and for others it involved missing out on decent housing (see Section 3.5) or being unable to pay the bills.

“I think every one of us in here has forgone, usually it's food we forgo – it's the easiest thing to do because we must all pay the rent, that is our first priority, then of course we have to pay the bills like electricity, gas or phone and if we have water, that sort of thing, we must pay that and usually us, ourselves is the last important thing we have to pay for” – Group 3

“That's an issue for me at the moment. I mean I'm living in a dump because I can't afford the rent, my daughter and I are sharing a bedroom, it's a one bedroom place because on the Newstart [Allowance] I cannot afford to pay [more] rent” – Group 4

“Social security income, it doesn’t get you through when you pay your bills and buy food and all that like bus fares. I live in [suburb] and I’ve gotta come in [to town] everyday and that’s \$6 a day, and that’s a concession, like \$3 one way and \$3 back, \$6 a day and sometimes I’ve gotta scale the trains ‘cause I don’t have it and social security says well you get the money you’re supposed to budget it. How can you budget it? Like I’m on methadone, I’m up at the free clinic, luckily, and it’s hard being at the free clinic and paying \$6 a day coming in each day, it’s hard” – Group 10

“I think the problem with welfare is it doesn’t stretch enough and then if something goes wrong it sends you reeling right back so there isn’t any margin for you to try and put anything away, you’re just barely making ends meet...well your fridge breaks down, then you can’t pay one of your bills, or three or four of your bills, to replace your fridge because you can’t live without your fridge” – Group 4

Many of the participants had financial resources that were often stretched to the limit, but some still felt that home and contents insurance was important in maintaining an adequate standard of living.

“The problem is that if you don’t have that insurance, in the position we are all in, if you get your stuff stolen then you know you’re stuffed – you don’t have any way of replacing things.” – Group 3

Participants identified a number of issues that caused people to miss out on appropriate financial resources, with poor education considered one of the most significant. This was seen to have a flow-on effect to poor employment options or outcomes (see Section 3.3).

“It [education] is vital because if you’ve been at home looking after the kids for so many years it’s impossible to get a job, which means you have to stay on welfare – which is never enough and it just continues the cycle” – Group 4

Both client and staff participants also felt that many low-income people were prevented from accessing appropriate financial resources because of the structure and administration of social security payments.

“And too, this is the thing that I don’t understand with social security, if you’re on Newstart [Allowance] and you’re looking for work, you get a certain amount of money plus rental assistance; if you want to study, Austudy is minus the rental assistance. It doesn’t make sense to me because you’re still paying rent [but] they reduce your pay, they take away your rental assistance and it doesn’t make any sense” – Group 4

“Youth Allowance, it’s really interesting...it gives them, in some cases, half of what you would get on Newstart to pay rent that an adult would pay, to buy food that an adult would buy, to pay for

travel that an adult would pay for - to do all this stuff that adults do but because you're under 21 and under 25 if you're in education, you get this lower amount of money so I've always kind of been fascinated that young people get such pissy amounts of income support" – Staff Group 11

The reliability of income was another issue raised by staff participants:

"...If they go off Centrelink [payments] and then report [cancel their Centrelink payments] and then get sacked, then get back onto Centrelink, there's gaps of weeks in between where they haven't got any money and there's no money coming in" – Staff Group 13

Despite the importance of financial resources, one of the staff participants felt this should not be the only focal point of the focus group discussions, because improved access to financial resources or an increase in money may not necessarily have a flow-on effect to one's standard of living. This view reinforced the notion that poverty is multi-dimensional and extends beyond the parameters of income and income-related measures. This is exemplified in the following quote but is also highlighted as a constant theme throughout later sections.

"The reality is that there are three basic things that every creature needs: shelter, food and of course as humans, clothing...therefore those three things must be there and then beyond that what we're all discussing really is social satisfaction ...they are very abstract, how one is going to be happy. It doesn't matter how much money we put in, the money is relative" – Staff Group 11

### **3.2 Employment**

Closely related to financial resources was the importance of employment for a decent standard of living. Whilst all groups saw employment as a key pathway to adequate financial resources, many agreed that decent employment was also about having job satisfaction, choice and opportunity. Some also felt that employment was key for a decent standard of living as it encouraged a sense of self-esteem and self worth, but problems attributed to poor motivation were seen as preventing people from accessing decent employment, especially older workers trying to re-enter the workforce. Staff participants also felt that inappropriate role modeling was a further problem that discouraged some from entering the workforce, especially those from multi-generational unemployed families.

"Well, I didn't work till I started working last year in May. I did, you know, part-time work here and there when I was younger, but I had five children so I wasn't working. But now I'm working, I feel like I'm me again rather than just a mum or a wife. I'm myself again and it's not really anything to do with putting anything into the community, it was actually for myself, to make myself feel like I'm a person again not just a mum – I'm not putting being a mum down at all...well I mean, money's great, but it was more for my self-esteem because it's a step towards where I wanna be, 'cause I wanna do aged care eventually but it was proving to myself that I can actually still get a job now and do it" – Group 2

“A job that you want to be in not ‘cause you have to take it...sometimes you do just have to take a job that’s come along. I mean shoot, you get up in the morning and you go to work and you don’t wanna do this and you think ‘Oh God why am I in this’ but there’s nothing else out there” – Group 10

“We’re talking about a good decent life. Now if you hate getting up every morning, going to the factory and putting lids on jars and you absolutely hate it so it’s affecting your mental health – the way you feel about yourself – you’re not leading a decent life...” – Staff Group 12

“Oh yeah, your self esteem, if you have none, it’s very hard to get started and you are starting from the bottom at 42. You hope you can cut the pace, but I don’t want to sit at home with two children either for the rest of my life” – Group 1

However for some it was considered most important for decent employment to provide access to adequate financial resources, as low wages and limited choice and opportunity meant that many low-income people faced huge disincentives when transferring from welfare benefits to employment.

“And your rent goes up if you’re with the Ministry [government housing], you lose your health care card, you can’t afford to get sick ... you lose everything so at the end of the week you’re not even better off!” – Group 3

Job availability and accessibility emerged as two of the most significant problems that prevented people from obtaining decent employment. A range of issues was identified, with poor education seen as one of the most significant problems, particularly for young people, new migrants/refugees and older workers. Moreover, the high costs associated with registration and retraining had prevented many of the client participants from overcoming the problems attributed to poor education.

Problems associated with poor education were especially relevant for many of the younger participants who felt they had missed out on employment opportunities because the education system did not offer what they described as *‘life skills’* – opportunities to gain useful and practical information and knowledge that could be applied in a ‘real world’ setting. Poor life skills had proven to be an especially problematic barrier for accessing employment, as both client and staff participants felt that the schooling system did not equip young people with the appropriate knowledge, skills and experience to survive in the workforce and secure stable employment.

“It really needs to start in the schools. They need to start showing you how to survive in a workplace and how to actually get into a workplace successfully” – Group 5

“See one of the biggest problems they’re finding at the moment with students is once they leave high school they’ve got no skills, they go through high school, they do everything, they all go through year 12 and they’ve got no skills...” – Group 5

Some of the young participants acknowledged the fact that the schooling system did offer work experience, but many felt these opportunities were extremely limited and could not provide the appropriate life skills, knowledge or experience to enhance the employment prospects of young people. The following brief interchange between participants in one group highlights the inadequacy of current work experience arrangements:

“They’ve got the work experience thing but it’s just a waste of time because the employers see that as a way of getting someone to do their chores for nothing. Not only that, but it’s not actually showing you anything about the workforce”.

“Yeah and most places where you get work experience, it’s like you make coffees for them and that’s all, they get you to do errands and stuff”.

“And also the range of places that offer work experience nowadays is really very little” – Interchange from Group 5

However, some of the older workers and new migrants/refugees who actually had appropriate qualifications and professional training continued to miss out on decent employment prospects because their educational attainments were not recognised by employers. Whether this was because of non-compliance with Commonwealth Industry Standards or other reasons, it was clear that many had to be re-educated. For the new migrants/refugees, poor English literacy was an additional problem that limited access to decent employment and pushed many into re-training.

“To get a job you’ve got to have language and qualifications...but Australia only gives 500 hours of English training to new migrants and that’s not enough, especially for those who are illiterate or semi-literate in their own language...and migrants who are professionals, their qualifications aren’t recognised in Australia so they have to retrain...I had a friend that had to retrain for six years before they could practise as a doctor” – Group 8

Health-related problems were also seen as a major problem that caused people to miss out on decent employment. In some cases those experiencing health problems reported being either subjected to unacceptable employment conditions, or forced to retrain in order to access alternative employment opportunities.

