
MILLER COMMUNITY SURVEY 1999-2007

Data report of
8-year trends in
community
perceptions
prepared for
Community 2168

CENTRE FOR HEALTH EQUITY
TRAINING RESEARCH AND EVALUATION

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Community 2168 is a major community renewal and capacity building partnership located in Miller in the City of Liverpool in South Western Sydney. It is sponsored by Liverpool City Council, Sydney South West Area Health Service and Housing NSW.

<http://www.liverpool.nsw.gov.au/community2168project.htm>

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EXECUTIVE SUMMARY

PURPOSE OF REPORT

The Miller Community Survey 1999 – 2007 Data Report of 8-year trends in community perceptions was prepared for the Community 2168 Management Committee as part of the broader evaluation of the Community 2168 Project. Community 2168 (1999 – ongoing) is an inter-agency collaboration that aims to bring residents, government, business and community organisations together to improve services, facilities and opportunities for all people in the 2168 postcode area. It is sponsored by Liverpool City Council, Sydney South West Area Health Service and Housing NSW, and began in 1999 with \$30 000 funding from each of these agencies. The Community 2168 Project has worked with other initiatives in the area over the 1999 to 2007 time-frame including:

- Wellbeing in the Valley, formerly Miller Innovative Health Partnership (1998 – 2001), funded by NSW Health at \$600 000 over 3-years.
- NSW Premiers Task Force on Miller (2002 – 2005) funded at \$2.428 million dollars over 3-years; and
- Mission Australia Communities for Children Initiative (2005-2008) received \$3 million over 3 years.

The overlap across program initiatives in the Miller and postcode 2168 area means that the Miller Community Surveys are unable to document the impact of specific projects or activities on community perceptions over time. The purpose of this report is to present descriptive data from the four community surveys conducted in Miller since 1999 that may be useful in informing future program development, project initiatives and service planning in Community 2168.

MILLER COMMUNITY SURVEY OVERVIEW

The Centre for Health Equity Training Research and Evaluation (CHETRE) has conducted random household surveys of the Miller community since 1999. This report presents changes and trends in Miller residents' perceptions of their local area and people from 1999 to 2007. Assessments were made of perceptions of crime, amenity and other community issues, safety, trust, solidarity, sense of community, self-rated health, satisfaction with services, and global perceptions of change in Miller. The report is based on data from three household surveys conducted in Miller at 3-year intervals, using both doorknock (1999) and telephone survey methods (2002, 2005 and 2007). The first three surveys showed consistently high response rates: 1999 (n = 213, RR = 64%); 2002 (n = 334, RR = 75%); and 2005 (n = 270, RR = 75%). In 2007 the response rate dropped to 44.3% (n=180) due to increases in household refusals (22.7% in 2007 compared to 15% in 2005), personal refusals (15% in 2007 compared to 10% in 2005) and incomplete interviews (18% in 2007 compared to 1% in 2005).

SURVEY FINDINGS

Characteristics of survey respondents

There was good correlation in socio-demographic characteristics across the 1999, 2002, 2005 and 2007 surveys. However fewer respondents were from households comprised of a couple with children and more respondents were from households comprised of a single parent with children. Also, more respondents had lived at their current address for 20 years or more and less had lived there between 0 to 5 years. Survey respondents exhibited a similar demographic profile to that shown in the ABS 2006 census data for Miller. However there is evidence of a sampling bias toward females and older respondents in the 2007 survey.

Perceptions of crime and safety

While reports of actual crime have remained relatively steady, perceptions of crime have reduced significantly since 1999 with the exception of speeding traffic. Most respondents feel safe at home and walking down the street in the day and unsafe walking down the street at night. There has been a significant improvement in respondents' feelings of safety within the home from 1999 to 2007. Most respondents feel Miller does not have a reputation as a safe place.

Amenity and other community issues

Most respondents believe that a lack of safe places for children, a lack of recreational facilities, uneven footpaths and litter are problems in Miller. Perceptions of all the aspects of amenity identified here have improved since 1999 with the exception of uneven footpaths. Perceptions of racism as a problem in Miller have increased significantly since 1999.

Trust, solidarity and sense of community

The majority of respondents believed that most people can be trusted and on average place the greatest trust in family, friends and work colleagues. Health services, commonwealth government services and the police force also ranked relatively high on the trust scale and the lowest levels of trust were ascribed to the media, State, Local and Commonwealth politicians, and big business. Respondents were more likely to trust people in wider Australia than people in their own neighbourhood.

The majority of respondents do not have family in the neighbourhood but do have friends and 3 or more people to turn to for support in the neighbourhood.

The majority felt that most people were helpful and had helped or had been helped by their neighbours during the 3-months prior to survey. The majority of respondents had visited someone in the neighbourhood at least once in the previous week. Less than half had attended a local community event in the previous 6 months and the majority had not helped out a local group. Approximately half were members of a local club.

Most respondents agreed that if a stranger or someone different moved into their street they would be accepted by the neighbours, however half of the respondents believed that differences between new and long term residents divided people in the neighbourhood. Just over half felt that multiculturalism does not make life better and a similar proportion felt that differences in ethnicity and religion divided people in the neighbourhood.

A major issue which most respondents believed divided the neighbourhood was the difference between people with drug, alcohol or mental health problems and other residents. Overall most respondents felt that differences that divide people in the neighbourhood cause problems and sometimes lead to violence. In spite of these differences, most people felt very at home in Miller and would be sorry to leave if they had to. However, many (approximately 40%) reported little or no interest in what goes on in Miller.

Perceptions of health

The mean general health score in 2007 was 3.02. The mean general health score has not changed significantly from 1999 to 2007. Physical health, measured by the SF-12, showed little change from 2002 to 2007. The 2007 mean score of 48.32 compares well to other norms. Mental health, measured by the SF-12, decreased significantly from 2002 to 2005 and remained low in 2007. Scores for mental health in all three surveys appear to be lower for people in the Miller sample than those in the SF-12 norms or in other Australian populations.

Knowledge and Satisfaction with Services

Awareness of the Hub was high and approximately half of the respondents were aware of Community 2168. Satisfaction with health services was relatively high with most respondents

rating the services as good, very good or excellent. A higher proportion of respondents rated GP care and Allied Health care as excellent than for other health service providers.

Satisfaction with government services was relatively low, especially Housing NSW and Liverpool City Council. However a large proportion of respondents rated Department of Community Services, Centrelink, Department of Education and local schools as good.

Over half of the respondents rated the Police as good, very good or excellent and were satisfied with the level of Police presence, however there was a large proportion who rated the service as poor and were dissatisfied with the level of Police presence.

Most respondents believed that there were training and employment opportunities in the local area and didn't identify any other services that they felt were needed.

Global perceptions of change

The majority of respondents felt that Miller was better, had become better in some ways and worse in other ways or was about the same. Only 12.2% believed that Miller was worse, a significant reduction since 1999.

1. BACKGROUND

PURPOSE OF THIS REPORT

Community 2168 is a major community renewal and capacity building partnership located in Miller in the City of Liverpool in South Western Sydney. It is an inter-agency collaboration that aims to bring residents, government, business and community organisations together to improve services, facilities and opportunities for all people in the 2168 postcode area. Community 2168 is sponsored by Liverpool City Council, Sydney South West Area Health Service and Housing NSW, and began in 1999 with \$30 000 funding from each of these agencies. The Community 2168 Project will focus on the following priorities from 2006-2009 (see <http://www.liverpool.nsw.gov.au/community2168project.htm>):

- Community Engagement, Participation and Communication
- Community Capacity and Governance
- Community Safety and Wellbeing
- Community Links and Networking
- Community Amenities and Facilities

The Miller Community Survey 1999 – 2007 Data Report of 8-year trends in community perceptions was prepared for the Community 2168 Management Committee as part of the broader evaluation of the Community 2168 Project. The purpose of this report is to present descriptive data from four household surveys conducted in Miller since 1999 that may be useful in informing future program development, project initiatives and service planning in Community 2168.

SURVEY CONTEXT

The Miller Community Survey Data Report covers the period 1999 to 2007. Over this time there have been many programs and initiatives in the Miller and Green Valley area besides Community 2168. The three major coordinated intersectoral community initiatives that were implemented in this area from 1999 to 2005 which overlap with the activities of Community 2168 were:

