Key Directions in Social Policy:
A Discussion Paper to inform the NPSP
Social Development Framework

presented to

City of Norwood Payneham & St Peters

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1   Overview of trends in policy development

This paper is designed to provide background for the design of the City of Norwood Payneham and St Peters (NPSP) *Social Development Framework*, and is a companion document to the *Future Issues Paper*. In that paper, a number of recent and future changes were identified. A common theme in the paper was the pace and enormity of change being faced. While many of the changes outlined are positive and symbolic of progress, they are not without losses. Our accelerating technological capabilities have brought benefits in some aspects of our lives, but created unwanted complexity in others. They have brought wealth and progress for some but in the process have widened the divide between the beneficiaries of change and those who are further impoverished by this change. A clear example of this relates to the information and communications technology revolution, sometimes described as the 'digital divide'.

The enormity of the task of managing change to minimise its negative consequences and maximise its benefits highlights the fragility of the balance that must be attained. It can be argued that now, more than ever, we need strong leadership in social policy – leadership that means that social policy not only keeps pace with technological and other forms of change, but anticipates the social consequences of that change. Unfortunately, there is little evidence anywhere in the world, of social policy providing leadership in a world of profound change. At best, it has been reactive and piecemeal. Part of the problem lies in the separation between social policy and other key policy arenas, such as, economic and fiscal policy. And part of the problem lies in the comparatively junior status of social policy against areas like defence, taxation and economic development.

In the process by which social policy makers struggle to address these challenges a deluge of policy jargon has been unleashed, often masking a failure to make an appreciable difference in closing the increasing gap between the 'haves' and the 'have nots'. (Many of these terms are identified by using italics and quotation marks in the analysis which follows.)

It is also important to take into account the impact of a parallel process of change in the relationship between policy and funding arising from the separation of the roles of funding and service provision, together with the shift to competitive tendering for government funding. The human services sector has always operated as a mixed economy structured by the combined roles of public, private and non government organisations. Government played the role of both funder as well as provider of services, with funding to non government agencies being mainly submission driven and grant funded.

During the 1990s, as public policy incorporated competition policy, contracting out of services became a world wide trend, bringing with it a separation and redefinition of roles and responsibilities. This model has more in common with economic outcomes than with social policy, and the question has not been addressed of its compatibility for a sector whose culture has been shaped by humanitarian rather than profit-making and business objectives and behaviours. In the new brave new world of tendering for service provision, not for profit organisations have found themselves forced to compete against others who traditionally have been their allies, in order to achieve scarce resources. In the process, as they rely on funding from multiple sources, only the larger organisations can bear the additional cost involved in meeting the increased demands for accountability that have accompanied the separation of roles. This has

significant implications for the trend *(see Section 3)* for collaborative service delivery to be encouraged by the same government funding bodies that have enforced competitive tendering!

2 Integration and coordination

In recent years there has been increased emphasis placed on integrating different policy fields rather than developing policy only in isolated and specialised fields. Greater awareness exists of the importance of coordinated and cross-sectoral services reflecting the fact that people's needs are diverse, and that those in most need usually have complex issues that require multiple, simultaneous interventions.

The development of *'holistic'* policy and programs has been one response, that is, focusing on a range of needs of the whole person rather than single and separate need. The recognition of the need for **coordination** across policy sectors is another response. This is sometimes referred to as *'joined-up'* services that involve a linkage of policy from a range of fields. While some of the arenas will be expected, for example, the joining of health, economic, housing, urban planning, environment and social policies, others will not. The linking of social policy with technology and scientific policy is not an alliance for which much (if any) evidence is apparent. However, unless this occurs, social policy will not be able to address the issues that arise from technology-driven change, nor will it be able to provide leadership to shape the social impact of new technologies.

Increasingly aware of the tendency for those most in need to suffer when they slip between the boundaries of different services, a key demand has been for what is sometimes termed *'seamlessness'* – that is, the capacity for clients to move across the boundaries between service systems. The *'one-stop-shop'* model also acknowledges this need. A key example was the creation in 1997 of *Centrelink* (bringing together Australian government income support, family assistance, assessment of labour market needs, referral to work or an employment service provider and some rural and disaster relief measures). Related to this has been an increasing focus on services that work across different sectors, for example, between aged care and acute care (as occurs with hospital avoidance programs), or between aged care and disability services (a growing demand as people with disabilities live longer and older people face extended life spans that often bring acquired disability).