“It’s also like a friend of mine, he’s a really severe asthmatic and like a lot of jobs that he’s actually skilled for around here he can’t work in ‘cause there’s too much dust and that and it stuffs him badly. He misses too much work and all that” – Group 5

“Well I’m a copper chef by trade which is a year 2 chef, but ‘cause of the disability I have I dare not go back there because my body will just not tolerate it. I need, I want retraining, I will never work full-time again because my body is just different to what it was, and education is very important ‘cause if you’re uneducated, or

inexperienced it's another big thing that you can't get a job" – Group 3

Employment that is stable, secure and safe was considered ideal as this was seen to provide an ongoing income as opposed to casual employment, which was seen to provide an insecure and inconsistent income. Some of the older participants with families also felt that work flexibility was an equally important component of a decent standard of living. Many of the participants felt that they had been prevented from having stable, secure and safe employment because of job insecurity and poor employment conditions associated with casual and part-time employment (particularly for women), split shifts and minimum wage (particularly for young people). A small number of staff participants also felt that the current drought in rural areas had facilitated job instability for many.

Location was another influential factor that caused many people to miss out on appropriate employment opportunities and consequently miss out on a decent standard of living. In particular, problems with the affordability of accommodation and lack of adequate transport prevented people from living in, or close to, locations with appropriate job opportunities and thus made it harder for them to gain access to employment.

"If you have to work at night time or if you have to work at the weekends well public transport is rather limited...especially at night. For a woman it's very hard, but unfortunately if you live in the country it's non-existent" – Group 3

"The distribution of job types is very limited and makes people relocate frequently..." – Staff Group 12

Discrimination was another major problem that was especially relevant for young people, those with mental health problems, people living in remote or isolated areas, or those with a criminal record. Some felt that they had also experienced discrimination based on their physical appearance and how they dressed.

Other issues that were seen to further exacerbate the problems associated with employment accessibility were the recruitment process and advancing technology, which has led to the computerisation of many jobs.

"It's like the steel works, years ago there was thousands and thousands of people, now there's only a short amount 'cause it's computerised, I mean how are you supposed to compete with that?" – Group 10

Finally, for some it was a multitude of many interconnecting factors that caused them to miss out on decent employment and consequently be excluded from a decent standard of living.

"For instance I can only speak for myself, I'm 48 years old, I have nothing, no car, no qualifications, no recent experience of any work and I have a slight disability...I'm not on disability benefits because I'm not disabled enough, so I have to be on the dole [and] a lot of employers don't want to know you, a heck of a lot don't, and the ones that do – where are they?" – Group 3

### 3.3 Education

Throughout the discussions, it was made clear that education was essential for a decent standard of living and that many felt a poor education was the underlying cause of their poverty and one of the key reasons that many were unable to access decent employment, housing and health care. Many participants (especially staff) felt that poor education was a key indicator of exclusion, and one of the most significant barriers limiting the choices and opportunities available to many.

“...What I find more and more is that like above housing, above food, above all those other basic needs, education stands...education has been far more important as a tool for advancing in life...” – Staff Group 13

Participants defined education in a variety of different ways, with some focusing on the importance of a formal or vocational education, and others on the importance of an informal education. In terms of a formal or vocational education, participants suggested that basic reading, writing and mathematical skills were important, with at least a year 10 qualification but ideally a year 12 certificate.

“There’s a lot of kids slipping through the net that don’t know how to read and write these days” – Group 10

Access to technology such as a computer and the Internet were seen as important for a decent education, especially for young people in the schooling system and new migrants/refugees – many of whom had limited experience using computers. Poor computer-related capacity and literacy were therefore significant issues, particularly for the older and new migrant/refugee participants who had little understanding of this technology. The overall costs associated with purchasing a computer and accessing the Internet were also considered too expensive by many and were seen as causing many to miss out on a decent education.

“The Australian education system requires people to have access to a computer and the Internet but this is difficult for many migrants who can’t use a computer and are not used to the technology...and the costs of purchasing a computer and accessing the Internet are too expensive and...those that can’t afford it get left behind” – Group 8

Within the schooling system, support structures that are both available and accessible were seen as essential for a decent standard of living. In particular, participants felt that career guidance and counselling were critical for providing an important stepping-stone towards the improved employment prospects and the overall career direction of many young people.

“...They should have like mentoring or coaching sessions where they can, where kids sort of know what fields to pick ‘cause it’s very daunting they don’t know what [to do], they’re leaving school then they’re facing the real world” – Group 10

“And like they do have career advisors at school but you go into school, you’re never going to see a career advisor, they should make it mandatory to see a career advisor” – Group 5

Another key component of vocational education was access to traineeships and apprenticeships. This was seen as a gateway to improved employment prospects and greater access to money, as well as providing a critical pathway out of poverty, especially for young adults and older people trying to re-enter the workforce.

“I think more apprenticeships should be available because that gives people training, plus they work and earn a wage at the same time...you get the best of both worlds – you’re working and you’re studying which is good” – Group 1

“There’s not enough jobs and there’s not enough people out there having traineeships and stuff like that” – Group 10

A range of problems were seen to prevent people from obtaining a decent education, with the costs incurred for accessing a formal or vocational education seen as one of the most significant problems. Some participants also felt that private schools provided a better education than public schools, but many felt that their children had been excluded from receiving a decent education because of the high costs associated with a private education.

“...It’s an expensive industry and it will exclude people who can’t afford the expense of that industry” – Staff Group 12

“I am trying to get into a course and so far it’s \$150. Hello! Where am I going to find 150 bucks?” – Group 4

“Cause it costs money to send your children to a private school and if you don’t have the money therefore your child misses out on that education that they need” – Group 1

Participants identified a range of problems linked to the schooling system that prevented people from having access to a decent education. In particular, participants felt that teacher competency could be a significant problem because teachers can affect the development, motivation and success of children within the schooling system. Some participants also felt that the large class sizes had further exacerbated the problems associated with poor teaching.

“It’s the teachers as well I think, ‘cause you have these teachers that are really good and they’re like really into it and everybody loves them ‘cause they’re awesome and then you have these teachers that are just really bitter...I had this one teacher...and he was awful, I had him in Year 7 for Maths...and I had him for PE the next year and he hated me – for no reason...he was just really nasty...so I stopped going to PE and it went from me stopping going to PE to me stopping going to school on that day, to me not going to school on the other days in case I ran into him in the hallways – and I just stopped going altogether” – Group 5

“If you’ve got a good teacher you’ve got a good student” – Group 10



“You find that teachers do not have enough time these days ‘cause there’s too many students in one class, they’re pushed to their maximum limit and they just don’t have time” – Group 10

One girl also felt that that the religious prejudices and affiliations of both teachers and schools prevented many young people from accessing appropriate knowledge and information related to sexual health, and had consequently caused them to miss out on a decent education thus highlighting the interconnectedness between poor sexual health and the provision of health related information within the schooling system.

“It depends on the way the teachers think as well; like the Catholic schools, I went to a Catholic school and they don’t believe in using condoms or anything and so they didn’t teach us about it” – Group 5

In addition, the new migrants/refugees were seen to face a host of additional problems within the Australian educational system, many of which were attributed to poor English skills and significant cultural differences. For many, not having the qualifications or assumed knowledge for certain subjects such as maths, had proven difficult and were seen as contributing to them dropping out of the system. Cultural misunderstandings and an overall ignorance of the diverse needs of new migrant/refugee students were seen to further prevent many from accessing a decent education.

“Parents should have primary responsibility for bringing up children but teachers also have an important role in educating students, but within the Australia education system there is a lack of cultural understanding and tolerance of the needs of migrant students by teachers” – Group 8

At a more general level, location was seen to have a significant impact on education in terms of access to transport, and safety.

“...The only way you can get to [the local high school] is by either car or bus – unless you want to walk through bush...it’s just terrible” – Group 5

“Like the school you go to and the area it’s in has a huge impact because it depends on the other children that go there...I used to go to [local] high and...it really has got some terrible kids that go there and they made my life hell, like it was really awful” – Group 5

As mentioned earlier, education was defined in a variety of ways, with an informal education seen by some, particularly the staff participants, as equally important as formal or vocational education. In particular, many felt that a decent education was about developing appropriate life skills such as basic cooking, cleaning, hygiene and budgeting skills. Well-developed communication and social skills and the ability to reason, make decisions and articulate those choices were equally important.