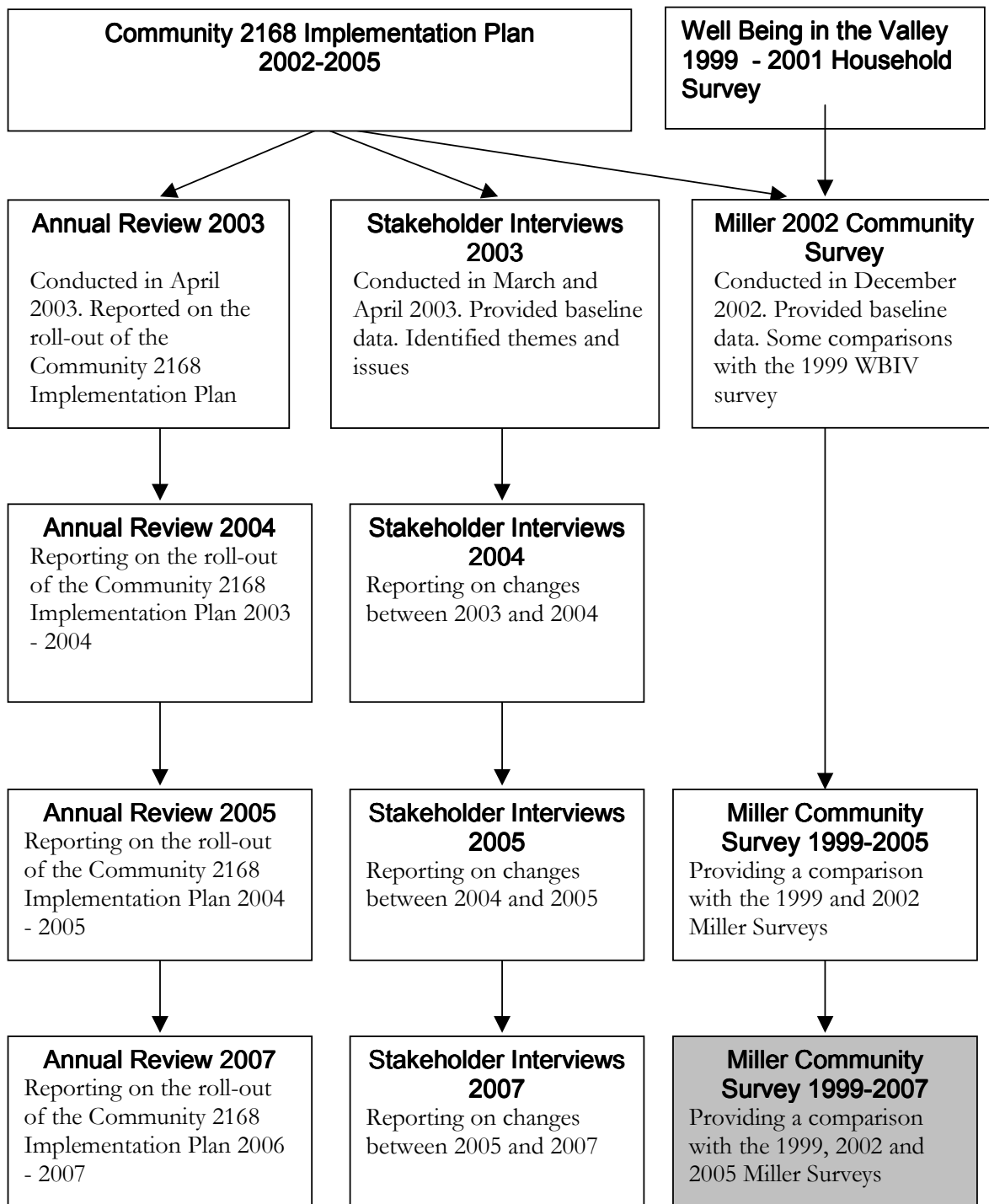
1. Wellbeing in the Valley, formerly Miller Innovative Health Partnership (1998 – 2001), aimed to improve access to services, employment opportunities and social capital in Miller. The project was based at the HUB in Miller and involved a partnership between Sydney South West Area Health Service, Liverpool City Council, Housing NSW, Police, Non-government and other community based organisations and the local Miller community. Wellbeing in the Valley was funded by NSW Health at \$600 000 over 3-years. While the project was completed in October 2001, the HUB continues to support community programs and activities under the auspices of Sydney South West Area Health Service.
2. NSW Premiers Task Force on Miller (2002 – 2005) was implemented as part of the Community Solutions and Crime Prevention Strategy and aimed to develop local strategies to address priority social and economic issues in Miller. Activities focussed on crime prevention and community development. This included a multi-disciplinary Youth and Young Family Team and specialist child and family health nurses to work with high need families with children aged 0-2 years. The Task Force on Miller was funded by the NSW Premier's Department at \$2.428 million over 3-years.
3. Mission Australia (2005-2008), which has a youth, employment and child and family service located in Miller, received \$3 million over 3 years through the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) Communities for Children Initiative to provide additional services to children in the wider Green Valley area.

2. INTRODUCTION

The Centre for Health Equity Training Research and Evaluation (CHETRE) has conducted random household surveys of the Miller community since 1999. The first survey in 1999 was developed to assess community needs and service use and gain baseline data on community perceptions of crime, safety, social capital and other issues for the Wellbeing in the Valley Project. Three more community surveys have been conducted since this time and have been used to inform the Community 2168 Project. Figure 1 shows where this report is positioned in relation to the broader Community 2168 Project evaluation, including key stakeholder interviews and annual monitoring reviews of the roll out of the Community 2168 Project implementation plans. Given the overlap between the Wellbeing in the Valley (1998-2002), Community 2168 (1999 - ongoing) and other initiatives in the Miller and Green Valley area the community surveys are unable to document the impact of specific projects or activities on community perceptions over time. The Miller Community Survey 1999 – 2007 Data Report serves to describe the Miller community to inform future project planning and service delivery for the Miller and broader 2168 postcode area.

The aim of this report is twofold: (1) to present the findings from the 2007 Miller Community Survey; and (2) to present trends and changes in residents' perceptions of the Miller area and local community from 1999 to 2007. Four Community Surveys have been conducted in Miller at 3-year intervals, 1999, 2002, 2005, 2007. The last survey was conducted between October 2007 and January 2008.

Figure 1: Miller Community Survey 1999-2005 data report in relation to the broader Community 2168 evaluation



3. METHODS

OVERVIEW OF METHODS

The Miller community survey methods have differed across the four survey periods. While the 1999 survey was conducted using a household doorknock technique, the 2002, 2005 and 2007 surveys were conducted using telephone survey.

The 2007 telephone survey of a random sample of Miller households was undertaken between October and January 2007 by trained interviewers. A total of 180 households participated, 17.1% of all households estimated by the Australian Bureau of Statistics (ABS) to be in Miller during the 2006 census (180/1053). This figure compares to 26.3% of all households surveyed in the 2005 survey (270/1026), 32.6% for the 2002 survey (335/1026) and 20.8% for the 1999 survey (213/1198).

THE QUESTIONNAIRE

The 2007 questionnaire was developed by CHETRE in consultation with the Community 2168 Project Evaluation Subcommittee. The survey was placed on a Computer Aided Telephone Interviewing System (CATI).

Questions for the 2007 Miller Community Survey were based on those used in the previous surveys to enable comparison of the results with existing data. Several questions were added to allow greater exploration of key themes and topics of interest revealed in the previous surveys.

RESPONDENTS

A random sample was selected from the Electronic White Pages (EWP) using a list of street names and street numbers falling within the survey area of Miller. The target number of interviews to complete was 300.

Up to six attempts to contact the randomly allocated household were made. The respondent was the person living in the household who was aged 18 years or more. If there was more than one resident within this age group then the respondent was randomly selected by the CATI system based on the number of eligible respondents within the household. This process involved:

- Identifying how many eligible respondents lived in the household;
- Identifying the ranked age position of the person answering within the eligible respondents; and
- Randomly selecting from the eligible respondents.

If the person answering was the randomly selected person, the CATI would prompt the interviewer to continue. If not they would ask to speak to that person or arrange another time to call, with at least four attempts at contact with the individual being made. Respondents were deemed ineligible if they were outside the area for the entire study period or were answering a business phone.

Respondents who were unable to communicate well in spoken English were asked if they would agree to be interviewed at a later date by an interpreter. Interpreters were given brief training (1 hour) and carried out telephone interviews with these respondents.

RESPONSE RATE

The response rate for the 2007 survey was 44.3% (see Table 1 below). This compares with a response rate of 75% for the 2002 and 2005 surveys and 64% for the 1999 Wellbeing in the Valley door-to-door survey. The reduction in the response rate is due to increases in household refusals (22.7% in 2007 compared to 15% in 2005), personal refusals (15% in 2007 compared to 10% in 2005) and incomplete interviews (18% in 2007 compared to 1% in 2005).

Table 1: Response rate for 2007 Miller Community Survey

	N	% of Total	% of Eligible
Ineligible			
Business/Fax	127	4.1%	
Disconnected	228	7.3%	
Call back – exhausted attempts	360	1.1%	
Not available in survey period	389	12.4%	
Unsuitable (not in area)	168	5.4%	
No answer/Engaged	816	26%	
Answering Machine	524	16.7%	
Non-English Speaker	115	3.4%	
Total ineligible	2727	87%	
Non-consenters			
Household refusal	92	2.9%	22.7%
Personal refusal	61	1.9%	15%
Incomplete Interview	73	2.3%	18%
Total non-consenters	226	7.2%	55.7%
Completed Interviews	180	5.7%	44.3%
Total N	3133	100%	100%

DATA ENTRY AND HANDLING

Deidentified data from the surveys was exported directly from the CATI in d-Base 2.0 format. This was then imported into SPSS so that values could be assigned to numeric variables.

DATA ANALYSIS

The survey results were analysed using SPSS for Windows version 15.0 (SPSS Inc, 2006). The data were summarised using frequencies and descriptive analyses. Where appropriate, references were made to area norms for Miller based on the 2006 Australian census. All survey items, except perceived objects of trust and self-rated general health, were treated as categorical variables and analysed using Chi-square testing. Self-rated general health, including the single-item global general health question and full SF-12 composite scores, were treated as continuous variables and analysed using one-way ANOVA or the non-parametric equivalent test, Kruskal-Wallis. Alpha, the level of statistical significance, was set at .05 for all tests.

Differences in survey methodologies, including question wording, limited the extent to which statistical analysis could be undertaken to examine change across surveys. For this reason some results do not show 1999, 2002 or 2005 data.

4. CHARACTERISTICS OF SURVEY RESPONDENTS

The validity of changes in community perceptions of health, safety and the local area from 1999-2007 is strengthened when the characteristics of the people surveyed are similar each time; meaning that changes cannot be attributed to personal characteristics. This section presents a comparison of the sociodemographic and socioeconomic characteristics of survey respondents in the 1999, 2002, 2005 and 2007 surveys.

4.1 SOCIODEMOGRAPHIC CHARACTERISTICS

Table 2: Gender

There was no significant difference in the gender of respondents across the 4 surveys. Most survey respondents were female.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Male	67	31.9	131	39.2	84	31.1	60	33.3
Female	143	68.1	203	60.8	186	68.9	120	66.7
Total	210	100	334	100	270	100	180	100

Table 3: Age

There was no significant difference in the age of respondents across the 4 surveys, however there was a slightly greater proportion of respondents aged more than 54 years and slightly less aged less than 35 years in the 2007 survey. Across all surveys the majority were aged more than 54 years.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Less than 35 years	53	25.0	79	23.7	55	20.4	23	12.8
35 to 54 years	65	30.7	107	32.0	90	33.3	59	32.8
More than 54 years	94	44.3	148	44.3	125	46.3	98	54.4
Total	212	100	334	100	270	100	180	100

Table 4: Aboriginal and Torres Strait Islander

Ten percent of respondents identified themselves or someone in their household as Aboriginal or Torres Strait Islander. There was no significant difference across the 4 surveys.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Aboriginal or Torres Strait Islander	15	7.3	16	4.8	19	7.1	18	10
Non-Aboriginal or Torres Strait Islander	191	92.7	318	95.2	250	92.9	162	90
Total	206	100	334	100	269	100	180	100

Table 5: Country of birth

Approximately 30% of people surveyed in 2007 were born overseas. There was no significant difference in the proportion of respondents born overseas across the 4 surveys.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Born overseas	80	39.2	102	30.5	87	32.2	53	29.4
Born in Australia	124	60.8	232	69.5	183	67.8	127	70.6
Total	204	100	334	100	270	100	180	100

Respondents from the 2007 survey who were born overseas were born in 22 different countries. The largest proportions were from England (13.5%), Vietnam (9.6%), India (9.6%), Lebanon (9.6%), Fiji (7.7%) and New Zealand (7.7%).

