



# Australian Social Trends

USING STATISTICS TO PAINT A PICTURE OF AUSTRALIAN SOCIETY



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# Introduction

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*Australian Social Trends* draws on a wide range of data, sourced both from ABS and other agencies, to present a picture of Australian society. This publication aims to inform decision-making, research and discussion on social conditions in Australia. It covers social issues of current and ongoing concern, population groups of interest, and changes in these over time.

The selection of articles aims to address current and perennial social concerns and to provide answers to key social questions. Some topics are revisited as new data become available. The aim of this approach is for each report to remain responsive to contemporary concerns, while accumulating a more comprehensive picture of Australian social conditions over time. For this reason, articles often include cross references to other relevant articles in the current issue, and in previous issues. All articles published since 1994 are available on the ABS web site: [www.abs.gov.au](http://www.abs.gov.au).

*Australian Social Trends* is structured according to the ABS Wellbeing Framework which identifies areas of social concern, population groups and transactions among people and entities within their social environments (see *Measuring Wellbeing: Frameworks for Australian Social Statistics, 2001* – ABS cat. no. 4160.0). The broad areas of social concern are:

- population
- family and community
- health
- education and training
- work
- economic resources
- housing
- crime and justice
- culture and leisure
- other areas - including environment, religion, and transport and communication.

From March 2009, *Australian Social Trends* will be issued on a quarterly basis after being issued annually from 1994 to 2008. In the course of a year, articles will cover a wide range of the areas of social concern.

The articles focus strongly on people and social concerns. Each article aims to tell a story, providing a sense of the social and historical context in which a particular topic is embedded, moving from the general to the specific, and using statistics to bring light to the issue. Articles aim to balance 'what' analysis (relating the relevant statistical facts surrounding the issue, e.g. number, characteristics, change over time, sex, age and other differences), with 'why' analysis (providing context and explanation by highlighting relevant social changes and events and the chronologies of these). For example, an article on work may examine current labour force participation, how the labour market has changed over time, how different groups of people are affected by social and economic conditions, and how these factors may be linked to observed employment trends.





# Jobless families

Employment can provide an individual with benefits in terms of financial security, self-esteem and social engagement. Families with no employed parent may be at risk of economic disadvantage and reduced social opportunities, and these in turn may impact on the wellbeing of the family members.

Children are amongst the most vulnerable of the family members and may be at greater risk of experiencing financial hardship and income poverty. Furthermore, a child's future economic success may depend on their access to economic resources during the first 15 years of life.<sup>1</sup> Living without an employed parent may also raise the risk of these children growing up to be jobless themselves.<sup>2</sup> However, while studies point to a higher incidence of poor outcomes for children living without an employed parent, it is important to note that results do not indicate a simple deterministic pattern – that is, childhood experiences of family joblessness do not necessarily result in adverse outcomes. In some circumstances living without an employed parent may be positive for the child, for example if the parents choose not to work in order to care for the child. A parent may also undertake study and this may mean that the economic wellbeing of the family is improved in the longer term.

The Social Inclusion Board recently reported that Australia has one of the highest levels of joblessness amongst families of all developed countries in the OECD.<sup>2,3</sup> Jobless families with children have been identified by the Australian Government as a top priority for the Australian Social Inclusion Board to address.

## Data source and definitions

This article uses data from the 2007–08 Survey of Income and Housing. Data from this survey are restricted to a point-in-time measure.

In this article, a *family with no employed parent* or a *jobless family* refers to a family with at least one child aged less than 15 years in which no resident parent is employed. This includes parents who are unemployed or not in the labour force. Other members of the family or household in which the family lives may be employed.

A *family* is two or more persons, one of whom is at least 15 years of age, who are related by blood, marriage (registered or de facto), adoption, step or fostering, and who are usually resident in the same household.

In this article *children* are those aged under 15 years or dependent full-time students aged between 15 and 24 years, who are usually resident in the household.

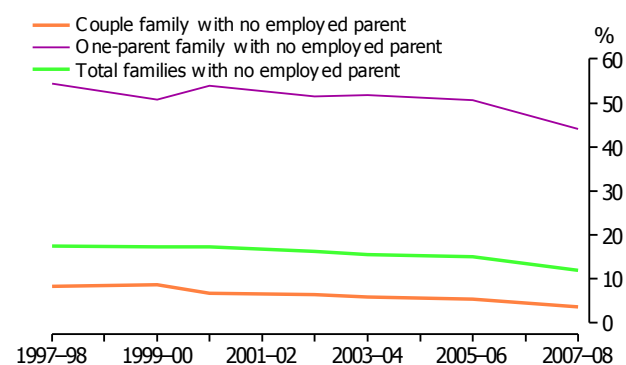
A *couple family* with children is comprised of two usual residents, both aged 15 years and over, who are married to each other or living in a de facto relationship with each other, who have at least one child aged less than 15 years usually resident in the household.

A *one-parent family* is comprised of one parent with no resident partner (married or de facto), with at least one child aged less than 15 years usually resident in the household.

*Unemployed* people are those aged 15 years and over who were not employed, but were available for work and who were actively looking for work at the time of the interview.

*Not in the labour force* refers to those people aged 15 years and over who were not employed and who were not actively looking for work at the time of the interview.

## Jobless families with children(a) by family type – 1997-98 to 2007-08



(a) Children aged less than 15 years.

Source: ABS, 1997-98, 1999-00, 2000-01, 2002-03, 2003-04, 2005-06, 2007-08 Surveys of Income and Housing

## Changes over time

In 2007–08, there were 266,000 families with at least one child aged less than 15 years with no employed parent. Jobless families as a proportion of all families with children has decreased from 18% in 1997–98 to 12% in 2007–08. This overall fall can partly be related to the decade's economic growth, when the unemployment rate fell from 7.7% in 1998 to 4.2% in 2008. During this time, the percentage of couple families who were jobless decreased from 8.4% in 1997–98 to 3.6% in 2007–08.

Over the same decade, the proportion of one-parent families with no employed resident parent also decreased, from 54% to 44%. This may be related to the increased availability of part-time work, increased economic prosperity over the decade and changes to government

policy. These changes included the introduction of childcare benefits and rebates, and changes in eligibility requirements to the Parenting Payment.

While the overall proportion of families with no employed parent has decreased over the past decade, there has been a shift in the distribution of couple and one-parent families. In 1997–98 one-parent families made up three-fifths (61%) of all families without an employed parent, but by 2007–08 this had increased to around three-quarters (76%). Most jobless one-parent families were headed by mothers (93%).

## Family composition

In 2007–08 over 500,000 children aged less than 15 years lived in a family with no employed parent, and almost three-quarters (73%) of these children lived in one-parent families.

Of all children living in one-parent families, half lived with no employed parent. Of all children living in couple families, 4.2% lived with no employed parent.

In approximately half (47%) of all jobless families, the youngest child was aged less than five years. In a further 32% of these families the youngest child was aged between five and nine years, and in the remaining 21% the youngest child was aged between 10 and 14 years.

In almost half (47%) of jobless one-parent families the youngest child was aged less than five years compared with one-quarter (25%) of one-parent families where the resident parent was employed. This suggests that caring for a young child may be an important reason for parents not working, particularly in one-parent families.

Families with no employed parent were more likely to have a larger number of children than families with at least one employed parent.

### Proportion of families with children(a) by age of youngest child – 2007-08

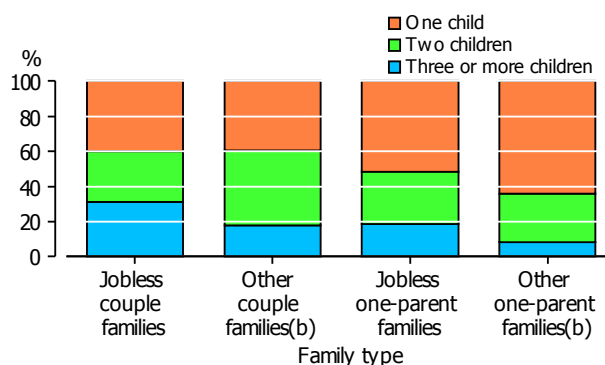
Family type	Age of youngest child (years)			
	0-4	5-9	10-14	Total
Families with no employed parent	46.8	32.2	21.1	100.0
Couple families	44.9	27.3	*27.8	100.0
One-parent families	47.4	33.7	18.9	100.0
Families with at least one employed parent	44.5	27.1	28.4	100.0
Couple families	47.4	26.1	26.5	100.0
One-parent families	25.2	33.5	41.3	100.0

\* estimate has a relative standard error of 25% to 50% and should be used with caution

(a) Children aged less than 15 years.

Source: ABS 2007-08 Survey of Income and Housing

### Families with children(a), number of children aged less than 15 years in family – 2007-08



(a) Children aged less than 15 years.

(b) Other couple and one-parent families refers to all families with at least one parent employed with at least one child less than 15 years.

Source: ABS 2007-08 Survey of Income and Housing

In 22% of jobless families (both couple and one-parent) there were three or more children aged less than 15 years, compared with 16% of families with at least one employed parent. This difference was more pronounced for one-parent families where around one-fifth (19%) of jobless one-parent families had three or more children aged less than 15 years, compared with under one-tenth (8.4%) of one-parent families where the resident parent was employed.

## Household income

The economic wellbeing of a family is largely determined by its income and housing circumstances.<sup>4</sup> Looking at the distribution of income across all jobless families (couple and one-parent) a substantial majority (81%) had a weekly equivalised household income in the lowest 20%, compared with 12% of families with at least one parent employed. Of the 159,000 jobless families who had a weekly equivalised household income in the lowest 20%, over two-thirds (68%) were one-parent families.

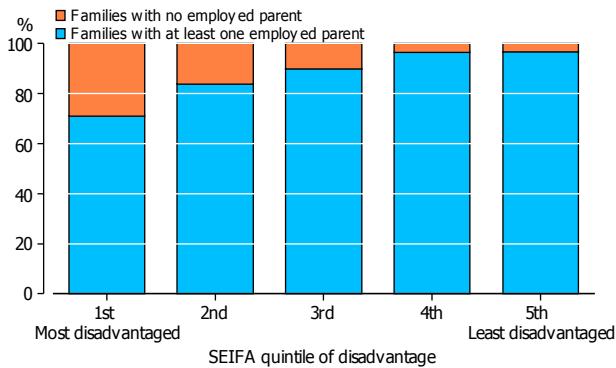
A very small proportion of all jobless families (around 5%) had a weekly equivalised household income in the top 60% compared with almost two-thirds (63%) of families with at least one employed parent.

### ...principal source of income

The vast majority (90%) of all families with no employed parent received their principal source of income from government pensions and allowances, compared with just 6% of families with at least one employed parent.

Approximately 6% of jobless one-parent families received their principal source of income from other sources – this includes income from child support payments.

## Families with children(a) by relative disadvantage of area(b) – 2007-08



(a) Children aged less than 15 years.

(b) 1st quintile - most disadvantaged; 5th quintile - least disadvantaged.

Source: ABS 2007-08 Survey of Income and Housing

### Socioeconomic factors

The Socio-Economic Index of Disadvantage (SEIFA) summarises the attributes of an area in which people live (including low income, low educational attainment and unemployment). Geographical areas are ranked according to their index score, with the first quintile made up of the most disadvantaged areas and the fifth quintile made up of the least disadvantaged areas.

Almost one-third (29%) of the families living in areas of greatest relative disadvantage were jobless compared with around 3% of jobless families living in areas of lowest relative disadvantage. Of the 121,000 jobless families living in the areas of greatest relative disadvantage a substantial majority (79%) were one-parent families.

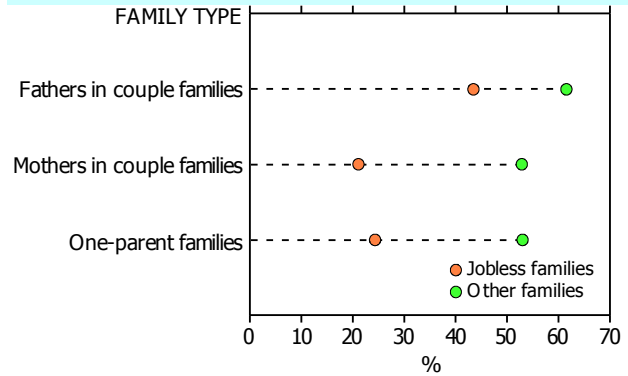
### ...tenure

For most families the provision of ongoing housing is usually their largest single expense. For families which own their homes it is commonly their largest asset and one that provides a key economic resource for maintaining their economic wellbeing. This analysis measures the tenure type of the head of the family.

Over 190,000 families with no employed parent were renters and of these families the vast majority (81%) were one-parent families. Of all jobless families who were renting, 36% were renting from a state or territory housing authority and 62% were renting from a private landlord.

Families with no employed parent were less likely to own their own home (with or without a mortgage) (25%) than families with at least one employed parent (72%).

## Families with children(a), proportion of parents with non-school qualifications – 2007-08



(a) Children aged less than 15 years.

Source: ABS 2007-08 Survey of Income and Housing

### ...parent's education

Higher levels of educational attainment are often associated with increased employment opportunities and higher wages. Parents in jobless families (either couple or one-parent) were less likely to have attained a non-school qualification than those parents who were employed.<sup>5</sup>

In couple families with no employed parent, around one-fifth (21%) of mothers and over two-fifths of fathers (44%) had completed a non-school qualification. In comparison, in couple families with at least one employed parent over one-half of mothers (53%) and almost two-thirds of fathers (62%) had a non-school qualification.

In jobless one-parent families around one-quarter (24%) of parents had a non-school qualification compared with around a half (53%) of parents in one-parent families where the resident parent was employed.

### Other employed people in the household

The employment status of the parents is particularly influential on the child in terms of economic wellbeing and offering a working role model. Most jobless families live in single family households where no person is employed, however some live in households where other related or unrelated people may be working, for example older siblings. While the employed person's income is not necessarily shared it may contribute to the family's economic wellbeing by, for example, contributing to shared dwelling costs. These employed people may also offer a role model for the child in terms of work ethics and social responsibility.<sup>6</sup>

In 2007-08, around 14% of jobless families (couple and one-parent) lived in households where someone else was employed.<sup>7</sup> Most of these (around 82%) were one-parent families.

## Looking ahead

The Australian Government has identified addressing the incidence and needs of jobless families with children as a priority. Professor Peter Whiteford has been commissioned by the Australian Social Inclusion Board to undertake work in this area. In 2009 Whiteford reported that "family joblessness is one of the most significant problems facing Australian society today," stating that the number of jobless families had increased since 2008.<sup>8</sup> Whiteford maintained that new policies are needed to support families in entering and staying attached to the workforce to ensure that new generations of children are not disadvantaged by family joblessness.<sup>9</sup>

## Endnotes

- 1 Department of Education, Employment and Workplace Relations, 2009, [Social Inclusion: Jobless Families in Australia: Their Prevalence, Personal and Societal Costs, and Possible Policy Responses](#), Australian Government, Canberra, p. 2.
- 2 Peter Whiteford, 2009, [Social Inclusion: Family Joblessness in Australia](#), Australian Government, Canberra, p. 4.
- 3 Organisation for Economic Co-operation and Development (OECD).
- 4 For the purpose of this income focused analysis, jobless families will be measured at a household level. In this section jobless families or families with no employed parent refer to families with dependent children living in single family households where no adult in the household is employed. Income estimates are equalised to take into account household size and composition.
- 5 Non-school qualifications include Postgraduate Degree, Graduate Diploma/Graduate Certificate, Bachelor Degree, Advanced Diploma/Diploma and Certificate Level.
- 6 Australian Institute of Health and Welfare, 2009, [Australia's Welfare 2009](#), cat. no. AUS 117, AIHW, Canberra, p. 35.
- 7 This refers to jobless families living in single family households.
- 8 Peter Whiteford is a Professor at the University of New South Wales and works in the Social Policy Research Centre; Peter Whiteford, 2009, [Social Policy and Research Centre: Family Joblessness in Australia](#), Newsletter No. 102, University of New South Wales, p. 3; and Peter Whiteford, 2009, *Family Joblessness on the Rise*, Australian Policy Online, viewed 23 November 2009, <[www.apo.org.au](http://www.apo.org.au)>.
- 9 Peter Whiteford, 2009, *Family Joblessness on the Rise*.