The *'whole-of-government'* approach is another embodiment of this trend, involving collective policy making across multiple levels of government and across multiple portfolios within individual levels of government. There are numerous barriers to achieving whole-of-government responses and integrated services. These include competition for resources, different budget and funding cycles, governance issues, limited understanding of other policy portfolios due to an emphasis on specialisation, and the lack of a public sector tradition and culture to support this approach.

Whole-of-government approaches to a particular issue require one participating agency to take responsibility for coordinating effort – either at the policy level or at the delivery level. Local government authorities are often ideally placed to play the role of 'lead agency' for local level initiatives. At national level the Council of Australian Governments (COAG) is increasingly playing the role of lead agency in whole of government strategies, and expressing the importance of this approach. The announcement of the National Reform Agenda (see below) included this statement –

> *… Australia must change its attitudes towards preventative health, find new ways to engage people of all ages in learning, and encourage and support more people to participate in work. These challenges cut across all levels of government, portfolios and generations, and require the strategic leadership that only Heads of Government through COAG can provide.*

The *National Reform Agenda* (announced in February 2006) exemplifies the recognition of the importance of a coordinated strategy, led by COAG (and therefore, involving the Commonwealth, all State and Territory governments and the Australian Local Government Association). The *National Reform Agenda* is designed to ensure Australia's future prosperity by enhancing workforce participation and productivity. The Agenda has three streams – human capital, competition and regulatory reform – and relies on collaboration at all levels of government and across jurisdictions to be successful. Its implementation will be monitored by an independent body – the COAG Reform Council – which will replace the National Competition Council.

The *Human Capital Agenda* has a range of policies across the portfolios of health, education and training and seeks to –

o increase workforce participation across age groups, and key groups with lower participation rates (for example, those with a disability)
o reduce the incidence of chronic disease and the prevalence of risk factors contributing to chronic disease (poor diet, physical inactivity, smoking, alcohol misuse, excess weight, obesity)
o increase the effectiveness of health systems by emphasising health promotion, prevention and early intervention
o increase literacy and numeracy standards
o increase the proportion of young people transitioning from school to work or further study
o increase the proportion of adult workers with the skills and qualifications needed for productive working lives
o improve early childhood education and care services, from the prenatal period to the transition to the first year of school.

None of these goals is new – all represent enduring challenges for policy makers and addressing them within rather than across individual portfolios has not achieved significant success. However, they have more chance of doing so when packaged as a whole-of-government initiative, assuming the usual barriers to integrated effort are overcome.

The NPSP *Social Development Framework* acknowledges the need for policy and program development across Council portfolios, and with a focus on local level initiatives. As a single organisation, of relatively small size, its challenges in developing an integrated strategy to manage social change are far less than those faced by cross-government initiatives.

3   Collaboration and partnering

The past decade has also seen a growing acknowledgement of the value of *'strategic collaboration'* and **partnerships** – across and within sectors, and across different levels of government. Collaboration in policy development acknowledges that a range of skill

and knowledge is needed to address complex need and issues, and can also bring more effective use of resources (for example, by sharing the costs of common requirements like staff training).

Partnerships offer valuable learning opportunities provided they are based on a blending of different sets of expertise. For example, strategic collaboration between service providers and ethnic community organisations can be a very effective way of providing culturally inclusive programs. However, partnerships are not achieved without difficulty, and require equal commitment from those involved, effective communication processes, tolerance, patience, and long lead times to be fully functional.

The formation of industry 'clusters' has brought significant commercial success in some South Australian industries, such as, water and defence, but has seen substantial investment of time and resources in others without a matching return. Collaboration designed to achieve economic benefits highlights the symbiotic relationship between competition and cooperation, two concepts that are often viewed as polar opposites but which, when structured through intentional partnerships, increase competitive edge.

Some service tendering processes provide incentives for partnered approaches, and given the increasing demand for integrated service models, it is likely that collaboration will be a long term feature of social policy. However, partnering is a process that has greater chance of long term success if it is a 'bottom up' process as opposed to a 'forced marriage' instigated by a funding body. In South Australian, the Home and Community Care Program funded four *HACC Collaborative Projects* in each metropolitan region between 1999 and 2001. The Projects have shifted their focus significantly from collaboration driven by funding incentives to collaboration driven by the incentive of achieving better outcomes for consumers through a focus on service reform, particularly through integrated service responses that overcome barriers between sectors. This shift in focus has been the key to their sustainability and a number of innovative service models have evolved as a consequence.