Table 6: Year of arrival

Most survey respondents who were born overseas arrived in Australia before 1986. There was no significant difference between the surveys.

	2002		2005		2007	
	N	%	N	%	N	%
Before 1986	58	57.4	53	62.4	26	54.2
1986-1990	19	18.8	12	14.1	6	12.5
1991-1995	11	10.9	8	9.4	6	12.5
1996-2000	11	10.9	9	10.6	9	18.7
2001-2005	2	2.0	3	3.5	1	2.1
Total	101	100	85	100	48	100

Table 7: Parent's country of birth

Forty-three percent of all survey respondents reported that their parents were born overseas. There was no significant difference from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Parents born overseas	157	47.4	128	47.8	76	43.0
Parents born in Australia	174	52.6	140	52.2	101	57.0
Total	331	100	268	100	177	100

Table 8: Parents born in non-English-speaking country

Of those who had parents who were born overseas, most reported that their parents were born in a non-English-speaking country. There was no significant difference in this proportion from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Parents born in non-English-speaking country	101	63.9	74	57.8	46	61.3
Parents born in English-speaking country	57	36.1	54	42.2	29	38.7
Total	158	100	128	100	75	100

Table 9: Marital status

Most survey respondents were married or living with a partner. There was no significant difference in the marital status of respondents across the 4 surveys.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Single	35	16.7	80	24.1	52	19.3	28	15.8
Married/Partner	103	49.3	144	43.4	125	46.5	79	44.6
Separated/Divorced	39	18.7	59	17.8	48	17.8	34	19.2
Widowed	32	15.3	49	14.8	44	16.4	36	20.3
Total	209	100	332	100	269	100	177	100

Table 10: Living arrangements

There was a statistically significant difference in the living arrangements reported by respondents across the 4 surveys ($\chi^2 = 44.6$, $df = 24$, $p = .007$). In the 2007 survey there was a smaller proportion of households comprised of a couple with children and a greater proportion of households comprised of a single parent with grown up children.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Couple with children	50	23.5	75	22.6	61	22.7	30	17.0
Single parent	24	11.3	27	8.1	28	10.4	18	10.2
Couple, no children	17	8.0	30	9.0	40	14.9	16	9.0
Couple, grown up children	44	20.7	61	18.4	26	19.8	33	18.6
Single parent grown up children	13	6.1	27	8.1	21	7.8	26	14.7
Person living alone	45	21.1	93	28.0	79	29.4	44	24.9
Other	20	9.4	19	5.7	14	5.2	10	5.6
Total	213	100	332	100	269	100	177	100

Table 11: Households with children less than 18 years

Most survey respondents did not have children living with them. There was no significant difference across the 4 surveys.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Children less than 18 years	83	41.1	121	36.2	86	32.0	55	30.6
No children	119	58.9	213	63.8	183	68.0	125	69.4
Total	202	100	334	100	269	100	180	100

Table 12: How long lived at current address

There was a statistically significant difference in the length of time respondents had lived at their current address across the 4 surveys ($\chi^2 = 49.659$, $df = 12$, $p < .001$). This is largely due to an increase in the proportion of respondents who had lived at their current address 20 years or more, and decreases in the proportion of respondents who had lived at their current address 1 year or less (2005 and 2007 survey) and between 2 and 5 years. The majority of respondents have lived at their current address for 20 years or more.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
One year or less	37	17.4	41	12.3	9	3.3	12	6.7
2 – 5 years	52	24.4	72	21.6	65	24.1	22	12.2
6 – 14 years	48	22.5	73	21.9	61	22.6	40	22.2
15 – 19 years	13	6.1	23	6.9	26	9.6	20	11.1
20 years or more	63	29.6	125	37.4	109	40.4	86	47.8
Total	213	100	334	100	270	100	180	100

Table 13: Previous place of residence

Most respondents had previously lived in other areas of NSW, and to a lesser extent, Western Sydney. There was no significant difference in the previous place of residence reported by respondents from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Miller	42	12.6	35	12.7	19	10.6
Green Valley	25	7.5	17	6.3	8	4.4
Liverpool LGA	55	16.5	49	18.1	24	13.3
Western Sydney	84	25.1	56	20.7	52	28.8
Other NSW	115	34.4	104	38.5	72	40
Other Australia	6	1.8	3	1.1	3	1.7
Overseas	7	2.1	6	2.2	2	1.1
Total	334	100	270	100	180	100

4.2 SOCIOECONOMIC CHARACTERISTICS

Table 14: Age left school

Most survey respondents left school before the age of 17. There were no significant differences in the age that respondents left school across the 4 surveys.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
14 years or younger	51	24.5	66	19.8	48	17.8	38	21.2
15 to 16 years	102	49.0	159	47.6	141	52.2	90	50.3
17 – 18 years	38	18.3	92	27.5	68	25.2	38	21.2
More than 18 years	17	8.2	17	5.1	13	4.8	13	7.3
Total	209	100	332	100	269	100	179	100

Table 15: Level of education

There was a statistically significant difference in the level of education reported by respondents from 2002 to 2007 ($\chi^2 = 43.9$, $df = 8$, $p < .001$). There was a considerable reduction in the number of respondents with a primary school level education in 2007.

	2002		2005		2007	
	N	%	N	%	N	%
University degree	17	5.1	12	4.4	9	5.0
Diploma	9	2.7	11	4.1	12	6.7
Certificate	69	20.8	41	15.2	33	18.4
High school	136	41.0	152	56.3	109	60.9
Primary school	101	30.4	54	20.0	16	8.9
Total	332	100	270	100	179	100

Table 16: Employment status

The majority of survey respondents were not in the labour force; meaning that they were retired, engaged in home duties or caring for others. There was no significant difference in the employment status of respondents across the 4 surveys.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Employed or studying	59	29.2	123	37.2	103	38.3	56	31.3
Unemployed	17	8.4	23	6.9	18	6.7	8	4.5
Not in the labour force	126	62.4	185	55.9	148	55.0	115	64.2
Total	202	100	331	100	269	100	179	100

Table 17: Type of accommodation

Most respondents were living in publicly rented accommodation, however a large proportion were also living in fully owned accommodation. There was no significant difference in the type of household accommodation reported by respondents across the 4 surveys.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Home is fully owned	55	26.2	101	30.2	86	31.9	64	35.5
Home is being purchased	36	17.1	68	20.4	42	15.6	32	17.8
Home is rented publicly	108	51.4	140	41.9	124	45.9	72	40
Home is rented privately	11	5.2	25	7.5	18	6.7	12	6.7
Total	210	100	334	100	270	100	180	100

Table 18: Car ownership

Thirty percent of respondents lived in a household that did not own a car. There was no significant difference in respondents' reports of car ownership from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Family owns a car	238	71.3	181	67.0	123	68.3
Family does not own a car	96	28.7	89	33.0	57	31.7
Total	334	100	270	100	180	100

4.3 COMPARISONS WITH SELECTED ABS DATA

Conducting comparisons with ABS data for the Miller area is useful in determining the generalisability of the 2007 survey sample as a whole. Similarities between the demographic profile of survey respondents and the broader pool of Miller residents in 2006 enables stronger conclusions to be drawn about how representative survey respondents' perceptions of health, crime and community services are to the broader Miller population.

Figure 2: Gender by 2007 Miller survey and 2006 ABS population

The gender profile suggests an oversampling of female respondents and a corresponding undersampling of male respondents in the 2007 survey when compared with ABS data for Miller in 2006. This sampling bias was noted in all of the previous surveys.

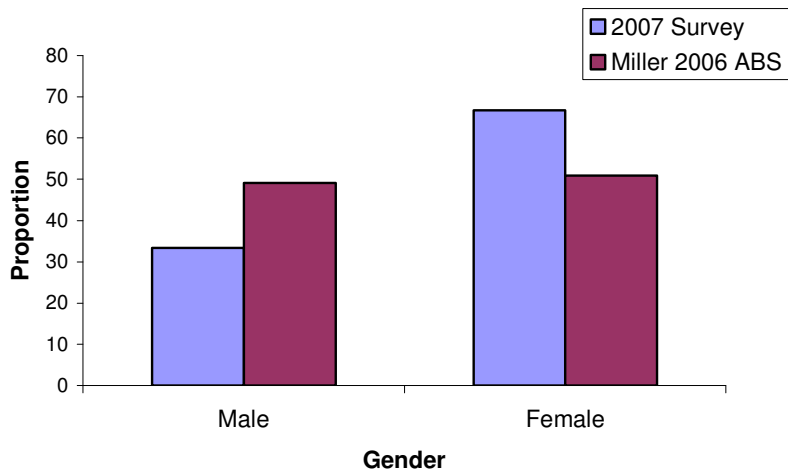


Figure 3: Age-group by 2007 Miller survey and 2006 ABS population

The age profile below suggests an oversampling of respondents aged more than 54 years and an undersampling of respondents aged less than 35 years in the 2007 survey compared with ABS data for Miller in 2006.