# Living alone

In 2009, there were around two million people aged 15 years and over who were living alone.<sup>1</sup> The proportion of people living alone increased over the two decades to 2006. However, over the last few years this trend has stalled. The longer-term increase was associated with delayed partnering, divorce and separation, as well as lower fertility rates, and a decline in extended families. Living alone becomes more common as people age, particularly for women, who tend to outlive their husbands. People living alone may be at risk of social isolation, which can have a negative impact on people's mental and physical wellbeing. While people generally value some time alone, people who spend a lot of time alone may become socially isolated. The Australian Government's social inclusion agenda recognises the importance of all people having the opportunity to be engaged in society, in ways such as being involved in their local community, connecting with their family and friends and having access to services they need.<sup>2</sup>

This article looks at the characteristics of people who live alone, and compares them with those who live with other people, in terms of their levels of social interaction, mental health and general wellbeing.

## Living alone

Over the last couple of decades, the proportion of the population aged 15 years and over living alone (in private dwellings) increased from 9% to 12%, and over the next 20 years is projected to increase to 16% (3.1 million).<sup>3</sup> Living alone becomes more common with age, in 2006 peaking at around age 90 for both men and women. In both 1986 and 2006, men were more

## Data sources and definitions

This article uses data from a number of ABS sources: Censuses of Population and Housing; 2006–07 Family Characteristics and Transitions Survey; 2006 Time Use Survey; and the 2006 General Social Survey. Data on health and wellbeing are drawn from the 2007 Survey of Mental Health and Wellbeing and the 2007–08 National Health Survey.

*Living alone* census data exclude people who were not at home on census night and/or those living in non-private dwellings such as nursing homes. In 2006, 2% of people aged 15 years and over lived in non-private dwellings (7% of people aged 65 years and over lived in non-private dwellings).

likely to live alone than women, until around 55 years of age when it became increasingly more common for women to live alone.

This long-term overall increase in the prevalence of living alone is in part due to the ageing of the population, but also to the increasing propensity of younger and middle aged people to live alone. Older women were generally less likely to live alone than two decades earlier. This shift is related to increases in life expectancy, which have also narrowed the gap between men and women. This has led to both partners living to an older age on average, and so the length of time spent in the widowed state has decreased for both men and women at age 60 (see *Australian Social Trends 2007*, ['Lifetime marriage and divorce trends'](#)).

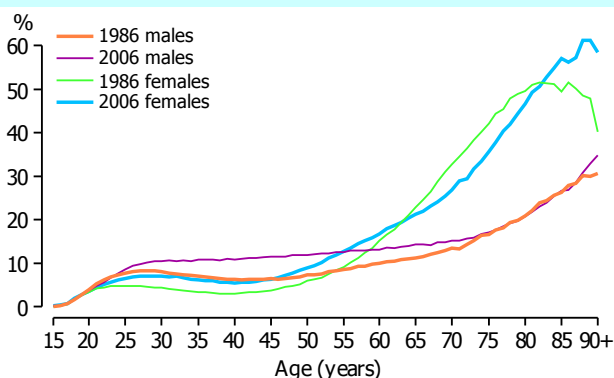
**Over the last twenty years, the proportion of people living alone increased from 9% to 12%.**

## Who lives alone?

### ...relationship history

Changes in the age and sex patterns of living alone are also related to transitions in couple relationships, with people having more freedom to end relationships or remain single (see *Australian Social Trends March 2009*, ['Couples in Australia'](#)). In 2006–07, there were around 750,000 people aged 25–44 years who had never been married or in a de facto relationship. Around one-third (35%) of these never partnered people lived by themselves. People this age who had ever partnered were much less likely to be living alone (7%).

People living alone(a)

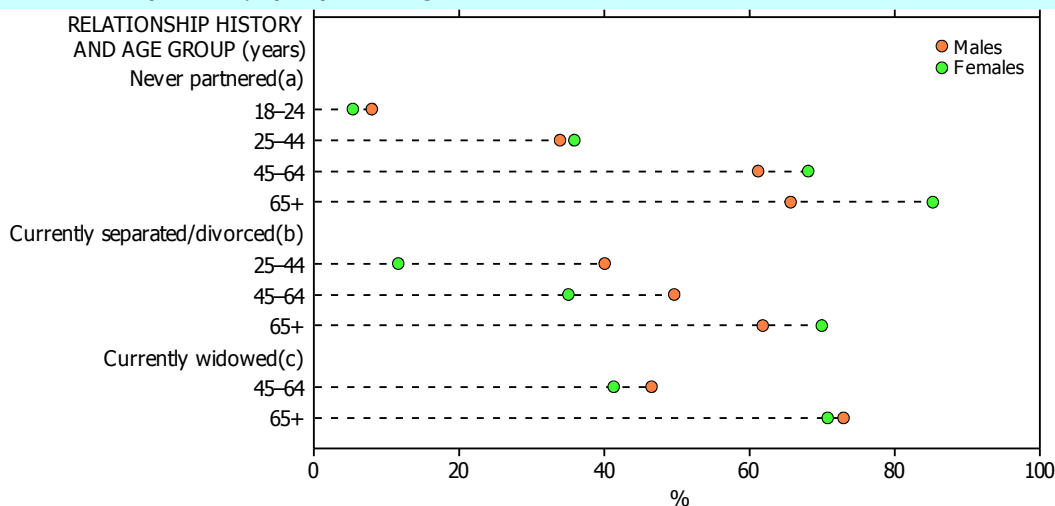


(a) Excludes people living in non-private dwellings and people who were not at home on census night.

Source: ABS Censuses of Population and Housing



## Relationship history, people living alone –2006-07



(a) Includes de facto and registered married relationships.

(b) Estimates for 18-24 years are not shown as they have a relative standard error greater than 50% and are considered too unreliable for general use.

(c) Estimates for 18-24 years and 25-44 years are not shown as they have relative standard errors greater than 50% and are considered too unreliable for general use. Estimate for men aged 45-64 years has a relative standard error of 25% to 50% and should be used with caution.

Source: ABS 2006-07 Family Characteristics Survey

In the 45–64 years age group, there were around 230,000 people who had never partnered. Almost two-thirds (63%) of these people were living alone. Among people of this age who had ever partnered, 12% were living by themselves.

Significant life events, such as a relationship breakup or the death of a partner, may place people at risk of experiencing social isolation. Following a breakup people often experience a period of time in which they live alone. Almost half (49%) of men and 31% of women aged 18 years and over who were currently separated or divorced (from a registered marriage) lived alone. Of separated or divorced people aged 25–44 years, 40% of men and 12% of women lived alone. Men are more likely to live alone after a breakup because they are less likely than women to become lone parents. Around one-fifth (21%) of men aged 25–44 years who were living alone had at least one child (aged under 18 years) who lived elsewhere, but could possibly stay with them some of the time.

In 2006–07, 71% of widowed people aged 65 years and over lived by themselves. These widowed people made up 68% of people this age who lived alone (45% of lone men and 78% of lone women were widowed).

### Spending time: alone or with others?

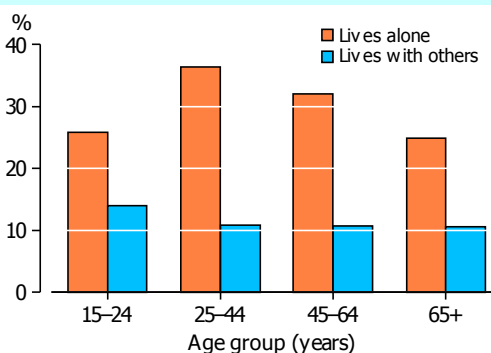
In 2006, people aged 15 years and over who were living alone spent, on average, 9.5 waking hours a day by themselves (equivalent to 61% of their waking hours). People aged 25–44 years who were living alone spent on average around

7.5 hours in solitude each day (48% of their waking hours). In contrast, lone people aged 65 years and over spent on average 11.5 hours a day alone (74% of their waking hours).

Looked at another way, people aged 65 years and over who lived alone spent on average 4 hours each day in the presence of others. However, there was a small proportion who had very little face to face contact with others, with 5% spending half an hour or less with others on any given day, and a further 12% spending no time with others.

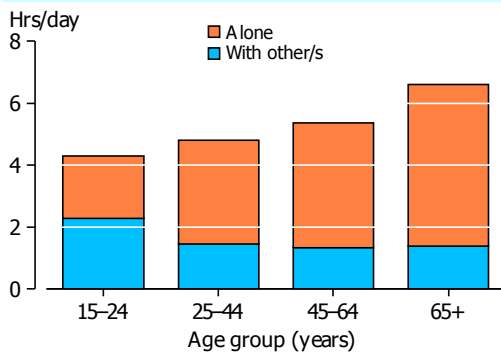
Lone women aged 65 years and over were more likely to have daily face to face contact with someone from outside their household compared with those living with others (26% and 17% respectively). Among men aged 65 years and over, the proportion who had daily contact was about the same regardless of whether they lived alone or with others (around 18%).

### People who would prefer less time alone – 2006



Source: ABS 2006 Time Use Survey

## People living alone, free time spent alone or with others(a) – 2006



(a) Average hours per day by all people.

Source: ABS 2006 Time Use Survey

People living alone were almost three times as likely as people living with others to say that they would prefer to spend less time alone (29% compared with 11%). While lone older people generally spent more time on their own than people in other age groups, they were not more likely to prefer less time alone. The preference for less time alone was most common among those aged 25–44 years who lived alone, and tended to be a stronger preference among lone men than among lone women.

### ...free time alone

The amount of waking time spent alone by people is influenced by many things other than their living arrangements, such as their working arrangements and travel time. Looking at the amount of free time (such as leisure and recreation activities) spent in solitude, people living alone spent on average 4.5 hours of their free time by themselves each day. The amount of free time spent alone increased with age, from an average of 2 hours a day for lone people aged 15–24 years, to almost 5.5 hours for those aged 65 years and over.

### Time use

*Primary activity* is any activity that respondents described in the Time Use Survey (TUS) as their 'main activity' at a given time. Unless otherwise specified TUS data refer to the primary activity at the time.

*Waking time* excludes sleeping and naps, but includes sleeplessness.

*Free time* includes social and community interaction and recreation and leisure activities. It is the amount of time left once the following activities have been taken out of a person's day: necessary time (such as sleeping, eating and personal care); committed time (such as housework, child care or shopping); and contracted time (such as work or education).

For more information on time use data see [How Australians Use Their Time, 2006](#) (ABS cat. no. 4153.0).

## Loneliness

Living alone or spending a lot of time alone does not necessarily equate to being 'lonely'. People who have active social lives may still report 'loneliness', which may indicate that they are dissatisfied with the quality of their social connections.<sup>4</sup>

Information from the 2002 Household, Income and Labour Dynamics in Australia survey (HILDA) suggest that there is a gender gap in loneliness.<sup>5</sup> People aged 15 years and over were asked about their perceived levels of support and friendship (or 'social loneliness') for example whether they have someone to lean on or confide in. Their responses suggested that men tend to be more lonely than women from early adulthood to their seventies.

This research focused on people aged 25–44 years. It found that in this age group, men living alone and lone fathers are at the greatest risk of experiencing loneliness. While men generally reported lower levels of support and friendship than women, men living alone reported substantially lower levels than women living alone. However women living alone reported similar levels of support and friendship to women living with others. The lowest levels of support and friendship of men in any living arrangement were among lone fathers with young children. This research suggests that men are at a greater risk of social isolation if they live in households without other adults.

This research also identified 'emotional loneliness'. Men aged 25–44 years living alone were the most likely to agree with the statement 'I often feel very lonely' (33%).

Among women living alone, 23% said they often felt very lonely. Lone mothers reported the highest levels of emotional loneliness.<sup>5</sup>

Almost half (46%) of people aged 15 years and over who were living alone spent over 90% of their free time by themselves. Among those aged 65 years and over who were living alone, 54% of men and 45% of women spent over 90% of their free time by themselves.

### Contact via telephone or email

In 2006, people aged 18 years and over who lived alone had more frequent contact with family and friends via phone and/or email, than those who lived with others. For example, 72% of lone 18–24 year olds, compared with 62% of people this age who were living with others, had at least daily telephone, and/or email contact with family or friends outside the household.

However, of lone men aged 65 years and over, just 22% had daily contact of this sort, compared with 32% of older men who were living with others. In contrast, older women who were living alone were more likely than those living with others to have daily contact (43% compared with 30%).

## People aged 18 years and over, selected measures of social and community participation – 2006

	Males		Females	
	Lives alone	Lives with others	Lives alone	Lives with others
	%	%	%	%
Has daily face to face contact with family and/or friends(a)	21.9	18.5	26.2	20.2
Has daily telephone/email/mail contact with family and/or friends(a)	34.7	36.3	48.0	43.5
Has attended a cultural or leisure venue and/or activity in the last 12 months(b)	77.8	88.4	83.0	91.1
Has attended a sporting event in the last 12 months	52.3	60.9	30.1	46.8
Did voluntary work during the last 12 months	23.2	33.0	30.5	37.3
Able to get support in times of crisis from persons outside the household	89.8	92.8	95.6	93.9
Disagrees or strongly disagrees that most people can be trusted	37.5	30.1	31.4	29.0
Employed (limited to those aged 18-64 years)	72.3	85.7	68.5	68.8
	'000	'000	'000	'000
<b>Total aged 18-64 years</b>	<b>699.1</b>	<b>5 684.7</b>	<b>545.5</b>	<b>5 847.9</b>
<b>Total aged 18 years and over</b>	<b>914.8</b>	<b>6 638.5</b>	<b>1 027.1</b>	<b>6 726.6</b>

(a) For 'Lives with others', refers to family and friends who they do not live with.

(b) Such as museums, zoos, botanic gardens, libraries, concerts, theatre and dance performances and cinemas.

Source: ABS 2006 General Social Survey

### Social and community participation

People living alone had lower rates of attendance at cultural or leisure venues, and sporting events during the last 12 months, compared with those living with others.

Engagement in voluntary work was also less common among people living alone, compared with people living with others. This difference is related to higher rates of volunteering among people with children (see *Australian Social Trends 2008*, '[Voluntary work](#)').

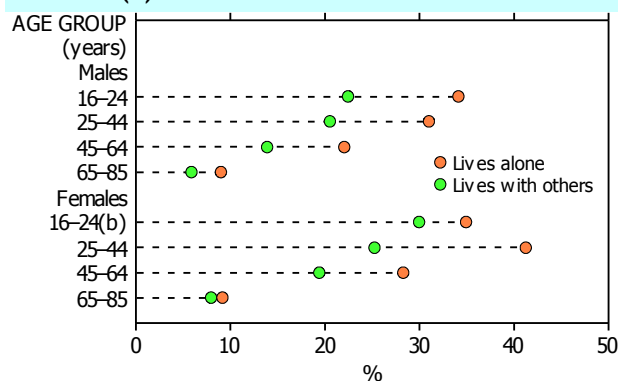
People's feelings of safety and trust in the community may have an impact upon their participation. However, whether people lived alone or with others did not have an impact on their levels of community trust. Just over one-third (34%) of lone people aged 18 years and over said that they disagreed that 'most people can be trusted'. A similar proportion of people who lived with others said the same thing (30%). There was also no difference between those living with others and those living alone in the proportion of people who said they felt unsafe at home alone at night (7%) or during the day (2%).