Local government authorities are making strategic collaborations that link them together at the regional level. These can be an effective response to the reduction of Australian government assistance for seeding programs, (part of a widespread pattern of providing establishment funding that raises expectations only to be withdrawn as the responsibility for its continuance is passed to another jurisdiction). There are a number of grants available from State and Federal governments for projects that benefit regional and metropolitan communities, and local government authorities have enhanced competitive ability to access this funding when they combine their resources. A Regional Grants Officer with responsibility to procure money for various local government projects and programs (other than rate income) will now submit applications on behalf of a number of Councils including Norwood Payneham & St Peters.

There are numerous examples of partnerships between local government and the South Australian government. These occur across the range of portfolio areas and recognise local government authorities' direct connection with communities, a link that is often formalised in agreed partnerships to address specific issues. An important component of the NPSP *Social Development Framework* will be the identification of current partnerships that require sustaining as well as new collaborations needed to address future change.

4   Capacity Building and Early Intervention

Two interrelated policy trends that also reflect the need for a coherent response to complex social issues are those designed to *'build capacity'* among individuals and communities, and to pursue '*early intervention*' and '*prevention*' strategies that address the causes as well as the consequences of need. Building capacity simply means to enable individuals, families or communities to be self-reliant, and reflects a shift away from social policy that can lead to long term dependence on government. Capacity is built by transferring or developing skills, knowledge, and infrastructure and by providing resources to support these efforts. The concept is not new, and is central to the concept of community development. One of the earliest examples of this occurred during the Whitlam government period through an initiative known as the *Australian Assistance Plan.* The ' capacity building' approach underscores current family and community related policy at both the Australian and South Australian government levels, and is also evident in employment, anti-poverty, health and early childhood policy.

Policy that provides incentives for self-reliance in moving people from dependence on unemployment benefit and other income security payments is evident in the Australian Government's *'Welfare to Work'* initiative. Welfare-to-work policy is part of a broader process that is usually described as 'welfare reform'. It is driven by a perceived need to reduce dependency on income support payments by shifting those considered able, or potentially able, to work into paid employment. Welfare reform has been a particular policy goal for Australia, Canada, the USA, Great Britain and New Zealand, with the commitment to reducing 'welfare dependency' being pursued by both conservative and non- conservative governments.

In Australia, welfare-to-work policy was implemented with the 2005-2006 Budget, building on the earlier welfare reform initiative known as *Australians Working Together* – a key concept of which was that of 'mutual obligation' between government and welfare recipients. In practice, this means that income security recipients are expected to pursue pathways that lead to paid employment – for example, work experience, training or community work. Parents of children over the age of six receiving *Parenting Payment,* long term unemployed people, mature age people on *Newstart Allowance* and people receiving *Disability Support Pension* are the groups targeted by welfare-to-work policy which took effect from July 1st 2006.

A range of interventions have been identified to assist the process of transition into work – these include, increased training places, assistance with child care, information, and linkage to employment services. However, all of the interventions are focused on supply-side issues and are not matched by a focus on demand. This ignores the availability of employment opportunities, especially restricted in most disadvantaged neighbourhoods or rural areas, and ignores the availability of quality jobs that lead to improved income over a long term period. While the encouragement of self-sufficiency and participation in paid work and its associated lifestyle is a worthy goal, welfare-to-work policy implies a reliance on welfare payments results from individual deficiency rather than a failure of market forces.

The goal of increasing self-reliance is also reflected in the Australian Government's *Stronger Families and Communities Strategy*, which is the responsibility of the Department of Family and Community Services and Indigenous Affairs (FaCSIA).

Implemented in 2000, with a subsequent four year addition in 2004, this initiative is based on research evidence highlighting the importance of early intervention. Its programs include early childhood initiatives designed to develop individual skills that have a lifelong impact. Building strong individuals and families is seen as critical to creating stronger and self sufficient communities, and thereby reducing reliance on government support programs. Intervening early or preventing the development of social problems is an important feature of 'capacity building'.