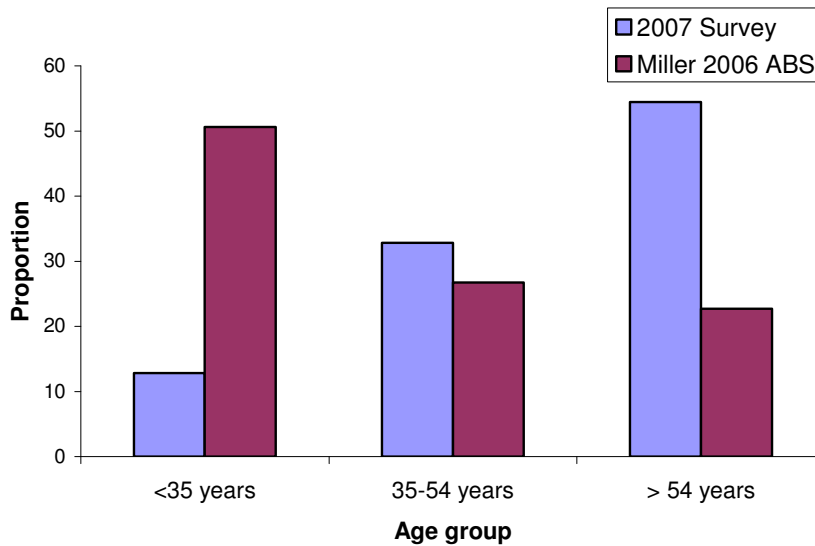


Figure 5: Country of birth by 2007 Miller survey and 2006 ABS population

Respondent's country of birth in the 2007 survey shows a similar profile to ABS data for Miller in the 2006 census.

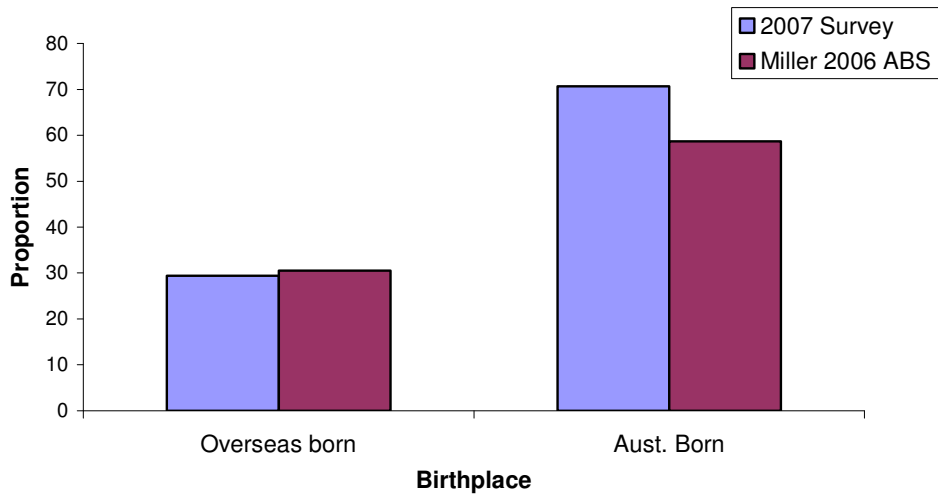
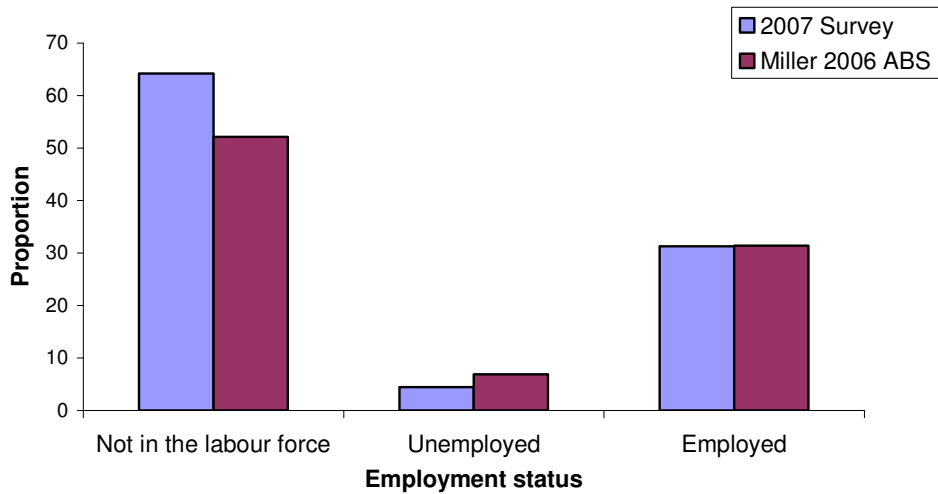


Figure 6: Employment status by 2007 Miller survey and 2006 ABS population

The employment status of respondents in the 2007 survey is similar to the profile of Miller residents from the 2006 Census.



Key Messages: Characteristics of Survey Respondents

There was good correlation in socio-demographic characteristics across the 1999, 2002, 2005 and 2007 surveys. However there were a few key differences including:

- the living arrangements of respondents (fewer respondents in households comprised of a couple with children, and more respondents in households comprised of a single parent with children);
- the time lived at current address (more respondents who have lived there 20 years or more, and less who had lived there 1 year or less or 2-5 years.); and
- fewer respondents with their highest education level as primary school.

Survey respondents exhibited a similar demographic profile to that shown in the ABS 2006 census data for Miller. However:

- there is evidence of a sampling bias toward females and older respondents in the 2007 survey.

5. PERCEPTIONS OF CRIME AND SAFETY

5.1 PERCEPTIONS OF CRIME AND ANTISOCIAL BEHAVIOUR

Table 19: Perceptions of crime and antisocial behaviour

This table shows survey respondents' perceptions of crime over time in the Miller area and comparisons of respondents' ratings between surveys. Significant decreases in all perceptions of crime except speeding traffic were found for the the period 1999 to 2007. This is largely as a result of significant reductions in perceptions of crime that occurred from 1999 to 2002.

	Survey year				Survey comparison			
	1999	2002	2005	2007	1999-2002	2002-2005	2005-2007	1999-2007
Vandalism & graffiti	80.3%	54.5%	61.8%	57%	-25.8%***	+7.3%	-4.8%	-23.3%***
Assaults & muggings	63.8%	39.5%	50.4%	40%	-24.3%***	+10.9%*	-10.4%*	-23.8%***
Burglary	73.2%	47.0%	53.9%	37.3%	-26.2%***	+6.9%	-16.6%***	-35.9%***
Speeding traffic	78.4%	66.2%	66.3%	71.8%	-12.2**	+0.1%	+5.5%	-6.6%
Presence of drug dealers & users in public spaces	82.6%	56.0%	59.0%	56.4%	-26.6%***	+3.0%	-2.6%	-26.2%***
Drinking in public spaces	65.7%	47.6%	54.5%	46.1%	-18.1%***	+6.9%	-8.4%	-19.6%***
Antisocial behaviour	64.3%	48.8%	55.3%	50.6%	-15.5%***	+6.5%	-4.7%	-13.7%**
Domestic violence	n/a	n/a	n/a	37.6%	n/a	n/a	n/a	n/a

*** p < .001 ** p < .01 * p < .05

Table 20: Reports of crime

There was little change in respondents' reports of crime against themselves or a household member in the 12-months prior to survey from 1999 to 2007. Approximately one-quarter of the sample reported that they had been a victim of theft, assault, property damage or other criminal activity at each survey.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Victim of crime	52	24.4	80	24.0	74	27.4	36	20.1
Not a crime victim	161	75.6	254	76.0	196	72.6	143	79.9
Total	213	100	334	100	270	100	179	100

Table 21: Type of crime

The most common type of crime committed on respondents or members of their household in the 12 months prior to the survey in 2007 was assault/mugging and motor vehicle theft/damage. In previous years motor vehicle theft/damage was the most common crime reported by respondents. There was no significant difference in the types of crime committed on respondents or members of their household from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Assault and mugging	18	22.5	8	9.4	10	23.8
Burglary including break and enter	12	15	13	15.3	6	14.3
Motor vehicle theft or damage	22	27.5	24	28.2	9	21.4
Theft (not break and enter)	10	12.5	16	18.8	8	19.1
Property damage (not car)	14	17.5	19	22.4	5	11.9
Other crime	4	5	5	5.9	4	9.5
Total crimes	80	100	85	100	42	100
Total respondents	80		73		36	

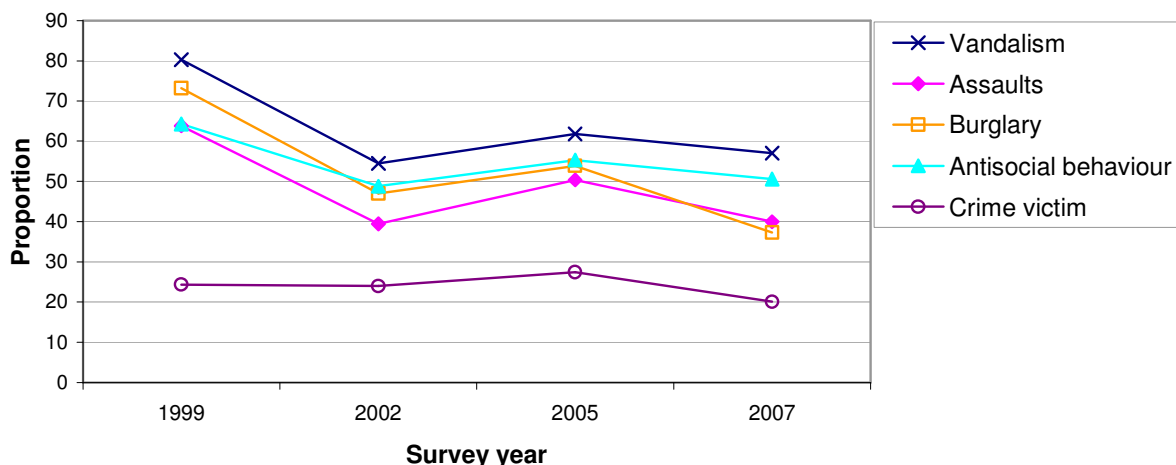
Table 22: Locality of crime

Most of the crimes reported by respondents to have been committed on themselves or a member of their household, were committed in the local area. There was little change across the 3 surveys.

	2002		2005		2007	
	N	%	N	%	N	%
Crime occurred in local area	70	87.5	72	97.3	33	91.7
Crime occurred elsewhere	10	12.5	2	2.7	3	8.3
Total	80	100	74	100	36	100

Figure 7: Perceptions of crime and reports of crime 1999-2007

This graph shows selected criminal acts and respondents' perceptions of these crimes over time (using data from the Tables 19 and 20). Reports of an actual crime have remained relatively constant from 1999 to 2007, however perceptions of crime have changed over time to a greater extent. Perceptions of vandalism and graffiti, assaults and muggings, burglary and antisocial behaviour have significantly reduced since the baseline survey in 1999. After the dramatic decrease in perceptions of crime in 2002, perceptions of crime slightly increased in 2005 but once again appear to be falling.