Regardless of whether they lived alone or lived with others, almost all (93%) people aged 18 years and over said that they would be able to get support from people outside their household in a time of crisis.

### Mental and physical wellbeing

While the mental wellbeing of some people living alone may be related to their living circumstances (for example following a relationship break-down) other people may be living alone as a consequence of mental health issues. In 2007, lone people aged 16–64 years were more likely than people living with others to have had at least one mental disorder in the last 12 months (29% compared with 21%). This pattern was particularly pronounced among women aged 25–44 years. (For more information on mental health see *Australian Social Trends March 2009*, '[Mental health](#)').

#### People aged 16-85 years with a mental disorder(a) – 2007



(a) Selected mood, anxiety and substance use disorders within the previous 12 months.

(b) Estimate for lives alone has a relative standard error of 25% to 50% and should be used with caution.

Source: ABS 2007 National Survey of Mental Health and Wellbeing



Lone people aged 16–64 years were also more likely than people living with others to have experienced high to very high levels of psychological distress during the four weeks prior to interview (15% compared with 10%). Among those aged 45–64 years, the proportion of people living alone who reported high to very high levels of psychological distress was higher than for those living with others (15% compared with 9%). The proportion of people who said they had experienced high to very high levels of psychological distress was similar for those aged 65 years and over, regardless of whether they lived alone or lived with others (5 to 6%).

Based on information from the 2007–08 National Health Survey, lone people aged 25–64 years were more likely than those living with others to assess their health as being fair or poor (20% compared with 12%). Whether younger and older people lived alone or with others did not make a difference to the proportions who said they had fair or poor health. Men and women followed a similar pattern.

## Economic wellbeing

All other things being equal, the living standards of people living alone are generally lower than those of others. This is because people living alone do not benefit from the economies of scale generally available to people living with others, for example food and electricity costs are more affordable when shared with others. In recognition of this, from September 2009 the single age pension was given an additional increase, bringing it up to two-thirds of the couple rate.<sup>6</sup>

## ...source of income

Data from the 2007–08 Survey of Income and Housing showed that just over two-thirds (68%) of lone men aged 65 years and over had a government pension or allowance as their current main source of income, similar to the proportion of men this age who lived with others (63%). The majority (80%) of lone women aged 65 years and over relied on a government pension or allowance for their main source of income. This was also the case among women of this age who lived with others (75%).

Lone men aged 45–64 years were over twice as likely as men living with others to have a government pension or allowance as their main source of income (26% compared with 11%). The majority (81%) of these lone men were receiving a disability pension, as were 70% of men this age who were living with others and relied on a government payment for income. Among lone women aged 45–64 years, 28% said that a government payment was their main

source of income, compared with 21% of women this age who lived with others. These lone women were almost twice as likely as women living with others to be recipients of a disability pension (59% compared with 30%).

## ...superannuation

In the context of Australia's ageing population, superannuation has an increasingly important role to play in boosting retirement savings and relieving some of the need to provide financially for a growing number of retirees. In 2007, 47% of lone men aged 55 years and over had superannuation coverage, much lower than men living with others (63%). Women of this age who lived alone were also less likely than those living with others to have superannuation coverage (33% compared with 45%).

People with higher superannuation balances when approaching retirement are better able to self-fund a comfortable retirement lifestyle without relying on the aged pension. This is particularly an issue for older women, who have a greater life expectancy and are more likely to live alone in old age than men. For the minority of women aged 55 years and over who were living alone and had some superannuation, the median superannuation balance was \$61,500.

However, overall women living alone had a higher median superannuation balance, compared with women living with others (some of whom may have had less of an

### Superannuation coverage and balances – 2007

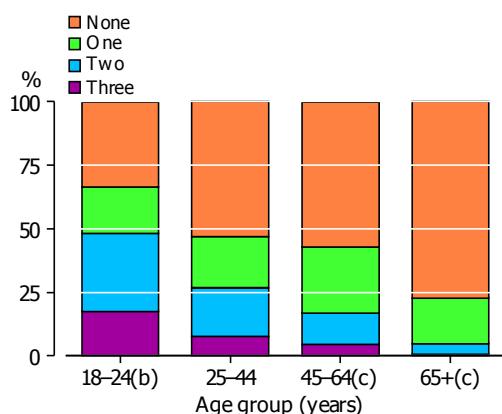
	Has coverage		Median balance(a)	
	Lives alone	Lives with others	Lives alone	Lives with others
	%	%	\$'000	\$'000
Age group (years)				
Men				
15-34	83.2	74.1	14.4	6.9
35-44	84.7	91.1	33.6	42.0
45-54	81.1	89.0	41.4	70.0
55 and over	46.7	63.4	71.2	98.0
<b>Total</b>	<b>67.5</b>	<b>76.9</b>	<b>32.0</b>	<b>31.6</b>
Women				
15-34	85.9	69.6	10.6	5.8
35-44	93.3	83.4	45.2	22.0
45-54	83.5	83.7	47.4	29.6
55 and over	33.3	44.9	61.5	52.0
<b>Total</b>	<b>51.3</b>	<b>68.7</b>	<b>34.1</b>	<b>17.6</b>

(a) Of people with one or more superannuation account in the accumulation phase. Balances are limited to three accounts per person, and calculated on known values only.

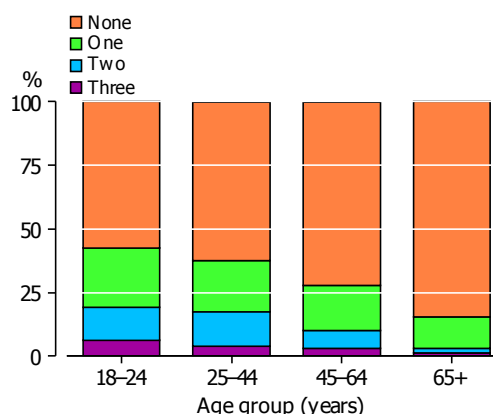
Source: 2007 Survey of Employment Arrangements, Retirement and Superannuation

## People aged 18 years and over, number of types of financial stress(a) experienced – 2006

### LIVES ALONE



### LIVES WITH OTHERS



(a) Whether could raise \$2000 in a week for an emergency; whether experienced cash flow problems in the last 12 months (such as could not pay bills, rent or mortgage on time, went without meals or sought financial help from friends or family; whether took a dissaving action in the last 12 months (such as reduced home loan repayments, took out a personal loan or sold assets)).

(b) Estimates have a relative standard error of 25% to 50% and should be used with caution. However differences between 'Lives alone' and 'Lives with others' are significantly different.

(c) Estimates for three types have a relative standard error of 25% to 50% and should be used with caution.

Source: ABS 2006 General Social Survey

opportunity to accumulate superannuation if their labour market participation was affected by childrearing or other caring responsibilities). For women aged 45–54 years who were living alone, the median superannuation balance was \$47,400 (those living with others had a median balance of \$29,600). For men aged 45–54 years who were living alone the median superannuation balance was \$41,400, lower than for those living with others (\$70,000).

### ...financial stress

In 2006, people living alone were more likely than those living with others to have experienced more than one form of financial stress during the last 12 months, such as being unable to quickly raise \$2,000 in an emergency, having a cash flow problem like being unable to pay a bill, and taking a dissaving action such as reducing home loan repayments. For example, 13% of people living alone aged 45–64 years reported experiencing two forms of financial stress, compared with 7% of people in this age group living with others. Greater resilience to sources of financial stress comes with age, as older people may have more economic resources to draw on in the form of assets. People aged 18–24 years, in particular those living alone, showed a greater degree of financial stress than people in the older age groups.

### Endnotes

- 1 Australian Bureau of Statistics, 2009, *Labour Force, Australia, Detailed – Electronic Delivery, October 2009*, Table FM2, cat. no. 6291.0.55.001, ABS, Canberra.
- 2 Australian Social Inclusion Board, 2008, *Social Inclusion Principles: Summary*.
- 3 Australian Bureau of Statistics, 2004, *Household and Family Projections Australia 2001 to 2026*, cat. no. 3236.0, ABS, Canberra.
- 4 Franklin, A. and Tranter, B., 2008, *Loneliness in Australia*, Paper No. 13, Housing and Community Research Unit, University of Tasmania.
- 5 Flood, M., 2005, *Mapping Loneliness in Australia*, Discussion Paper Number 76, The Australia Institute.
- 6 The Treasurer of the Commonwealth of Australia, 2009, *Secure and sustainable pension reform: three million Australian pensioners benefit from reforms*, Press release no. 058, 12 May 2009.

# Smoking, risky drinking and obesity

Lifestyle behaviours such as tobacco smoking, risky alcohol consumption, and obesity are three of the more prominent health risks in modern Australian society.

These three risk factors may affect a person's ability to work, as well as the ability to participate in other aspects of life such as family and community activities. On a broader scale each of these risks have wider implications for both society and the economy.

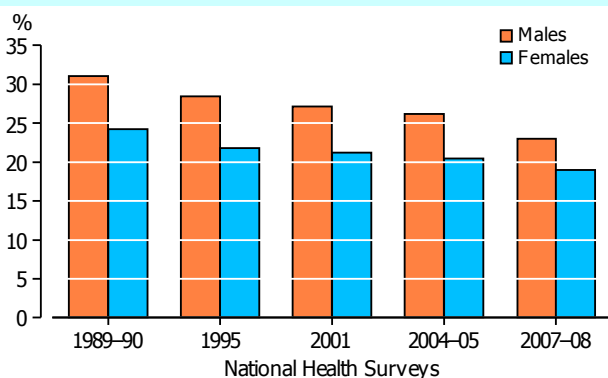
Both smoking and obesity are associated with social disadvantage, while excessive alcohol consumption affects society in a number of ways, such as through property damage, road accidents and the need for law enforcement. From an economic point of view, diseases or conditions resulting from these risk factors (e.g. diabetes, some cancers, cardiovascular disease, mental illness, and injury) place demand upon Australia's health care system. The annual cost to Australia of harm arising from smoking and drinking has been estimated to exceed \$31 billion and \$15 billion respectively, while obesity had direct costs of \$8.3 billion in 2008.<sup>1,2,3</sup>

In 2008, the Australian Government set up the [Preventative Health Taskforce](#) which focuses on the burden of chronic disease to which these three risk factors contribute.

## Smoking tobacco

Despite the social acceptance of tobacco smoking, its many negative effects, most notably its relation to various cancers, have been known for many years.<sup>4</sup> Tobacco contains the powerfully addictive stimulant nicotine, which can make smoking a regular and long-term habit that isn't easy to quit.<sup>4</sup> In recent

### Current smokers, aged 18 years or over(a)



(a) Age standardised to the 2001 Estimated Resident Population (ERP).

Source: ABS, 1989-90, 1995, 2001, 2004-05 and 2007-08 National Health Surveys

### Data sources and definitions

The data in this article are mainly drawn from the 2007-08 National Health Survey.

*Current smokers* are those who reported at the time of interview that they smoked cigarettes, cigars or pipes. *People who ever smoked*, includes current smokers as well as *ex-smokers* (those who reported that they had smoked at least 100 cigarettes, or smoked pipes, cigars etc. at least 20 times in their lifetime, but did not currently smoke).

*Risky or high risk drinking* refers to relative risk levels as defined by the National Health and Medical Research Council (NHMRC) in 2001. The analysis in this article focuses on the guidelines for reducing long-term risk unless otherwise stated. For more information, see the 'National Health and Medical Research Council Drinking guidelines' box later in this article.

Overweight and obesity are defined according to Body Mass Index (BMI), using the formula weight in kilograms divided by the square of height in metres. Adults are classed as overweight if their BMI score is 25 to less than 30 and obese if 30 or greater. You can use this formula to calculate your own BMI on the [Department of Health and Ageing's website](#). In this article BMI scores were based on measured height and weight.

This article discusses diseases or conditions that may be associated with the risks above. This analysis is limited to *chronic or long-term conditions* (i.e. those that have lasted or are expected to last for six months or more).

In order to counter the different age profiles present in populations with certain conditions, where appropriate data in this article have been age standardised to the 2001 Estimated Resident Population (ERP).

For more detail refer to the [National Health Survey: Summary of Results, 2007-08](#) (ABS cat. no. 4364.0).

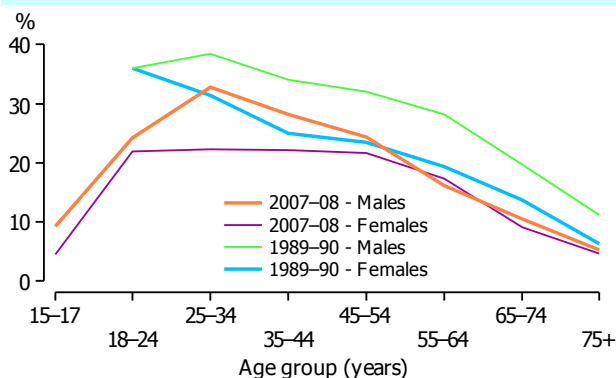
years the negative effects of passive smoking have also been highlighted, demonstrating that the risks to health of smoking affect more than just the smoker.<sup>5</sup>

### ...over time

As awareness of the negative impacts of tobacco smoke has increased, the proportion of people who smoke has declined steadily, as reported by the National Health Survey (NHS), since tobacco consumption was first included in the survey in 1989-90. Decreasing by 24% over the 18 year period, this represents an annual average decline of around 1.5%.

The NHS reported around 3 million *daily smokers* in 2007-08. There were 716,000 people who had been a daily smoker 12

## Current smokers, by sex and age – 1989-90 and 2007-08



Source: ABS, 1989-90 and 2007-08 National Health Surveys

months prior, but who either now smoked less than daily (112,000 people) or were no longer smokers at all (604,000).

### ...age and sex

In 2007-08, around 8 million Australian adults aged 15 years and over had smoked at some time in their lives. Around 3.3 million were *current smokers*, with the vast majority (91%) of these people smoking daily. Males were more likely to be current smokers than females (22% compared with 18%).

Around 9% of young men aged 15-17 years were current smokers, with the rate peaking at 33% for those aged 25-34 years before declining to around 5% for men aged 75 years or over. The smoking rate for young women aged 15-17 years was slightly lower than for men of the same age (4.5%). For women aged 18-54 years, the smoking rate plateaued at 22% before declining in the older age groups.

A large decrease in smoking rates from 1989-90 to 2007-08 occurred in the 18-24 year age bracket (dropping by a third for men and 39% for women). This was accompanied by a rise in the number of 18-24 year olds who had never smoked (from 55% to 64% for men and 52% to 65% for women).

### ...as a health risk

Research shows that smoking is associated with increased risk of coronary heart disease, stroke, peripheral vascular disease and cancer.<sup>6</sup>

While the 2007-08 NHS collected information on long-term health conditions, it is not possible to infer causality. Nevertheless, smokers were more likely to have certain conditions. Current smokers were 3.9 times as likely to have emphysema than were non-smokers although there was not much difference in relation to other chronic conditions. However, those who had ever smoked were more likely than those who had never smoked to have

particular illnesses, suggesting that certain health conditions may be associated with a history of smoking rather than just a person's current smoking status. People who had ever smoked were 6.3 times more likely to have emphysema, twice as likely to have a heart disease and 1.6 times as likely to have bronchitis, than those who had never smoked.

