Building a resilient and sustainable workforce for the future

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List of abbreviations

ASQ	Anglicare Southern Queensland
CPF	Centre for Policy Futures
DCSE	Discrete Choice Survey Experiment
DSW	Disability Support Worker
FGD	Focus Group Discussion
FT	Full Time
OT	Occupational Therapist
PT	Part Time
PCW	Personal Care Worker (Aged Care)
SSI	Semi-Structured Interview
SSW	Service Support Worker (Aged Care)
UQ	University of Queensland
WFH	Work From Home
WHS	Work Health and Safety
YW	Youth Worker

Executive summary

The community services sector in Australia is a critical pillar of societal well-being, encompassing a diverse range of roles from aged care and disability support to youth work and family services. This sector is a significant employer and is projected to continue expanding in Australia, particularly within the aged care sector. This trend is driven by Australia's ageing population, citizens' increased expectations of government services, and a broader transition from informal to formal care arrangements (Jobs and Skills Australia, 2025). Despite its central role in the Australian economy and society the 'care economy' is historically undervalued in Australian society. Other issues, such as marketisation and individualised funding models, have led to more transactional and insecure work arrangements, impacting the quality and continuity of care. The Royal Commission into Aged Care Quality and Safety (Royal Commission, 2020) highlighted systemic failures and underscored the urgent need for reform, including addressing workforce sustainability, improving working conditions, and professionalising the sector.

Within this wider structural and historical context, this research, commissioned by Anglicare Southern Queensland (ASQ), investigates the specific factors influencing workforce attraction and retention in aged care and youth work roles through a mixed-methods study involving focus group discussions (FGDs), semi-structured interviews (SSIs) with current and former workers in the community services sector, and a large-scale discrete choice survey experiment (DCSE). The research reveals a complex interplay of factors influencing individuals' decisions to enter and remain in front-line community services sector roles.

Research findings

A fundamental finding of the research, which reinforces previous studies, is the strong intrinsic motivation that draws people to this work. The desire to make a meaningful contribution to community well-being and supporting individuals stands out as a primary attraction factor to this form of work. Being a positive role model for young people facing a range of challenges was a particularly important attraction factor for people drawn to youth work. These altruistic and relational aspects of care work are powerful forces that align with the core mission of the community services sector, and Anglicare Southern Queensland's mission and values (Anglicare Southern Queensland, 2025).

However, these intrinsic rewards are weighed up against notable barriers that fall into two main categories: intrinsic, related to the nature of the work itself, and extrinsic, related to external conditions and structures. Intrinsic barriers include the significant emotional and mental demands of care work, leading to stress, emotional labour, and burnout. Dealing with clients' health conditions, cognitive decline, and challenging behaviours, as well as navigating difficult relationships with clients' families, were highlighted as emotionally taxing in the qualitative aspect of the study. The physical demands of the work also pose a barrier, though these vary by role. Aged care is perceived as physically demanding (e.g., lifting), while youth work carries concerns about physical safety, emotional labour and potential violence. The nature of certain tasks, such as personal hygiene and toileting in aged care, is also a notable deterrent for some potential workers.

Extrinsic barriers are consistently identified as critical challenges. Inadequate remuneration is a major issue, with the sector widely perceived as low-paid relative to the demanding nature of the job and the skills it requires. While the introduction of awards and recent pay increases have improved conditions, low pay remains a significant barrier to entry and a source of dissatisfaction for current care workers. The sector also struggles with a perception of offering limited career progression, which deters career-minded individuals. Unclear qualification requirements and a lack of awareness about entry pathways further complicate the picture for potential entrants. The lack of public recognition and the perception of the sector as struggling contribute to this negative image. Using a mixed methods approach, the research delved into how specific job attributes influence workforce attraction and retention. The findings demonstrate strong preferences for certain employment conditions, as outlined below:

Contract type and leave

The research findings show there is a clear preference for permanent full-time positions over casual and other contractual arrangements, likely driven by the need for job security and stable income in the face of cost-of-living pressures. Permanent part-time is also preferred over casual employment, especially by women and those with dependents. Importantly, offering pro-rated leave on casual contracts significantly increases their attractiveness, suggesting that incorporating benefits typically associated with permanent work can make casual roles more appealing, particularly to younger cohorts. Men showed the strongest preference for permanent full-time work in the study, aligning with traditional societal expectations.

Flexibility

The study found that there is considerable nuance in the way flexible work arrangements are perceived. Innovative "gig-style" flexibility, allowing workers significant control over their schedules, is highly valued, particularly by women. This type of flexibility, inspired by digital platforms used by independent workers, is seen as a potential avenue for attracting new workers to the sector. Flexibility is also valued as a means to balance personal caregiving responsibilities, accommodate cultural/gender-specific needs, and mitigate the emotional demands of caring roles by allowing for better work-life integration. While respondents noted the benefits of flexible work arrangements, these approaches are significantly less effective than permanent full-time work in increasing attraction to the sector. Organisations also need to consider that trying to increase attraction through flexibility might reduce gender diversity on the frontline of community services by predominantly attracting women. Finally, the community services sector faces constraints around flexibility models due to the face-to-face nature of residential and in-home care work. Worker flexibility therefore needs to be balanced with the necessity for consistency and continuity of care for clients, especially those with complex needs like dementia or disability, highlighting a critical tension that needs to be managed.

Organisational support

While essential for retention, the way organisational support is presented impacts attraction differently. Robust internal support systems, such as Employee Assistance Programs, supervision, mentorship, and debriefing, are highly valued by existing staff for managing work related stress and burnout. However, the research findings illustrate that explicitly highlighting support measures like 'buddies' or senior mentors in job advertisements can paradoxically deter potential applicants, possibly signalling that the job is inherently stressful or emotionally demanding. This effect was particularly noted among men considering aged care roles. This finding suggests a need to carefully curate the image of the sector in recruitment materials, focusing on the positive aspects, while ensuring comprehensive support is readily available when staff are hired.

Opportunities for development

The perception of limited career pathways is a barrier to attraction. For existing staff, the desire for professional development and career advancement is strong and crucial for staff retention. However, simply stating that paid training and development opportunities exist in job advertisements did not significantly increase attraction in the survey experiment. This implies that deep-seated perceptions require more than superficial messaging. Concrete investment in training, clear advancement structures that recognise experience and diverse skills (including lived experience and transferable skills from other sectors), and mentorship opportunities and succession planning are necessary. Fostering professionalisation and shared learning across the sector is also seen as important.

Qualifications and entry pathways

Formal qualification requirements represent a significant barrier to entry for many potential workers, with a substantial proportion of research participants reluctant to pursue necessary certifications, particularly if this

involves a high personal cost late in someone's career or lacks any job assurance. Strategies that could lower this barrier include combining employment with paid training or guaranteeing jobs upon completion of the qualification. Recognising lived experience and transferable skills from other sectors (e.g., education, nursing, hospitality) is vital for creating a diverse care workforce. Proactive outreach, including in educational settings, is needed to raise awareness of career opportunities in the community services sector and to connect with individuals whose values align with the sector's mission but who may have limited knowledge of how to enter the field.

Pay levels

While not the sole driver, inadequate financial compensation remains a fundamental barrier to attraction and retention in front-line community service sector roles. Higher salaries increase job attractiveness, however, the findings from the study shows that employment security (permanent contracts) is valued more highly than increased hourly wages (casual loading) by respondents, highlighting the importance of stability. Wage expectations tend to increase with age. While current sector wages (around $33-$47 per hour) can attract workers from lower-paid sectors, increasing the wage range to $47-$56 per hour was found to maximise attraction from a broader section of the workforce.

Analysis of transition probabilities suggests that workers from certain sectors are more likely to consider moving into community service roles. The top sectors identified in the survey were Agriculture, Forestry and Fishing, Accommodation and Food Services, Retail Trade, Manufacturing, and Wholesale Trade. Targeting recruitment efforts towards workers in these sectors could yield higher success rates. Workers in Mining, Public Administration, and Professional/ Scientific/ Technical Services showed lower transition probabilities. Retention is inextricably linked to attraction.

Beyond the well-being support mentioned earlier, key factors influencing staff staying in the sector include:

Supportive leadership and management

Staff highly value leaders who understand the realities of front-line work and provide adequate support, supervision, and debriefing opportunities. A lack of sector experience among some managers was seen as detrimental to staff support and development.

Organisational culture and values

Staff are more likely to stay in organisations that genuinely "live their values," demonstrate integrity, and actively defend staff, particularly against discrimination from clients or families. Given the high proportion of migrant workers, protecting staff from racism and exploitation is crucial for retention and fostering a diverse workforce.

Career progression

The perceived lack of advancement pathways is a barrier to entry, but genuine opportunities are vital for retaining existing staff. Recognising and leveraging the experience and skills of senior staff, perhaps through formal mentorship roles, can provide advancement opportunities while supporting newer workers.

Understaffing

Chronic understaffing, often linked to funding limitations, significantly impacts workloads, stress levels, burnout, and the ability to provide quality care. This directly contributes to staff leaving the sector. The sector also faces broader structural challenges that impact the workforce. These include the highly gendered nature of the workforce (with women dominating frontline roles, creating specific service delivery considerations, including client preferences based on gender), and potential tensions between the scale of large organisations and the need for connection to local communities and adaptable service delivery.