5.2 PERCEPTIONS OF SAFETY

Table 23: Feelings of safety in the home

There was a significant change in perceptions of feeling safe at home from the 1999 to 2007 ($\chi^2 = 24.698$, $df = 9$, $p = .003$). This is largely due to an overall increase in the proportion who always feel safe at home and a decrease in the proportion who never feel safe at home.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Always safe at home	95	44.6	188	56.3	134	49.6	106	58.9
Mostly safe	83	39.0	110	32.9	96	35.6	54	30.0
Sometimes safe	21	9.9	28	8.4	32	11.9	20	11.1
Never safe at home	14	6.6	8	2.4	8	3.0	0	0
Total	213	100	334	100	270	100	180	100

Table 24: Feelings of safety during the day

The majority of respondents agreed that they felt safe walking down the street in Miller during the daytime. There was no difference in respondents perceptions of safety in walking down their street in the daytime from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Strongly agree safe in daytime	101	30.7	96	35.8	61	34.5
Agree	186	56.5	128	47.8	94	53.1
Disagree	27	8.2	31	11.6	11	6.2
Strongly disagree safe in daytime	15	4.6	13	4.9	11	6.2
Total	329	100	268	100	177	100

Table 25: Feelings of safety at night

The majority of respondents did not feel safe walking down the street in Miller at night. There was no difference in respondents perceptions of safety in walking down their street in the night-time from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Strongly agree safe in night-time	22	6.8	21	8.2	15	8.9
Agree	65	20.1	45	17.5	36	21.4
Disagree	82	25.3	49	19.1	44	26.2
Strongly disagree safe in night-time	155	47.8	142	55.2	73	43.5
Total	324	100	257	100	168	100

Table 26: Reputation of Miller as safe

Most respondents felt that Miller does not have a reputation as a safe place. There was no difference in respondents perceptions from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Strongly agree	13	4.0	8	3.1	8	4.8
Agree	98	30.3	65	25.0	53	31.7
Disagree	138	42.7	101	38.8	68	40.7
Strongly disagree	74	22.9	86	33.1	38	22.8
Total	323	100	260	100	167	100

Key Messages: Perceptions of Crime and Safety

While reports of actual crime have remained relatively steady, perceptions of crime have reduced significantly since 1999 with the exception of speeding traffic.

There was a significant improvement in respondents' feelings of safety within the home from 1999 to 2007.

Most respondents feel safe walking down the street in the day and unsafe walking down the street at night with little change in perceptions over time; and

Most respondents feel Miller does not have a reputation as a safe place.

6. AMENITY AND OTHER COMMUNITY ISSUES

6.1 PERCEPTIONS OF AMENITY

Table 27: Perceptions of amenity

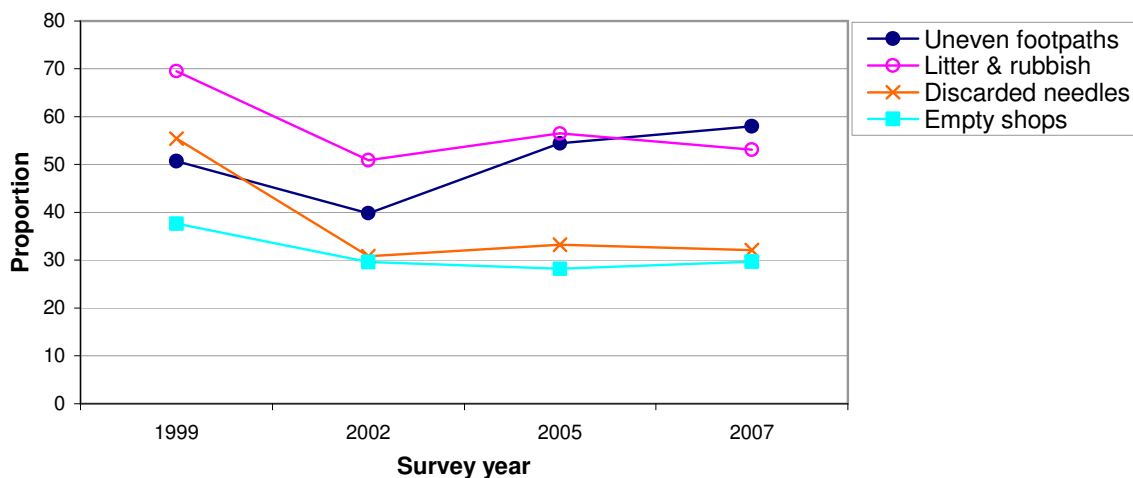
Perceptions of most aspects of amenity have not changed significantly from 1999 to 2007. However, significant reductions in perceptions that litter and discarded needles were a problem occurred from 1999 to 2007, largely as a result of the significant change in perceptions from 1999 to 2002.

	Survey year				Survey comparison			
	1999	2002	2005	2007	1999-2002	2002-2005	2005-2007	1999-2007
Litter & rubbish	69.4%	50.9%	56.4%	53.1%	-18.5%***	+5.5%	-3.3%	-16.3%***
Discarded needles & syringes	55.4%	30.8%	33.2%	32.1%	-24.6%***	+2.4%	-1.1%	-23.3%***
Uneven, dangerous footpaths	50.7%	39.8%	54.4%	58.0%	-10.9%*	+14.6%***	+3.6	+8%
Poor lighting	42.7%	38.9%	43.2%	34.5%	-3.8%	+4.3%	-8.7%	-8.2%
Empty shops & houses	37.6%	29.6%	28.2%	29.7%	-8.0%	-1.4%	+1.5%	-7.9%
Poor state of shops & houses	45.5%	38.0%	42.9%	37.7%	-7.5%	+4.9%	-5.2%	-7.8%
Poor state of open spaces & gardens	39.4%	31.7%	32.3%	31%	-7.7%	+6%	-1.2%	-8.4%

*** p < .001 ** p < .01 * p < .05

Figure 8: Perceptions of amenity 1999-2007

The graph below shows selected perceptions of amenity over time (using data from the table above). Perceptions of all the aspects of amenity identified here have improved since 1999 with the exception of uneven footpaths which has increased slightly. Most respondents believe that uneven footpaths and litter are a problem and have been for the last 2 surveys at least.



6.2 PERCEPTIONS OF OTHER COMMUNITY ISSUES

Table 28: Perceptions of other community issues

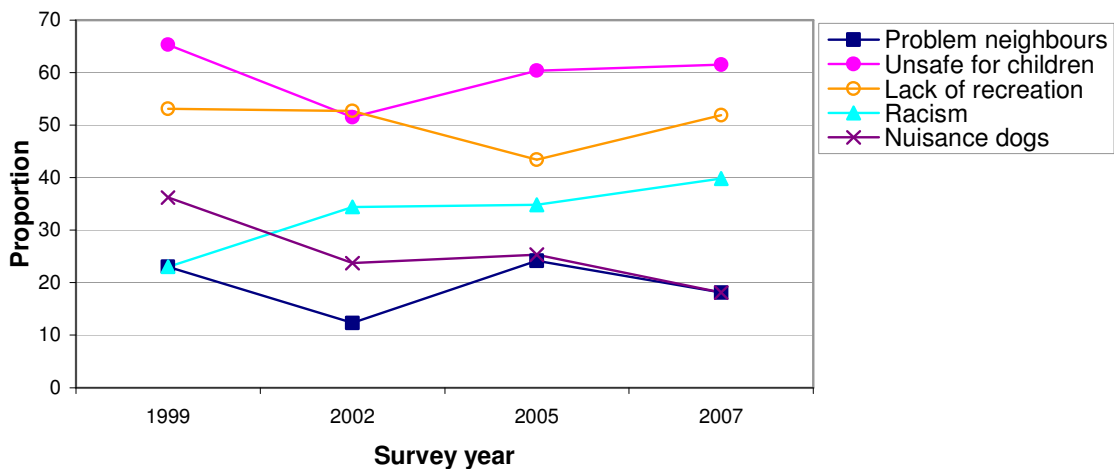
This table shows survey respondents' perceptions of social issues over time in the Miller area and comparisons of respondents' ratings between surveys. There was a significant decrease in respondent's perception of nuisance from dogs as a problem and a significant increase in perceptions of racism as a problem from 1999 to 2007, largely as a result of significant changes in perceptions from 1999 to 2002.

	Survey year				Survey comparison			
	1999	2002	2005	2007	1999-2002	2002-2005	2005-2007	1999-2007
Nuisance from dogs	36.2%	23.7%	25.3%	18.1%	-12.5%**	+1.6%	-7.2%	-18.1%***
Lack of safe places for children	65.3%	51.5%	60.4%	61.5%	-13.8%**	+8.9%*	+1.1%	-3.8%
Lack of recreational facilities	53.1%	52.7%	43.4%	51.9%	-.4%	-9.3%*	+8.5	-1.2%
Problems with neighbours	23.0%	12.3%	24.2%	18.1%	-10.7%**	+11.9%***	-6.1%	-4.9%
Racism	23.0%	34.4%	34.8%	39.8%	+11.4%**	+.4%	+5%	+16.8***

*** p < .001 ** p < .01 * p < .05

Figure 9: Perceptions of other community issues 1999-2007

This graph shows perceptions of selected community issues over time (using data from the table above). A lack of safe places for children and a lack of recreational facilities have consistently been perceived as a problem by the majority of respondents across the 4 surveys. Perceptions of racism as a problem in Miller appear to be increasing.



Key Messages: Perceptions of Amenity and other Community Issues

Most respondents believed that uneven footpaths and litter were a problem and have been for the last 2 surveys at least.

Significant reductions in perceptions that litter and discarded needles were a problem occurred from 1999 to 2007, largely as a result of the significant change in perceptions from 1999 to 2002.

Perceptions of all the aspects of amenity identified here, have improved since 1999 with the exception of uneven footpaths which has increased slightly.

Most respondents feel that a lack of safe places for children and a lack of recreational facilities are problems.