### ...passive smokers

Around 459,000 (or 3.5% of) adults aged 15 years or over who were not current smokers and 291,000 (or 7.2% of) children aged under 15 years lived in a household where a daily smoker was reported to have smoked indoors. These people may be exposed to environmental tobacco smoke and the associated health risks of tobacco consumption.

**People who had ever smoked were 6.3 times more likely to have emphysema than those who had never smoked.**

### ...age first started

People in their teens may take up smoking as part of a social activity that is perceived to be well suited to their youth culture and allows them to better fit in with or rebel against friends or family.<sup>7</sup> People who started smoking daily at a younger age were less likely than others to have reduced their frequency of smoking or to have kicked the habit altogether at the time of interview.

Of people who had ever smoked daily, 61% first took up the habit on a daily basis when aged 15-19

### Burden of disease and injury

Exposure to tobacco or alcohol and high body mass have been identified as three of the main risk factors contributing to the burden of disease and injury within Australia. This burden was calculated using Disability-Adjusted Life Years (DALYs), which include years of life lost due to premature death as well as 'healthy' years lost due to disability.

Exposure to tobacco, accounting for 7.8% of the total burden, was strongly linked with lung cancer, chronic obstructive pulmonary disease and ischaemic heart disease.

High body mass (a little more inclusive than the traditional overweight and obesity categories) accounted for 7.5% of the total burden, with Type 2 diabetes and ischaemic heart disease major contributors to this.

Alcohol harm was responsible for 3.2% of the total burden of disease and injury and accounted for the greatest amount of burden specifically for males under the age of 45 years. Alcohol abuse, road traffic accidents and suicide made up two-thirds of the harm attributed to alcohol.

For more information see [The burden of disease and injury in Australia 2003](#) (Australian Institute of Health and Welfare, cat. no. PHE 82).



years. About one in five (18%) of those who had ever smoked daily had first started doing so under the age of 15 years.

Of people aged 25–54, those who first started smoking daily as a child aged under 15 years were more likely to have also been a daily smoker at the time of interview (55%) than those who first started at an older age (46%).

## Drinking alcohol

Many Australians drink alcohol on a regular basis. However, excessive consumption can cause serious harm, and the past decade has seen an increase in community awareness of this problem.<sup>2</sup>

The National Health and Medical Research Council (NHMRC) considers people who drink regularly at high levels to have an increased risk of chronic ill health and premature death (i.e. high levels in relation to the 2001 drinking guidelines – see the box *National Health and Medical Research Council Drinking guidelines*). The NHMRC guidelines provide information that allows Australians to “enjoy alcohol, if they choose to drink, while avoiding or minimising harmful consequences.”<sup>8</sup>

### ...over time

Between 2001 and 2004–05, rates of drinking at levels considered risky or high risk to health in the long-term increased slightly (11% to 13%) but remained steady over the following three years to the 2007–08 National Health Survey.

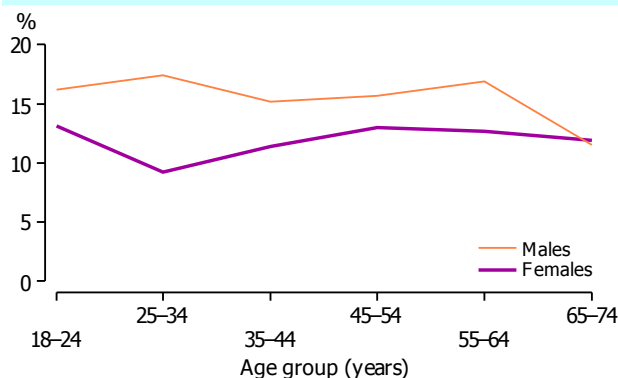
### ...age and sex

Of all adults in Australia, just over four-fifths (81%) had consumed alcohol within the year before the survey, with most having done so within the previous month (70%), or within the previous week (59%). Rates of drinking in the week prior to interview were higher among men than women (68% compared with 51%) and peaked for the 35–54 year age bracket for men (75%) and at 45–54 years for women (60%). Most people (78%) who drank alcohol in the

### National Health and Medical Research Council Drinking guidelines

Recognising the risks of excessive alcohol consumption in 2001 the National Health and Medical Research Council provided guidelines for drinking alcohol. The main guideline to minimise risks in the long-term limits consumption to no more than an average of 4 standard drinks a day for a man and 2 standard drinks a day for a woman. In this article, *risky or high risk drinking* refers to drinking above these guidelines based on a seven-day average. Although these guidelines were revised in mid-2009, the analysis in this article is based on the 2001 guidelines as it is not possible to create meaningful measures relating to the 2009 guidelines from the 2007–08 NHS.

### Risky or high risk drinking, by sex and age – 2007-08



Source: ABS 2007-08 National Health Survey

week prior to interview did not do so at levels considered risky or high risk to their health in the long-term.

In 2007–08, around 13% of Australians aged 15 years or over consumed alcohol at a level that posed a risk to their health in the long-term (according to 2001 NHMRC guidelines). The rate was higher for men (14%) than for women (11%).

Around 16% of men in the age groups between 18–64 years drank at risky or high risk levels, with the proportion dropping to 12% for those aged 65–74 years. However, for women the proportion drinking at risky and high risk levels sat generally around 12% for most age groups with a dip for those in their prime childbearing years, aged 25–34 years (9%).

### ...a health risk

Excessive alcohol consumption is associated with risks to health both in the short and long-term. Between 1995–96 and 2005–06, around 813,000 Australians were hospitalised for alcohol-attributable injury or disease. In the 10 years to 2005, it was estimated that around 32,700 Australians aged 15 years or over died from causes attributable to risky or high risk drinking.<sup>9</sup> For discussion of associated short-term risks of drinking see the box '*Drinking as a risk to health in the short-term*'.

Risky or high risk drinking is associated with certain chronic conditions, such as mood and anxiety problems or a chronic condition caused by injury. While it is not possible to infer causality, in 2007–08 people who reported drinking at levels considered risky or high risk to health in the long-term were 1.3 times more likely to have a chronic condition caused by injury than those who didn't drink at those levels. People who drank at risky or high risk levels were also 1.6 times more likely to have long-term affective (mood) or anxiety problems, such as depression, bipolar or social phobia than those who didn't drink at risky levels, or didn't drink at all.

## Drinking as a risk to health in the short-term

While excessive alcohol consumption is associated with long-term health risks, more people die from the acute effects than the long-term or chronic effects.<sup>2</sup> These acute effects or short-term health risks include an increased association with dangerous driving and violence that can lead to injury or death of the drinker and/or others.

According to the 2005 Personal Safety Survey, there were 625,000 people aged 18 years or over whose most recent experience of violence within the previous year was physical assault by a male. Alcohol contributed to a significant amount of these assaults, with three-in-five victims reporting that they themselves or the perpetrator had been drinking.

For more information on excessive drinking and other related risks specifically amongst young Australians aged 15–24 years see *Australian Social Trends 2008, 'Risk taking by young people'*.

## ...type of alcohol

The type of alcohol consumed by those who drank at risky or high risk levels varied depending on their sex and age.

Beer was the most common drink consumed by men aged 15 years or over who drank at risky or high risk levels (85%). Spirits (36%) and ready-to-drink spirits or liqueurs (RTDs; 35%) were more popular among young men, aged 15–24 years, who were risky or high risk drinkers than those aged 25 years or over (18% and 10% respectively).

Women who drank at risky or high risk levels had a different pattern in terms of the type of alcohol consumed. The type of alcohol consumed by young women, aged 15–24 years, who were risky or high risk drinkers was varied, with no one type significantly more popular than any other. However, these young women were around 4.9 times as likely to have consumed RTDs, and 3.7 times as likely to have consumed spirits, than those aged 25 years or over who mostly drank wine (82%).

## Type of alcohol consumed by risky or high risk drinkers(a) – 2007-08

	Males		Females	
	15-24 years	25 years or over	15-24 years	25 years or over
	%	%	%	%
Beer	81.0	85.0	41.0	25.0
Wine	*15.0	42.0	53.0	82.0
Spirits	36.0	18.0	52.0	14.0
RTDs(b)	35.0	10.0	44.0	9.0

\* estimate has a relative standard error of 25% to 50% and should be used with caution

(a) Type of alcohol reported to have been consumed in the week prior to survey.

(b) Ready-to-drink spirits or liqueurs.

Source: ABS 2007-08 National Health Survey

## ...age first started

As with tobacco, young people may first consume alcohol for many reasons, such as to fit in with peers, or because they want to experiment. Some young people may also be introduced to alcohol by their parents or other family members. While it is not legal for people below the age of 18 years to consume alcohol, the 2007 National Survey of Mental Health and Wellbeing shows that over one-quarter (27%) of Australians aged 16–85 years had first drunk alcohol when under 15 years of age, with a further two-fifths (40%) having first done so when aged 15–17 years. The latest NHMRC guidelines advise that children under 15 years are at the greatest risk of harm from drinking, and that not drinking at all is especially important at this age. They also state that those aged 15–17 years should delay initiation to alcohol as long as possible.<sup>10</sup>

## Overweight and obesity

Using the Body Mass Index (see definitions box on first page of article), people can be categorised as underweight, normal weight, overweight or obese.

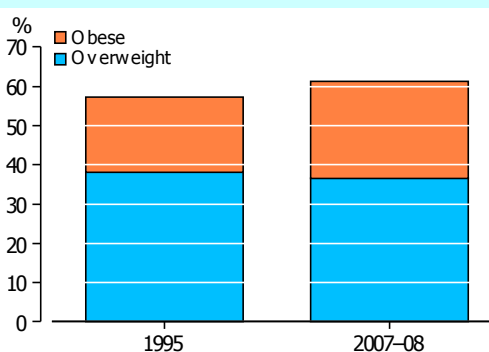
While genetics may play a role in a person's propensity to become overweight or obese, the fundamental cause is an imbalance between energy consumed and energy expended.<sup>11</sup> Shifts towards energy-dense diets and decreasing physical activity are some of the factors that have contributed to increases in overweight and obesity.<sup>11</sup>

## ...over time

Measured Body Mass Index scores from the 2007–08 NHS can be compared with those from the 1995 Nutrition Survey to see how the population has changed over the 13 years in between.

While the proportion of people who are overweight or obese has grown by 7% (an

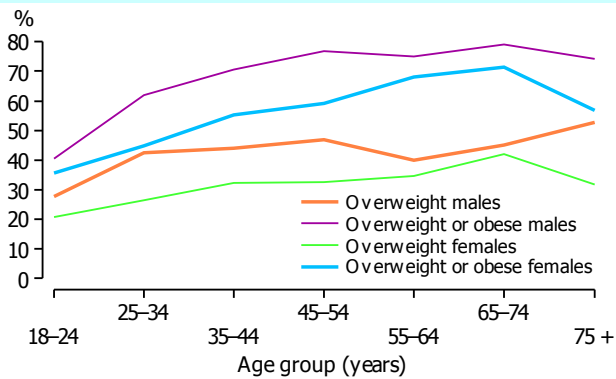
## People overweight or obese, aged 18 years or over(a)



(a) Age standardised to the 2001 Estimated Resident Population (ERP).

Source: *National Health Survey: Summary of Results, 2007-08* (ABS cat. no. 4364.0)

## Overweight and obesity, by sex and age – 2007-08



Source: ABS 2007-08 National Health Survey

annual average of 0.5%) this movement has been more focused at the obese end of the spectrum, with obesity increasing by 29% in the 13 year period (an increase of 2.0% per year on average).

### ...age and sex

Of all adults aged 18 years or over in 2007–08, almost two-fifths (37%) were overweight and a further quarter (25%) were obese. Being overweight or obese was more common for men than women (68% compared with 55%) and tended to increase with age (being 79% for men and 71% for women in the 65–74 year age bracket).

### ...a health risk

Being overweight or obese increases a person's chance of having certain conditions such as cardiovascular disease, diabetes, osteoarthritis and certain types of cancer (endometrial, breast and colon).<sup>11</sup>

In 2007–08, people who were overweight or obese were almost twice (1.9 times) as likely as people within the normal BMI range to have Type 2 diabetes, 1.7 times as likely to have high blood pressure, 1.7 times as likely to have high cholesterol and 1.4 times as likely to have heart disease. Risks of chronic conditions increased progressively with increasing BMI<sup>11</sup> and were therefore higher at the obese end of the spectrum. People who were obese were more than two and a half times (2.7 times) as likely to have Type 2 diabetes as those within the normal BMI range.

### ...morbidly obese

As risks to health in the long-term increase with BMI scores, those who are more obese are at much higher risk than others. In 2007–08 there were 275,000 people with a BMI of 40 or more (class III obesity<sup>12</sup>), or around 2.4% of Australian adults aged 18 years or over. The rate was higher for women (3.1%) than for men (1.8%).

## Body Mass Index (BMI)

A person's BMI can be calculated by dividing their weight in kilograms by the square of their height in metres. This BMI can be used to determine whether a person is overweight or obese.

### BMI Scores for adults

Underweight	Less than 18.5
Normal range	18.5 to less than 25.0
Overweight	25.0 to less than 30.0
Obese	30.0 and greater
Obese class I	30.0 to less than 35.0
Obese class II	35.0 to less than 40.0
Obese class III	40.0 and greater

Source: World Health Organisation's [Global Database on Body Mass Index](#)

### ...among children

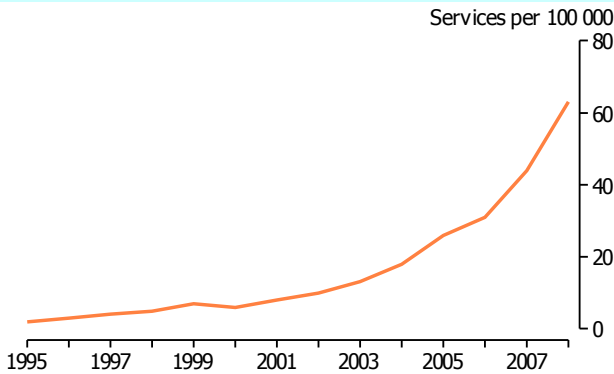
In 2007–08, one-quarter of all Australian children aged 5–17 years, were overweight or obese, up four percentage points from 1995 (21%). Studies have shown that once children become obese they are more likely to stay obese into adulthood and have an increased risk of developing the associated diseases mentioned above.<sup>13</sup> For more information on childhood obesity see *Australian Social Trends September 2009*, '[Children who are overweight or obese](#)'.

### ...surgery for the obese

While preventative and weight loss measures, focusing on education about diet and exercise, play the major role in the fight against obesity, there are more radical options available to the severely obese who have been unable to lose their excess weight through more traditional means. Bariatric surgery involves modification of the gastrointestinal tract to reduce the intake of calories and aims to improve the chance of sustained significant weight loss.<sup>14</sup>

In 2002 and 2003 gastric bypass was the most frequent weight loss surgery performed worldwide (65% of bariatric procedures at this time).<sup>14</sup> However, within Australia gastric banding and other gastric reduction surgeries (as opposed to gastric bypass) accounted for the vast majority of bariatric surgeries within Australia with 13,600 surgeries in 2008 (compared to only 211 gastric bypasses – both excluding public patients in public hospitals). The rate of gastric reductions has grown by 800% over the last decade from seven surgeries per 100,000 people in 1999 to 63 per 100,000 in 2008.<sup>15</sup> The rapid growth in gastric reductions is associated with the uptake of adjustable gastric banding which is perceived as a relatively safe, effective and reversible procedure.<sup>14</sup>

## Gastric reduction procedures(a), per 100,000 people – 1995-2008



(a) Gastric reduction for obesity (30511) as classified on the Medicare Benefits Schedule. This data is based on health insurance data and therefore does not include bariatric surgery performed on public patients in public hospitals.