Recommendations

Based on these findings, the report outlines a number of recommendations to enhance workforce attraction and retention for Anglicare and the community services sector into the future. These recommendations have been categorised as i) systemic & sector-wide, ii) organisational systems and structures, and iii) organisational culture and relational dynamics. We recognise wider structural change will take time to achieve. As such, the recommendations are organised by timeframe: SHORT-TERM (within the next 12 months), MEDIUM-TERM (within the next 3 years) and LONG-TERM (within the next 10 years).

SYSTEMIC: SECTOR-WIDE
Focus: System-wide or government/policy-level reforms

ORGANISATIONAL STRUCTURES & SYSTEMS
Focus: Operational, HR, & management systems

ORGANISATIONAL CULTURE & RELATIONSHIPS
Focus: Internal culture, leadership, & human dynamics
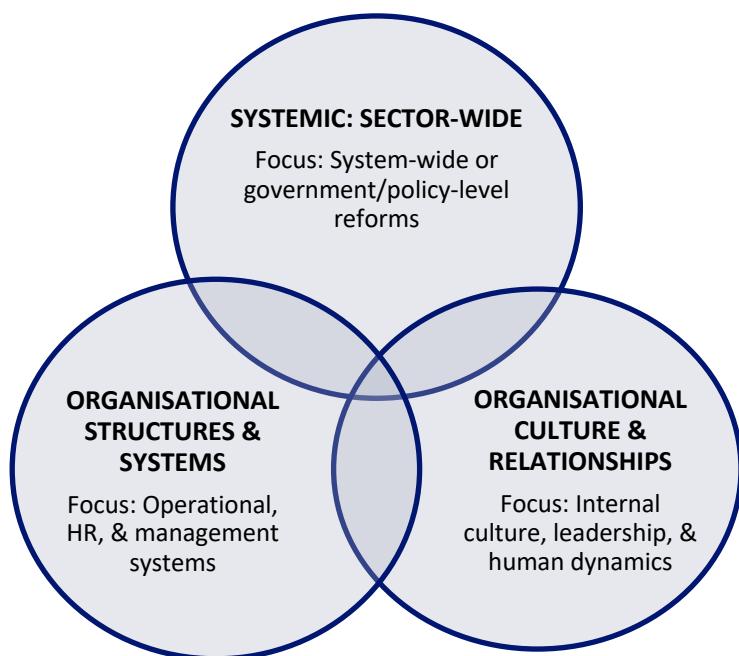
I) Systemic: Sector-wide recommendations

1. Address public perceptions and awareness	
• Create public education initiatives to value care work, highlight the diverse roles and genuine career pathways available to actively challenge the widespread perception of "dead-end" jobs.	**MEDIUM TERM**
• Implement proactive outreach programs, including in educational settings such as the VET sector, to promote the care economy as a viable and rewarding career choice, particularly for younger people and those whose values align with the mission of the sector.	**MEDIUM TERM**
2. Communication, engagement and advocacy	
• Advocate for increased financial support for the social services sector. Financial security and funding certainty are catalysts for ASQ and other providers to implement measures that will address the challenges the sector faces, including: • Minimum staffing ratios to address chronic understaffing that impacts workload and staff wellbeing, quality of care, and staff retention.	**LONG TERM**

• Full-time contracts have been identified as a core driver of attraction, however, they require more flexibility in financing models. • Improving pay and conditions for front-line care work is the precondition for addressing gender pay gaps and increasing the representation of men in the sector.	
• Promote recognition of prior learning and diverse entry pathways, which can reduce barriers for career changers.	**LONG TERM**
• Establish mechanisms for large providers to maintain strong connections with local community needs, including through community consultation processes and local staff empowerment initiatives.	**MEDIUM TERM**
• Leverage the benefits of scale by sharing resources across the organisation to improve work conditions, enable professional development and support systems.	**MEDIUM TERM**

II) Organisational: HR structures & systems recommendations

3. Recruitment approaches that leverage positive public perceptions & motivations	
• Develop targeted marketing campaigns that highlight the intrinsic rewards of front-line care work, tailoring messages that resonate with different demographic groups. Some examples, informed by the research results, include: • Emphasising that meaningful work appeals to both genders equally. However, messages about supporting vulnerable community members or making a difference primarily attract women. • Young males find building relationships with elderly people an attractive aspect of aged care roles. • Younger cohorts across both genders indicate "mentoring young people" and "being a role model" as attraction factors for youth worker roles. • Men place a higher value on being part of a growing and secure industry, especially younger men.	**SHORT TERM**
4. Contract type and leave	
• Where possible, offer permanent full-time positions to enhance job security, as this was the most preferred employment option identified through the study across both genders and in particular among males with dependents.	**MEDIUM TERM**
• Permanent full-time contracts were the most preferred option for both genders. However, women (particularly those with dependents) showed a stronger preference for permanent part-time contracts over casual positions.	**SHORT TERM**
• Improve casual employment by incorporating benefits such as pro-rated leave entitlements (Casual-Plus model), particularly appealing to the 18-25 age demographic.	**MEDIUM TERM**

5. Flexibility	

• Explore the implementation of flexible work arrangements, including innovative gig-style flexibility (like that offered by Mable and other app-based platforms). However, there is a need to prioritise offering full-time permanent positions where possible, as full-time roles are more effective in increasing attraction.
 	
• When experimenting with gig-style flexibility and similar innovative flexibility approaches, it is important to consider:
 	
   • Males are less attracted to flexible work arrangements. As such, there is a risk that this type of flexibility could potentially reinforce gender imbalances in front-line care work.
 	
   • Need to ensure robust employment protections are maintained.
 	
   • Balancing worker flexibility with consistent, high-quality client care must remain a priority.
 	
   • Recognise the unique challenges of implementing flexible work arrangements in community care settings, given the nature of front-line work and the need for continuity of care.
	MEDIUM TERM

6. Enhance opportunities for development and career progression	
• Create formal pathways for career advancement that recognise on-the-job expertise acquired by experienced staff, such as mentorship roles that leverage senior expertise to support newcomers.	**MEDIUM TERM**
• Support professional development, training, and opportunities for peer-to-peer learning and networking across the sector to foster collegiality and solidarity.	**MEDIUM TERM**
7. Targeted entry pathways and remuneration	
• Strategically target recruitment efforts towards sectors where workers have a higher propensity to transition to the community services sector (e.g., Agriculture, Forestry and Fishing, Accommodation and Food Services, Retail Trade, Manufacturing, and Wholesale Trade).	**SHORT TERM**
• While current pay rates attract workers from lower-paid sectors, aiming for a salary range of $47-$56 per hour could maximise attraction from a broader section of the workforce.	**MEDIUM TERM**

• Address qualification barriers by:
 	
   • Exploring models that combine employment with paid training or guaranteed employment upon successful training completion.
 	
   • Recognising the value of lived experience and transferable skills from other sectors.
	MEDIUM TERM

III) Organisational: Cultural & relational recommendations

8. Strengthen organisational support and culture	

• Ensure comprehensive and accessible support systems are in place for existing staff to manage the emotional and physical demands of front-line care work, including adequate supervision, mentorship, debriefing, and professional counselling. The study found that:
 	
   • 18-25, or 25-35 age groups are more aware of the emotional toll and need for support.
   • 35-50, or 50-65 age groups are aware of the emotional impact of the work, but they have better support mechanisms in place.
	SHORT TERM

• Need to adopt a cautious approach when advertising organisational support structures as a means of improving attraction, as highlighting them might inadvertently signal high job stress and deter potential applicants:
 	
   • Advertising the availability of a 'buddy' or senior mentor, for example, may negatively prime potential employees about the emotional toll and intensity of the work.
   • These organisational supports are critical to support staff, however, they could be introduced at different times in the recruitment process (e.g. in an interview or part of an induction process).
	SHORT TERM

9. Leadership based on support and integrity	
• Foster supportive leadership and ensure social service organisations demonstrate integrity by "living their values" and actively protecting their staff against discrimination or challenging client/family interactions.	**MEDIUM TERM**

Building a resilient and sustainable care workforce requires a comprehensive and multifaceted approach that leverages the intrinsic desire to perform meaningful work and addresses the significant extrinsic and structural challenges within the sector. By enhancing the sector's public image, improving employment conditions (particularly security and pay), offering workplace flexibility, investing in genuine career development, streamlining entry pathways, and tackling systemic issues like understaffing and workforce diversity, the sector can significantly improve its ability to attract and retain the skilled workers essential for meeting Australia's growing care needs. Achieving this goal requires concerted efforts from advocacy organisations, policymakers and the wider community to value and invest in the vital work of the community services sector.

1. Introduction

In Australia, the community services sector plays a vital role in providing social services such as housing support, healthcare, and social care in a variety of settings. This sector relies on a diverse workforce with various skills and backgrounds. Despite growth in the demand for community services across Australia, attracting and retaining qualified workers in the sector remains challenging due to factors such as unpredictable government funding, job insecurity, and unclear career pathways (Isherwood et al. 2018; PMC 2023). New challenges further complicate this issue. The ageing population and growing demand for formal care arrangements add further pressure on the care workforce. Other economy-wide factors, such as AI, automation and other technological advancements, have promoted greater take-up of flexible working arrangements, such as hybrid work and flexible hours, though there are also limitations with the applicability of these arrangements with frontline care work.