Perceptions of racism as a problem in Miller have increased significantly since 1999.

7. TRUST, SOLIDARITY AND SENSE OF COMMUNITY

7.1 PERCEPTIONS OF TRUST

Table 29: Perceptions that people can be trusted

Over half the sample believed that most people can be trusted. There was a slight increase in levels of trust but this was not significant.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Most people can be trusted	111	55.0	183	57.7	141	55.1	107	60.5
Most people can't be trusted	91	45.0	134	42.3	115	44.9	70	39.5
Total	202	100	317	100	256	100	17	100

Table 30: Perceptions of trust in other people and organisations

Respondents were asked to rank their level of trust in a range of different individuals, groups and organisations using a 5-point scale from 1 (do not trust at all) to 5 (trust completely). Higher scores therefore represent higher levels of trust. In 2005 and 2007 respondents put the greatest trust in family, friends and work colleagues. Health services, Commonwealth government services and the police force also ranked relatively high on the trust scale. Respondents were more likely to trust people in wider Australia than people in their own neighbourhood. The lowest levels of trust were ascribed to the media, State, local and Commonwealth politicians, media, and “big business”.

	2005		2007	
	N	Mean (SD)	N	Mean (SD)
People in immediate family	270	4.81 (0.66)	175	4.80 (0.66)
People in wider family	263	4.41 (0.95)	169	4.35 (1.06)
Friends	266	4.30 (0.95)	175	4.27 (1.07)
People in neighbourhood	258	3.05 (1.16)	164	3.16 (1.32)
Work or study colleagues	157	3.71 (1.09)	86	3.80 (1.18)
People in Australia	250	3.32 (.96)	157	3.43 (1.14)
Local politicians	240	2.05 (1.11)	155	2.22 (1.22)
State politicians	257	2.04 (1.11)	162	2.11 (1.16)
Commonwealth politicians	245	2.07 (1.09)	160	2.20 (1.30)
Big business	239	2.30 (1.14)	153	2.34 (1.23)
Police force	267	3.58 (1.17)	175	3.54 (1.25)
Legal/Justice system	253	2.47 (1.21)	156	2.58 (1.30)
Media	246	2.21 (1.06)	166	2.04 (1.15)
Unions	210	2.64 (1.18)	129	2.62 (1.33)
Education system	236	3.23 (1.13)	152	3.23 (1.27)
Religious institutions	246	3.17 (1.38)	144	3.19 (1.35)
Health services	263	3.54 (1.18)	176	3.55 (1.26)
Local government services	253	2.78 (1.19)	168	2.78 (1.24)
State government services	243	2.91 (1.28)	161	3.14 (1.35)
Commonwealth government services	253	2.88 (1.21)	172	3.51 (1.28)

7.2 COMMUNITY PARTICIPATION AND HELPFULNESS

Table 31: Family in the neighbourhood

The majority of respondents reported that they did not have family living in the neighbourhood. There was a significant decrease in the number of respondents who reported that they have family living in the neighbourhood from 2002 to 2007 ($\chi^2 = 9.082$, $df = 1$, $p = .003$).

	2002		2005		2007	
	N	%	N	%	N	%
Family in the neighbourhood	115	34.4	80	29.6	39	21.7
No family in the neighbourhood	219	65.6	190	70.4	141	78.3
Total	334	100	270	100	180	100

Table 32: Friends in the neighbourhood

Most respondents reported that they did have friends living in the neighbourhood. While there was no significant difference between the surveys, there was a slight decrease over time in the number of respondents who reported having close friends in the neighbourhood.

	2002		2005		2007	
	N	%	N	%	N	%
Friends in the neighbourhood	235	70.4	171	63.3	113	62.8
No friends in the neighbourhood	99	29.6	99	36.7	67	37.2
Total	334	100	270	100	180	100

Table 33: See friends when shopping

The majority of respondents ran into friends while shopping at least some of the time or more. There was no difference in the proportion of respondents who reported that they ran into friends while shopping from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Nearly always run into friends	94	28.1	81	30.6	52	29.2
Most of the time run into friends	73	21.9	45	17.0	36	20.2
Some of the time run into friends	83	24.9	68	25.7	44	24.7
Rarely or never run into friends	84	25.1	71	26.8	46	25.8
Total	334	100	265	100	178	100

Table 34: Visiting others in the neighbourhood

The majority of respondents had visited someone in the neighbourhood at least once in the previous week. Almost a quarter of respondents said they frequently visited someone. A large proportion said they had not visited anyone in the previous week. There was no significant difference in responses from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Frequently visited someone	87	26.0	57	21.1	42	23.3
A few times visited someone	61	18.3	47	17.4	32	17.8
At least once visited someone	58	17.4	44	16.3	28	15.6
Never visited someone	128	38.3	122	45.2	78	43.3
Total	334	100	270	100	180	100

Table 35: Number of support people

The majority of respondents had three or more people to turn to for support. There was no significant difference in the number of people that respondents had to turn to for support if needed from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
No-one to turn to for support	28	8.5	27	10.0	12	6.8
One person to turn to for support	36	10.9	23	8.6	10	5.6
Two people to turn to for support	44	13.3	44	16.4	26	14.7
Three or more people to turn to for support	222	67.3	175	65.1	129	72.9
Total	330	100	269	100	177	100

Table 36: Perceptions of helpfulness

In 2007 the majority of people felt that most people were helpful. This is a slight but not statistically significant increase from previous years.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Most are helpful	112	54.6	165	52.5	141	54.4	105	60.3
Most looking out for themselves	93	45.4	149	47.5	118	45.6	69	39.7
Total	205	100	314	100	259	100	174	100

Table 37: Helping neighbours

The majority of respondents had helped or been helped by their neighbours during the 3-months prior to the survey. A large proportion stated that they helped or were helped by their neighbours about once a week. However, a large proportion reported that they had not helped or been helped by their neighbours at all. There was no significant difference from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
About once a week help neighbours	90	27.9	80	29.7	55	30.9
Once every 2-3 weeks	49	14.7	37	13.8	25	14.0
Once a month or less	74	22.2	49	18.2	31	17.4
Not helped neighbours	120	36.0	103	38.3	67	37.6
Total	333	100	269	100	178	100

Table 38: Helping local groups

The majority of respondents had not helped out with local groups over the past 3-months. There was no difference in the number of times that respondents had helped out with local groups over the past 3 months from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
About once a week help groups	53	15.9	44	16.3	28	15.6
Once every 2-3 weeks	19	5.7	12	4.4	8	4.4
Once a month or less	42	12.6	23	8.5	17	9.4
Not helped groups	220	65.9	191	70.7	127	70.6
Total	334	100	269	100	180	100

Table 39: Attending local events

Just under half of the respondents reported attending at least one local community event in the past 6 months. Most had not attended a local event at all. There was a significant difference in responses from 2005 to 2007 ($\chi^2=9.636$, $df = 3$, $p = .022$) which is largely attributable to the increase in the proportion of respondents who had attended an event and the increase in respondents who had attended several events.

	2002		2005		2007	
	N	%	N	%	N	%
Not attended a local event	176	52.7	174	64.4	97	54.2
Once attended	75	22.5	47	17.4	27	15.1
Twice attended	32	9.6	18	6.7	19	10.6
Several times attended a local event	51	15.3	31	11.5	36	20.1
Total	334	100	270	100	179	100

Table 40: Club membership

Most respondents were not active members of a local club. There was no significant difference from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Not an active club member	209	62.6	152	56.3	91	50.6
A little active	38	11.4	42	15.6	25	13.9
Somewhat active	36	10.8	33	12.2	33	18.3
Very active club member	51	15.3	43	15.9	31	17.2
Total	334	100	270	100	180	100

7.3 TOLERANCE OF DIFFERENCE

Table 41: Local community acceptance of strangers

Most respondents agreed that if a stranger or someone different moved into their street they would be accepted by the neighbours. There was no significant change from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Not accepted	41	13.5	42	16.9	28	16.8
Accepted	263	86.5	206	83.1	139	83.2
Total	304	100	248	100	167	100

Table 42: Perceptions of multiculturalism

Most respondents did not believe that multiculturalism makes life better. Approximately a quarter believed that multiculturalism does not make life better at all. There was little difference in responses from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Does not make life better at all	56	18.3	59	24.0	40	24.0
Does not make life much better	101	33.9	80	32.5	53	31.7
Makes life a fair bit better	96	32.2	74	30.1	40	24.0
Definitely makes life better	45	15.1	33	13.4	34	20.4
Total	298	100	246	100	167	100

Table 43: Difference that divide people in the neighbourhood

This question was introduced in the 2007 survey to explore perceptions of differences that divide people in the neighbourhood. Most respondents felt that differences between people with drug and alcohol or mental health problems and other residents divided the neighbourhood. A majority also felt that differences between older and younger generations, differences in ethnic background and differences in religious beliefs divided the neighbourhood. On the other hand most respondents felt that landholdings, political party affiliation and differences between males and females did not cause divisions in the neighbourhood.

	Somewhat		Not at all	
	N	%	N	%
Differences between residents and people with drug or mental health problems divide people	122	74.4	42	25.6
Differences in age divide people	97	57.4	72	42.6
Differences in ethnicity divide people	92	54.1	78	45.9
Differences in religious beliefs divide people	91	53.8	78	46.2
Differences in length of residence divide people	83	50.3	82	49.7
Differences in social status divide people	75	45.2	91	54.8
Differences in education divide people	64	41.3	91	58.7
Differences in wealth divide people	61	36.5	106	63.5
Differences in landholdings divide people	43	29.7	102	70.3
Differences in political party affiliations divide people	39	26.5	108	73.5
Differences in gender divide people	39	24.8	118	75.2

Other Differences

A small proportion of respondents (n=11) identified other differences that tended to divide people in the neighbourhood. Half of these were concerned with antisocial behaviour (n=6) e.g. swearing and bad language, people who ignore water restrictions, not keeping properties clean and tidy. Other differences included the difference between migrants and older Australians, employed and unemployed people, and people with English language difficulties and people without difficulties.

Table 44: Do differences cause problems?

Respondents were asked if the differences ever caused problems and the majority felt that they did.