“I think that there should be more life skills taught at school to prepare kids for going out into the world ‘cause number one, if they’re not getting it at home they need to get it somewhere and if they’re from dysfunctional homes the chances are they’re not

getting it from home ‘cause the parents don’t have the time or don’t have the inclination to sit down – that’s the problem with people” – Staff Group 13

Both client and staff participants felt that the most significant problem causing people to miss out on decent life skills and a decent education was the fact that kids were not being taught appropriate life skills at a young age, in either the schooling system or at home within the family unit.

“...As a young person, we’re educated from home to shower daily, we’re educated to go to the shop with mum and check out how she buys food, we’re educated how to eat with a knife and fork, all that really basic stuff happens in the family” – Staff Group 13

### **3.4 Health and Health Care**

Affordable health care was a key issue that emerged from all groups, with access to free or subsidised services, such as bulkbilling and a health care card, considered essential for people on low-income. Many participants reported that the high costs of prescriptions and medication were a significant problem whilst others felt that the costs of rehabilitative and specialist services, such as drug and alcohol programmes had caused many people to miss out on acquiring and maintaining a decent standard of health.

One of the client groups also felt that the high costs of private health insurance had excluded many low-income people and therefore caused them to miss out on decent health care, particularly when faced with a health-related emergency requiring hospital care.

“It makes you feel like less of a person if you don’t have [health] insurance...but it’s a catch 22 situation where you can’t afford to spare the money to pay the insurance but you can’t afford not to have the insurance in case something goes wrong, but then if you pay that money and nothing goes wrong then you’ve had to go without that fifty bucks a fortnight that you could have otherwise spent on food” –Group 9

“Yeah ‘cause they don’t bulk bill in the country so if you’ve got the money to go to a doctor yeah you’re cheering, but if you don’t you’ve got to wait until you have the money” – Group 5

“My son had epilepsy, he’s grown out of it thank God for that, but I just thought to myself thank God I’ve got my health care card to pay for his medication, I would have been absolutely stuffed if I didn’t have that card” – Group 4

“I’d say that there would be kids that most probably miss out on their medication ‘cause their parents wouldn’t be able to buy it” – Group 10

“I’m a big believer that everyone should be entitled to the same type of health regardless of their financial situation” – Staff Group 13

Another area where there was strong agreement about the inadequacy of current arrangements was in relation to the cost of dental treatment. Many participants reported that they had had to forego major dental work because they could not afford it, while others had waited for years to access affordable dental treatment. As several people mentioned, poor dental health can have flow-on effects in other areas, for example by making it harder for those with bad teeth to compete for jobs.

“I mean it causes so many problems having bad teeth and stuff and it is treated something like, treated as a luxury. I’m sorry but dentistry in a first world country is not a luxury – it’s a necessity...”  
– Group 3

“I’m on the waiting list so I’ll probably be that old when I get my teeth done I won’t have any left” – Group 3

“And health impacts on employment...people will have bad dental health, often their teeth are in such a state they won’t access training, they won’t access employment so it has this roll-on effect to all the other areas of their life” – Staff Group 12

The availability of a range of services including hospital, mental health, optometry, physiotherapy and other specialist services was another key theme that emerged from the discussions. Many felt that long waiting lists were a major problem that prevented people from accessing decent health care, whilst others felt that the criteria to access health care services, particularly mental health services, had proven equally problematic. The lack of available services, particularly in rural and remote areas, was identified as another problem and both client and staff participants felt that this was the direct result of under-resourcing and limited funding within the public health care system.

“I couldn’t get in, it was just waiting rooms and they were turning people away because there were just too many people waiting to see the doctor – the place was just packed” – Group 1

“If you don’t fit the criteria you don’t get any help...” – Group 2

“I know a lot of the services that help to rehabilitate people that are on drugs and alcohol are not available, the waiting lists are so long and the money is being withdrawn out of it” – Group 4

“I think under-resourcing in the health system means that a lot of people are not getting adequate service, particularly people who are either homeless or living in a very disadvantaged situation...” – Staff Group 13

Access to information was also identified as another important factor for decent health and there was a consensus amongst participants that all patients (especially those with a mental illness) should be properly informed at all times and able to understand and interrelate with health care professionals and doctors. In addition, the younger participants felt that information about sexual health was important and suggested that this type of information should be readily available, especially within schools.

“Also the doctors, like the doctors have gotta be accountable for telling people the truth” – Group 10

“That’s a big issue, ‘cause I was never given very much information on that kind of stuff, like especially to do with sexual health and all that and I got an SMS from a person I had been sleeping with saying ‘I’ve got an STD you should go get tested’ and I didn’t know where to go to get tested, I had no idea, it’s like ‘what do I do, where do I go?’” – Group 5

“When I describe my symptoms as to what’s going on for me, I want that to be understood and then for the answer that’s given back to me, for me to be able to understand that as well” – Staff Group 13

“...If you’ve sort of got a mental illness as opposed to being without a mental illness it’s just so much harder to make choices you know...” – Staff Group 13

Finally, many of the staff participants also felt that it was important to have compassionate, caring and personal services that are both suitable and appropriate for the specific needs of the individual client.

“It’s also having staff at hospitals that are educated about clients’ needs. For instance a lot of my clients are Muslim women and they would be very frightened about having a male doctor” – Staff Group 11

It was acknowledged that health was about more than just the adequacy and accessibility of health services. Participants also felt that *nutritious and healthy food* was key to a decent standard of living with clean water, fresh fruit and vegetables, meat and dairy considered essential. For some, food that is low in fat, low in cholesterol and low in salt was equally important. The affordability of food was one of the most significant issues that caused people to miss out on a nutritional diet and hence decent health. Some of the staff participants suggested that poor budgeting skills could also be a major problem for some people.

“Everyone’s entitled to have a decent meal, it’s a right and if you don’t it affects you in so many ways, mentally, physically and obviously if you’re not having your meals you are disadvantaged to everybody else” – Group 2

“I feel lack of food is one of the highest priorities if not the highest priority that people need to sustain daily living...” – Staff Group 13

“...There’s no budgeting, there’s no planning, they run out of money and so they don’t actually have the concept of food as the most important...” – Staff Group 13

In addition, staff participants suggested that a lack of appropriate cooking skills was considered problematic for accessing decent food and nutrition, while conflicting knowledge and information had made it difficult for many of the client participants to

determine those food items that were decent and nutritious. Other reported problems included the accessibility of takeaway foods and the marketing of junk food products and the lack of adequate resourcing of welfare agencies.

“I thought I was doing the right thing by giving my kids red meat and three veg. and now I’m told that’s not good for them and that I shouldn’t give them meat every night so now I’ve gotta buy them fish fingers” – Group 9

“As well, like with the agencies you know sometimes when you go to agencies you go there and you really need the food and they turn their back [they turn] you away and it’s a bit hard when you’ve got kids and your kids are saying ‘I’m hungry, I’m hungry’ and you go to an agency [and] they can’t help ya” – Group 10

Participants also felt that *adequate and appropriate clothing* was important for a decent standard of living as this could have a significant impact on many other areas including health, employment and education. Clothing that was appropriate and affordable was considered essential by many participants who, in some cases, could not even afford second hand clothing. Clothing that was seasonal, specifically warm in winter was important, especially for those participants from rural NSW and Melbourne.

“I can’t even afford second hand ones [clothes]” – Group 3

“I’ve got no money at the moment right, so I can’t go and afford to buy brand new clothes so I’ve gotta rely on op shops or hand me downs or whatever you call them” – Group 2

“Like winter for example in Melbourne is absolutely freezing and if you don’t have a good jacket and you are out in the elements everyday” – Staff Group 11

Clothing that is presentable and work-appropriate was important for the adult participants, whilst clothing that is appropriate for school and reflective of the individual’s needs, personality and choices was seen to be essential for many of the young participants.

“Well that’s depending on your training but it’s suitable in a personal sense, what you’re not going to feel horrible wearing, what’s good for the type of employment you’re looking for, safety is very important” –Group 3

### **3.5 Housing**

Available and accessible housing was considered essential for many and the affordability of securing decent accommodation was seen as one of the most significant issues that caused people to miss out on a decent standard of living. The high costs of rental properties forced many to make difficult choices between poor housing conditions, or paying large sums on rent and consequently having to miss out in other areas of their lives.

For many of the young participants, the costs incurred in securing housing, such as bond money and moving costs was a significant issue. Some of the client participants also described high living expenses and inadequate budgeting skills as important factors that caused people to miss out on decent housing. One participant suggested that home ownership was important for a decent life, but felt that many low-income people were excluded from owning their own homes because they would be unable to meet the mortgage repayments.