The Australian Government's 2023 White Paper on Jobs and Opportunities identifies five major forces that are projected to reshape Australia's economy and labour market in the coming decades:

1. Population ageing
2. Rising demand for quality care and support services
3. Expanded use of digital and advanced technologies
4. Climate change and the net-zero transformation
5. Geopolitical risk and fragmentation

The impact of AI and automation on industrial sectors also needs to be navigated by social service providers. Digital care platforms, for example, are rapidly transforming how Australians access and experience care. The proliferation of platforms raises fundamental questions about whether technology enhances or diminishes the relational dimensions that define quality care. While these platforms promise greater efficiency, accessibility, and choice, particularly crucial for Australia's ageing population and geographically dispersed communities, we lack a critical understanding of how digitally-mediated interactions reshape the trust, empathy, and continuity that form the foundation of care relationships.

In responding to this rapidly changing environment, community service organisations are assessing how current employment arrangements can be re-imagined to better suit the preferences of the workforce and the needs of clients into the future. Ensuring a positive future for workers, carers, and those cared for requires attention to policy detail and practices that shape how time spent on different activities is structured and rewarded. This means advocacy and political struggles over the availability of decent and meaningful paid work, adequate forms of state-provided income support and collective valuing of unpaid care work will need to continue.

While the community sector workforce has grown substantially in recent years, the attraction and retention of suitably skilled and qualified workers represents a key challenge for the sustainability of the sector. This challenge has historically been driven by various factors such as unpredictable government funding cycles that promote casualisation and job insecurity, a lack of understanding and/or misperceptions about working in the sector, and unclear pathways for career growth and progression. The interplay of these demand- and supply-side factors has important implications for the community sector's ability to attract new workers and retain existing ones. This complex and challenging environment underscores the need to reassess the appropriateness of traditional workforce models and recruitment strategies.

It is within this context that the research project, commissioned by Anglicare Southern Queensland (ASQ), was undertaken. ASQ provides a range of social services to Queenslanders, with a significant footprint in the aged and foster care sector, housing and homelessness, and family and domestic violence support. In addition to being a key provider of social services, ASQ is also a large employer with a workforce comprising over 3,000 employees across Southeast Queensland.

This research project builds off previous research, including the Footprints Market Research Report, commissioned by ASQ in 2023, that sought to determine what is important to potential employees when considering a new workplace. The core themes that came out of this Footprints Market report included the importance of a positive work culture (including management and co-workers) and a place where workers are respected and treated honestly and transparently, and can actively work in roles that make a difference in people's lives. Other tangible work factors included fair, appropriate pay and benefits, flexible working conditions and job security. This previous research also provided insight into how people perceive Anglicare as an employer, with approximately 50% indicating they would be more likely to choose Anglicare as an employer over other community-based service providers.

The present research project aims to shed light on the specific factors impacting workforce diversity, workforce attraction and retention in the community sector, as well as exploring potential solutions that can be implemented to ensure the long-term sustainability of the community services workforce, particularly in relation to aged care and youth work. To explore these issues, a mixed-methods study was undertaken. The first phase, which included focus group discussions (FGDs) with members of the public, provided insights into exploring attraction to the community services sector. Based on the results of the FGDs, we then developed a discrete choice survey experiment (DCSE) aimed at understanding how specific job characteristics (e.g., contract type, flexibility) might impact attraction into the sector. These two data collections were complemented by semi-structured interviews (SSIs) with current or former community services employees, undertaken to understand the factors underpinning retention. The findings from the empirical study are outlined in this report, along with a range of recommendations and strategies for ASQ and the sector more broadly. Before presenting the results of this research, it is important to briefly outline the broader context that shapes the delivery of social services and care work in Australia.

1.1   A snapshot of the community services sector in Australia

This section provides a brief background of the community services sector and its workforce, as well as a synthesis of existing peer-reviewed research and grey literature related to the attraction and retention of workers in the community sector. While the focus is on the Australian context, we also draw from international evidence, particularly from countries that have successfully implemented interventions to attract and retain workers in community services. We also present evidence from other industry sectors that share similar challenges and opportunities faced by the community services sector.

1.1.1 Characteristics of the care economy

The care economy, which includes all paid and unpaid work related to caring for others, underwrites societal well-being, and it is one of the fastest-growing parts of the wider economy (PMC 2023). In 2020, the value of unpaid care in Australia was estimated at $78 billion, with 'lost earnings' of an estimated $15 billion, or 0.8% of GDP, from carers being out of paid work when looking after family or loved ones. Despite these significant economic contributions, the sector has not traditionally been seen through an economic policy lens by the government. As such, the potential economic benefits of the sector have been historically neglected. Care and support work has traditionally been undervalued in Australia. The low social status, relatively low pay and the misrepresentation of front-line care work as unskilled contribute to the undervaluation of paid care workers. To both value care and make care valuable, we must begin with respect and recognition. Recognition is a core social need for people, and it has notable impacts in attracting and retaining a diverse care workforce. A key challenge for taking care seriously is to identify the policies and practices that support what Nancy Fraser (1997) refers to as a 'universal caregiver model', which aims to support everyone as individuals with responsibilities for social reproduction. This approach takes the rhythms of caregiving in society as standard, taking seriously people's combined responsibility for both production and reproduction.

Structural changes driven by regulatory and funding constraints have also impacted the labour market conditions of front-line care work, resulting in suboptimal outcomes in both the quality and working conditions of employees.

Marketisation and individualised funding models have enabled an environment where work arrangements can be more transactional and insecure. Third-party labour hire agencies, driven primarily by profit, may also seek to circumvent regulatory requirements placed on traditional community care operations (WACOSS 2022).

Underfunding of the sector and marketisation of social services have created several challenges for continuity and quality of care. High caseloads can mean staff have insufficient time to provide adequate support and care, compromising services and contributing to burnout and staff leaving the sector (PMC 2023). Cortis and Blaxland (2024) surveyed community care workers and found that employed staff felt additional pressure due to understaffing. Half of those surveyed also felt emotionally drained in their work, and the proportion of staff who intended to remain in their current roles fell from 71% to 62% between 2021 and 2022. In a sector where quality and consistency of care are relationship-based, the increased turnover of staff, who are time-poor and in some cases burned out, means the sector cannot deliver the kind of care the community expects and values (WACOSS 2022). This devaluation of quality care reduces the perception of the industry in society and directly challenges how new workers are attracted and how the industry retains staff in current roles.

Concerns about quality and safety, evidenced in sub-standard care identified across various aged care facilities and providers, were factors that influenced the establishment of the Royal Commission into Aged Care Quality and Safety in 2018 by the Commonwealth government (NSC 2021; PMC 2023). The Aged Care Royal Commission highlighted the fragility of the sector in the face of the COVID pandemic, bringing into focus many of the issues already present, and reinforcing how different demographics of the community, particularly older Australians, were disproportionately impacted by isolation and mental health issues (Cortis and Blaxland 2022; Royal Commission 2020). As such, the Royal Commission outlined above a series of recommendations to address the systemic failures of the sector. One focus of these recommendations was transforming the aged care system from its current structure to one that centres on the requirements of individuals receiving care. In this instance, the recommendation included introducing minimum staffing levels for aged care homes, which consisted of a minimum of 200 minutes of care per day per resident (with 40 minutes of this care provided by a registered nurse) and increasing staff numbers (NSC 2021). There was also a recognition for workforce professionalisation in the sector, to build a skilled and specialised workforce (PMC 2023). This recognised the limited career pathways available for training or progression, the need for appropriate compensation for the value of work performed by caregivers, and the need for specialised skillsets to address complex health issues within the sector. As such, the proposed reforms were designed to "*provide broad social benefits and drive economic prosperity by ensuring the sector provides high-quality care, delivered by workers with decent jobs, and by unlocking productivity growth*" (PMC 2023, p.2).

The Royal Commission has been critical in bringing aged care workforce issues into the public spotlight and outlining recommendations to address quality, safety, and workforce sustainability challenges (WACOSS 2022). The inquiry came at a time when the sector was experiencing substantial growth. Australia's population is ageing. The proportion of the population aged 85 and above is likely to rise from 1.7% in 2007 to 5%-7% by 2056, resulting in increasing demand for aged care services (Weale et al. 2017). To address this growth, government investment in care and support services across aged care, disability support, veterans' care and early childhood education and care is estimated to increase from $60 billion in 2021-22 to more than $110 billion by 2026-27 (Jobs and Skills Australia 2023). The core challenge, however, will be how the sector addresses workforce shortages, which compromises its ability to deliver high-quality services.

Workforce shortages for aged and disabled carers, nursing support and personal care workers are estimated to reach 285,000 people by 2049-50 (PMC 2024). The profile of the sector is likely to also change during this time, with in-home care likely to increase as older Australians prefer to remain in their homes as they age, also challenging the size and composition of the future workforce (Mavromaras et al. 2022; Cortis and Blaxland 2022). Other jurisdictions echo the Australian youth care sector realities, with low pay and unstable jobs being compounded by the rising demand for youth workers, which is also a core challenge in the United Kingdom (NYA 2025).

The underinvestment and undervaluation of the economic and social impacts of the care and support systems resulted in the systemic failures that sparked the national reform agenda. A robust and well-funded infrastructure surrounding care work improves national productivity and increases Australia's resilience to shocks, such as pandemics, natural disasters and economic downturns (ILO 2024). It is within this broader context that this project seeks to address the question of how ASQ, as a large non-profit provider of residential and non-residential care and services to young people and older Australians, can attract and retain a diverse workforce while maintaining high standards of care and job satisfaction. The next section profiles the wider community services workforce and the profile of the ASQ workforce.