	N	%
Cause problems	92	60.5
Don't cause problems	60	39.5
Total	152	100

Table 45: Do differences ever lead to violence?

Of those who believed that the differences that divide people in the neighbourhood cause problems, most believed that these differences, at least sometimes, lead to violence.

	N	%
Lead to violence	70	76.1
Don't lead to violence	22	23.9
Total	92	100

7.4 SENSE OF COMMUNITY

Table 46: Feel at home in Miller

The majority of respondents felt very at home in Miller. There was no significant difference in respondents' perceptions of feeling at home in Miller from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Feel a lot at home in Miller	221	66.4	181	67.0	135	75.4
Feel a bit at home	76	22.8	51	18.9	25	14.0
Don't feel much at home	21	6.3	17	6.3	8	4.5
Don't feel at home at all in Miller	15	4.5	21	7.8	11	6.1
Total	333	100	270	100	179	100

Table 47: Feel sorry to leave Miller

The majority of respondents said they would feel sorry to leave Miller if they had to go. 16.9% said they would not be sorry at all. There was no difference in respondents' perceptions of how they would feel if they had to leave Miller across the 2002, 2005 and 2007 surveys.

	2002		2005		2007	
	N	%	N	%	N	%
Feel a lot sorry to leave Miller	123	37.7	109	41.3	88	49.4
Feel a bit sorry	98	30.1	59	22.3	41	23.0
Don't feel much sorry	44	13.5	37	14.0	19	10.7
Don't feel at all sorry to leave Miller	61	18.7	59	22.3	30	16.9
Total	326	100	264	100	178	100

Table 48: Interested in what goes on in Miller

Approximately 40% of respondents said they had little or no interest in what goes on in Miller. There was no significant change in responses from 2002 to 2007.

	2002		2005		2007	
	N	%	N	%	N	%
A lot of interest in Miller	76	22.8	61	22.7	51	28.8
A bit of interest	112	33.6	76	28.3	52	29.4
Not much interest	99	29.7	90	33.5	44	24.9
No interest at all in Miller	46	13.8	42	15.6	30	16.9
Total	333	100	269	100	177	100

Key Messages: Trust, solidarity and sense of community

The majority of respondents believe that most people can be trusted and respondents put the greatest trust in family, friends and work colleagues. Health services, commonwealth government services and the police force also ranked relatively high on the trust scale.

Respondents were more likely to trust people in wider Australia than people in their own neighbourhood and the lowest levels of trust were ascribed to the media, State, Local and Commonwealth politicians, media, and 'big business'.

The majority of respondents do not have family in the neighbourhood but do have friends and 3 or more people to turn to for support in the neighbourhood.

The majority felt that most people were helpful and had helped or been helped by their neighbours during the 3 months prior to survey.

The majority of respondents had visited someone in the neighbourhood at least once in the previous week. Less than half had attended a local community event in the previous 6 months and the majority had not helped out a local group. Approximately half were members of a local club.

Most respondents agreed that if a stranger or someone different moved into their street they would be accepted by the neighbours, however half of the respondents believed that differences between new and long term residents divided people in the neighbourhood.

Just over half felt that multiculturalism does not make life better and a similar proportion felt that differences in ethnicity and religion divided people in the neighbourhood.

A major issue which most respondents believed divided the neighbourhood was the difference between people with drug/alcohol or mental health problems and other residents. Most respondents felt that the differences that divide people in the neighbourhood caused problems and sometimes led to violence.

Most people felt very at home in Miller and would be sorry to leave if they had to, however many reported little or no interest in what goes on in Miller.

8. PERCEPTIONS OF HEALTH

8.1 SELF-RATED GENERAL HEALTH

The GH1 is a single question widely used by government and other agencies in assessing general health. Survey respondents rate their health according to a 5-point scale ranging from excellent (1) to poor health (5). The GH1 can be analysed as a categorical or continuous variable: here it is interpreted as a continuous variable representing a score range.

Table 49: GH1 General health scores

While there was a statistically significant improvement in general health from 1999 to 2002 ($F = 3.225$, $df = 2, 812$, $p < .05$), overall, general health scores have not been significantly different from 1999 to 2007.

Survey year	N	Mean	SD	CI
1999	211	2.97	1.13	2.81 – 3.12
2002	334	3.22	1.19	3.09 – 3.35
2005	270	3.08	1.10	2.95 – 3.22
2007	180	3.02	1.20	2.85 – 3.20

8.2 SF-12 PHYSICAL AND MENTAL HEALTH

The SF-12 is a comprehensive self-reported assessment of physical and mental health. This scale was used in the 2002, 2005 and 2007 surveys. Scores on the SF-12 Physical Component Summary (PCS-12) were shown to be bimodal in the 2002 survey and normally distributed in the 2005 and 2007 surveys. Scores on the SF-12 Mental Component Summary (MCS-12) were negatively skewed in all three surveys. This meant that a non-parametric test was the most appropriate statistical test for both of these scales. The Kruskal Wallis test was used to compare physical and mental health across the 2002, 2005 and 2007 surveys.

Table 50: SF-12 Physical Health scores

There was no significant difference in the mean PCS-12 score across the three surveys. The 2007 mean score of 48.32 compares well to other norms:

- SF-12 population norms 2002 (based on US data): $n = 2\,329$, mean = 50.0, SD = 10.0;
- Australia National Mental Health Survey 1997: $n = 10\,641$, mean = 48.9, SD = 10.1;
- SF-12 population norms for South Australia 2003: $n = 2\,013$, mean = 48.9, SD = 10.2;
- South Australian SF-12 scores for areas rated most disadvantaged 2003 (SEIFA ISRD): $n = 414$, mean = 48.1, SD = 10.7.

Survey year	N	Mean	Median	SD	Range
2002	326	47.12	50.17	10.50	45.55
2005	264	49.00	49.72	7.18	40.74
2007	180	48.32	47.51	7.24	41.82

Table 51: SF-12 Mental health scores

There was a significant difference in mental health from 2002 to 2005 ($\chi^2 = 6.717$, $df = 2$, $p = .035$). This is largely attributed to the significantly lower MCS-12 mean scores in the 2005 and 2007 surveys. The mean MCS-12 scores for all three surveys appear lower than other available norms:

- SF-12 population norms 2002 (based on US data): $n = 2\,329$, mean = 50.0, SD = 10.0;
- Australia National Mental Health Survey 1997: $n = 10\,641$, mean = 51.8, SD = 9.4;
- SF-12 population norms for South Australia 2003: $n = 2\,013$, mean = 52.4, SD = 8.8;
- South Australian SF-12 scores for areas rated most disadvantaged 2003 (SEIFA ISRD): $n = 414$, mean = 51.4, SD = 8.7.

Survey year	N	Mean	Median	SD	Range
2002	326	48.75	51.24	13.67	57.35
2005	270	47.50	50.94	12.66	56.69
2007	180	47.05	51.12	12.25	55.79

Key Messages: Perceptions of Health

The mean general health score in 2007 was 3.02. The mean general health score has not changed significantly from 1999 to 2007.

Physical health, measured by the SF-12, showed little change from 2002 to 2007. The 2007 mean score of 48.32 compares well to other norms.

Mental health, measured by the SF-12, decreased significantly from 2002 to 2005 and remained low in 2007. Scores for mental health in all three surveys appear to be lower for people in the Miller sample than those in the SF-12 norms or in other Australian populations.

9. KNOWLEDGE AND SATISFACTION WITH SERVICES

9.1 AWARENESS OF MILLER BASED PROJECTS

Table 52: Heard of Community 2168

Approximately half of the sample had heard of Community 2168 across all three surveys.

	2002		2005		2007	
	N	%	N	%	N	%
Heard of Community 2168	155	47.0	120	44.8	89	49.4
Not heard of Community 2168	175	53.0	148	55.2	91	50.6
Total	330	100	268	100	180	100

Table 53: Heard of the Hub

Most respondents reported that they had heard of the Hub. Responses were significantly different across the 3 surveys as a result of more people reporting that they were aware of the Hub ($\chi^2 = 8.580$, $df = 2$, $p = .014$).

	2002		2005		2007	
	N	%	N	%	N	%
Heard of the Hub	238	71.5	209	77.7	148	82.7
Not heard of the Hub	95	28.5	60	22.3	31	17.3
Total	333	100	269	100	179	100

9.2 SATISFACTION WITH HEALTH SERVICES

Table 54: Satisfaction with General Practitioners

The majority of respondents reported that their GP care was very good or excellent. There was a significant difference in responses across the 4 surveys ($\chi^2 = 37.756$, $df = 12$, $p < .001$) due to a greater proportion rating the service as good and less rating the service as excellent.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Excellent	76	42.9	135	54.7	92	46.2	48	28.2
Very good	55	31.1	55	22.3	57	28.6	58	34.1
Good	36	20.3	40	16.2	34	17.1	47	27.6
Fair	9	5.1	12	4.9	11	5.5	8	4.7
Poor	1	0.6	5	2.0	5	2.5	9	5.3
Total	177	100	247	100	199	100	170	100

Table 55: Satisfaction with Medical Specialists

The majority of respondents reported that their specialist care was good or very good. There was a significant difference in responses across the 4 surveys ($\chi^2 = 33.863$, $df = 12$, $p = .001$) due to a greater proportion rating the service as good and less rating the service as excellent.

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Excellent	31	40.8	52	37.7	56	43.8	21	16.8
Very good	28	36.8	37	26.8	32	25.0	39	31.2
Good	13	17.1	32	23.2	23	18.0	39	31.2
Fair	2	2.6	8	5.8	9	7.0	12	9.6
Poor	2	2.6	9	6.5	8	6.3	14	11.2
Total	76	100	138	100	128	100	125	100

Table 56: Satisfaction with Community Based Health Services

The majority of respondents reported that their community based health care was good. There was a significant difference in responses across the 3 surveys ($\chi^2 = 21.457$, $df = 8$, $p = .006$) due to a greater proportion rating the service as good and less rating the service as excellent.

	2002		2005		2007	
	N	%	N	%	N	%
Excellent	16	31.4	18	47.4	15	17.9
Very good	14	27.5	5	13.2	13	15.5
Good	7	13.7	8	21.1	33	39.3
Fair	8	15.7	3	7.9	10	11.9
Poor	6	11.8	4	10.5	13	15.5
Total	51	100	38	100	84	100

Table 57: Allied Health

In 2007 respondents were asked to rate their satisfaction with services provided by Allied Health. Services provided by Allied Health were rated as good, very good or excellent by the majority of respondents.