“I think the most important part we need is low-cost rent...I’m on the dole and most of my dole is taken up with the rent and affordability is crucial ‘cause if you haven’t got enough money to buy food, like I haven’t, and pay the bills like gas, electricity, phone, water etc then life is hard as it is. I mean a lot of people go without” – Group 3

“Yeah there’s plenty of homes to rent, I’m talking about the affordability, I mean we get a lot of people in the week, people who are going to be evicted because they can’t afford to pay the rent” – Staff Group 13

Poor housing conditions was another common theme across the groups and an area where participants felt they were missing out on a decent standard of living. For most of the service users, their expectations of decent housing conditions were relatively modest, suggesting that clean, well-maintained and weatherproof accommodation would be more than suitable. Many also felt that decent housing conditions involved having accommodation that was appropriately equipped with basic cooking, washing and bedroom facilities such as a stove, fridge, washing machine, sofa and bed, but some participants reported that they had been deprived of even these basic necessities.

“Yeah you know just basically a clean well-kept, well-maintained place. I mean it’s fine being offered a place but if the toilet leaks or the roof leaks above your bed and all of this, I mean what kind of standard of living is that?” – Group 1

“I’ve got mushrooms growing in the bathroom, that’s been happening for 6 months, which I have to go in there everyday and make sure they’re not growing – the house is falling down around me and people wonder why I don’t want them to come to my house [it’s] ‘cause I’m embarrassed by it” – Group 2

“I’m fed up...of getting cold at night ‘cause there’s like a cold draft coming in from underneath the door, you know a gap that shouldn’t be there or part of a wall that moved, and you can feel that cold if you’ve got arthritis or something, you know you feel it” – Group 2

Another area where there was strong agreement about the inadequacy of current arrangements was in relation to the limited housing options facing many low-income people. This was an especially significant issue for people with health-related issues such as drug addiction and disability. Inappropriately sized housing was equally problematic for large families who continuously struggled to find housing options that offered enough space for both themselves and their children.

“I’ve got a friend that’s a sole parent and she’s got a son, he’s severely disabled and the thing is, with renting in [suburb], she had to get the cheapest place, it’s just a pokey three bedroom... she’s got no facilities there, she got the bond assistance which was great but then the DHC [Department of Housing and Construction] ... didn’t actually provide her with any help in the home, any bars or anything to help lift him...just even to get a wheelchair, and he needs a wheelchair, but they can’t even get it up the hallway it’s that small...” – Group 4

“I have five children in one room” – Group 9

“I’ve got a large family and I’m stuck in a three bedroom Ministry [House] and some of my boys have got to sleep in the lounge room on mattresses because we haven’t got the room” – Group 2

“...I mean to actually get someone into a Department of Housing property with a large family, say eight children, is extremely difficult” – Staff Group 12

There was agreement within several groups that the overall management and administration of public housing was a major issue and a significant barrier that caused people to miss out on decent housing. Problems consistently identified by participants included lengthy waiting lists to access public housing, substandard and poorly maintained housing, and inadequate investment in and funding for, public housing properties.

Participants felt particularly strongly that the criteria used to access public housing had caused people to miss out on a decent standard of living. This was especially relevant for one participant who was part of a same sex family, but because her family unit didn’t match the traditional concept of a ‘nuclear family’ she had been unsuccessful in accessing public housing and forced to secure a more expensive housing option within the private rental market.

“My issue with government housing is that my partner and I have applied to get housing and she’s been on the list for 10 years and still nothing, and we’re not recognised as partners ... I’m a single person and she’s a single person with a child and that’s how it works!” – Group 4

Problems with accessibility criteria were also experienced by one of the participants who had been trying to gain access to priority housing.

“Yeah, you have to get all these letters, like in my case because I’ve been very ill, you have to go to your doctors, you have to get all these assessments done from your doctor and you send it into the Housing Commission and if they don’t agree with everything on that then you’ve gotta get more documentation and they’re just really like ‘oh well’ and as you said what is priority? I was supposed to be in a place for 8 weeks after and I’m still not in it and that’s nearly 2 years ago!” – Group 10

Closely related to accessibility, was the problem of public housing allocation processes. Overall participants felt that public housing properties were not being allocated appropriately, suggesting that the allocation of public housing was inappropriate because individual housing requirements relating to size and health needs such as disability were frequently ignored. Other needs associated with location, specifically access to transport and support networks, had also been neglected during the allocation process.

“It’s not fair, it’s one of the things the government should be able to do is get all these places that they’ve got empty and give it to the people that need it...” – Group 2

“...The Department of Housing really needs educating, ‘cause I went there recently to try and get help with a place, they wanted to send me back to Sydney in an environment I just didn’t want to go back into...they didn’t care about the fact that my support networks [are] up here...” – Group 5

“Well you don’t put someone who is a recovering addict in a high rise at [inner Sydney suburb], that in my mind you are not helping them to maintain a clean and sober life...I got offered a place in [suburb] and I got methadone all around me and I was on it for the last 12 years and I don’t need to be there, but to me it doesn’t seem – reasonable. We’ve got a place now in [suburb] and yeah sure, with every housing commission place you’ve got drug addicts, so be it, but as long as it’s not in my face and my kids don’t have to – I just think they [The Department of Housing] should think more about families, where you’ve come from and where you want to go – I don’t want to go back there...”

“Yeah they’ve got to take each case on its merits, but I mean really take each case on its merits you know they just don’t, they don’t give a toss, they just sort of stick you wherever” – Interchange from Group 1

Participants also felt that the management and administration of private housing was an equally significant problem that had caused many people to miss out on decent housing. In particular, the provision of a good rental history and quality references was identified as a major issue, particularly for young people who are accessing housing for the first time. Participants also felt that the overall responsiveness of real estate agents was another contributing factor that caused people to miss out on decent housing.

“We’ve just moved into a place, it’s private, but we went around to that many different houses through real estates and that and they don’t even give you the courtesy of calling you back and saying ‘you didn’t get it’” – Group 10

For participants in both public and private housing there was an overall feeling that discrimination caused many people to miss out on a decent standard of living. This was thought to be particularly relevant for people with children and those with a disability, illness or drug addiction. The younger participants also felt that



discrimination based on age and physical appearance was problematic, whilst the new migrants/refugees felt that language barriers and racial prejudices were a major issue.

“Age is a huge issue...whenever I have to go into the real estate about something, if I go in they just treat me like crap and they never answer any of my questions they never like, they say ‘oh yes we’ll call you about that’ and they never do, whereas if my dad goes there they’ll help him straight away” – Group 5

Despite their different experiences, all participants agreed that discrimination based on employment status (i.e. being unemployed) was perhaps the most significant problem that caused people to miss out on decent housing. Some of the participants also felt that stereotyping based on people mistreating public and private accommodation had made it difficult for some of the ‘genuine people’ to gain access to appropriate and suitable housing.

“...If you don’t work and you’ve got people beside you that do work, they have number one priority!” – Group 10

“I found when I first started looking for places it wasn’t just age that the real estate looked into, like if you didn’t have a job or you were still only doing like part-time work or something they really didn’t help you at all” – Group 5

Education was raised as another significant problem that caused people to miss out on housing, not only in terms of gaining access to a better job and a higher income, but also in terms of knowledge and awareness of your rights within both the public and private housing market. Poor education had been a significant issue for both young people and new migrants/refugees who also faced the additional problem of poor English language skills. Participants from the staff groups also felt that a lack of appropriate life skills such as cooking, cleaning and personal hygiene was a major reason that people missed out on decent housing.

“They haven’t got the living skills to be able to maintain their tenancy so what has to go along with independence is case management. If the person ... can’t live in those situations, they need support to be able to get to a point where they can maintain independence...” – Staff Group 13

Advocacy and support was another significant issue, especially for young people who had little or no experience in accessing either the public or private housing market. One young woman felt that she had missed out on a decent standard of living because she wasn’t equipped with the knowledge skills and experience to access housing.

“I think there should be someone out there, like I’m 16 and I live in a refuge and I want to get my own place, but there’s no one out there that I can go to and say ‘can you help me find a place’ or ‘can you come with me to the real estate’” – Group 5

The new migrants/refugee group had shared a similar experience and felt that limited knowledge and information resulting from a poor education and limited language skills had prevented them from accessing decent housing and other opportunities. The

fact that upon arrival, their assigned migrant case managers were given responsibility for choosing and allocating appropriate housing was a further problem as many felt that this excluded them from having choice and opportunity regarding their housing.