1.1.2 Workforce demographics

The community services sector in Australia is difficult to define and quantify as it encompasses a range of different roles, qualifications, programs, and activities focused on improving the lives of individuals, families and communities across the care and welfare economies. For the purpose of this study, the community services sector includes workers in public, private and not-for-profit sectors. The community services sector also encompasses a suite of legal and institutional policies and frameworks that support the provision and receipt of community-based care in Australia (ILO 2024).

According to the Australian Institute of Health and Welfare, the community services sector employs 660,000 people, has grown by 65% since 2012, and it currently makes up 4.9% of total employment in Australia (AIHW 2023). According to the 2021 Census, of the 12 million people aged 15 years and over who were employed, around 11.5% worked in the occupation 'community and personal service worker', up from 10.8 in the 2016 Census (ABS 2022). The 2021 Census also showed that 3.0% of employed people worked as ageing and disability support workers, up from 1.2% in 2016. Roles in this sector include social workers, case managers, and support workers, professionals who assist clients with housing, mental health, substance abuse, and family support issues. As a sector, this workforce includes diverse roles such as case management, counselling and advocacy (Jobs and Skills Australia 2025). Community-based care workers, who are the focus of this study, are more inclined to focus on direct personal care and support to enhance and empower different groups in the community (aged, youth or people with disability), supporting clients in maintaining their independence and quality of life within their communities.

For this study, we focus on workers classified under the Australia and New Zealand Standard Classifications of Occupations (ANZSCO) (Queensland Treasury 2024) as personal care and support workers in the youth and aged care, in both residential and community care capacities. Women represent 70% of this workforce, reflecting the sector's highly gendered composition. Consistent with national trends in lower-paid, lower-status occupations, the community care sector has an overrepresentation of migrants and racial minorities (ILO 2024). As such, the care and support workforce is also culturally and linguistically diverse (CALD), with around 40% of workers born overseas, which has grown over the last 15 years and is higher than the national average (32%) (NSC 2021). While the average age of workers in the care and support workforce has decreased from 44 to 42 years old between 2015 and 2021, migrant workers tend to be slightly younger. Workers in this industry are also more likely to be employed on a part-time basis, with 52% of employees working less than 35 hours a week. In this regard, the National Skills Commission (NSC 2021) notes that residential care workers are more likely to be employed on a permanent part-time or casual basis than in other industries in Australia.

Anglicare Southern Queensland is one of the key community care providers in Queensland. According to the 2023/24 annual report (Anglicare Southern Queensland 2025), ASQ provided support to 49,209 clients, residents, children, young people and families. This included specifically 850 residents supported across ASQ's eight residential aged care homes and support to some 700 women and young people experiencing homelessness. The ASQ workforce consisted of 1,678 staff working in home and community services. These comprised 928 aged care employees, 418 out-of-home care employees, 270 corporate employees, 153 social and community service employees and 13 Pacific Islander workers under the Australian Government Pacific Australia Labour Mobility

(PALM) scheme. The ASQ workforce reflects broader sector trends (ILO 2024), with 81% of workers identifying as female. The average age of ASQ staff is 44 years old, and the organisation has a 2.5% representation of First Nations employees. South East Queensland is experiencing some of the highest population growth in the state (Queensland Government 2024), creating challenges around community service delivery and workforce shortages that ASQ and other local service providers will need to address.

1.2 Attraction & retention of staff in the sector: barriers and opportunities

There is a range of barriers that limit the attractiveness of the community services sector as a place to seek employment and a career. As outlined above, some of these barriers stem from the wider systemic challenges the sector faces, which include relatively low wages, casualisation of the workforce, understaffing, high workloads and subsequent staff burnout. These compound with a lack of recognition and value for care workers, and the sector more broadly. This section examines the barriers to attraction, correlating them with similar challenges in retaining existing staff. Despite these challenges, there is also a range of solutions to address these barriers gathered from the literature and real-world examples from Australia and abroad. The next section examines how research has conceptualised staff attraction and retention challenges in the community care sector, and how previous reforms have attempted to address them.

1.2.1 Public perceptions and recognition

The community services sector faces a challenge with low public recognition, impacting funding and sustainability. This lack of recognition stems from a complex interplay of factors, including a perception of the sector as struggling and difficulties in understanding its crucial role in supporting Australian society. The sector is often portrayed as unable to cope with the increasing demands placed upon it, particularly during times of economic hardship or in the face of a crisis, such as the COVID-19 pandemic. The public perception of the community care sector in Australia was impacted by the Royal Commission, which highlighted the extent of 'poor quality care and support' (PMC 2023; NSC 2021; WACOSS 2022), bringing these issues directly into the public's consciousness, with the PMC National Care and Support Economy Strategy (2023, p. 14) highlighting that the "*exposure of these failings has resulted in a strong and resounding call from the Australian public to do better*". In their review of the staff wellbeing literature, Russ et al. (2023) found that workers feel unsupported and experience increased stress when community commentary and media institutions (both local and more widely) propagate a narrative that workers are unprofessional and to blame for poor client outcomes.

There is also a lack of public awareness of the wide range of services available through the community sector, leading to a missed opportunity to access crucial support. As a consequence, the sector's valuable work is often overlooked, leading to a reliance on 'goodwill' and underpaid staff, which ultimately affects service quality and long-term sustainability of the sector. In addition, frontline caring roles are also frequently perceived as low-skilled jobs, despite the complexity and high level of interpersonal skills that are required for these roles. In this same regard, limited awareness of career pathways or opportunities that are available in the sector means attracting new staff is a challenge, reflecting the wider lack of institutional recognition for care work more widely (Cortis and Blaxland 2024). Similarly, staff working in these roles have historically been under-remunerated for the work they undertake.

The introduction of various industrial Awards over the last three decades has improved pay and conditions for these roles. However, low pay and poor employment conditions continue to be an issue raised through successive government inquiries and independent studies into the sector. The Australian Government in 2009 introduced the Secure Jobs, Better Pay reforms to the Fair Work Act, establishing a Fair Work Commission (FWC) to address gender-based undervaluation in the aged care sector and introducing a statutory equal remuneration principle to consider pay equity (PMC 2023). The part-time and casualised workforce creates roles with limited job security that are not seen as offering strong career development options. Migrants in the care workforce also face visa and residency issues that affect job security, as well as discrimination that can worsen retention problems. Overall,

under-recognition of roles, poor public perceptions, and a general lack of awareness lead to challenges in attracting and retaining staff (Cortis and Blaxland 2024).

1.2.2 Job characteristics

Work conditions and job tasks are also impacting both retention and the number of prospective employees entering the sector. There is a series of psychosocial risks associated with care work, which include exposure to traumatic situations, harassment, violence, and burnout. The high physical and emotional demands of care work, especially for personal carer workers, put a high level of strain on staff (ILO 2024; Edvardsson et al. 2009; Eley et al. 2007; Rathert et al. 2015). Insufficient staffing levels and inadequate support for workers' mental health and well-being exacerbate these retention issues, as was evident during the COVID-19 pandemic, when services were severely under-resourced (ILO 2024). The COVID-19 pandemic also highlighted the importance of community care workers' safety, where health and safety measures, like PPE and minimising staff's exposure to psychosocial hazards, were highlighted. Safety also includes the physicality of some community care work, which can impact the physical health and well-being of care workers. The risks that arise from working in these roles can consequently have a strong influence on whether individuals seek to commence or continue working within the sector (Weale et al. 2017).

Retention challenges are also compounded by regulatory barriers, including complex compliance requirements for receipt of government funding and contracts (e.g., NDIS, aged care standards). Furthermore, administrative burdens reduce time for direct care work, resulting in mounting pressure on staff. In some cases, there can be a lack of adequate, appropriate or regular supervision and managerial support (Cortis and Blaxland 2024). There can also be wider organisational culture issues. Some studies, for example, have highlighted instances of racism, bullying, sexual and emotional harassment (Cortis and Blaxland 2024), which can in turn influence the high turnover of staff (PMC 2023).

The lack of professional development opportunities and avenues for career progression also contributes to the perception of these as 'dead-end' jobs. This makes the work generally less attractive for prospective workers, unable to compete with opportunities provided in other sectors (Cortis and Blaxland 2022). The poor completion rate of community sector courses in VET also indicates a disconnect between training and actual working roles, given the limited interest students have in committing after better understanding what the roles entail (WACOSS 2022). Concerning retention of current staff, it has been highlighted that care roles lack 'transition points,' or moments in one's career where career advancement is available (VCOSS 2018).

These attraction and retention barriers in the sector subsequently also increase the costs associated with staff turnover (Weale et al. 2017), impacting the businesses' operational sustainability (ILO 2024). As such, high staff turnover then impacts the delivery of services, such as longer waiting times for clients and unmet health and care needs. Ensuring the community care sector can continue to support the most vulnerable while providing fair employment conditions requires a better understanding of effective solutions. Research suggests that flexible work arrangements might help address the sector's low attraction and high turnover rates (Werbel and DeMarie 2005; King et al. 2013; Weale et al. 2017). Increasing public awareness, improving pay, work conditions, organisational structures, and cultures are also important measures. The complex barriers discussed in this section require a multifaceted response. This project aims to better understand the optimal combination of strategies and solutions that can ensure a diverse and sustainable community sector workforce. The next section discusses some of the strategies that have been identified through previous research.