The *Stronger Families and Communities Strategy* has four program elements –

1 *Communities for Children* – funding local early childhood initiatives targeting up to 45 disadvantaged communities using a community development approach through a lead non government agency.
2 *Early Childhood-Invest to Grow* – funding national early childhood programs and resources.
3 *Local Answers* – supporting a range of projects designed to help communities find their own solutions and supports initiatives in parenting and relationship skills, early childhood and family, mentoring leadership and youth development, volunteering and projects designed to strengthen the community.
4 *Choice and Flexibility in Child care* – funding in-home care and additional places for families without other formal child care options.

While there is significant synergy between the *Welfare-to-Work* and *Stronger Families and Communities* strategies, there is an absence of **linked** service provision across the sectors responsible for them. For example, the vocational education and training (VET) sector has received additional training places for people transitioning from welfare to work, but as yet there is no mechanism to ensure that those in the human services sector supporting them can communicate with VET providers to tailor a 'package' of supports for them. Many people on long term income support can be assumed to also have complex needs and VET providers cannot be expected to have the special skills needed to ensure that they can successfully participate in their programs. Therefore, the achievement of successful outcomes for those individuals will depend on the goodwill and expertise of particular service providers in both sectors and their willingness to work collaboratively.

Policy with a focus on **early intervention** has been most often associated with early childhood and family policy, health promotion and prevention of illness. However, the need for such strategies is also apparent in relation to aged care policies that acknowledge the need to prevent social isolation among older people and to provide in-home support services before need becomes complex.

The quality of the early parent-child relationship has been found to be a major predictor of long term life outcomes with the absence of stable attachment between parent and child producing negative consequences in later life. Children receiving inadequate or disruptive stimulation are more likely to develop learning, behavioural or emotional problems, and parenting is a key factor in early child development at all socio-economic levels. The most frequently occurring components of early intervention approaches in family policy have a focus on the following –

o strategies to develop effective parenting ability (training, resource provision)
o the screening of risk factors affecting the quality of parent-child interactions
o provision of home-based support (such as, home visiting programs) and

o   the linking of families to a range of support services.

The Rann government has produced new policy agendas in the areas of early childhood services and child protection, each of which are designed to involve local government. Both policy agendas emphasise more preventive, 'holistic' and 'whole of government' approaches, and community strengthening through community development programs. In its roles as a primary collector and source of community information, community catalyst and educator, and local service provider, local government is seen as having a key role to play in both policy areas.

Health promotion and prevention of illness is now central to health policy (rather than a focus only on treatment of ill health) in governments across the world. This focus was a major driver of the South Australian Government's *Generational Health Review*. This drew attention to the importance of social determinants of health, recognising the impact of the local social, physical and economic environment on individual health and well-being. Health outcomes have been strongly linked with socio-economic status, highlighting the significance of social inclusion and exclusion for health and well being.

The South Australian government's promotion of a population health focus is evident in the more recent policy and planning initiatives of the Department of Health. Among the *Generational Health Review's* recommendations are planning of health services around defined geographical populations, population based funding and service planning to facilitate equitable access to health care and local community participation in health system priority setting.

Early intervention and prevention makes sense for a variety of reasons, and among these are compelling incentives which relate to effective resource usage. In most countries, demand is rarely met by supply of human services and the price for failing to prevent or intervene at an early stage of a developing problem is understood – but not necessarily reflected in the resources allocated to such intervention.

Social capital, social inclusion and social exclusion

Since the 1990s, policies that promote 'capacity building' have made continuing reference to the concepts of ***social inclusion*** and ***social exclusion***, and these are now central to the language of social policy.

The term ***'social exclusion'*** was first used in France in the mid 1970s in reference to people who were unable to access welfare entitlements. In the 1990s, the term was being used as an analytical concept for understanding social inequality, often to denote anti-poverty strategies. The 1997 election of the UK Labour Government saw social exclusion become a central component of Blair government social policy. The Social Exclusion Unit was established within the Prime Minister's policy team in order to coordinate government policies and programs addressing poverty and social inequality. The social exclusion concept broadens the definition of poverty beyond economic deprivation to become part of a wider pattern of social disadvantage. The concept of ***'social inclusion'*** became evident in European social policy debates of the late 1980s in reference to overcoming social exclusion.