	2007	
	N	%
Excellent	15	23.8
Very good	14	22.2
Good	22	34.9
Fair	7	11.1
Poor	5	7.9
Total	63	100

Table 58: Liverpool Hospital

In 2007 respondents were asked to rate their satisfaction with services provided by Liverpool Hospital. The majority rated the Hospital services as good or very good, however 20.8% rated the Hospital as poor.

2007		
	N	%
Excellent	24	16.7
Very good	33	22.9
Good	49	34.0
Fair	8	5.6
Poor	30	20.8
Total	144	100

9.3 SATISFACTION WITH GOVERNMENT SERVICES

Table 59: Satisfaction with Housing NSW

The majority of respondents rated their satisfaction with Housing NSW as fair or poor. There was no significant difference across the three surveys.

	2002		2005		2007	
	N	%	N	%	N	%
Excellent	14	12.8	6	7.2	10	10.1
Very good	15	13.8	15	18.1	8	8.1
Good	23	21.1	13	15.7	18	18.2
Fair	12	11.0	11	13.3	25	25.3
Poor	45	41.3	38	45.8	38	38.4
Total	109	100	83	100	99	100

Table 60: Satisfaction with Centrelink

Most respondents rated their satisfaction with Centrelink services as good. There was no significant difference across the three surveys.

	2002		2005		2007	
	N	%	N	%	N	%
Excellent	14	20.9	7	14.9	18	13.7
Very good	18	26.9	8	17.0	26	19.8
Good	13	19.4	17	36.2	5	40.5
Fair	10	14.9	3	6.4	17	13.0
Poor	12	17.9	12	25.5	17	13.0
Total	67	100	47	100	131	100

Table 61: Satisfaction with Department of Education and Schools

In 2002 and 2005 respondents were asked how satisfied they were with the Department of Education and local schools. Most respondents rated their satisfaction with the Department of Education or local school as good or higher. There was no significant difference from 2002 to 2005.

	2002		2005	
	N	%	N	%
Excellent	10	23.3	3	14.3
Very good	10	23.3	3	14.3
Good	12	27.9	7	33.3
Fair	7	16.3	1	4.8
Poor	4	9.3	7	33.3
Total	43	100	21	100

Table 62: Satisfaction with Department of Education 2007

In 2007 respondents were asked how satisfied they were with the Department of Education (excluding local schools). Most respondents rated their satisfaction with the Department of Education as good or very good.

	2007	
	N	%
Excellent	7	11.9
Very good	15	25.4
Good	24	40.7
Fair	7	11.9
Poor	6	10.2
Total	59	100

Table 63: Satisfaction with Schools 2007

In 2007 respondents were asked how satisfied they were with local schools (not Department of Education as a whole). Most respondents rated their satisfaction with local school as good or very good.

	2007	
	N	%
Excellent	12	14.5
Very good	21	25.3
Good	33	39.8
Fair	10	12.0
Poor	7	8.4
Total	83	100

Table 64: Satisfaction with Department of Community Services

Only 26% of respondents answered this question. The majority rated the service as good and a large proportion also felt it was poor. Statistical tests were not performed for this question because of the small numbers in each category.

	2002		2005		2007	
	N	%	N	%	N	%
Excellent	3	25.0	2	33.3	5	10.6
Very good	1	8.3	0	0.0	7	14.9
Good	3	25.0	1	16.7	19	40.4
Fair	0	0	0	0	6	12.8
Poor	5	41.7	3	50.0	10	21.3
Total	12	100	6	100	47	100

Table 65: Satisfaction with Liverpool City Council

While the largest proportion of respondents rated Liverpool City Council as good, almost half rated their satisfaction as fair or poor. There was no significant difference across the two surveys.

	2005		2007	
	N	%	N	%
Excellent	6	15.4	11	8.1
Very good	8	20.5	26	19.1
Good	7	17.9	38	27.9
Fair	8	20.5	24	17.6
Poor	10	25.6	37	27.2
Total	39	100	136	100

9.4 SATISFACTION WITH POLICE AND OTHER SERVICES

Table 66: Satisfaction with Police

While the majority of survey respondents rated their satisfaction with Police as good or higher, there was a large proportion who rated their satisfaction as fair or poor. There was no significant difference across the two surveys.

	2005		2007	
	N	%	N	%
Excellent	20	25.3	19	14.3
Very good	19	24.1	28	21.1
Good	17	21.5	35	26.3
Fair	7	8.9	20	15.0
Poor	16	20.3	31	23.3
Total	79	100	133	100

Table 67: Satisfaction with Police presence

The majority of respondents were satisfied with the level of Police presence, however a large proportion were dissatisfied or very dissatisfied. There was no significant difference across the two surveys.

	2005		2007	
	N	%	N	%
Very satisfied	16	6.0	22	12.7
Satisfied	104	39.2	72	41.6
Neither	39	14.7	17	9.8
Dissatisfied	62	23.4	39	22.5
Very dissatisfied	44	16.6	23	13.3
Total	265	100	173	100

Table 68: Non-Government Organisations

In 2007 respondents were asked to rate their satisfaction with services provided by Non-Government Organisations. Services were rated as good or very good by the majority of respondents.

	2007	
	N	%
Excellent	11	14.9
Very good	17	23.0
Good	29	39.2
Fair	12	16.2
Poor	5	6.8
Total	63	100

9.5 GAPS AND OTHER SERVICE ISSUES

Table 69: Finding help with drug or alcohol problem in the area

There was a significant difference in who respondents would turn to for help if there was a drug and alcohol problem in the area from 2002 to 2005 ($\chi^2 = 23.706$, $df = 4$, $p < .001$). This is largely attributed to changes that were identified in the 2005 survey: an increase in the proportion of respondents who said they would turn to Police and a decrease in the proportion who wouldn't tell anybody or wouldn't know who to contact.

	2002		2005		2007	
	N	%	N	%	N	%
Police	213	66.8	177	81.9	112	62.2
Services (e.g. health, welfare, housing)	17	5.3	13	6.0	9	5
Family and friends	6	1.9	6	2.8	6	3.3
Local members and councillors	27	8.5	5	2.3	5	2.8
Nobody or don't know who to contact	56	17.6	15	6.9	48	26.7
Total	319	100	216	100	180	100

Table 70: Perception that person/ agency would listen to problem

Most respondents believed that the person/agency would probably or definitely listen to them. There was no significant difference across the surveys, however a greater proportion said they would definitely listen to them in 2007 than in the other surveys.

	2002		2005		2007	
	N	%	N	%	N	%
Definitely	79	29.0	67	33.7	58	41.4
Probably	142	52.2	98	49.2	60	42.9
Not really	39	14.3	24	12.1	13	9.3
Not at all	12	4.4	10	5.0	9	6.4
Total	272	100	199	100	140	100

Table 71: Perception that person/ agency would take action on problem

Most survey respondents believed that the person/agency would probably or definitely take action based on their information, and this proportion increased slightly in 2007. There was a significant change in responses across the 3 surveys ($\chi^2=16.468$, $df = 6$, $p = .011$) largely attributable to a greater proportion of respondents believing that the person/agency would definitely take action, and a smaller proportion who believed the person/agency would not really take action in 2007.

	2002		2005		2007	
	N	%	N	%	N	%
Definitely	46	17.3	52	26.9	44	31.4
Probably	133	50.0	81	42.0	64	45.7
Not really	59	22.2	43	22.3	17	12.1
Not at all	28	10.5	17	8.8	15	10.7
Total	266	100	193	100	140	100

Table 72: Perception that person/ agency would solve problem

The majority of respondents believed that the person/agency would probably solve the problem. There was no significant difference across the surveys.

	2002		2005		2007	
	N	%	N	%	N	%
Definitely	23	8.9	17	8.9	16	12.3
Probably	119	46.1	89	46.8	70	53.8
Not really	81	31.4	52	27.4	31	23.8
Not at all	35	13.6	32	16.8	13	10.0
Total	258	100	190	100	130	100

Table 73: Training and employment opportunities

Respondents were asked if they felt there were training and employment opportunities for people living in the area in 2007. The majority felt that there were.

	2007	
	N	%
Yes there are training/employment opportunities	94	69.1
No there aren't training/ employment opportunities	42	30.9
Total	136	100

Table 74: Other services that are needed

Questions were added in the 2007 survey asking respondents if there are other services not currently provided that are needed in the area. A small proportion of respondents did think that other services were needed in the area.

	2007	
	N	%
Other services are needed	38	21.5
No other services identified	139	78.5
Total	175	100

Key Messages: Knowledge and Satisfaction with Services

Awareness of the Hub was high and approximately half were aware of Community 2168.

Satisfaction with health services was relatively high with most respondents rating the services as good, very good or excellent. A higher proportion of respondents rated GP care and Allied Health care as excellent than for other health service providers.

Satisfaction with government services was relatively low, especially Housing NSW and Liverpool City Council. However a large proportion of respondents rated Department of Community Services, Centrelink, Department of Education and local schools as good.

Over half of the respondents rated the Police as good, very good or excellent and were satisfied with the level of Police presence, however there was a large proportion who rated the service as poor and were dissatisfied with the level of Police presence.

Most respondents believed that there were training and employment opportunities in the local area and didn't identify any other services that they felt were needed.

10. GLOBAL PERCEPTIONS OF CHANGE

Table 75: Perceptions of change in Miller

The majority of respondents felt that Miller had either, over the past two years, become better in some ways and worse in other ways, had become better overall or was about the same. Only 12.2% believed that Miller was worse, a significant reduction since 1999 ($\chi^2 = 93.898$, $df = 3$, $p < .001$).

	1999		2002		2005		2007	
	N	%	N	%	N	%	N	%
Miller is better	33	15.6	107	33.2	64	24.4	51	29.7
Miller is worse	108	51.2	44	13.7	47	17.9	22	12.2
About the same	60	28.4	77	23.9	70	26.7	42	24.4
Some better some worse	10	4.7	94	29.2	81	30.9	57	33.1
Total	211	100	322	100	262	100	170	100