1.2.3 Strategies for improving attraction and retention

Globally and in Australia, a series of approaches have been identified that address the barriers presented above. Some of these are sector-wide strategies aimed at improving public perception and structural issues within organisations. Increased competition for funding and the marketised environment of the sector are also creating a competitive landscape where organisations are seeking ways to create competitive advantage through innovations

that support productivity, employee satisfaction and quality of care (PMC 2023). Improving attraction and retention in the sector has also led to more employee-focused approaches, such as workplace flexibility and work-life balance policies and greater autonomy for workers. Poor public perception can be improved through media, awareness campaigns and accessible information about services and expectations. These strategies work towards addressing misconceptions while also improving the visibility of the sector (NSC 2021). Advocacy efforts across the sector on working conditions, job security, government funding, and the important role the sector plays can also go towards addressing these public perceptions (Cortis and Blaxland 2023; VCOSS 2018; WACOSS 2022).

Providing clearer career pathways, greater opportunities for training and development, in addition to improved wages, more funding certainty, and consistency in the amount of working hours, are all known to improve retention and attraction (Cortis and Blaxland 2023; PMC 2023; VCOSS 2018). In 2023, in response to the Aged Care Royal Commission, minimum staffing levels in residential aged care were also introduced to improve the quality of care. In addition, a series of sector-wide pay raises were recommended by the Fair Work Commission, with different increases ranging from 15 to 28.5% delivered to various workers. These policy and regulatory changes are examples of government-led approaches that provide structural benefits to the sector and address some of the public perceptions that undermine attraction and retention.

The Aged Care Royal Commission also promoted the 'professionalisation' of the workforce as a way to address current challenges (PMC 2023). Strategies to support this professionalisation include investment in training and professional development (NSC 2021) and enhancing job security and career pathways. Recognition of prior learning and experience, or inclusion of work placements within community care organisations, also increases opportunities for attraction and entry for new staff into the sector (Isherwood et al. 2018).

Beyond professionalisation, the cultural and interpersonal dimensions of the work environment also play key roles. A supportive organisational culture values the needs and preferences of its employees. Employee-focused employment seeks to provide greater flexibility in when and how many hours employees work, which can be tailored around employee needs (Nous Group 2021; Weale et al. 2017; Carer-Inclusive Workplace Initiative 2024). Flexibility in this context is a multidimensional concept (Spreitzer et al. 2017). Employment flexibility enables organisations to be more agile in labour markets through diverse employment models such as non-standard employment arrangements, agency arrangements, and co-employment structures (Cappelli and Keller 2013). In these arrangements, individuals have more autonomy to negotiate hours. However, when flexibility is driven by an employer (not employees' needs), it is likely to create a less secure, more challenging environment for the worker.

Agencies or co-employment have surfaced more recently, including gig economy-style approaches to employment. These forms of employment leverage platform-based models (like Mable). Online delivery platforms can be a way for companies to circumvent government regulations, requirements and costs that are associated with traditional employment models (WACOSS 2022). There is also an acknowledgement that these third-party, gig-style labour hire agencies disproportionately benefit and further entrench the marketisation of the sector. Critics note that there is potential for exploitation of an already insecure workforce to the detriment of the not-for-profit community care providers. On the upside, these gig-style employment models can provide experience and skills development for employees seeking to move into more stable or traditional employment (Mas and Pallais 2020). In terms of flexibility, the work modality itself includes dimensions associated with the scheduling of work and where work is undertaken. Temporal flexibility in this instance includes individuals having the ability to influence start and finish times. Time off in Lieu (TOIL) where additional hours can be 'banked' to take off later (Carer-Inclusive Workplace Initiative 2024), compressed work weeks with the same amount of work in less days (UNECE 2022) and flexibility round shift choosing, swapping and shifting (Weale et al. 2017) are all examples of flexibility that cater to individual needs. The spatial dimension of work flexibility includes being able to work remotely or in a hybrid form away from the primary place of employment. In the community services sector, this might include moving between community care facilities or into people's homes to provide services or even having the choice to work between different clients or part of an organisation or facility (Anttila et al. 2015).

Overall, flexibility in these instances is widely recognised as a way to increase the efficiency, competitiveness and innovation of organisations. Flexibility could address staff shortages by engaging groups who otherwise couldn't join the workforce: carers, single parents, older Australians, young people, and migrants. This approach aims to help employees achieve a better work–life balance. These flexible models can provide a positive outcome for both individuals and organisations, allowing more streamlined allocation of the organisational and individual resources to address needs while also providing residents with more targeted, individualised care (Weale et al. 2017). This said, depending on how these employment contracts are deployed, there are also risks associated with these flexible work models, such as entrenching the gender division of labour through work-from-home arrangements and creating work intensification and longer work hours as the boundaries between private spaces and paid work become blurred (Wratny and Ludera-Ruszel 2020).

The applicability of these various strategies for improving attraction and retention for specific organisational settings requires testing and refinement. Further research is also needed to understand how individual workers weigh up and rank various strategies. Furthermore, understanding the preferences of different worker demographics is essential for developing targeted strategies. In close partnership with ASQ, our research team examined these aspects through a mixed-methods study. Section 2 outlines the conceptual framework and methodology adopted.

2. Study design: Conceptual framework & research methods

2.1 Conceptual framework

This section will present the conceptual framework and guiding questions of the project before outlining the different qualitative and quantitative methods that have been used to achieve the project objectives. This project has been designed to consider the challenges and opportunities the community services sector workforce faces in terms of attraction and retention.

AWARENESS
- What do people know about the community sector?
- Are they aware of opportunities to work in the sector?

PERCEPTION
- How do people perceive the community sector?
- What are people's impressions of working in the sector?

ALIGNMENT
- What do people look for when they apply for a job?
- How do people's goals and preferences align with employment opportunities in the sector?

SATISFACTION
- What factors contribute to high levels of job satisfaction?
- How can jobs in the community sector be designed to retain workers and maximize their well-being?

Figure 1: Conceptual framework

As detailed above in Figure 1, the decision-making process around attraction and retention can be divided into four key stages, namely: (1) Awareness, (2) Perception, (3) Alignment, and (4) Satisfaction. *Awareness* refers to people's knowledge or familiarity with the community sector, including opportunities for employment within the sector. In this case, this asks questions about 'what do people know about the community services sector,' or how aware they are of opportunities to work in the sector. *Perception* relates to their preconceived notions of working in the community sector, enquiring as to how people perceive the sector and their impressions of working in the sector. *Alignment* pertains to whether their personal goals and work preferences align with the types of opportunities available in the sector. Questions driving this component seek to understand what people look for when applying for a job, and how their own goals and personal preferences align with employment opportunities in the sector. Finally, *Satisfaction* refers to the happiness and well-being of people who are currently employed in the sector. This dimension considers the factors that contribute to high levels of job satisfaction, and how community sector jobs can be designed to retain workers and maximise their well-being.

The conceptual approach to promoting worker well-being to improve retention is aligned with the multifaceted approach identified by Russ et al. (2023), which includes:

- Providing specific strategies to support workers where individual factors impact their well-being in the work context. This includes ensuring staff have access to training on risks and individual response strategies.
- Building supportive teams with the capacity and agency backing necessary to contribute to the well-being of peers.
- Ensuring quality supervision is available and that supervisors are trained and supported in their role and ability to support their staff.

- Examining and addressing organisational factors to build a supportive workplace culture. This includes ensuring the climate is conducive to reflective and learning cultures and mindful of behaviours and practices that recognise the pressures on staff and prioritise their wellbeing.
- Looking at how organisations can work collaboratively with others in the sector to address systemic factors that negatively influence organisational culture and climate, and/or directly influence the pressures and experiences of staff.
- Looking for evidence-based strategies that support workers to achieve positive client outcomes, with benefits not only for the clients but also the potential to enhance worker satisfaction.

This multifaceted approach to attraction, retention and worker wellbeing guided the research team in exploring workforce attraction and retention in the community sector.

2.2 Research methods

To address the questions outlined in the conceptual framework, a mixed-methods approach to the research was used. The first phase, which covered qualitative methods of Focus Group Discussion with members of the public, provided insights into their awareness and perceptions of the community care sector. To support this, semi-structured interviews with current or former community sector employees were conducted, allowing us to compare some of the perceptions with actual employment realities. Both of these qualitative methods were then fed into the development of the Discrete Choice Survey Experiment, the quantitative aspect of the project that sought to more comprehensively explore the alignment and satisfaction questions outlined in the above conceptual framework.