The *Social Inclusion Initiative* was established by the South Australian government in March 2002. The Initiative acknowledges that unemployment, low income, poor

educational attainment, low skill levels, inadequate housing, bad health and violence are interrelated factors that can all contribute to social exclusion. A Social Inclusion Board was established by the State Government to provide advice on the development and implementation of the initiative. The initial priorities of the Social Inclusion Board include:

o   Reducing the incidence of homelessness
o   Increasing school retention rates
o   Tackling problems related to drug use
o   Reducing self harm and suicide amongst young people in regional areas
o   Breaking the cycle of repeat offending among young people
o   Increasing Aboriginal health and wellbeing through sports, recreation and the arts
o   Increasing youth employment opportunities
o   Improving the circumstances of families with multiple, complex needs in identified geographical locations.

The approach that has been adopted to address these problems involves a number of elements which include the development of partnerships, promotion of integrated and coordinated planning and service delivery across departments, sectors and communities, and a focus on innovation.

Social policy also relies on the concept of *'social capital'* to highlight the importance of individuals, families and communities in generating productivity and quality of life. However, there is no consistent theoretical definition that identifies what social capital is, who benefits from it and how it can be measured. A reasonable degree of agreement is evident among researchers that social capital brings benefits through membership of **social networks** and related social structures. It is interesting that an economic term focused on assets has been adopted to express a social phenomenon, but perhaps this is the only language that resonates with governments who consistently place a higher priority on economic issues, relative to social issues. Emphasising the importance of people to productivity, the COAG reform agenda uses the term 'human capital' and has this as one of its three policy planks.

5   De-institutionalisation and care in the community

The concept of *'deinstitutionalisation'* aims to provide as 'normal' a life as possible for people deemed unable to live independently in the community. A key pioneer in promoting this concept was Wolf Wolfensberger whose work is now known as *'social role valorisation'* or *'SRV'*, and promotes the right to care in an environment that minimises restrictions to living as much as possible. This policy focus has been particularly apparent in the fields of aged care policy, disability policy and mental health policy.

The most evident trend in disability policy in South Australia, nationally and internationally has been towards 'deinstitutionalisation'. Analysis of aggregate data by the Australian Institute of Health and Welfare shows decreasing numbers of people living in institutions in Australia, and an accompanying increase in the number remaining in the community. Related to this trend has been the increase in the number of people living with relatives.

The South Australian *Disability Services Framework 2004-2007* identifies as a high priority the need for people living in institutional environments to be given the choice of living in community housing. It provides for an increase in the number of community accommodation places and encourages a 'variety of innovative accommodation models for community living'.

There is a high level of unmet demand for community care accommodation from people with disabilities living in the general community – that is, not within a congregate care or supported community setting. Evidence suggests that the reduction of places in institutions has not been matched by the development of appropriate services in the community, with the result that many people with a disability have unsuitable living arrangements, and their carers lack the support needed. Similar difficulties are identified with the de-institutionalisation of people receiving mental health care.

A policy issue that is growing in importance is the **ageing of people with a disability**, due to increasing longevity as a result of improved medical and other forms of care. The emphasis in both ageing and disability policy is the enabling of ***'Ageing-in-Place'*,** that is, remaining in the community with appropriate support to do so. The SA disability services sector is working closely with the aged care sector on this issue, and it is evident that a partnership between both sectors is critical.

A number of challenges are involved in the partnership approach and these arise from difficulties in identifying specific responsibility – for service provision and associated costs. It is difficult to differentiate between the amount of support that is required because of age or because of the disability involved and therefore, which sector should pay for providing that support. An emerging trend in response to this dilemma appears to be for purchase of service from providers across both sectors according to individual need and situation.

Ageing policy has travelled along different paths to reach its current direction. The history of Australian policy has been characterised by a *marginalising* of older people, ignoring their role as significant consumers (even in areas like public health where they are more likely to be described as a 'burden' or worse, 'bed blockers'). In addition, policy relevant to the majority of older people who do *not* need significant aged care support was virtually non-existent in key portfolio areas that affect the lives of people at all ages. In the mid-1980s, no doubt in the face of demographic change and increasing activism by advocates for older people, the focus shifted.