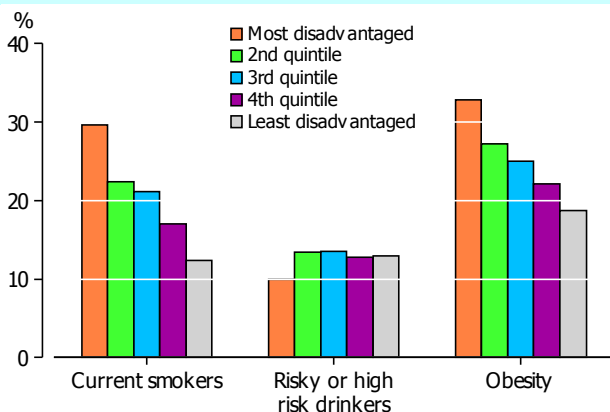
Source: [Medicare Australia Statistics](#)

### ...inactivity

Exercise enables the body to burn off surplus energy stores. Exercising at only low levels, or having no exercise at all, is a lifestyle behaviour that is strongly related to being overweight or obese. The NHS graded a person's level of exercise in the two weeks prior to survey based on frequency, intensity, and duration of exercise (for more information on exercise scores see [2007-08 National Health Survey Users' Guide](#), ABS cat. no. 4363.0.55.001).

Of all adults, almost three-quarters (72%) had inadequate exercise (i.e. only a low level, or no exercise) in the two weeks prior to interview. Women (76%) and those aged 75 years or over (83%) had higher rates of inadequate exercise than the average. Around two-thirds (68%) of men also had inadequate levels of exercise.

## Risk factors by Index of Relative Socio-Economic Disadvantage ranking(a)(b) – 2007-08



(a) Based on the Socio-Economic Indexes for Areas (SEIFA).

(b) Where the first quintile represents the 20% of the total population living in areas with the most disadvantage and the fifth quintile represents the 20% of the total population living in areas with the least disadvantage.

Source: ABS 2007-08 National Health Survey

Of all adults who were inactive, over one-quarter (27%) were obese, compared with 16% of people who had a high level of exercise.

## Socioeconomic factors

The Socio-Economic Indexes For Areas (SEIFA) Index of Disadvantage summarises various attributes (such as income, unemployment, and educational attainment) of an area in which people live.

Obesity and smoking were more common in the most disadvantaged areas. The rate of current smokers among the 20% of people living in most disadvantaged areas was two and a half times the rate among the 20% of people in the least disadvantaged areas (30% compared with 12%). The gap in rates of obesity between these quintiles was also quite wide (33% compared with 19%).

The pattern was different for people who drank at a level risky to their health, this being slightly less common among the lowest quintile (10%) than the other quintiles (13%).

## Occupation

Blue collar workers such as technicians, trade workers, labourers, drivers and machinery operators were much more likely to be current smokers (30%) than people in all other occupations (18%). This was the case for both men (31% compared with 17%) and women (27% compared with 18%).

## Multiple risk factors

In 2007-08 there were 6.9 million people who were overweight or obese. Almost one-fifth of these people were also current smokers (19% or 1.3 million), and 5% (or 319,000) were overweight or obese smokers who also drank at risky or high risk levels.

Overweight or obese smokers were twice as likely to have heart disease as people who were within the normal weight range and who had never smoked, 2.2 times as likely to have Type 2 diabetes, and 2.8 times as likely to have bronchitis. While the population of those who as well as being overweight or obese were also risky drinkers was too small to gauge their relative risks, they would have the added burden of increased risk of chronic injury and mental health disorders as discussed earlier in the article.



## Looking ahead

In June 2009, The National Preventative Health Taskforce released [\*Australia: The Healthiest Country by 2020\*](#), Australia's national preventative health strategy covering obesity, tobacco and alcohol. The report presents seven strategic directions including sharing responsibility, acting early, engaging communities, reducing inequality, influencing markets, refocusing primary healthcare towards prevention and a focus on Indigenous Australians.

## Endnotes

- 1 Preventative Health Taskforce, 2008, [\*Technical Report No 2: Tobacco control in Australia: making smoking history\*](#), p. v.
- 2 Preventative Health Taskforce, 2008, [\*Technical Report No 3: Preventing alcohol-related harm in Australia: a window of opportunity\*](#), p. 2.
- 3 Preventative Health Taskforce, 2008, [\*Technical Report No 1: Obesity in Australia: a need for urgent action\*](#), p. 6.
- 4 Gilman, Sander L. and Zhou, Xun (Eds.), 2004, *Smoke: a global history of smoking*, Reaktion Books, Hong Kong, p. 321, 331.
- 5 Better Health Channel, 2007, *Passive Smoking*, viewed 27 October, <[www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Passive\\_smoking](http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Passive_smoking)>.
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- 7 Tilleczek K. and Hine D., 2006, 'The meaning of smoking as health and social risk in adolescence' in *Journal of Adolescence*, Volume 29, Issue 2, April 2006, pp. 273–287.
- 8 National Health and Medical Research Council, 2001, *Australian Alcohol Guidelines: Health Risks and Benefits*, NHMRC, p. 3.
- 9 National Drug Research Institute, 2009, [\*National Alcohol Indicators: Bulletin 12: Trends in estimated alcohol-attributable deaths and hospitalisations in Australia, 1996–2005\*](#), Australian Government Department of Health and Ageing, p. 1.
- 10 National Health and Medical Research Council, 2009, [\*Australian guidelines to reduce health risks from drinking alcohol\*](#), pp. 2–4.
- 11 World Health Organisation, 2006, [\*Obesity and Overweight\*](#), Fact sheet no. 311, WHO.
- 12 World Health Organisation, 2009, 'BMI Classification' on *Global Database on Body Mass Index*, viewed 27 October 2009, <[www.apps.who.int/bmi/index.jsp?introPage=intro\\_3.html](http://www.apps.who.int/bmi/index.jsp?introPage=intro_3.html)>.
- 13 Australian Institute of Health and Welfare, 2004, *Risk Factor Monitoring, A Rising Epidemic: Obesity in Australian Children and Adolescents*, AIHW, Canberra.
- 14 Victorian Government Department of Human Services, 2009, [\*Surgery for morbid obesity: Framework for bariatric surgery in Victoria's public hospitals\*](#), Melbourne, p. 7.
- 15 Medicare Australia Statistics, 2009, *Medicare Item Reports*, viewed 30 Oct 2009, <[www.medicareaustralia.gov.au/statistics/mbs\\_item.shtml](http://www.medicareaustralia.gov.au/statistics/mbs_item.shtml)>; The item number for gastric reduction is 30511 and for gastric bypass is 30512 (see Medicare Benefits Schedule Online, <[www.health.gov.au/internet/mbsonline/publishing.nsf/Content/Medicare-Benefits-Schedule-MBS-1](http://www.health.gov.au/internet/mbsonline/publishing.nsf/Content/Medicare-Benefits-Schedule-MBS-1)>).

# Preschool attendance

The importance of investing in good quality early childhood education and care is widely recognised. Research shows that positive educational experiences in the early childhood years can have life-long impacts on health, learning and behaviour.<sup>1</sup> In particular, high quality early education and care can significantly improve outcomes for disadvantaged children.<sup>2</sup>

Responsibility for early childhood learning and care is shared between the Australian Government and the state and territory governments.<sup>3</sup> Recently, federal, state and territory agencies have focused on integrating the regulation of services covering preschool and child care.<sup>3</sup>

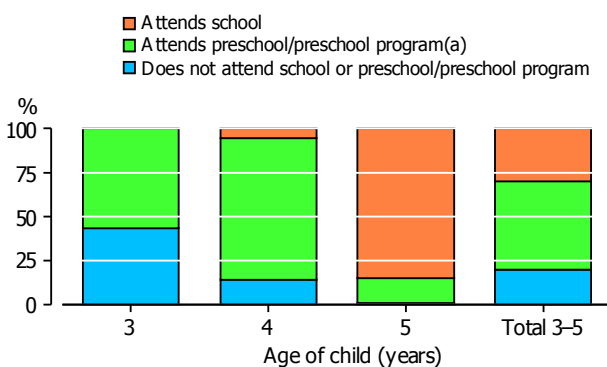
In November 2008, the Council of Australian Governments (COAG) endorsed a new National Partnership Agreement on Early Childhood Education. Under the Agreement, the Commonwealth and state and territory governments have committed to ensuring that all young children will have access to a quality early childhood education program by 2013.<sup>4</sup>

## Early childhood education

The early childhood years represent a series of transitions for children as they participate in a variety of educational and care settings prior to entry into formal schooling.<sup>3</sup>

In 2008, there were over three-quarters of a million children aged 3–5 years in Australia. Depending on age, these children could start school or attend preschool or preschool programs in long day care.

### Children aged 3-5 years, early childhood education – 2008



(a) Preschool includes children who usually attend preschool or a preschool program in long day care.

Source: *Childhood Education and Care, Australia, June 2008* (ABS cat. no. 4402.0)

### Data sources and definitions

The information in this article comes from the 2008 Childhood Education and Care Survey (CEaCS).

This article looks at children aged 3–5 years. According to the CEaCS, 99% of 6 year olds were attending school, with the balance either being cared for, or receiving an education, in the home.

*Child care arrangements* refer to types of care which may be formal or informal.

*Formal care* refers to regulated care away from the child's home. The main types of formal care are before and/or after school care, long day care, family day care and occasional care.

*Informal care* refers to non-regulated care, arranged by a child's parent/guardian, either in the child's home or elsewhere. It comprises care by (step) brothers or sisters, care by grandparents, care by other relatives, and care by other people such as friends, neighbours, nannies, or babysitters. It may be paid or unpaid.

*Cost of care* refers to cost, net of Child Care Benefit (CCB) and the Child Care Tax Rebate (CCTR), to parents for a child to attend care.

*Long day care centre* refers to regulated centre-based care that is available to children between birth and school age for the full day or part day.

*Preschool* refers to education and development programs for children up to two years prior to commencing full-time primary education.

*Preschool program in long day care* refers to a program in a long day care centre which is structured and planned as part of an early childhood education program with specific educational aims and objectives.

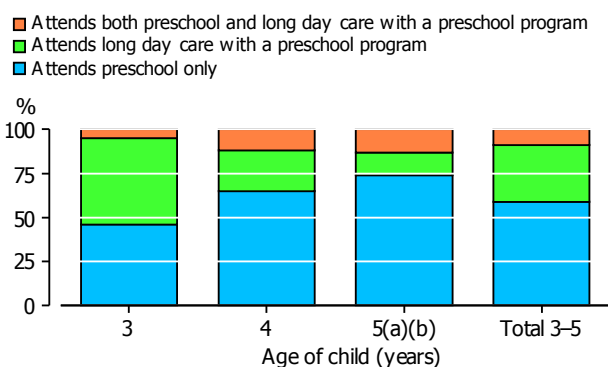
In 2008, around 395,000 children aged 3–5 years attended preschool or a preschool program in long day care, which was equivalent to 50% of all children this age. A further 30% attended school, while 20% of children did not attend preschool (in either setting) or school.

## Preschool attendance

Preschool programs aim to provide early educational activities specifically to help children prepare for school.<sup>3</sup>

In 2008, 72% of children aged 3–5 years who were not attending school, usually attended a preschool or preschool program in long day care. Attendance at preschool was most common for children in the year prior to school age, with 85% of children aged 4 years attending, compared with around 57% of 3 year olds. This indicates, in part, that many parents still believe in the beneficial role of preschool before the start of formal primary school education.

## Children aged 3-5 years who usually attended preschool or a preschool program – 2008



- (a) The estimate for children aged 5 years attending both preschool and long day care with a preschool program has a relative standard error greater than 50% and is considered too unreliable for general use.
- (b) The estimate for children aged 5 years attending long day care with a preschool program has a relative standard error of 25% to 50% and should be used with caution.

Source: *Childhood Education and Care, Australia, June 2008* (ABS cat. no. 4402.0)

Of those children who usually attended some form of preschool, 59% usually attended preschool only, 32% usually attended a preschool program in long day care, and the remaining 9% attended a preschool program in both settings.

### Hours of attendance and cost to parents

In 2008, information collected on the hours and cost of attendance for children attending long day care did not separately identify either hours of participation in a preschool program in long day care, nor any separate costs for participating in those programs. For more information see *Childhood Education and Care, Australia, June 2008* (ABS cat. no. 4402.0). The following sections therefore look at attendance at designated preschools only.

Of the 268,000 children who usually attended preschool in 2008, 30% attended for less than 10 hours per week, close to half (47%) attended for between 10–14 hours per week, while 23% attended for 15 hours or more per week.

In terms of cost to parents, (taking into account the Child Care Benefit (CCB) and Child Care Tax Rebate (CCTR) entitlements) just over a third (34%) of all children who attended preschool had costs of \$19 or less per week, while 28% of children had a usual weekly cost of \$20–\$59, with a further 24% of children in the highest cost bracket (\$60 or more) per week.

### ...what type of preschools are children attending?

For those children aged 3–5 years who usually attended preschool in 2008, 50% were enrolled

## Preschool overview

Preschools offer formal learning programs ideally delivered by a degree-qualified early childhood teacher. Enrolment for children in preschool programs is voluntary. Preschool programs may be delivered through government schools, non-government schools, for-profit providers, community preschools and child care providers. Preschools are referred to as 'kindergartens' in five states and territories and are largely community based in three states (New South Wales, Victoria and Queensland). They operate under the authority of departments of education and/or departments of community services.<sup>3</sup>

### ...age of attendance

There is variability among the states and territories in school starting ages, and times of the year for which children are eligible for school entry. In most cases children will be aged 4 or 5 years when attending preschool in the year prior to starting primary school, but in some cases preschoolers may be as young as 3 years of age. Similarly, children as young as 4 years may be attending primary school.<sup>3</sup>

in government preschools, while 43% of children attended non-government preschools. Around 7% of parents did not know what type of preschool their child attended.

Children attending non-government preschools were more likely to have higher costs associated with preschool learning, compared with those children attending government preschools. Higher costs at non-government preschools are due, in part, to higher hourly rates and longer attendance hours per week.

In 2008, 44% of parents who sent their child to a non-government preschool were paying \$60 or more a week, compared with only 7% of parents who sent their child to a government preschool.

Children who were attending non-government preschools were more likely to attend for 15 hours or more a week (34%) compared with children who attended government preschools (11%).

### ...why choose that particular preschool?

For many parents, the decision to send their child to a particular preschool was based on two important factors, the proximity of the preschool to home and the quality of education and care provided at the preschool.

In 2008, 37% of parents who chose a government run preschool said the main reason they chose it was the convenience of having a preschool close to home, while a further 17% of parents considered the reputation and quality of the education program to be the main reason why they chose the government run preschool.

## Children aged 3-5 years who usually attended preschool, usual weekly hours and cost of care, by selected characteristics – 2008(a)

	Usual weekly hours			Usual weekly cost				Total(b)
	Less than 10	10-14	15 or more	No cost	\$1-\$19	\$20-\$59	\$60 or more	
Proportion of children	%	%	%	%	%	%	%	%
<b>Type of preschool</b>								
Government	31	58	11	17	50	19	7	100
Non-government	27	39	34	**2	14	38	44	100
<b>Remoteness areas of Australia</b>								
Major Cities of Australia	26	46	28	9	30	26	31	100
Inner Regional Australia	37	52	*11	*10	36	35	*14	100
Other(c)	39	41	20	*11	50	27	*8	100
<b>All children aged 3-5 years who usually attended preschool(b)(d)</b>	<b>30</b>	<b>47</b>	<b>23</b>	<b>9</b>	<b>34</b>	<b>28</b>	<b>24</b>	<b>100</b>

\* estimate has a relative standard error of 25% to 50% and should be used with caution

\*\* estimate has a relative standard error greater than 50% and is considered too unreliable for general use

(a) All children aged 3-5 years who usually attend preschool only.