Participants also identified a range of problems relative to the individual's situation that might cause people to miss out on decent housing. These included people with special health needs, specifically people with disabilities requiring wheelchair access, people with mental health issues or drug addictions that might require accommodation of a particular size or in a particular location. People with pets, homeless people and people unable to maintain a long-term tenancy were also identified as groups who might miss out on decent housing whilst others, specifically the young participants, thought that the motivation and confidence of the individual person could be an additional problem.

“...Just getting up and trying to look for a new place ‘cause if you are down in the dumps and you haven’t got money – to get motivated is really hard” –Group 4

Long-term and stable accommodation was seen as ideal but many also acknowledged the importance of having available and accessible temporary and short-term accommodation opportunities such as transitional housing and refuges. This view was shared by both client and staff participants.

“Cause there’s a lot of single dads out there with kids and they’ve got nowhere to stay, there’s only one [hostel] down here and sometimes it’s full” – Group 10

“...Some people opt to not have that permanent residency for whatever reason but they should be able to know that there’s somewhere temporary they can go” – Staff Group 13

It was also clear that many people had to make difficult choices between the type of housing they considered to be essential and other items that were seen as necessary for a decent life, but could not be afforded on a limited budget. When faced with this situation, people made different choices, with some preferring to spend on securing a decent and safe home (particularly those with children) whilst others were willing to save on housing costs in order to leave more for other items.

“I declined it [a public housing property] because I wouldn’t let the children go out and play by themselves – no way in the world, because the rubbish and drug paraphernalia laying around the place ... it doesn’t take much to pick it up, but I don’t want my children doing that” – Group 1

“I pay more [for rent] because I can’t handle that sense of insecurity. I’m up in [suburb] and I feel safe. If I want to go for a walk it’s that feeling of being in a place of not feeling insecure is very important for me and I’m willing to forego other things to feel secure or to not be thinking about it at all...I’ll go hungry” – Group 3

“I’d be happy with a dump so long as I could pay less rent for it, you know a piece of shelter, I guess it’s important to have a solid

home and something that's stable but also when I weigh it up between do I want a nice looking house or a crappy house, I'd rather pay less, you know if I could pay less money and live in a crappy house I would choose that" – Group 4

This meant that many were unable to have a realistic choice in relation to their housing and this was seen as a significant problem because in most cases, the ability to choose housing was governed by all of the former mentioned problems that caused people to miss out on decent housing.

"Home's home, I guess aye - not many people have got a choice" – Group 2

"Well when you're homeless you're homeless, that's how they look at it, if you're homeless you'll take anything - well I'm not taking my kids back to where we've come from, that to me is insane, but they don't really give you a choice" – Group 1

### 3.6 Location

Throughout the discussion on housing it became abundantly clear that location had a significant impact on one's standard of living, with many suggesting affordability as one of the most significant factors preventing people from living in a more desirable location. Participants also felt that problems associated with the affordability of many locations had further exacerbated issues relating to limited choice, which could then have a flow-on effect to other areas of life such as poor housing, employment, education and recreational opportunities.

"...Like a poor person can't move into a rich neighbourhood can they?" – Group 2

"When you're on the dole it's like you don't have too many choices you know, you've got an income of \$450 a fortnight or something" – Group 10

"But there also needs to be options of places [because] when you're stuck in a few places in a big city you don't have a choice, we're talking about comparing people of disadvantage to the rest of society. I mean if you're disadvantaged you're stuck in certain areas and you have no choice about where you can go" – Group 3

Living in a location that was close to support networks such as family and friends was especially important, as was access to local services, facilities and amenities such as transport, hospitals, schools, training, employment, banking, Centrelink and shopping centres.

Of particular importance for many was having access to a hospital with emergency services, particularly for those living in rural or remote areas. Social and recreational opportunities such as neighbourhood houses and drop-in centres were also identified as essential for living in a decent location.

"Because if you're away from your family and everything, you've got to have someone to be able to talk to" – Group 10

“Well where I live we need a hospital...if you really get into trouble you’ve got to travel to [suburb] and if you don’t have a car you’ve got no way” – Group 2

“I find like with myself, living in a Ministry place, there’s nothing for us to do, it’s okay for me I can do a bit of gardening around the place ... but a lot of people are stuck and have got nothing there to do, there’s no life for them to live...” – Group 2

Staff participants also suggested that it was important for the location to be suitable to the individual’s needs, history and personal circumstances. The client participants described open-minded communication and tolerance of individuals as equally important for a decent standard of living.

“You need to be in a nice community, like a nice town and all the community sort of stick together, if you’ve got a problem they all have meetings, sort of things like that. Safety, like [a] safety net, like a big community sort of thing ... like with everyone’s culture, everyone sort of works together, different cultures and things like that, you know everyone’s needs” – Group 2

One of the client groups suggested that decent neighbours were important and participants from all groups identified a safe, secure and crime-free location as essential for a decent standard of living. Safety considerations were identified as extremely problematic, as problems related to affordability meant that people were forced to live in what they perceived to be an unsafe location and therefore miss out on a decent standard of living, or (as discussed in the previous Section) people chose to pay more rent so they could live in what they felt to be a safe location, but in doing so missed out in other areas of their lives.

“Maybe the area is not really suitable for them and they don’t want to bring their kids into that area where there are a lot of drugs and needles on the side of the road” – Group 4

“But unfortunately these days I think a lot of people don’t feel comfortable in their own houses...we’ve got some monsters and we got broken windows and stuff, well how can you feel safe in your own house? Well you’re not!” – Group 10

Finally, it was suggested that town-planning policies, specifically the layout and design of housing commission properties had been a significant barrier preventing people from living in a decent location and some felt that the high rise design of many housing commission properties had a significant influence on one’s self-esteem, instilling a sense of hopelessness in many.

“It goes back to the government you know like, they put all these Housing Commission areas in one lot and you’re gonna have trouble, they should be spread out” – Group 10

“Those high rises at [suburb], just living there seems to instil a sense of hopelessness ...” – Group 1

“I think like they’re saying [suburb], it’s the area, and I know a lot of people that live in high rises and it’s just like they live there and they just give up and the whole place is run down...” – Group 1

### **3.7 Transport**

Throughout the focus group discussions, transport was constantly identified as essential in terms of accessing many of the things identified as key elements of a decent standard of living, as some of the comments already cited illustrate. Lack of adequate transport was also seen as a constant problem that caused many to miss out on a decent life.

“Transport is a constant problem” – Group 8

“You’ve gotta be able to go where you need to go” – Group 6

“When I was looking for a place the most biggest issue was that it had to be close to a train station or a bus stop, not because I had to go somewhere on a train, it was in case I needed to” – Group 5

Accessible public transport was seen as especially important, particularly for people living in rural and remote areas and for people with health-related issues such as a disability. The reliability and safety of public transport was seen as another contributing factor that caused people to miss out on a decent standard of living.

“Country areas need to get more transport...” – Group 2

“I had to wait 40 mins for a taxi” – Group 9

Some client participants indicated that access to private transportation (specifically a car) was essential for a decent life, particularly for people with a disability and people with employment in trades that require working at odd hours or the transportation of equipment. Private transport was also important for accessing social and recreational activities such as sport and grocery shopping, especially for families with children.

Finally, participants suggested that the affordability of transport was a significant problem, particularly the costs associated with private transportation such as taxi costs, licensing costs and fuel and registration costs. The high cost of fares was also a major issue for many.

### **3.8 Social and Civic Engagement**

Participants identified affordable social and recreational opportunities as essential and many felt that the high costs had caused families with children and single people to miss out. Affordability problems were seen to exclude many from meeting new people and making new friends and those who could not afford such opportunities were at risk of becoming socially isolated and depressed, which could have detrimental effects on one’s self esteem and sense of hope for the future.

“It’s very hard to go out and meet new friends, it’s close to impossible ‘cause you just can’t afford to do things” – Group 3

“Well it would be nice to be able to afford to go out, you can’t even afford to go out” – Group 10

“And when you do find something that you can do, it all costs money – money that you just don’t have” – Group 5

“Like if you’ve got a few kids it can cost you at least \$100 just to get through the door at the pictures and that’s without munchies!” – Group 10

“There should be some kind of groups organised for people on low-incomes...people with not much money can get really housebound and depressed and that creates a lot of problems in themselves and they isolate too much and don’t mix enough with other people or other groups” – Group 1

On the other hand, not all participants felt that affordability was the most significant problem, with one participant suggesting that an equally significant issue was finding the time to engage in social and recreational opportunities.

“I’m going fishing this afternoon with my boys and it doesn’t cost nothing, like sometimes you don’t need nothing to entertain, you just need your time” – Group 10

Staff participants also identified knowledge and awareness of social and recreational opportunities as a major issue and a significant problem that prevented people from attaining a decent standard of living.