The CPF team actively engaged ASQ throughout the entire process to ensure the successful execution of these methods. In January 2025, eight ASQ managers and front-line staff participated in a co-design workshop with the CPF team to align the quantitative component with the organisation's HR framework and employment realities. Additionally, we incorporated feedback from ASQ gathered through an internal workshop in July 2025. This comprehensive engagement helped us validate our research findings, ensuring they remain feasible, tangible, and actionable.
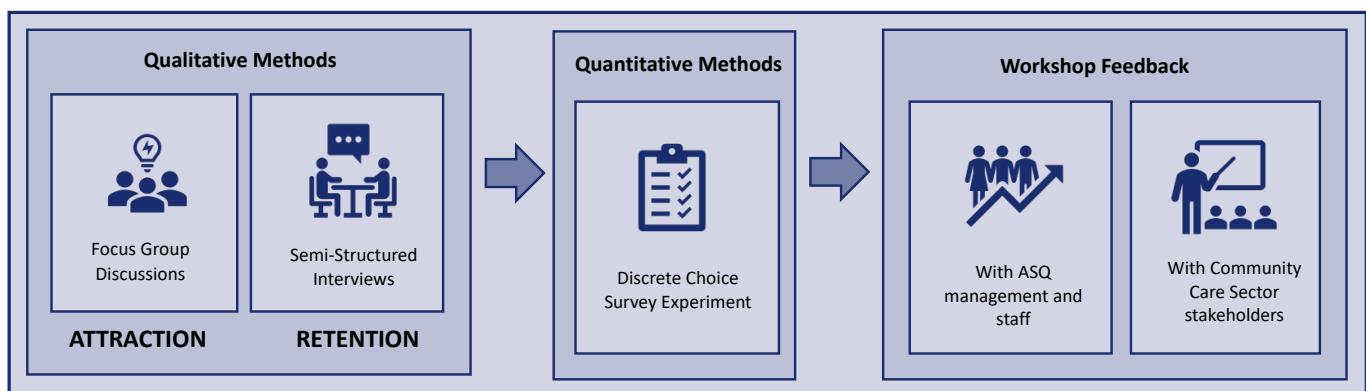
Figure 2: Project phases

2.2.1 Focus group discussions

Focus group discussions (FGD) are a qualitative research method that brings groups of individuals together (from similar or diverse backgrounds, demographics, genders, etc.) to gain insight into a specific topic. FGDs are not intended to reach a consensus on a specific topic but to provide a range of perspectives on the topic. Typically, between 5-10 people are facilitated by a moderator who provides questions and topics to the group and probes where required to gather more depth or breadth of insights (Hennink 2013).

Females				Males			
n. 29				n. 31			
48%				52%			
18 - 25	25 - 35	35 - 50	50 - 65	18 - 25	25 - 35	35 - 50	50 - 65
n. 9	n. 9	n. 9	n. 2	n. 11	n. 4	n. 4	n. 12
15%	15%	15%	3%	18%	7%	7%	20%

Figure 3: Focus Group Discussion Participant Demographics

Focus group discussions (FGDs) were selected as a method of data collection for this project to gather public insights into the community care sector in Australia. These insights were then developed into specific hypotheses that were tested in the Discrete Choice Survey Experiment (DSCE). Overall, 10 FDGs were undertaken with members of the public, with a focus on those who have never worked in the community sector. The table below illustrates the spread across ages, genders and demographics of the participants who were engaged in FGDs. Of these, 7 FGDs were held online, with three being held face-to-face. These FGDs also allowed us to target specific groups of interest for ASQ to better understand their perceptions about the community care sector (question guides from FGDs can be found in Annex 1). As such, young people (18-25) account for 33% of the respondents, and older males (from 50-65) were also targeted in a focus group with a South East Queensland-based men's shed.

2.2.2 Semi-structured interviews

Semi-structured interviews (SSI) are a flexible research method that combines a standardised interview structure with the freedom of an unstructured interview, allowing for space to explore complex social issues (Sarantakos 2012). For this part of the project, 10 interviews were undertaken with current or former community care professionals. These individuals are seen as experts in their field and not just sources of data. While the interviews followed a general framework of questions, the conversational approach between interviewer and interviewee provided an open and flexible approach to data collection across a wide range of topics.

Employed in the sector:
Aged care (n. 5),
Youth work (n. 5)

Gender distribution:
60% female,
40% male

Age distribution:
18-25 (30%), 25-35 (20%),
35- 50 (30%), 50-65 (20%)
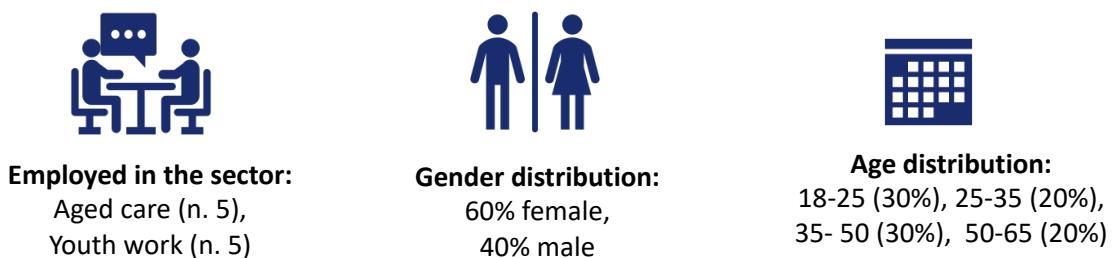
Figure 4: Semi-structured interview participant demographics

For this project, the community care workers included 5 people from the aged care sector (personal care workers and a service support worker) and from the youth workspace (front-line youth workers in addition to a youth disability care worker). Interviews were all undertaken online, audio recorded, and text transcripts from the interviews were coded after the interviews to identify trends and themes. These were then cross-referenced with the FGDs and Discrete Choice Survey Experiment data. An example interview question guide utilised for these SSIs can be found in Annex 2.

2.2.3 Discrete choice survey experiment

Building on the findings of the FGDs and interviews, we designed and rolled out a discrete choice survey experiment in early 2025. This method has been widely applied in academic and policy research (WHO 2010; Ronda et al. 2021) to study what attracts and retains workers across various sectors. Unlike traditional survey

methods, discrete choice survey experiments estimate the hypothetical impact of unimplemented workforce employment policies and capture trade-offs between job attributes. They are particularly valuable in identifying 'optimal' employment packages to attract staff. In this report, we adopt this method to answer the following research questions:

- Which **attributes are most likely to attract people** to jobs in the community sector?
- Which ones matter more for **underrepresented groups** (e.g., men)?
- What is the **equivalent salary increase or monetary value** associated with specific types of flexibility or incentives?
- **Workers from which sectors** are more likely to transition to community sector jobs?

The discrete choice survey experiment was administered by an external survey firm that was tasked with recruiting online a representative sample of the Australian population aged 18-70 through a quota sampling method. In total, 2,902 people responded to the survey, with a median time of completion of 18 minutes. The distribution of the sample by gender, age, and geographic location is available in Figure A1 in Annex 3.

The survey was divided into four main sections. The first section collected demographic information and screened out ineligible participants (e.g., those below 18 or above 70, not living in Australia). In the second section, respondents participated in the discrete choice survey experiment task, where they were asked to assess and choose between a series of hypothetical jobs in aged care and youth work. Each respondent was given 12 job pairs, 6 for a job as a Youth Worker and 6 for a job as a Personal Aged Care Assistant. Before each set of 6 job pairs, respondents were given a description of the tasks involved in the job[1]. Respondents had to choose which job pair they preferred and if they would choose it over their current situation.

As shown in the example in Figure 5, each job pair included six job attributes, namely (1) Contract and work hours, (2) Leave arrangements, (3) Flexible time, (4) Organisational support, (5) Salary, and (6) Career development. These job attributes were selected based on the findings from the FGDs, SSI's data, and the co-design workshop with ASQ. Each job attribute was randomised to display different 'levels'. Therefore, the content of the job pairs was different for all 12 job pairs presented to each respondent. For example, for the attribute "Contract and work hours", respondents could be assigned to see for each job either "Casual", "Permanent part-time", or "Permanent full-time". Table A1 in Annex 3 provides the full table with all the possible levels that each respondent could be assigned to for each job attribute, respectively for Youth Worker and Personal Aged Care Assistant jobs.

In the third section of the survey, respondents who either have a job or have worked in the past were asked about their current or most recent job. This served as a basis to establish the status quo and provide context for their choices. Information from this part was incorporated in section 4, *Attracting workers to the community sector from other industries*. Finally, in the fourth section of the survey, respondents were asked general questions about their level of education, willingness to undertake a qualification in the community sector space, personal and family situation (e.g., presence of working partner and dependants), and information on perceived attractors and barriers to jobs in aged care and youth work. Together with the data from the FGDs and SSIs, the information from the DCSE has formed the foundation for the report findings and future directions outlined in detail below.

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[1] Task descriptions for the Personal Aged Care Worker and Youth Worker roles can be found in Annex 3, Figures A2 and A3 respectively.

Below you will be asked **to choose between 6 pairs of jobs** as a **personal aged care worker**.

This position gives you a chance to **build relationships with our elders and make a difference in their lives with your daily work**. It typically involves **supporting the elderly client living in a residential setting** with:

- Social and recreational activities
- Assistance with conducting activities of daily life (e.g., walking, eating, dressing/undressing, personal hygiene)
- Emotional, social and spiritual support

Please reply assuming that the jobs indicated are all **within reach from where you live**, that there are **no barriers in terms of the qualifications required** for this job, that **any arrangements mentioned are realistic** and that **there are no other arrangements besides those explicitly specified**.