(b) Includes 13,000 children where the usual weekly cost of care 'could not be determined'.

(c) 'Other' includes 'Outer Regional Australia' and 'Remote Australia'.

(d) Includes children whose parent(s) did not know the type of preschool their child attended.

Source: *Childhood Education and Care, Australia, June 2008* (ABS cat. no. 4402.0)

For parents who sent their children to a non-government preschool, these two influencing factors were more equally aligned. One third (33%) said the main reason for choosing their preschool was the reputation of the education program, while 27% of parents said the proximity of the preschool to the family home was main reason for choosing their preschool.

### ...geographical location

Children living in the major cities of Australia were more likely to attend preschool for more hours per week (28% attending for 15 hours or more) and also were more likely to pay \$60 or more (31%) for preschool education per week than children living in outer regional or remote parts of Australia (20% and 8% respectively).

Among the states and territories, 49% of all children who attended preschool in New South Wales incurred a cost of \$60 or more per week. This compares with only 4% of children in Western Australia, who had a weekly cost of \$60 or more for preschool attendance.

The cost difference between the two states is largely due to a higher proportion of children attending non-government preschools in New South Wales (62%) compared with Western Australia (22%).

### Reasons for not attending preschool

Around 155,200 (or 28%) of children aged 3–5 years, who were not attending school, did not usually attend a preschool or preschool program in 2008.

The main reason given by around one-third of parents (36%) who did not send their child to preschool, was that they were not working and preferred to look after their child. Others felt that their child was too young/too old (8%) or that they preferred another form of care (8%). A further 7% of parents felt that the cost of preschool education was too expensive.

### Preschool attendance: socioeconomic characteristics

The National Partnership Agreement on Early Childhood Education aims to provide all children with access to affordable, quality education in the year before formal schooling. In particular, it aims to increase the proportion of disadvantaged children enrolled in preschool programs.<sup>1</sup>

In the areas of greatest relative disadvantage, 60% of children 3–5 years not attending school, usually attended preschool or a preschool program compared with almost 80% of children from areas with the lowest relative disadvantage.

Children who spoke English as their main language at home were also more likely to attend preschool or a preschool program in long day care. Of those children who spoke English at home, 73% attended preschool or a preschool program, compared with 60% of children who spoke a language other than English at home.

### ...educational attainment of parents

Preschool participation rates (in either setting) varied according to the highest level of parental education. The participation rates varied more for mothers than they did for fathers, indicating, in part, that the education level of mothers influences preschool attendance rates to a greater extent than the education levels of fathers.

The participation of children, aged 3–5 years, at preschool or a preschool program was highest for those children whose mother or father held a Bachelor Degree or above (79% and 78% respectively) while rates fell to 67% and 71% respectively, for those whose mother or father did not complete Year 12.

The educational attainment of parents is also shown to have a positive influence on the educational achievement of children. This is examined in the article: *Australian Social Trends, June 2009, 'Student achievement in maths and science.'*

### ...household composition and parental labour force status

A high quality and accessible early childhood education and care sector provides support and choice for families who need to balance work and family life.<sup>2</sup> For many families with young children, the need to re-enter or continue workforce participation, in turn creates a demand for the educational needs of the child to be addressed through formal early childhood education.

In 2008, for couple families, 72% of children aged 3–5 years usually attended either a preschool or a preschool program, compared with 66% of children in one-parent families.

The likelihood of children attending preschool increased if at least one parent was employed full-time. Those children in couple households where one parent was employed full-time and one parent was employed part-time were more likely to attend preschool or a preschool program (79%) than if one parent was employed part-time and the other parent was not employed, or neither parent was employed (57%).

### Learning in the home

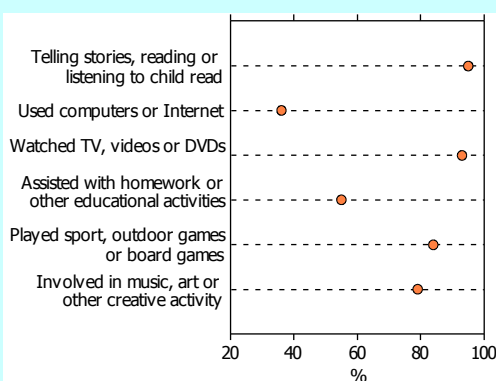
In 2008, almost all parents (95%) reported being actively involved in telling stories, reading to their child or listening to their child read. Further activities such as watching TV, videos or DVDs, playing sport, outdoor games or board games and being involved in music, art or other creative activities were also activities that many parents were actively involved in with their children.

### ...number of books

Educational attainment through books allows children to develop language, imagination and interaction skills.

Over two-thirds (71%) of children who attended preschool or a preschool program had 100 or more books in the home compared with 60% of children who did not attend preschool or a preschool program.

### Proportion of parents who actively engage with their children in selected activities – 2008



Source: *Childhood Education and Care, Australia, June 2008* (ABS cat. no. 4402.0)

For one-parent families, the story was similar. Children who had an employed parent had higher attendance rates at preschool (74%) compared with children who did not have an employed parent (61%).

Children in couple families were also more likely to attend preschool or a preschool program if the parents earned \$2000 or more per week (79%) compared with couple families earning less than \$800 per week (66%). For one-parent families the weekly income of the parent did not influence preschool attendance rates (in either setting) with around 65% of children (across all three income ranges) attending.

### Are parents advised of their child's progress at preschool?

Receiving a good education is crucial in the early years of a child's life. Research suggests that a range of educational experiences in the first decade of a child's life plays a crucial role in brain development and school readiness.<sup>5</sup>



It is important, therefore, that parents know how their child is progressing at preschool and if there are any learning difficulties that may continue into the future.

Most parents (around 86%) whose child attended preschool or a preschool program, felt satisfied that the preschool teacher was informing them very well or well in terms of their child's learning progress. Around 12% of parents felt that they were not well informed or that they were not informed at all of their child's progress at preschool.

## Children's adjustment to school

The latest Childhood Education and Care survey results show that if a child attends preschool or a preschool program in the year prior to school, then they are more likely to be better adjusted to school than if they did not attend a preschool or a preschool program.

In 2008, around 1 million children aged 4–8 years attended school. Of those children who had usually attended preschool and preschool programs in the year prior to school, parents reported that 94% had made a good adjustment to school compared with 88% of children who did not attend either preschool or a preschool program in the prior year.

## Indigenous children

According to the [2008 National Aboriginal and Torres Strait Islander Social Survey \(NATSISS\)](#), 37% (14,400) of Aboriginal and Torres Strait Islander children aged 3–5 years attended preschool, 22% (8,600) went to school and around 39% (14,900) did not attend school or preschool. This gives a preschool attendance rate of 49% for Indigenous children who did not yet go to school.

The majority (85%) of Indigenous children aged 3–5 years had parents or carers who assisted in reading activities in the week prior to the reference period. Other informal learning activities that the parent or carer were involved in included watching TV, videos or DVDs (92%), playing music, songs, dancing or other musical activities (75%), drawing, writing or other creative activities (72%), and playing a game or sport (67%).

## Endnotes

- 1 Council of Australian Governments (COAG), 2009, *National Partnership Agreement on Early Childhood Education*, viewed 25 September 2009, <[www.coag.gov.au](http://www.coag.gov.au)>.
- 2 Department of Education, Employment and Workplace Relations, 2009, *Regulation Impact Statement for Early Childhood Education and Care Quality Reforms July 2009*, viewed 21 September 2009, <[www.deewr.gov.au](http://www.deewr.gov.au)>.
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- 4 Department of Education, Employment and Workplace Relations 2009, *National Partnership Agreement on Early Childhood Education*, viewed 16 October 2009, <[www.deewr.gov.au](http://www.deewr.gov.au)>.
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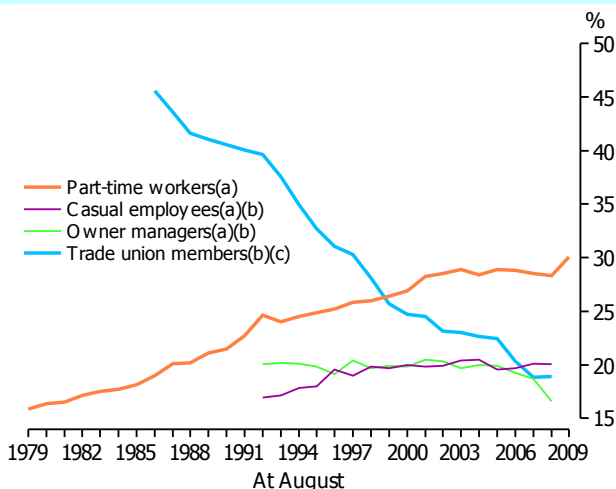
# Patterns in work

In recent decades the labour market has witnessed trading hour liberalisation, anti-discrimination legislation, labour market deregulation, and enterprise bargaining. These developments have been accompanied by changes in the composition of the workforce, increased diversity of working arrangements and patterns, and falling rates of trade union membership.

The proportion of all employed people who were working part-time almost doubled between August 1979 (16%) and August 2009 (30%). The proportion of employed people working as a casual employee also increased between August 1992 (17%) and August 1996 (20%), but has since remained at this level. In contrast, the proportion working as an employee with paid leave entitlements decreased slowly between 1992 (62%) and 2004 (59%) before rising to 63% in 2008. The overall proportional increase in employees was offset by a proportional decline in owner managers (from 20% in 1992 to 17% in 2008).

For some people, the availability of jobs which allow them to work at night or on the weekend, or which offer flexible working hours, enable them to obtain and retain paid work. Many are unable or unwilling to work a 'traditional' full-time, Monday to Friday job that has fixed and regular daytime start and finish times.

## Trends in selected working arrangements and types of jobs over recent decades



(a) As a proportion of all workers.

(b) In main job if a multiple job holder.

(c) As a proportion of all employees and owner managers of incorporated enterprises.

Source: [Labour Force, Australia, November 2009](#) (ABS cat. no. 6202.0); [Australian Labour Market Statistics, October 2009](#) (ABS cat. no. 6105.0); [Trade Union Members, Australia, August 1992](#) (ABS cat. no. 6325.0); [Employee Earnings, Benefits and Trade Union Membership, Australia, August 2008](#) (ABS cat. no. 6310.0)

## Data sources and definitions

Information presented in this article has been sourced from various ABS surveys. The data describe employed people aged 15 years and older excluding those in certain jobs, dwellings and locations. Scope exclusions vary from survey to survey, and details about these scope exclusions can be found in:

- [Labour Force, Australia, November 2009](#) (ABS cat. no. 6202.0)
- [Forms of Employment, Australia, November 2008](#) (ABS cat. no. 6359.0)
- [Employee Earnings, Benefits and Trade Union Membership, Australia, August 2008](#) (ABS cat. no. 6310.0)
- [Employment Arrangements, Retirement and Superannuation, Australia, April to July 2007 \(Reissue\)](#) (ABS cat. no. 6361.0)

In this article:

People who usually *work at night* are people who usually work some or all of their hours (in any job) between seven in the evening and seven in the morning.

*Part-time* workers are those who work less than 35 hours a week (in all their jobs combined) and *full-time* workers are those who work at least 35 hours a week (in all jobs).

For the 6% of employed people who have more than one job, any job-specific arrangements presented (e.g. paid leave entitlements) pertain to their main job only.

*Employees* exclude owner managers of incorporated enterprises (OMIEs). OMIEs are people who work in their own limited liability company, and the ABS usually classifies them as employees. However, because OMIEs have more control over their work patterns, they've been excluded from the definition of 'employee' adapted for this article, and have been grouped with other owner managers.

*Casuals* are employees (excluding OMIEs) who are not entitled to paid sick or holiday leave (the ABS proxy measure for casuals).<sup>1</sup> *Other employees* are those who are entitled to paid sick leave and/or paid holiday leave.

*Owner managers* are people who work in their own business, with or without employees, whether or not the business is of limited liability.

However, for other people, the ability to plan and commit to family, social and leisure activities is adversely affected by working at night or on the weekend, or by working at irregular and/or unpredictable times. By their nature, jobs which require workers to be on call or standby offer unpredictable working hours. Other irregular work patterns include working varying days of the week, a varying number of hours from week to week, and different start and finish times from day to day.

## Characteristics of workers(a) engaged in different types of employment(b) – 2008

Selected characteristics	Units	Employee			Owner manager	Total employed(c)
		Casual	Other	Total		
Average age	years	33.7	39.2	37.9	46.4	39.5
Proportion who are women	%	55.8	45.5	48.0	32.3	45.1
Proportion who work part-time(d)	%	70.0	16.7	29.5	28.2	29.3
Average hours usually worked by part-timers(d)	no.	16.3	23.1	19.2	18.9	19.2
Average hours usually worked by full-timers(e)	no.	42.7	42.9	42.8	51.4	44.4
Number	'000	2 075.7	6 586.6	8 662.2	1 972.2	10 634.5

(a) Employed people usually working less than an hour a week in all jobs are excluded from this table and all subsequent text.

(b) In main job if a multiple job holder.

(c) Those who are a contributing family worker in their main job are excluded from this table and all subsequent text.

(d) Employed people who usually work 1-34 hours a week in all jobs.

(e) Employed people who usually work at least 35 hours a week in all jobs.

Source: ABS 2008 Forms of Employment Survey

### How common are 'traditional' work patterns these days?

In November 2008, according to the ABS Forms of Employment Survey, three-quarters (75%) of all employees with paid holiday leave and/or paid sick leave usually worked five days a week. However, the five day working week was not the norm among other workers.

Only 33% of casual employees usually worked five days a week. Reflecting their tendency to work part-time, the majority (56%) of casuals usually worked fewer than five days a week. Yet, despite the relatively small proportion of casuals who worked full-time (30% compared with 83% of other employees) casual employees were just as likely as other employees to usually work on six or seven days of the week.

Just under half (45%) of owner managers also usually had a five day week, though only 17% usually worked less than five days a week. Substantial proportions of owner managers usually worked six days a week (21%) or every day (18%).

### How regular is work time?

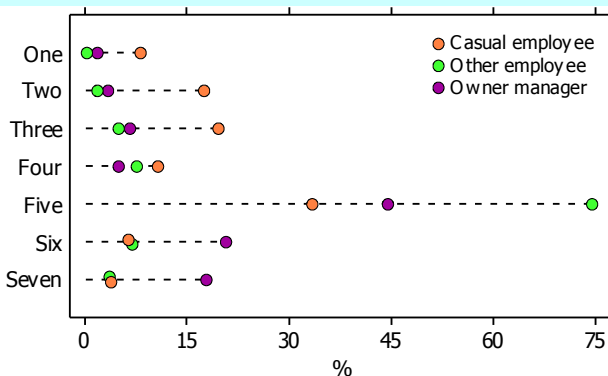
Also in November 2008, 15% of employed people worked on days of the week which varied from week to week. Variability of working days was more commonly experienced by casual employees (24%) than by other employees (11%) and owner managers (15%).

Around one in four workers (26%) did not usually work the same number of hours each week. Higher proportions of casual employees and owner managers (38% of both) worked variable weekly hours, while this pattern of work was more unusual among employees with paid leave entitlements (18%).

### ...different industries, different patterns

Some of the industry differences in work patterns in November 2008 can be attributed to the composition of each industry's workforce (i.e. the relative proportions of each who are casual employees, other employees and owner managers).