“One I think is knowledge that they’re there...I know that we had a group of people that were taken to the museum, homeless people, and they were absolutely amazed because they didn’t know they could just walk into the museum or walk into the art gallery anytime – that was for other people...” – Staff Group 12

However, others felt that even when you had the knowledge or awareness to engage in social and recreational opportunities, the location in which you lived could prove a significant problem, especially in relation to transport.

“And then location comes into that too ‘cause where I grew up there was like too far to anywhere and I mean whether or not I got asked if I wanted to do it, it didn’t even matter ‘cause if I did I couldn’t get there...” – Group 5

Participants also suggested that social and recreational opportunities that were welcoming, supportive and entertaining were important for a decent standard of living. Other issues that were seen to prevent people from participating included personal safety considerations, peer influences and public liability insurance costs.

Many of the young participants had their own perspectives on what participation should involve, and what contributed to their own sense of exclusion, which often differed from the factors identified by older age groups. They saw consultation as essential for social and civic engagement, but felt that a lack of respect and

acceptance for the opinions of young people had excluded them from expressing their ideas and having their opinions heard. Some felt that a poor education and inappropriate life skills had further excluded them from the consultation process, as many did not have the knowledge, skills or experience to advocate on their own behalf.

“Us as teenagers, we just don’t get listened to because no one older respects the fact that we’re human beings, it’s like ‘they’re just kids, they’ve got no opinion’” – Group 5

“A lot of people do not respect teenagers at all, we’re just this big scary group of people ...” – Group 5

Consultation was also seen to be an important component in the decision-making processes, as many of these young people felt they were constantly excluded from participation. Many felt that the government implemented policies, programmes and services for youth without asking them what they wanted, needed or would respect, thus highlighting an important interconnection between consultation and respect.

“It’s one thing to go ‘yeah we’re doing this for the youth’ but it’s another thing to actually sit down and go ‘what do you want, how can we help you’ and then following that up” – Group 5

“What you need to do is sit down with the kids and go ‘okay what do you guys want to do, what will you guys respect’, you know ‘why aren’t you respecting these other things?’ and then based on all these questions you can ask them, you can find out like how to get them on the right path but nobody’s even bothered to try and attempt it” – Group 5

Finally, a small number of both client and staff participants considered political involvement to be important for a decent standard of living, agreeing that awareness of your rights and entitlements was crucial, particularly for young people and those with literacy problems such as new migrants/refugees. However, an overall lack of education, knowledge and information was thought to be a major problem causing people to miss out on opportunities for social and civic engagement.

Participants from the staff groups and one of the client participants also felt that being able to make a difference, to advocate on your own behalf and invoke political action was important, but disempowerment within the political system, distrust of government and an inability to articulate political ideas and understand the political system prevented many people from becoming politically involved.

“It’s time government realises that we are the people” – Group 7

“The whole community is being alienated from the political setting” – Staff Group 12

### **3.9 Care and Support**

Both clients and staff agreed that formal care and support in all facets of life – mental, psychological, physical, emotional and social – were essential for a decent standard of living. In particular, support services that are accessible and available within the local

community were seen to be especially important. Both client and staff participants also suggested that flexible, integrated and holistic support services were important for dealing with the multi-dimensional nature of the problems that many people face.

“I would say the quality of life is reduced not because there is no family, not because there are no services but the services operate independently – it’s not integrated...” – Staff Group 11

“And it’s also hard too if you fit into more than one of the categories and they send you one place and they go ‘okay that’s great but we won’t deal with that issue with you until you have that other issue dealt with’ and you go to them and they’re like ‘we won’t deal with that’” – Group 5

Participants identified a range of issues that prevented people from obtaining formal care and support, with accessibility criteria being one of the most significant problems, particularly for people trying to access support services from government agencies such as Centrelink.

There was also a strong feeling amongst participants that the skills and attitudes of staff within support agencies, particularly government public housing and government welfare administrations had been a significant problem that prevented people from accessing support services.

“Some government agencies they don’t talk to you they talk down to you” – Group 10

“And the Housing Commission people aren’t very nice people that work there, they can be very very nasty” – Group 10

“...The reality is that Centrelink is the holder of your income support and they are the most shittiest, most unhelpful places in the world. Unless you’ve got someone advocating for you there’s nothing, there is nothing!” – Staff Group 11

Many participants felt they were missing out on decent care and support because they were not treated with the same respect and dignity as others, especially when trying to access housing and income support. Overall, participants agreed that everyone should get treated equally, irrespective of differences such as age, gender and colour. For a decent standard of living, it was also emphasised that respect, acceptance and equal treatment should be applied to all facets of life including education, career and recreation elements.

Being accepted for who you are was also considered key for many of the young participants, as the following inter-change illustrates.

“Not so much fitting in but being accepted for who you are”.

“Yeah”.

“You don’t have to fit in”.



“Yeah that’s it”.

“Just people at least respecting you enough to leave you alone to do what you want”.

“Like a feeling of belonging, like you can be around people that like you for who you are” – Interchange from Group 5

Both clients and staff also felt that it was important to have support services that are appropriate for the specific needs of the individual and their current situation. However, the lack of services catering for the individual needs of different people was another major problem, particularly for people with mental health issues.

“I’m from a drug and alcohol background, and violence and jail, and all that circle, and to stay out of that ... it’s very hard ... and [it’s important] just to have that ongoing help that you wouldn’t necessarily ask [for]” – Group 1

“I think what’s important is to live with the reality of the present [situation] of the person you’re working with...we’ve gotta work with what we’ve got and then help them choose to move on wherever they want to go, but recognise that they’re valuable people, whether they’re addicts, whether they’re homeless, whether they’re whatever – they’re just as valuable as you and me, they’ve just got a different lifestyle, they’re struggling, so working for the present I think is really important you know” – Staff Group 13

“There aren’t any services for same sex families...to get any kind of services, any support group, anything” – Group 4

Participants also suggested that people hiding their poverty and the stigma associated with being disadvantaged had prevented people from accessing appropriate support services and decent care.

“The other thing you want to look at too is a lot of the time people hide their poverty and disadvantage really well, like my grandmother always made a point, even if we couldn’t afford to eat, she’d always make a point of making sure my sister always had brand new school dresses because it wasn’t the fact that we were suffering that bothered her, but she didn’t want other people to know we were suffering” – Group 5

“There are people who are working who are disadvantaged, but they’re not gonna open their mouths and say it for the fear of the stigma that’s going to be attached to it” – Staff Group 13

Under-resourcing and limited funding, combined with the overall demand placed on support services was a burning issue for both clients and staff, whilst education, knowledge and awareness were seen to be equally significant problems that caused people to miss out on decent care and support. Other identified problems included social and geographical isolation.

In addition to formal support services, participants suggested that family was an important provider of care and support. This view was especially strong amongst the staff participants and the new migrant/refugee group. When asked to specify what type of family was needed, participants suggested that safety and supportiveness were important characteristics, however ‘the family’ was defined (broadly or narrowly). Safe and supportive friends were equally important but some of the staff participants disagreed that friends could provide an appropriate substitute for family, suggesting that blood-related families are more important (and reliable) source of care and support.

“They need a family, that’s the answer ...I mean it’s not going to happen but that’s the answer” – Staff Group 11

“I think that non-blood family is almost an urban myth, I think at the end of the day blood is thicker than water” – Staff Group 12

The new migrants/refugees felt that a traditional nuclear family, united with a father, mother and children was essential for a decent life, emphasising the idea that it is very important to have both parents in the family.

“Family must be united with a father, mother and children...single parents is not a good family...it’s very important to have both parents in the family to preserve the [national] way of life...” – Group 8

In contrast to this, a participant from one of the staff groups felt that there were certain situations where the family unit was not an appropriate source of care and support, thus reaffirming the importance of accessible support services outside of one’s circle of family and friends.

“98% of the kids we see have left the family unit, can’t return, and that’s just not a good recognisable thing that’s an option, so the alternatives are looking at supports in the community to teach and help them gain the knowledge and gain access to the things that their parents would have done if they were at home living in, you know, an environment that was supportive” – Staff Group 13

Separation and divorce, mental health and drug and alcohol related issues, ageing and death and prison were the most commonly identified problems that caused family fragmentation and consequently prevented people from accessing informal care and support. Other identified problems included poor parenting skills, changing lifestyles, social and geographical isolation and globalisation.

However, participants from the new migrant/refugee group identified a whole range of other problems they felt caused people to miss out on family. In particular, these participants felt that the Australian migration system was the driving force behind family fragmentation because families and children were continually getting separated during the migration process, as some family members are denied residence in Australia whilst others are not.