Attributes	Job Post 1	Job Post 2
Contract and work hours	Casual (~50% of full-time, hours not guaranteed)	Permanent full-time
Leave Arrangements	Accumulate paid leave as in permanent jobs, but pro-rated by hours worked	5 weeks of paid annual leave
Flexible time arrangements	You can choose when you start and finish shifts within our daily hours of operation	You can choose to work from 3 hours to a full week, we will work around your weekly schedule. Move hours across weeks for the same total pay or earn less for fewer hours worked.
Organisational Support	Employee Assistance Program: Get free confidential counselling sessions to support you and your family manage personal and work-related stress.	You can share the care of your clients with a 'work-buddy' and support each other with tasks and work-related stress.
Salary	$46 per hour, estimated at ~$45,000 a year (~50% of full-time, hours not guaranteed) + 11.5% superannuation	$40 per hour, equivalent to $80,000 a year (full-time salary) + 11.5% superannuation

Q.1	Which of these two jobs do you prefer?	Q.2	Would you accept the job selected above over your current situation (e.g. current job, unemployment or inactivity)?
	❑ Job 1 ❑ Job 2		❑ Yes ❑ No

Figure 5: Example of job pairs in the discrete choice survey experiment

2.3 Process findings

This research design provided us with three different data sources, covering both qualitative and quantitative data across both retention and attraction dimensions of the community sector workforce. Based on this dataset, we present the research findings in Sections 3, 4 and 5. **Section 3** highlights the public perception of the community sector and unpacks how job attributes (i.e., contract type and leave, dimensions of flexibility, organisational support, career development, remuneration) and qualifications support or hinder the attraction of new staff to the sector. **Section 4** complements Section 3 by providing insights into the attraction of talent from other industries. Finally, **Section 5** focuses on the retention of staff in the sector and on broader organisation and sectoral considerations, while **Section 6** concludes.

RESEARCH SUB-THEMES	Focus Group Discussion* (ATTRACTION)	Semi-Structured Interview** (RETENTION)	Discrete Choice Survey Experiment* (ATTRACTION)
Broad perceptions of the sector	☑		
How to improve perception	☑	☑	
Required skills	☑		☑
Appealing dimensions to work in the sector	☑	☑	☑
Barriers to working in the sector (intrinsic)	☑	☑	☑
Barriers to working in the sector (extrinsic)	☑	☑	☑
Qualifications	☑	☑	☑
Position description	☑		
Workforce demographics	☑	☑	☑
Contractual type	☑	☑	☑
Leave arrangements (flexibility)	☑	☑	☑
Flexibility (time-based)	☑	☑	☑
Location-based flexibility	☑	☑	
Flexibility in work tasks and with whom	☑	☑	
Organisational support	☑	☑	☑
Salary/pay	☑	☑	☑
Career pathways	☑	☑	
Opportunities for development	☑	☑	☑
Structural issues with the sector		☑	

Figure 6: Data sources

Notes: * FGD and DCSE participants do no work in the sector: these are all 'perceived' realities of this space

** All SSI participants actively work or worked in youth work or aged care. Their insights are based on personal experience.

3. Perception of the sector and preferences for job attributes

The data provides a range of insights into the attraction and retention of people in the community care workforce. The first section below highlights the broad public perceptions of the community services sector, before looking more specifically at the different job attributes of these roles. These attributes unpack how contract type and leave, dimensions of flexibility, organisational support, career development, qualifications and remuneration in the sector support the attraction of new staff to the sector. These findings and data support the recommendations outlined in Section 7 of this report. While the main focus of these findings is on attraction, the role of retention of staff in the sector is also highlighted, in addition to broader organisation and sectoral considerations.

3.1 Understanding perceptions of the community services sector

This section outlines the current community sector landscape from the public's perspective, highlighting how people perceive the sector, what attracts them to it, and the barriers they see in entering this workforce. While this data specifically examines youth work and aged care perceptions and roles, how these are interpreted can offer insights that can be applied more broadly across the community care sector. The data suggest, for instance, that aged care work is perceived as care-oriented, focusing on providing end-of-life support, comfort, dignity, and companionship. In contrast, youth work was seen as

> *I think something that you get in the youth sector that you may not get elsewhere is just that sense of a lot of hope and possibility and energy… working with folks who might be, you know, a few decades older and have those life experiences that have kind of worn them down a bit... It's just the energy and the opportunities and resilience of young people.*
>
> FGD: Youth Worker, 35-50F

supporting young people at the beginning of their lives. Youth workers provide a longer-term impact on someone's life, as young people face new challenges in transitioning to adulthood. Contrasting the youth and aged sectors, young people highlighted the challenges of establishing rapport with older individuals requiring care and support. Inversely, some older (male) participants noted they would find it difficult to connect with young people. Aged care was seen as more physically demanding (lifting, moving), while youth work was seen as potentially more dangerous, with females voicing concerns for their physical safety in the FGDs. This overview of the qualitative data suggests that people have a general understanding of different dimensions of the community services sector, recognising the diversity of roles and activities that exist across different types of services and clients. The following two sections provide further insights into what attracts and deters people from working in this sector.

3.1.1 What attracts people to the community sector

The desire to make a meaningful impact, to make a difference in someone's life, and the opportunity to build relationships within a community were highlighted as dimensions that attract individuals to jobs in the community services sector. Furthermore, these public perceptions (from FGDs and DCSE data) closely reflected the motivations of staff currently working in the sector (from the SSI data).

Meaningful impact and making a difference

In the DSCE, we asked respondents to indicate up to three factors that attract them to Personal Aged Care and Youth Worker roles. Altruistic dimensions are seen as drawcards for people to explore community sector employment. '*Making a difference in someone's life'* was the strongest factor that might attract people to the community sector in the survey (Figure 7), followed closely by '*Doing work that is meaningful'*. When we analyse this data by gender and age (Figure A4 and A6 in Annex 3), women are more likely than men to identify '*Providing support to those that are vulnerable within our community*' and '*Making a difference in someone's life*' as attractive

Figure 7: Factors attracting to personal aged care (left) and youth worker (right) positions (N=2,902)

features of both jobs. However, '*Doing work that is meaningful*' appears equally appealing to both men and women (except for males aged 18-24), representing a more gender-neutral motivator.

When we turn to the qualitative data, FGD participants emphasised altruism and contributing to society as attractive aspects of care work. This was particularly pronounced for youth work, where participants noted the potential for long-term impact, for instance: "*with young people, you can make a big difference that lasts them the whole life*" (FGD: Physiotherapist, 25-35M). For youth work, being a role model was highlighted consistently across the FGDs, particularly among male participants. Current staff in the community services sector also consistently shared this motivation for what attracts them to the work they do. A disability support worker explained their motivation: "*It feels quite rewarding to know that they felt cared for and that people actually cared and that they mattered*" (SSI: DSW, 25-35F). Another personal care worker emphasised the satisfaction from small acts of kindness: "*they're very appreciative of the smallest little thing that you do for them, that keeps me going*" (SSI: PCW, 25-35F).

Relationships and community building

Being able to form relationships, at a personal level, or wider community building, and supporting others, all emerged as other significant themes across the data. Being able to build relationships with the elderly was selected as a factor of attraction in aged care roles by about 30% of respondents. For youth worker roles, mentoring young people was instead selected by 39% of respondents. When we explore how these findings vary by gender and age, we find that almost 40% of males aged 18-24 rated '*Building relationships with elderly people*' as an attractive characteristic of aged care jobs (Figure A4, Annex 3). Moreover, younger cohorts of respondents are more likely to select '*Mentoring young people*' and '*Being a role model*' as factors attracting them to youth worker roles (Figure A7, Annex 3). In particular, about 45% of youth aged 18-24 selected '*Being a role model*' as a factor attracting them to youth worker roles.

The qualitative findings further revealed the importance of relationships with clients. For one aged care worker, relationship-building was core to her job satisfaction, stating, *"I never take my breaks and go and sit in the staff room... I choose different residents, and I go there in their rooms and talk with them. So that is my, I will say, golden time"* (SSI: PCW, 25-35F). Relationships also extended beyond clients to colleagues and the wider community. In the survey

> *I would personally find a lot of like, worth and meaning in terms of a career, supporting those who are unable to support themselves... I think that would make me want to enjoy and want to go to work and contribute*
>
> FGD participant: Student, 18-25M

data, *'Providing support to those that are vulnerable in the community'* was cited as an attractive factor for aged care and youth worker roles by 34.9% and 23.4% of respondents, respectively. A youth worker described how relationships with young people contribute to long-term community building (SSI: YW, 50-65M), stating "*I'm in contact with young people that I worked with 30 years ago... we were building community, and they're now part of that community"*.

Work conditions and practical considerations

In addition to the intrinsic dimension of the work, extrinsic dimensions were also attractive characteristics for prospective employees. '*Flexibility of work hours'* (aged care: 35.3%, youth work: 23.8%) and '*Being part of a growing and secure industry*' (aged care: 16.1%, youth work: 12.2%) ranked similarly for both roles. When we break down the survey data by gender and age, we find that '*Being part of a growing and secure industry*' is more important for males for both roles, in particular from younger cohorts (Figures A5 and A8, Annex 3). '*It is a job that provides good pay'* is instead more important for younger cohorts, across both roles and genders. Finally, respondents aged 55-70 are most likely to select '*Nothing attracts me to this job*' compared to younger cohorts for both roles, reflecting their progressive disengagement from the labour market as they approach retirement age.

These findings demonstrate that attraction to community sector employment stems primarily from the desire to make meaningful differences in others' lives and build impact from an organisational perspective. Education or advocacy campaigns can leverage these attractive dimensions to both improve perceptions of the sector and illustrate how they can support individual and community benefits. Authentic stories demonstrating tangible differences workers make in clients' lives, the long-term outcomes in youth work, rewarding daily interactions in aged care, and the relationship-building aspects of community work are all positive messages that can support new entrants into this workforce.