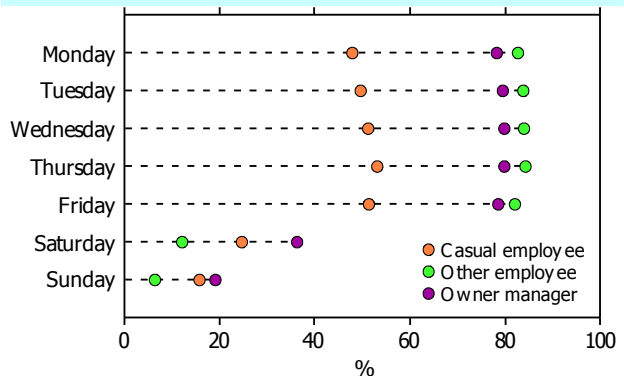
#### Number of days usually worked per week by employment type in main job(a) – 2008



(a) Employed people usually working less than an hour a week in all jobs are excluded from this graph and all associated text.

Source: ABS 2008 Forms of Employment Survey

#### Proportion(a) who usually worked on a given day of the week each week – 2008



(a) Employed people usually working less than an hour a week in all jobs are excluded from this graph and all associated text.

Source: ABS 2008 Forms of Employment Survey



However, other factors also influence the extent to which 'non-traditional' patterns are worked within an industry. Such factors include the nature of the work undertaken (e.g. seasonality in farming), negotiated entitlements and obligations (i.e. conditions of employment), the demographic profile and personal preferences of its workers, the preferences of its consumers, and levels of competition operating within the industry.

For example, 72% of people working in the very casualised and competitive Accommodation and food services industry usually worked on the weekend. Working mainly in this industry, 89% of bar attendants, 88% of hotel/motel managers and 83% of chefs usually worked on the weekend. In sharp contrast, only 8% of people employed in the Financial and insurance services industry usually worked on the weekend. This marked difference partly reflects heightened weekend demand for many services supplied by the Accommodation and food services industry.

Weekend work is uncommon in the Financial and insurance services industries, partly because few financial and insurance companies (e.g. banks) open their branches for face to face business on a Saturday or Sunday. New technologies have given consumers 24/7 access to many of this industry's products and services. In particular, ATMs and the rapidly expanding use of web-based technology has obviated many customers need for 'over the counter' service.

In some industries and occupations it's not only common to work on the weekend, but to work days which vary from week to week, and to work different numbers of hours each week. Conditions of employment, such as being able to choose work times and being on call, may contribute to such irregular work patterns. Among the occupations most likely to have variable days of work were midwives (81%), critical care and emergency nurses (81%) and

### Employed people(a)(b), selected patterns of work and selected conditions of employment – 2008

Industry of main job	Selected patterns of work			Selected conditions of employment in main job			Number employed '000
	Days of the week worked varies from week to week %	Number of hours worked varies from week to week %	Usually works on the weekend %	Not entitled to paid sick leave or paid holiday leave (i.e. is a casual employee) %	Usually required to be on call or standby %	Has some say in time starts and finishes work %	
Agriculture, forestry and fishing	19.8	39.7	63.2	16.7	46.8	73.6	362.9
Mining	35.7	28.7	58.5	9.2	25.9	29.2	179.1
Manufacturing	9.6	21.8	20.7	13.8	19.6	40.6	1 009.6
Electricity, gas, water and waste services	10.1	23.6	15.5	6.9	34.0	50.1	127.0
Construction	8.6	32.6	27.9	13.5	24.4	57.5	988.7
Wholesale trade	4.4	19.9	16.5	13.4	22.6	55.3	378.8
Retail trade	19.2	23.9	55.6	36.1	24.2	42.5	1 184.5
Accommodation and food services	28.1	33.7	72.3	57.9	31.2	40.0	683.7
Transport, postal and warehousing	21.0	33.4	39.3	17.4	31.1	39.4	577.1
Information media and telecommunications	11.3	23.9	23.6	15.6	21.8	54.0	220.8
Financial and insurance services	*1.7	14.1	8.2	5.3	18.3	58.7	379.1
Rental, hiring and real estate services	15.5	27.5	40.0	17.4	38.6	61.0	204.4
Professional, scientific and technical services	6.9	27.3	16.6	10.6	22.8	70.3	811.5
Administrative and support services	11.9	26.2	24.8	24.0	22.9	53.9	339.7
Public administration and safety	15.6	18.4	20.7	7.4	23.0	58.1	648.9
Education and training	6.2	20.2	13.7	13.6	14.5	38.3	788.3
Health care and social assistance	23.8	24.9	36.0	17.8	26.9	44.5	1 105.7
Arts and recreation services	30.5	33.4	60.3	35.1	30.2	48.2	192.5
Other services	10.6	26.6	38.4	14.7	27.9	57.3	451.9
<b>All industries</b>	<b>14.7</b>	<b>26.0</b>	<b>33.8</b>	<b>19.5</b>	<b>25.1</b>	<b>50.0</b>	<b>10 634.5</b>

\* estimate has a relative standard error of 25% to 50% and should be used with caution

(a) Those usually working less than an hour a week in all jobs are excluded from this table and all associated text.

(b) Those who are a contributing family worker in their main job are excluded from this table and all associated text.

Source: ABS 2008 Forms of Employment Survey

police officers (68%), while at least half of all photographers (57%), concreters (51%) and transport company managers (51%) worked a different number of hours from week to week.

In November 2008, half (50%) of all workers had some say in what time they started and finished work, and a quarter (25%) were usually required to be on call or standby. There were, however, considerable differences between industries. For example, Professional, scientific and technical services industry workers were more than twice as likely as Mining industry workers to have a say in their start and finish times (70% compared with 29%), and Agriculture, forestry and fishing industry workers were thrice as likely as Education and training industry workers to be on call (47% compared with 15%). Yet school principals were quite likely to be required to be on call (63%), along with 89% of ministers of religion and 69% of real estate agents.

### Are people's usual work patterns their preferred patterns?

The ABS Survey of Employment Arrangements, Retirement and Superannuation, which was conducted between April and July in 2007, asked workers to describe some of their usual work patterns and then asked them what patterns they would prefer to work (taking into account any income changes that would or might occur).

Nearly two in three workers (64%) usually worked all of their hours during daylight hours (i.e. between seven in the morning and seven in the evening). The overwhelming majority (96%) of these people who only worked during daytime hours liked it that way. Among the other 36% of employed people who usually worked some or all of their hours at night (i.e. between seven in the evening and seven in the morning) over two-thirds (68%) actually preferred to be working some or all of their hours at night.

Similarly, among the 63% of employed people who didn't usually work at all on the weekend, virtually all (96%) were happy to have the weekend off. Of the other 37% of employed people who did usually work on the weekend, almost two-thirds (65%) were following their preference for working some or all of their hours on the weekend.

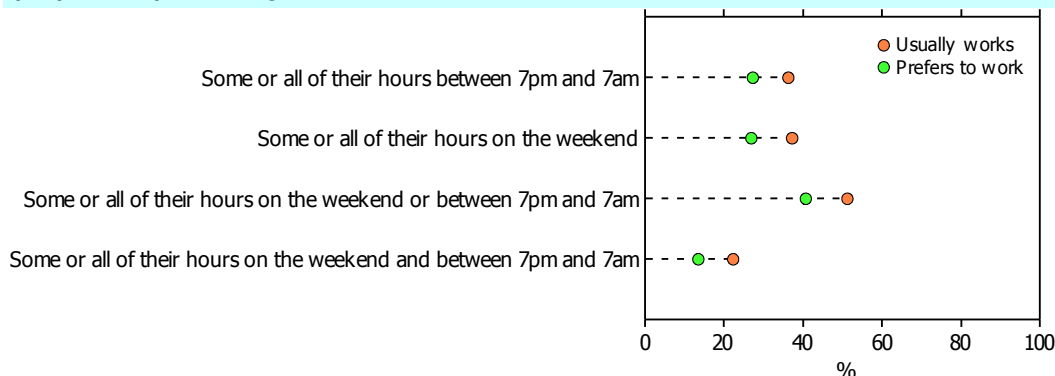
People who usually worked on the weekend and preferred to work on the weekend were a diverse group, even though some population groups were over represented. For example, 30% of people who usually worked on the weekend and preferred to work on the weekend were casual employees, 26% were owner managers, 59% were male, 26% were aged 15–24 years, and 17% were aged 55 years or older.

Among all employed people (excluding those who are a contributing family worker in their main job and those usually working less than an hour a week) 20% were casual employees, 20% were owner managers, 55% were male, 17% were aged 15–24 years, and 15% were aged 55 years or older.

***In 2007, 41% of Australia's workers preferred to work some or all of their hours at night or on the weekend. An even larger proportion (51%) usually did work some or all of their hours at these 'non-traditional' times.***

Entitlement to penalty rates of pay for working 'unsocial' hours may underpin some workers' preference for working on days which attract such higher rates of hourly pay. Weekend work may also be popular among students whose need to attend an educational institution during weekday daytime hours precludes paid work at such times.

### Employed people(a)(b), proportion usually working at 'non-traditional' times and proportion preferring to work at such times – 2007

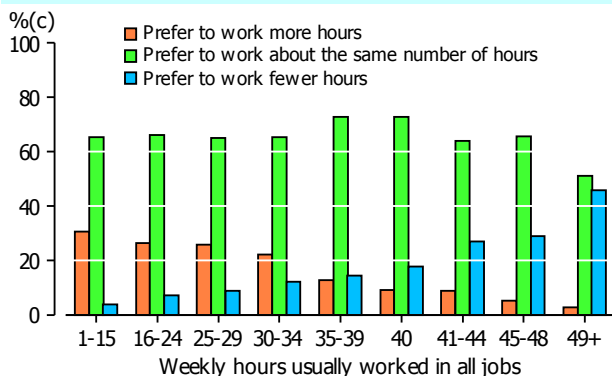


(a) Those usually working less than an hour a week in all jobs are excluded from this graph and all associated text.

(b) Those who are a contributing family worker in their main job are excluded from this graph and all associated text.

Source: ABS 2007 Survey of Employment Arrangements, Retirement and Superannuation

## Employed people(a)(b), satisfaction with number of hours usually worked per week – 2007



- (a) Those usually working less than an hour a week in all jobs are excluded from this graph and all associated text.
- (b) Those who are a contributing family worker in their main job are excluded from this graph and all associated text.
- (c) People who did not know which option they preferred were excluded prior to the calculation of all percentages presented in this graph and its accompanying text.

Source: ABS 2007 Survey of Employment Arrangements, Retirement and Superannuation

### ...too much, not enough or about the right amount of time spent working?

When it came to the number of hours they usually worked each week, about two-thirds (65%) of employed people felt they were working close to their preferred number of hours. Nevertheless, 14% of workers wanted to work more hours than they were usually working, and 21% preferred to work less hours for less money. Part-time workers who were dissatisfied with the number of hours they were working tended to want more hours, and full-time workers who were dissatisfied tended to want fewer hours.

People who only just worked full-time hours (i.e. those who usually worked between 35 and 39 hours a week) were among the most content. Only 13% wanted to spend more time working, 15% preferred to cut back their hours, and 73% felt they were spending about the right amount of time working. At the other end of the full-time spectrum, half (51%) of the people who usually worked at least 49 hours a week felt they were working about the right number of hours. While some of them (3%) actually wanted more hours, nearly half (46%) preferred to work fewer hours and accept a drop in pay.

Employed people who wanted to work fewer hours were more likely than other workers to feel that their work and family responsibilities were rarely if ever in balance (24% compared with 13%). Still, 41% of them felt that their work and family responsibilities were often if not always in balance. This reflects the many and varied main reasons for wanting to work fewer hours. Some people wanted to work less mainly

to be able to spend more time caring for children, but the single most commonly cited main reason for wanting to work fewer hours was to spend more time on social and/or recreational activities.

### Looking ahead

Recent and impending developments have the potential to shape the work patterns of the future. These include legislative, attitudinal and technological changes, the emergence and decline of industries and occupations, the existence of skill shortages, and pressures to boost productivity, competition and workforce participation.

Current government policies aim to maximise workforce participation and assist workers to realise their preferred work-life balance. A labour market which offers a more diverse and flexible array of working arrangements and work patterns may improve the chances of increasing workforce participation. It may also enable workers to optimally balance paid work with other aspects of their lives.

### Endnotes

- 1 For more information on how casual employment may be defined, see [Measures of Casual Employment](#) in *Australian Labour Market Statistics*, October 2008, cat. no. 6105.0, ABS, Canberra.

# International comparisons

The information presented in *Australian Social Trends* provides a picture of how Australian society is changing over time and offers insights into the factors driving these changes. In some cases these changes and the underlying factors are unique to Australia. In others, the forces affecting Australian society are also felt in other parts of the world. Comparing trends in Australia and elsewhere can provide a useful perspective and add to our understanding of the forces shaping Australian society.

This article compares recent trends in Australia with some other countries in the Organisation for Economic Co-operation and Development (OECD). Where appropriate, countries outside the OECD have also been included in the comparison. The issues chosen for comparison are drawn from articles featured in *Australian Social Trends* throughout 2009 and 2010.<sup>1</sup>

There can be difficulties in making comparisons between countries, as concepts, classifications and collection methods often vary from one country to another (see the *data sources and definitions* box). Despite this, there is still much to be gained from comparing trends in Australia with those in other countries.

## Population

Together with many other countries, Australia's population is ageing (see *Australian Social Trends March 2009*, ['Future population growth and ageing'](#)). The size, growth and age

### Projections of the world population – 2009

	Population (millions)	% of world population
New Zealand	4.3	0.1
<b>Australia(a)</b>	<b>21.9</b>	<b>0.3</b>
Canada	33.6	0.5
Italy	59.9	0.9
United Kingdom	61.6	0.9
Japan	127.2	1.9
United States	314.7	4.6
India	1,198.0	17.5
China	1,345.8	19.7
Rest of the world	3,663.2	53.6
<b>World</b>	<b>6,829.4</b>	<b>100.0</b>

(a) Based on Estimated Resident Population as at June 30, 2009.

Source: [UN World Population Prospects: The 2008 Revision](#); and [Australian Demographic Statistics, June 2009](#) (ABS cat. no. 3101.0)

### Data sources and definitions

The population projections in this article are taken from [World Population Prospects: The 2008 Revision](#) produced by the United Nations.

Population projections are based on assumptions about future trends in life expectancy, fertility and migration. Different projections are produced on the basis of different assumptions about these trends. The data included in this article are based on the 'medium' set of projections.

The proportion of *daily smokers* is the percentage of the population aged 15 years and over who reported smoking every day. The information on daily smoking rates comes from the [OECD Health Database 2009](#).

Data on prison populations are sourced from the International Centre for Prison Studies [World Prison Brief](#). Comparability is affected by differences in whether pre-trial detainees, juveniles and offenders being treated for psychiatric illness or drug and alcohol addiction are counted in the prison population.

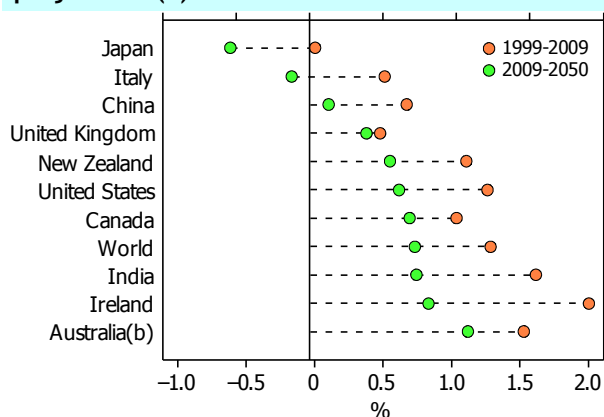
Data on childcare enrolment rates come from the [OECD Family database](#) and [OECD Education database](#). Childcare enrolment among 0–2 year olds includes enrolment in formal arrangements such as childcare centres, use of registered child minders and care provided by non-family members.

structure of a country's population has profound implications for its social and economic development. Population growth and age structure is affected by births and deaths (natural increase or decrease) as well as by migration patterns.<sup>2</sup>

In 2009, Australia's projected population of 21.9 million people accounts for 0.3% of the global population. In contrast, China and India's inhabitants account for 20% and 18%, respectively, of the world's population. The United States accounts for 5% of the world's population and the United Kingdom 1%.