The centrepiece of the Commonwealth government's contribution to ageing policy development was the national *Aged Care Reform Strategy.* From the mid 1980s onwards (exemplified in the establishment of the Home and Community Care – HACC – Program), aged policy has increasingly moved away from a residential and towards a **community care focus.** Aged care is now conceptualised as a ***'continuum of care'*,** whereby older people can move smoothly from services that address low levels of need and simple need to services that address high levels of need and complex need. The care continuum spans community-based and residential care, to allow for changing individual need over time. This has been facilitated by the introduction of aged care 'packages', involving services tailored around the needs of individuals with the overall objective of enabling care in the home and community. Where once aged care provision involved two parallel but rigidly divided streams of residential care and community care, the implementation of Community Aged Care Packages (providing the equivalent of low level residential care) and Extended Aged Care Packages

(providing the equivalent of high level residential care) has blurred the boundaries between both.

Within the aged care field, there has been a shift in the past decade towards the promotion of independence and choice and 'healthy' ageing. Terms like 'positive ageing', 'successful ageing', 'active ageing' and 'healthy ageing' are now part of the language of ageing policy across all levels of government. There are strong linkages between ageing and health policy, with an emphasis on health promoting and prevention of illness as key features of national and state level ageing policy.

While care in the community reflects the preferences of most people (assuming they do not have illnesses that are too difficult to manage in this setting), and it is usually more cost-effective than residential care, it does rely on the availability of family and friends to be effective. Traditionally, the care-giving role has been undertaken by women but their increased participation in the paid workforce limits their ability to fulfil this role. Current employment policy which encourages even greater female involvement and prolonged engagement with the labour force by older people will further reduce the supply of carers.

6   Diversity Management and Inclusive policy

Another key driver of policy is the demand for *'inclusive'* services, that is, services which acknowledge that particular groups in the community face greater barriers than others and require specific compensatory intervention. Groups most likely to be affected are those from diverse cultural backgrounds, indigenous people and people with a disability.

Where government policy once focused on access and equity and on multiculturalism, the trend has shifted to promoting effective management of diversity, with the implication that this is as much about good business as it is about social justice. At Commonwealth government level, the key policy document is *Multicultural Australia: united in diversity – updating the 1999 New Agenda for Multicultural Australia, Strategic Directions for 2003-2006* (2003). The Strategy emphasises the principles of inclusiveness, respect for diversity and mutual civic obligations. At the SA government level, attention is drawn to the *Prosperity through People: a population policy for South Australia* statement (2004, Government of South Australia), and to the Department for Families and Communities' statement – *Strategic directions for older people from culturally and linguistically diverse backgrounds*. The latter document is based on a set of principles that promote cultural inclusivity, equity of access to information and other resources, partnerships and community capacity building.

The City of NPSP is already noted for its cultural diversity, primarily in relation to its post World War II settlement groups who were drawn from different European countries. However, this profile is changing as more international students move into the area and following SA government policy to increase the population through targeted immigration, it can be expected that a greater cultural mix will result. It will be important to ensure that this diversity is managed effectively, as part of broader community capacity building initiatives. Partnerships will play a critical role and these will include ethnic community organisations, the Migrant Resource Centre of SA and university bodies with responsibility for international students. The City of NPSP has a leadership role to play in terms of community education (particularly through creative use of community arts and events) and through community development strategies.

7   Sustainability

Finally, much government policy now emphasises *'sustainability'*, that is, the provision of services and programs that have a long term impact, and in some cases, encourage community services to be self-funding rather than government funded. In promoting community capacity building, government policy is usually encouraging the development of 'sustainable' communities.

What is a sustainable community? This is usually taken to mean those shaped by policy and planning that will meet the needs of **current and future generations** and **links social, economic and environmental issues in an integrated way**.

> *Sustainable communities are places where people want to live and work, now and in the future. They meet the diverse needs of existing and future residents, are sensitive to their environment, and contribute to a high quality of life. They are safe and inclusive, well planned, built and run, and offer equality of opportunity and good services for all.[1]*

The concept of a sustainable community resonates with the theory of community development because both involve building strength and then developing strategies based on those strengths. Both involve a blend of 'bottom up' action that is driven by communities in partnership with 'top down' resourcing, facilitation and coordination by government.

This is an extremely relevant concept for local government, in fact, in the United Kingdom, local governments are now required to develop a *Sustainable Development Framework* (www.wlga.gov.uk). The NPSP *Social Development Framework* will fulfil a similar purpose, integrating social, economic and environmental issues with an overall goal of promoting individual and community well-being. The ability of individuals and communities to achieve well-being depends on being able to access six types of resources or 'capital' -

o   Economic
o   Infrastructure (eg highways, electricity, water, telecommunications)
o   Cultural (eg shared values, heritage)
o   Human (skills, knowledge, information etc)
o   Natural (environment and natural resources)
o   Social (interpersonal supports, networks, and so on).