Moreover, this group felt that the documentation requirements mandated by the Australian migration system played a significant role in fragmenting families. One of

the participants felt particularly strongly about this issue, explaining that the system does not take into account cultural differences when defining what constitutes a family.

“The migration system won’t help married migrants unless they produce a marriage certificate, but in Africa you are married by your elders and don’t get a marriage certificate to say you have a partner...so you need to consider people from their different cultures” – Group 8

These participants (who were notably all men) also felt that migration to Australia was a problem in itself, as it often led to family fragmentation because of differences in cultural expectations and practises.

“...In Africa the father is the head of the household but in Australia this type of family is difficult to preserve because the culture is different and there is too much freedom for children and wives” – Group 8

Finally, participants in one of the client groups identified rules that emphasise care and protection as being the most important, with rule flexibility considered essential for enabling young people to learn from their mistakes. Participants felt that for a decent level of care and support it was equally important to have rules that are applicable both inside and outside of the home.

Knowledge and information about rules was one of the most significant problem preventing people from accessing decent care and support, with the inability to understand rules, particularly legal rules, seen as a significant issue. This is because limited knowledge could lead to non-compliance with the rules and lead to conflict with authorities such as police or transit officers. Participants also felt that inflexible rules created a negative stigma when they were not appropriately followed, creating an overreaction to incidents, particularly by police.

An overall sense of aspiration, independence and happiness were also seen as essential for a decent life and for encouraging hope for the future.

“Everything we’ve talked about, that’s what we need for happiness”  
– Group 8

## 4 Summary of Main Findings

The research reported here has been principally directed at addressing the first of the research questions outlined in Section 1, i.e.

- What do Australians in general, and low-income Australians in particular, regard as the essential components of a socially acceptable minimum standard of living and community participation today, for children, adults and households?

It has approached this issue by conducting a series of focus group interviews with 71 users of selected welfare services and 27 members of staff in those agencies, focusing mainly on the views expressed by the former group.

The research would not have been possible without the unique partnership between researchers and agency analysts and practitioners on which the project as a whole is based, and the significance of the findings point to the success of this important collaboration, which will form the basis of on-going research on poverty and related topics.

As the project develops into its second stage, drawing on the findings from Stage I, its results will become of broader relevance and application as a wider range of community input is drawn in. However, given that a major goal of the research is to develop new indicators that draw on the experience of disadvantaged people, it was very important to begin by consulting with the most direct and immediate experience of having to go without and miss out on different elements of what constitutes a decent standard of living in contemporary Australia.

Although the numbers involved are relatively small, the information generated by the discussions is rich in both its scope and detail. This is an impressive achievement given the inherent complexity of the notion of a decent standard of living that was used to structure the discussions. It is, however, important to acknowledge that in framing the discussions around the positive idea of what constitutes a decent standard of living, the direct link to notions of deprivation, exclusion and poverty may have become somewhat tenuous: poverty is not the opposite of decency in most characterisations of living standards, and this needs to be borne in mind when reviewing the results. Against this, the approach taken has proved to be a valuable way of promoting a wide discussion of the issues without stigmatising those whose views were being sought.

One final caveat that needs to be borne in mind relates to the diverse backgrounds of those who contributed to the discussions. This is borne out by the differing nature of the groups themselves (as reflected in the services they were using, as set out in [Appendix A](#)), with groups including homeless people, long-term and young unemployed people, Indigenous school students and recently arrived ('new') migrants and refugees. This diversity adds texture and breadth to the findings, but also means that some of them have specific relevance only to the groups from which they emerged, rather than more general applicability.

Despite these qualifications, there is no doubt that the methodology used to generate the findings has been successful in identifying what is needed to attain decency in each of the different domains of the standard of living. The first point to note is that

there clearly are groups of people in Australia who have missed out on the increasing prosperity that over a decade of strong economic growth has brought to many others. The quotations set out on the previous pages provide many striking examples of this, and of the struggles, challenges and barriers facing those who have missed out.

Many of the findings speak for themselves when it comes to what they imply for the factors that constitute decency in living standards among those whose current circumstances cannot be so described. The welfare service clients who were interviewed had little trouble identifying what is needed to achieve a decent standard of living in the different domains that contribute to material well-being. They also had important things to say about how the domains themselves should be specified, and these will be taken into account in future work.

Another striking finding concerns the modest nature of the aspirations that emerged from the discussions. Those who participated had a keen awareness of what they and their families (particularly, where relevant, their children) had to go without as a result of the circumstances they were in. But they were also wary of setting unrealistic expectations for themselves about what is achievable, whilst at the same time recognising the many different dimensions that contribute to one's standard of living. Some also acknowledged their own limitations, and were keen to undertake training programs or otherwise take steps to improve their longer-term prospects.

One finding that emerged time and again was the *lack of affordability* that confronts people who are trying to juggle too few resources to meet their needs. The notion of (lack of) affordability reflects the gap between resources and needs, although the language is also significant, in that the focus on affordability draws attention not only to the *inadequacy of financial resources* but also to the prices that have to be paid to buy basic items. After well over a decade of privatisation and user pays pricing policies, it appears that many of those on low-income see their problems in terms of the high cost of items purchased, as much as in how much money they have to spend.

This does not mean that money is not important and this is another clear message to emerge from the findings. While relatively few of those who participated in the discussions argued outright for an increased level of income, many provided stark examples of the difficult choices they had to make when trying to make their incomes stretch far enough to meet all of their basic needs.

Nowhere was this more apparent than in relation to housing, which not only absorbs a large fraction of total income, but also frequently determines how easily people can access local services, or use public transport to do so, or simply feel safe and secure in their neighbourhood. Many spent more than they could afford on their housing in order to provide a secure platform for their lives, choosing as a consequence to go without in other areas. Others chose to live in what they knew to be sub-standard accommodation in order to give them more choice and flexibility elsewhere in their budgets. Even with very limited resources people exercise choice about what they do, although this is generally seen as an action that has negative consequences for what has to be foregone, rather than as an opportunity to achieve positive outcomes.

Many participants lived in public housing and had no hope of realising the 'Australian dream' of home ownership in the foreseeable future. Securing a Housing Commission (or 'Ministry') home brought relief to some, but for others was a source of tension and worry because of what were perceived as unappealing structures and

unsafe streets – particularly for children. The frustrating and often demeaning treatment that many received when dealing with Housing Commission (and other government) bureaucracies overlay these concerns, adding to people's loss of dignity and self-respect – two essential ingredients of a decent life.

The *nexus of connections between housing, location and transport* emerged as a factor that played a major role in determining the overall standard of living for many, and the choices and sacrifices that had to be made in these areas exerted an influence that spilled over into others. Put simply, it was far easier to attain a decent standard of living in all of its dimensions on a platform consisting of adequate and well-located housing that facilitates connections into local community networks.

Health and health care was another important domain, with many participants placing great emphasis on having good access to health services. These services had to be both close enough to be accessed when needed, and affordable in terms of the prices charged. There were many complaints about the reduced availability of bulkbilling making even basic medical services increasingly unaffordable. Where services were under-resourced and allocated using waiting lists (as in the case of public dental treatment) waiting times were so long that many effectively missed out altogether. One participant's description of the public dental system as being like that in a third world country vividly captures this disturbing problem and the urgent need for action.

Poor health reduced people's job prospects and many participants displayed a keen awareness of what was needed to increase their likelihood of finding a job in an increasingly competitive labour market. Although very few participants actually had a job (see [Appendix B](#)), most were keen to get into (or back into, or prepare for) the labour market and saw this as the main gateway out of their current situation. While there was some acknowledgment of the lack of jobs (particularly in rural areas) many saw their own limited education and low skills as the main factors preventing them from being employed.

What was seen as needed to rectify this situation varied greatly between the different groups, reflecting the diversity in their circumstances referred to earlier, but most saw a need to improve their access to information and to other types of basic living skills, such as proficiency in English language or in the use of computers. Those who experienced problems with mental health or another form of disability (however mild) found inadequate recognition among employers of how this constrained them, with many seeing themselves as permanently excluded from the labour market.

Many of the younger participants bemoaned the lack of acknowledgment of the specific issues they face, with many feeling that they were often consulted but rarely listened to. Some lacked the basic information that could help them to survive minor crises and move on in their lives and there was a worrying sense among some that they were already heading on a downward trajectory.

Education was also seen as an important way of increasing employment prospects and the standard of living generally, although most saw this as encompassing more than just formal education, to also include the acquisition of life skills such as communication and budgeting. These were important in their own right, but could also add value to what could be learnt from formal education programs. However, the cost of formal training often put it beyond the reach of participants.