Australia's population grew by an average of 1.5% per year between 1999 and 2009. This was slightly above the average growth rate across the world (1.2%) and in the US (1.2%), New Zealand (1.1%) and Canada (1.0%). Ireland had the highest population growth rate (an annual average of 1.9%) of any OECD country over this period. There was relatively slow growth in Japan (less than 0.1%), Italy (0.5%) and the United Kingdom (0.5%). Beyond the OECD, the Indian population grew by an average of 1.5% per year, while in China, where government policy mandates a limit of one child per couple in urban areas, the growth rate was 0.7%.

## Average annual population growth and growth projections(a)



(a) Data for 2009 and 2050 are projections.

(b) Data for 2009 are based on Estimated Resident Population at 30 June.

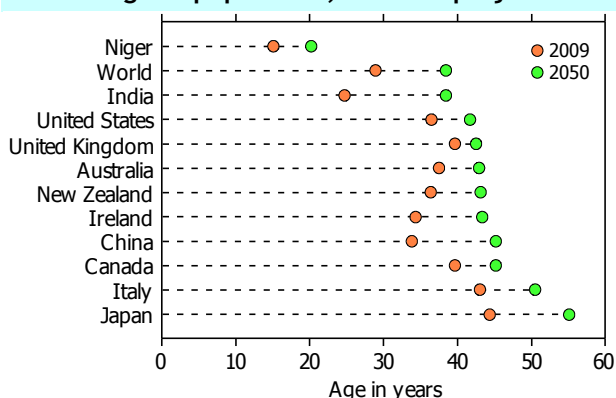
Source: [OECD Factbook 2009](#); [UN World Population Prospects: The 2008 Revision](#); [Australian Demographic Statistics, June 2009](#) (ABS cat. no. 3101.0); and [Population Projections, Australia, 2006 to 2101](#) (ABS cat. no. 3222.0)

Australia's population is projected to grow at a faster rate than most other developed countries (1.1% per year), reaching 34 million of the world's 9.1 billion inhabitants by 2050. The Japanese population, on the other hand, is projected to shrink by 0.5% per year over this time, while falls are also projected in the Russian Federation (0.5% per year), Germany (0.4%) and Italy (0.1%).

Most population growth is expected to occur in the less developed countries. For example, India's population is projected to grow by 35% between 2009 and 2050, seeing it overtake China as the world's most populous country.

Declining fertility and increased longevity will see many countries experience rapid population ageing in coming decades. The median age across all countries is expected to rise from 29 years in 2009 to 38 years by 2050. In Australia, the median age is expected to rise from 37 to 42 years over this time. Japan has the oldest age structure of any country in the world, with the median age expected to reach 55 years by 2050.

## Median age of population, medium projections



Source: [UN World Population Prospects: The 2008 Revision](#); [Population Projections, Australia, 2006 to 2101](#) (ABS cat. no. 3222.0); and [Population by Age and Sex, Australian States and Territories, June 2009](#) (ABS cat. no. 3201.0)

Population ageing is also expected in many of the least developed nations. These nations have relatively young populations as a result of high fertility and high mortality rates. For example, in Niger, which has the youngest age structure of any nation, the median age is expected to rise from 15 to 20 years between 2009 and 2050.

These trends will see an increase in the proportion of people in older age groups. In the more developed countries, the proportion of the population aged 60 years and over is projected to rise from 22% in 2010 to 33% in 2050. A similar trend is expected in less developed countries, with the proportion projected to more than double from 9% to 20%. In Australia, the proportion is projected to increase from 19% to 28% between 2009 and 2050. These trends are likely to pose serious economic challenges in many countries as the proportion of people of traditional working age falls, while demand for age pensions, health care and aged care services may increase.

## Health risk factors – smoking

According to the World Health Organisation, tobacco is the second highest cause of death in the world, responsible for about one in ten adult deaths, or five million deaths each year.<sup>3</sup> Tobacco is also rated as the largest avoidable risk to health in OECD countries.<sup>4</sup>

In 2007, Australia had one of the lowest smoking rates in the OECD, with around 17% of people aged 15 years and over smoking every day. Around the same period, Sweden had the lowest smoking rate in the OECD (15%), closely followed by the United States (15%). New Zealand, Canada, the United Kingdom and Italy all had rates below the OECD average of 24%, while Greece had the highest rate (40%).

## Proportion of population aged 15 years and over smoking daily – 2007

	Men %	Women %	People %
Sweden(a)	12.3	16.7	14.5
United States	17.1	13.7	15.4
<b>Australia</b>	<b>18.0</b>	<b>15.2</b>	<b>16.6</b>
New Zealand	19.3	17.0	18.1
Canada	20.3	16.0	18.4
United Kingdom	22.0	20.0	21.0
Italy(b)	28.9	16.4	22.4
OECD(c)	29.8	19.3	24.3
Japan(b)	39.5	12.9	25.7
Greece(b)	46.3	33.5	39.7

(a) Data are for 2006.

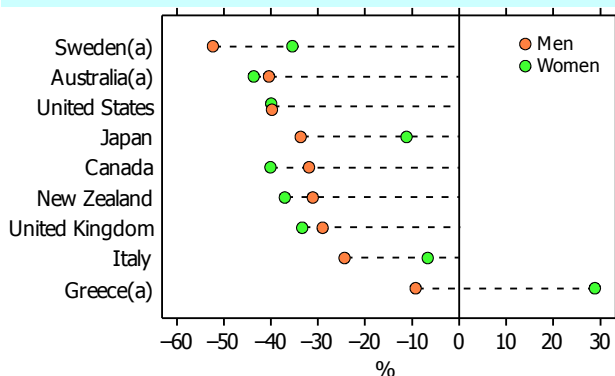
(b) Data are for 2008.

(c) Data are for 2005.

Source: [OECD Health Data 2009](#)



## Changes in smoking rates by sex – 1990-2007



(a) Data refer to the period from 1989-2007 for Australia, 1990-2006 for Sweden, and 1990-2008 for Greece.

Source: [OECD Health Data 2009](#)

Like most other OECD countries, in Australia men were more likely to smoke every day than women (18% compared with 15%). Across the OECD the smoking rate for men was 30% compared with 19% for women. In Korea, the rate of smoking among men was 10 times that for women (47% compared with 4.6%). Sweden was the only country in the OECD where women were more likely than men to smoke on a daily basis (17% of women compared with 12% of men).

There has been a marked fall in smoking rates across OECD countries in recent years. The decline in smoking rates in Australia (a fall of 40% for men and 44% for women between 1989 and 2007) was among the biggest in the OECD, along with Sweden where smoking rates fell by 52% for men and 36% for women. Other countries with large falls included the US, Canada, New Zealand and the UK.

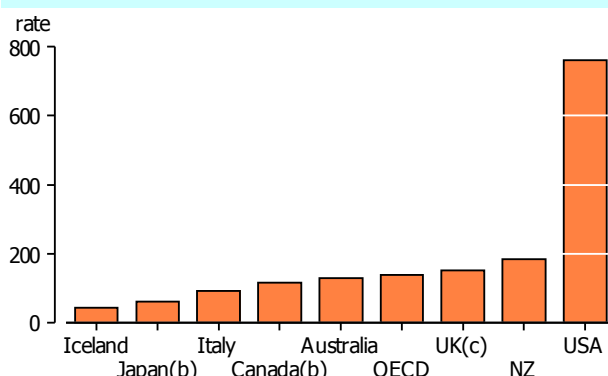
While the smoking rate for men fell in all OECD countries between 1990 and 2007, the rate among women increased in a number of European countries. In Greece, for example, the proportion of women who smoked on a daily basis rose by 29% over this period. There were smaller rises among women in France (5%), Germany (4%) and Spain (less than 1%).

## Prison population

While crime levels have an impact on the rate of imprisonment, differences in prison rates across countries are also influenced by other factors associated with the nature of the criminal justice system such as sentencing policies.<sup>2</sup>

In Australia in 2008 there were 129 adults in prison per 100,000 people. This was the 12<sup>th</sup> highest prison rate out of 30 OECD countries. Iceland had the lowest prison population rate of any OECD country (44), followed by Japan (63). The United States by far the highest prison population rate in the world in 2008 with 760 prisoners per 100,000 people.

## Prison population(a) – 2008(b)



(a) Adult prisoners per 100,000 people.

(b) Latest data for Canada are for 2007 and for Japan are for 2006.

(c) Data relate to England and Wales.

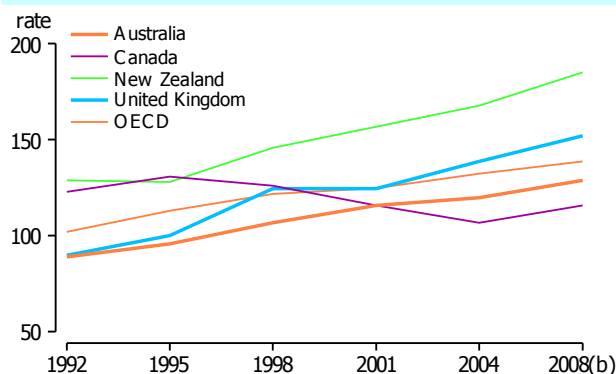
Source: International Centre for Prison Studies, [World Prison Brief](#)

Australia's prison population rate was slightly lower than the average across the OECD (139 prisoners per 100,000 people). However, this average is inflated by the US rate, which is more than three times as high as the next highest country, Poland (225). Without the US, the average prison population rate among the remaining 29 OECD countries in 2008 was 117 per 100,000 people, below the rate in Australia.

Research suggests that sentencing policies were a big factor in high prison rates in the United States. For example, property offenders and drug users are rarely imprisoned in European countries, while non-violent offenders make up more than half of the US prison population. However, violent offenders in the US spend five to ten times as long in prison as those in countries such as France.<sup>5</sup>

Over the past 15 years prison rates have risen in most OECD countries. Between 1992 and 2008, the average prison population rate across OECD countries rose by 26%. In Australia the increase was slightly higher (31%). The greatest rise in proportional terms over this period

## Prison population(a) – 1992-2008



(a) Adult prisoners per 100,000 people. The graph only represents those years shown on the axis (1992, 1995, 1998, 2001, 2004 and 2008).

(b) Latest data for Canada are for 2007.

Source: International Centre for Prison Studies, [World Prison Brief](#)

occurred in Turkey (64%), while the United States had the largest increase in absolute terms (up 255 prisoners per 100,000 people, or 34%).

There were a few countries where the prison population rate fell between 1992 and 2008. In Iceland the rate more than halved, while Korea saw a fall of 34%. There were more modest falls in Canada (6%), Denmark (5%), Switzerland (4%) and Finland (2%).

Across the OECD, women make up only 5% of the prison population. Women account for 7% of the prison population in Australia, and 9% in the United States. Racial minorities are often over-represented among prison populations. For example, in the United States the prison rate among black men in 2007 (4,618 prisoners per 100,000) was six times that of white men (773), while the rate among Hispanic men (1,747) was more than twice that of white men.<sup>6</sup> Similarly, in Australia in 2008, the prison rate among Indigenous men was 13 times that of non-Indigenous men.<sup>7</sup>

## Participation in formal childcare

There is substantial research pointing to the beneficial effects of high quality early childhood care on children's outcomes later on in life, along with the benefits children get from positive social interaction with peers and non-related adults. Early childhood care also affects broader social and economic goals such as providing choice for parents in balancing their work and family commitments. In many OECD countries, maximising the proportion of mothers, in paid work is seen as critical to maintaining economic growth and ensuring the sustainability of social protection systems.<sup>8</sup>

### Participation in formal childcare for children aged 0-2 years – 2006

	Proportion of children in formal care %	Time per week in care Hours
Denmark	70	34
United Kingdom	40	18
New Zealand	38	20
United States(b)	31	31
<b>Australia(a)</b>	<b>30</b>	<b>18</b>
Italy	29	30
OECD	28	30
Japan	28	n.a.
Canada	24	32
Mexico	6	40
Czech Republic	3	17

n.a. not available

(a) Data are for 2008.

(b) Data are for 2005.

Source: *OECD Family Database*; for Australia: ABS 2008 Childhood Education and Care Survey

In 2006, an average of 28% of children between 0 and 2 years of age across OECD countries were enrolled in formal childcare. The Australian rate was similar, with 30% of 0–2 year olds attending formal child care in 2008. A considerable proportion of childcare in Australia is also provided privately or in an informal setting – in 2008, 30% of children under three were attending some sort of informal childcare. This was also the case in countries such as Mexico and the Czech Republic where less than 10% of children aged 0–2 years were enrolled in formal childcare.

Enrolment rates were much higher in Nordic countries such as Denmark (70%), Iceland (53%) and Sweden (44%), which have long histories of publicly funded childcare, and high levels of mothers participating in paid work.<sup>9</sup>

The amount of time children spend in childcare can also affect children's developmental outcomes, as well as parents' ability to combine parenting with paid work. Across the OECD in 2006, children who attended formal childcare spent an average of 30 hours per week in care. There was considerable variation between countries, from 40 hours a week in Mexico and Portugal, to 17 hours a week in the Czech Republic and the Netherlands.

In Australia, children aged 0–2 attending formal childcare spent an average of 18 hours in care each week. This was towards the low end of OECD countries, along with the United Kingdom (18 hours) and New Zealand (20 hours). Longer time in childcare was relatively common in Nordic countries such as Iceland (36 hours), Finland (35 hours), and Denmark (34 hours), while the United States and Canada were slightly above the OECD average (31 and 32 hours per week, respectively).

## Endnotes

- 1 An article examining re-imprisonment in Australia is expected to be included in March 2010.
- 2 Organisation for Economic Co-operation and Development, 2008, *OECD Factbook 2008*, OECD Paris.
- 3 World Health Organisation, 2009, *Tobacco key facts*, viewed 1 December, 2009. <<http://www.who.int/topics/tobacco/facts/en/index.html>>
- 4 Organisation for Economic Co-operation and Development, 2008, *OECD Health at a glance 2007*, OECD, Paris.
- 5 Gottschalk, M., 2006, *The Prison and the Gallows: The Politics of Mass Incarceration in America*, Cambridge University Press, New York.
- 6 Sabol, W. J. and Couture, H., 2008, *Prison Inmates at Midyear 2007*. Bureau of Justice Statistics, Washington D.C.
- 7 Australian Bureau of Statistics, 2008, *Prisoners in Australia 2008*, cat. no. 4517.0, ABS, Canberra.
- 8 Adema, W. and Whiteford, P., 2008, 'Matching work and family commitments: Australian outcomes in a comparative perspective', *Family Matters*, 80, pp. 9–16.
- 9 Organisation for Economic Cooperation and Development, 2006, *Starting strong II: Early childhood education and care*, OECD, Paris.

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<i>POST</i>	Client Services, ABS, GPO Box 796, Sydney NSW 2001

## FREE ACCESS TO STATISTICS

All statistics on the ABS website can be downloaded free of charge.

<i>WEB ADDRESS</i>	www.abs.gov.au
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