The Framework will acknowledge that social sustainability cannot be promoted in isolation from wider sustainability, and that a multidisciplinary approach is needed to address key social challenges. It will identify a role for the City of NPSP in making the connections between the social, economic and environmental and establishing processes and structures to implement this integration.

8   Conclusion: the evolving role of local government

The emphasis of social policy may have changed over time but the issues it addresses are timeless. Local government is one of a number of stakeholders who shape and

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[1] Dept for Communities and Local Government,
http://www.communities.gov.uk/index.asp?id=1139866

implement social policy and its role in this arena has changed, and will continue to do so. Defining that role is not a straightforward task because there are many interpretations that are applied to local government, some of them initiated by local government itself, but many are in response to the actions of other government jurisdictions and at a broader level, in response to social change.

The role of local government in relation to physical infrastructure is well understood and fundamental but its social role has expanded over time as its importance in promoting vibrant local communities and quality of life gains increasing recognition. Unlike other levels of government it has the closest connection to community and this advantage has seen a range of cultural, recreational, and human services develop under its influence. While a separation of funding and service provision roles has occurred with those other levels, local government acts as a funder, facilitator and direct provider of a range of services that are benefit to its residential and business communities.

At the same time, local government lacks the fiscal capacity of state and federal governments and without assistance cannot address the range of social, economic and environmental issues affecting its communities. It also faces significant challenges due to the ageing of physical infrastructure and the need to embrace new technologies. These restrictions act to define the limits of its role, yet it would be diminishing to allow that definition to begin from such a restricting standpoint.

In terms of promoting sustainable development, local government has a powerful role in ensuring that all policy within its purview links environmental, social and economic issues. It can also contribute to the development of a local 'knowledge economy' by attracting workers who can succeed in such an economy to be residents and business owners, and this in turn relates to the quality of life provided through natural, recreational and lifestyle amenities. Supporting leading edge businesses and industries also acts as a source of attraction. The City of NPSP is relatively advantaged from this perspective.

A sustainable community needs both 'magnets' and 'glue'[2]. 'Magnets' are those factors that attract new businesses and residents and they include healthy, well-educated workforces, a clean environment, and a vibrant social and culture environment. The 'glue' that keeps them together includes both physical and social infrastructure factors. Again, local government has a key role in providing both 'magnets' and 'glue'.

Much of the literature on community strengthening identifies the need to map and build on the assets (expertise, knowledge, social networks, natural environment, educational institutions, cultural diversity, level of volunteerism and so on) of that community. Local government is ideally placed, because of its knowledge of its community, to map those assets and to ensure that others in the community are aware of them.

This role is reinforced by local government's role in facilitating or brokering partnerships, and as a partner itself. It is very apparent that the multiple roles it can play in addressing social, economic and environmental issues and building community strength require that it works closely in a range of strategic alliances. It can, through

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[2] Torjman, S & Leviten-Reid, E (2003) The social role of local government, Caledon Institute of Social Policy, Canada

convening creative public-private and other partnerships, foster innovation and leadership around challenging community problems (for example, affordable housing).

Local government also has the role of providing information that enables its residential and business communities to access available resources and to make informed choices in the process. In a world where lifelong learning is becoming increasingly important, local government can, through partnerships with learning providers, ensure that it fosters an aware 'learning community'.

It is clear that social policy outcomes are achieved through a variety of channels, beyond those of social support systems. For example, the arts and recreation (both central roles of local government authorities) have a unique capacity to strengthen social networks and quality of life. This is of direct relevance in the management of cultural diversity and in reducing the marginalisation of disadvantaged groups in the community.

As a service provider, local government has the untapped but critical role of fostering integration – across agencies and jurisdictions. It can achieve this by playing a lead agency role or facilitating that to be adopted by other stakeholders. As an employer, it can lead by example in enabling work-life balance and family-work balance, in managing diversity effectively, and in providing ongoing training to meet the demands of a knowledge economy.

Finally, local government can be an advocate for its community, creating awareness of social issues within and beyond that community and fostering a sense of collective responsibility for well-being and quality of life.