So there was a *second nexus of factors* that went together, in this case encompassing education, employment and financial resources. Many recognised the limitations of their own educational background and wanted to take steps to rectify this, and all placed great emphasis on ensuring that their children received an adequate education. Education – defined broadly to include all advancements in human capital – was an important element of a decent standard of living because it increased the probability of finding a decent (well paid and secure) job and this in turn contributed additional financial resources and promoted self-esteem.

A *third nexus of factors* covers the final two domains mentioned earlier - care and support, and social and civic engagement - in addition to health and health care. Outcomes in each of these latter two domains depended critically on other factors, including how closely people were located to services and to networks of support (family or community-based) that provided different forms of formal and informal care and support. Many spoke with feeling about the demeaning treatment they received when dealing with bureaucracy, and there was deep resentment about the lack of dignity and respect that was denied them by such treatment. There were different perspectives on how important family ties were in affecting the availability and reliability of such support – as is to be expected given the diverse nature of the participant groups.

Lack of information was a factor that emerged as preventing some people from accessing facilities, these being seen as ‘not for people like us’ and many young people saw *lack of information* as a barrier to such things as employment, education, health care and housing. There were relatively few comments from the client groups about civic engagement, although it was apparent that some felt distrustful of government and isolated from the political and other processes that could allow their voices to be heard.

As the quotes presented throughout the report demonstrate, there were a number of differences between the views that emerged from the client and staff discussion groups. However, these tended to reflect the ways in which issues were expressed and perceived rather than the nature of the issues themselves. In general, and as one might expect, many of the staff presented their views in the context of a broader background of economic, social and political factors. In contrast, the clients expressed their concerns in a far more immediate and personal way, focusing on how these forces impacted upon them and their families directly. This difference is an inevitable consequence of how the discussions were conducted and not too much should be made of it, although it was clear that many of the agency staff saw themselves as assisting their clients both directly and by advocating for them more broadly.

In terms of the issues and tasks that motivated this component of the research, the discussions have been extremely helpful in providing the research team with a better understanding of what it means to experience poverty in Australia today, and helping to guide future work that will explore issues of deprivation and social exclusion more systematically.

Four general findings are of particular importance: *first*, it is clear that deprivation and exclusion both encompass many aspects and neither can be usefully reduced to a single, monetary dimension: money is still a very important determinant of the ability to achieve a decent standard of living, but it is not all about money, and many other

factors, including access to services and information and being treated with dignity are also important; *second*, many low-income Australians are currently missing out on a decent standard of living (even when that standard is defined modestly) and are constantly faced with very difficult choices between the competing demands on their limited economic, personal and social resources; *third*, the views of those who are missing out on what is needed to have a decent standard of living are relatively modest, although they include having access to adequate economic resources, to affordable housing in a clean and safe neighbourhood, to good local services, to transportation, to information and advice, and being treated with respect. *Finally*, as a direct consequence of the above factors, the disadvantages faced by low-income people are multi-dimensional and reflect many inter-connected factors that can combine to produce cumulative, seemingly intractable problems. This complexity needs to be recognised when designing policies to combat poverty and social exclusion, *and* when assessing their impact.

Some of the more specific findings revealed new insights into the nature of deprivation and exclusion that were unexpected, in terms of their frequency and impact. Lack of access to dental care was one issue that created considerable suffering over long periods and contributed to low self-esteem and reduced job prospects. Mental health and other forms of disability were also factors that prevented people from overcoming other problems, particularly lack of employment. Lack of access to information, and to care and counselling services prevented people from participating more fully, economically and socially. The over-riding importance of accessible and affordable transport in allowing such participation was another factor that was often mentioned as important.

Mention has already been made of the modest nature of people's aspirations of what is needed in material terms to achieve a decent standard of living: resources, services, supports and information. At the same time, people had a strong sense of the importance of being treated with respect and dignity, particularly by those working in the government agencies that can exert enormous control over their daily lives. Many related experiences of disrespectful and demeaning treatment that eroded their sense of identity and compounded the barriers they were trying to overcome.

A few of the people we spoke with were aware of how their own limitations and past decisions had contributed to their current problems. Those with children were very conscious of the need for their children to avoid these mistakes, yet where they were living and their limited budgets made it harder to achieve this. Fear of cross-generational poverty, of failing as a parent to provide an adequate future for one's children, though not explicitly mentioned, seemed just below the surface - particularly in the minds of many mothers.

Many of the young we spoke with (and it is important to re-call that close to half of the sample were aged 25 or under) felt that even when they voiced their concerns, they were often not listened to. Many said that they wanted information about how to cope, but few people were able to listen to what they needed and provide guidance that they could relate to. This perception led to feelings of alienation that exacerbated the problems faced by those in the younger age group, giving rise to an age-related aspect of exclusion more generally.



Few of these findings are new, although the discussions reported here illustrate how different factors connect together, often compounding the challenges involved in dealing with them. Other recent studies have examined various kinds of data on actual living standards but rarely do they manage to draw out these inter-connections in the ways that they have emerged in this study.

Another important difference is that the findings reported here are drawn directly from the accounts of those who have lived through periods of poverty, surviving on a low income with the help of welfare agency support. This gives the findings added credibility and provides the basis for examining their broader applicability.

The findings stand as a testimony to the need to address the many problems facing those who are currently missing out. But they also provide a foundation for further examination of the issues raised in order to assess their broader relevance. In addition to the feedback provided during the discussions on how to go about this (not reported here), we are in a far better position to conduct research that will assist the identification and design of what actions are needed to ensure that fewer Australian experience poverty in the coming years.

**Appendix A: Group Coding Scheme and Participant Characteristics**

<b>CLIENT GROUPS</b>			
<b>Group Number</b>	<b>Group Type</b>	<b>Location</b>	<b>Service Provider</b>
1	Adults in supported accommodation	Sydney city (NSW)	Mission Australia
2	Public housing tenants	Melbourne suburbs (Frankston, VIC)	Brotherhood of St Laurence
3	Long-term unemployed	Melbourne suburbs (Frankston, VIC)	Brotherhood of St Laurence
4	Sole parents undergoing training	Melbourne suburbs (Craigieburn, VIC)	Brotherhood of St Laurence
5	Unemployed young people (16-24 years)	Rural/regional NSW (Central Coast)	Mission Australia
6	Year 9 Indigenous students	Rural/regional NSW (Dubbo)	Mission Australia
7	Young people in crisis accommodation	Rural/regional NSW (Wagga Wagga)	Mission Australia
8	New migrants/refugees	Sydney suburbs (Cabramatta, NSW)	Anglicare (Sydney)
9	Emergency relief clients	Sydney suburbs (Rooty Hill, NSW)	Anglicare (Sydney)
10	Emergency relief clients	NSW South Coast (Wollongong)	Anglicare (Sydney)
<b>STAFF GROUPS</b>			
<b>Group Number</b>	<b>Group Type</b>	<b>Location</b>	<b>Service Provider</b>
11	Service level staff from across Melbourne	Melbourne suburbs (Fitzroy, VIC)	Brotherhood of St Laurence
12	Head office/operations level staff from across Australia	Sydney city (NSW)	Mission Australia
13	Service level staff from across NSW	Sydney suburbs (Parramatta, NSW)	Anglicare (Sydney)

**Appendix B: Summary Characteristics of Service User Participants**

Participant Characteristics		Frequency (n = 71)	Percentage % (valid)
Gender	Male	31	43.7
	Female	40	56.3
Age	Less than 18 years old	18	25.4
	18 – 25 years old	14	19.7
	26-35 years old	8	11.3
	36-50 years old	22	31.0
	More than 50 years old	9	12.7
Country of birth	Born in Australia	53	76.8
	Born elsewhere	16	23.2
Marital status	Married	12	17.1
	Single	35	50.0
	Other	23	32.9
Number of children	None	35	58.3
	1 – 3 children	14	23.3
	4 or more children	11	18.4
Years of schooling	Less than year 10	26	38.8
	Year 10	17	25.4
	Year 11	7	10.4
	Year 12	11	16.4
	More than Year 12	6	9.0
Qualifications or training	No qualification	43	60.6
	Have qualification	28	39.4
Employment status	Working full-time	1	1.4
	Working part-time	4	5.7
	Not working – looking for work	22	31.4
	Home duties	11	15.7
	Studying	22	31.4
	Other	10	14.3
Main source of income	Salary or wages	6	8.6
	Centrelink	56	80.0
	Other	8	11.4