3.1.2 What barriers deter people from joining the community sector

In contrast to what attracted people, our mixed-methods study also identified several barriers that discourage people from entering aged care and youth work. These barriers fall into two categories: intrinsic (related to the work itself) and extrinsic (related to external conditions and structures). The FGDs and DCSE revealed perceived barriers to entering the sector, which the SSIs confirmed through accounts from current aged and youth care workers. At the same time, it is worth noting that of the 2902 survey respondents, a significant minority did not identify any barriers that prevented them from doing these jobs (aged care: 17.3% and youth work: 21.2%, Figure 8).
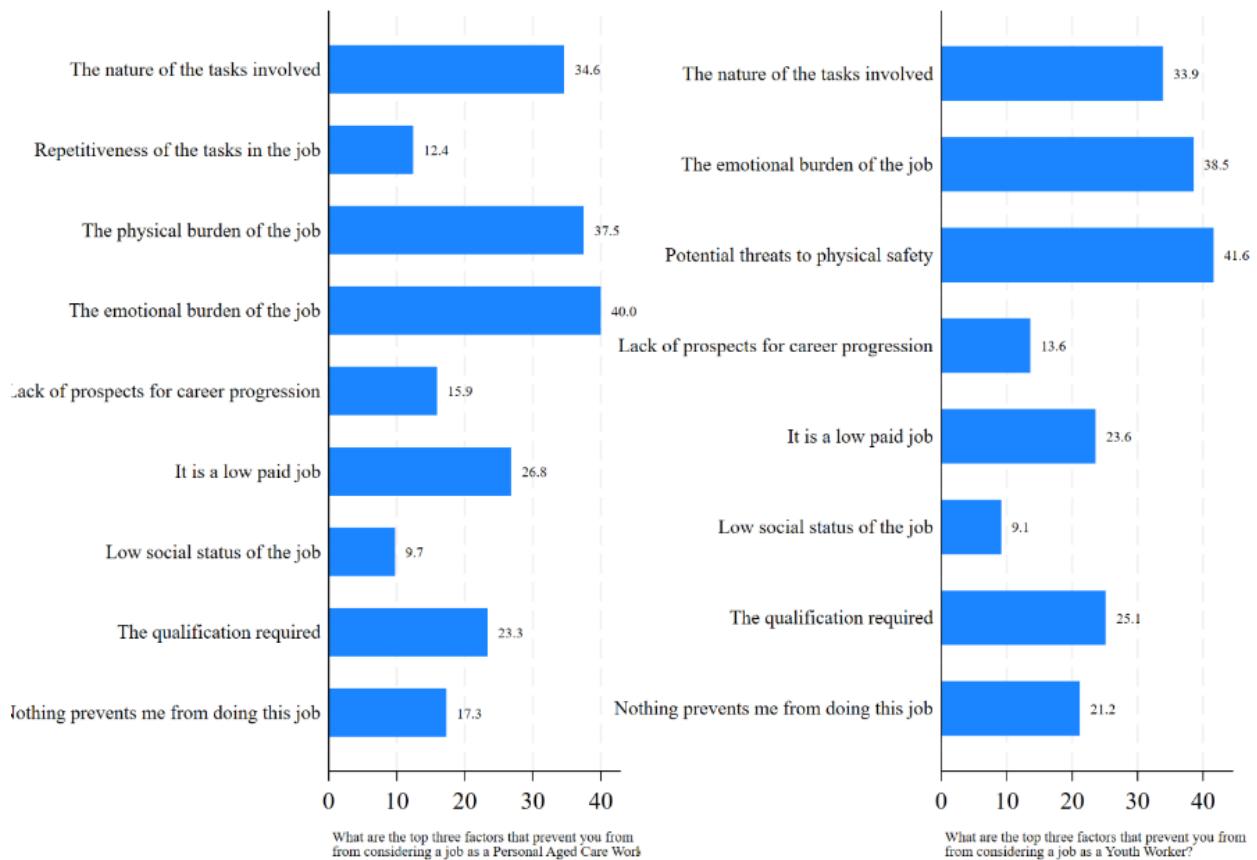
Figure 8: Barriers to personal aged care (left) and youth worker (right) positions (N=2,902)

Intrinsic Barriers

Emotional and mental demands

The significant emotional burden associated with care work was consistently identified across the survey. '*The emotional burden of the job*' was one of the highest deterrents for aged care (40.0%), and for youth work roles (38.5%) (Figure 8). The qualitative data reinforce the survey findings. Participants described the work as mentally and emotionally demanding, with high levels of emotional labour and stress. These factors contribute to burnout and affect both recruitment and retention of staff. While building relationships with older adults

> *There's the emotional part, you are doing a job that is not just labour-intensive in terms of using hoists and helping with toileting and physical mobility things. But also, you're there as the emotional support person for people, in whatever situation they might be in.*
>
> FGD: Office worker, 35-50F

attracts people to aged care, the emotional intensity of these relationships can also be challenging. As noted by an FGD participant, "*the hardest thing is like you're going to turn up one day and a certain patient just won't be there anymore because they're at the end of their life. So I think it'd be mentally quite challenging"* (FGD: Physiotherapist, 25-35M*). This same sentiment was expressed by people already working in the sector: "some people get lucky and they might just pass away because of old age. But not everybody gets so lucky: sometimes they get dementia or you have a stroke, or you have these health conditions, and then you all of a sudden lose your independence, and I guess it's hard just watching other people struggle"* (SSI: PCW, 25-35F). The FGDs revealed another emotional

challenge: managing difficult interactions with family members who often have high expectations and sometimes treat care workers poorly.

Physical demands and safety concerns

Some barriers are associated with the physical nature of care work, and also the safety of staff, when the mental health of patients is considered. These manifested in different ways across different community sector roles. As such, '*The physical burden of the job*' is a major deterrent for people to enter aged care (37.5%). This was considered a common challenge also among FGDs participants, who highlighted long hours, and physically demanding and repetitive work contributing to this issue. Overall, the physical dimensions of the work were more frequently mentioned by women in FGDs and reinforced in SSIs. A personal care worker (SSI: PCW, 25-35F) noted *"There's definitely a physical aspect as well. It gets very exhausting when you're transferring, say, one of my clients was like 110 kilos. So, trying to physically transfer them, even though you have supports, like with the hoist and stuff, it's still a very physical job"*.

> *I think we're quite underpaid for what we do. Because it's not just, we're looking after your grandma, and we're just hanging out and playing bingo. We are getting hit, we're getting sworn out, we're getting spat on, we're getting bitten, like all of that…we have to clean up poo, and we have to shower [elderly], we're doing the dirty jobs. So, I think a lot of people actually, when they realize, oh, 'that's actually involved in the job,' and then they look at the pay, and they're like, oh, no, I'm not doing that.*
>
> PCW25-35f (SSI)

'*Potential threats to physical safety*' ranked highest as a barrier to entering youth worker roles, selected by 41.6% of respondents. This was reinforced in FGDs, where again female respondents highlighted the physical threat of violence and not feeling safe with young people with mental health or behavioural issues. Youth workers interviewed, both male and female, highlighted the potentially dangerous situations they had been in due to drug and alcohol, or mental health issues with young people, where they were required to defuse situations that could become physically violent towards themselves or their property.

The threat of violence was not perceived solely in the youth space. Across SSIs, a service support worker in aged care spoke of verbal aggression she had experienced from patients. Furthermore, a disability support worker spoke of physical violence and being hit by patients, amongst others. These were associated with broader mental health issues, as highlighted by a personal care worker: *"you're trying to help them, of course, and just do what's best for them, but they're so confused. So they, like, can get quite aggressive, so it's very hard to deal with that side of things as well"* (SSI: PCW, 25-35F). As will be detailed below, some of these challenges in the workplace were exacerbated by limited staff numbers, resulting in staff being stretched and the quality of care being reduced.

Nature of tasks

'*The nature of the tasks involved*' was a common deterrent to working in both roles (aged care: 34.6%, youth work: 33.9%). This was consistently referenced in FGDs, with personal hygiene, toileting, and bathing in aged care all seen as deterrents to working in this space, with some participants openly stating they would never do this sort of work.

Extrinsic barriers

Inadequate compensation

Low pay emerged as a significant barrier across all data sources. In the survey data, '*It is a low-paid job*' was a substantial deterrent to both roles (aged care: 26.8%, youth work: 23.6%, Figure 8), with similar sentiments shared across FGDs and SSIs. Some FGDs participants stated that no amount of salary could convince them to undertake

these roles, given the nature of the tasks involved, with particular reference to personal hygiene tasks in aged care. This also comes down to a lack of understanding about what community sector work entails, or the emotional and physical burden that employees in this sector face. Research participants in the FGDs also highlighted how the pay does not match the challenging nature of the work. An office worker noted the work *"does demand a lot and then you need to go through a lot of scrutiny, and certification and all of that... the pay is not, I guess I can say it's not just about enough to cover for the type of workload that is expected of staff in there"* (FGD: Office Worker, 25-35F), creating additional barriers to entry.

Wider systemic issues around perceptions, politicisation and privatisation of the sector also played into this low-pay discourse. A youth worker compared sector wages unfavourably to government positions: *"the lack of pay, right, compared to equivalent positions in the govey [government] community sector... government pay kept getting increments and we didn't"* (SSI: YW, 50-65M*). In SSIs, the underfunding of the sector was associated with the lack of adequate pay, which also feeds into wider issues of understaffing, further exacerbating many of the intrinsic barriers identified above.

Social status and image of the sector

In the survey data, the *'Low social status of the job'* (Figure 8) was not a primary deterrent to entering either aged care or youth worker roles, suggesting that other aspects might be more salient for respondents. Yet, the wider social status of roles and perception of the sector were referenced regularly in FGDs. Participants noted the negative image of the sector in the media, referencing the Aged Care Royal Commission and political discourses on youth and crime as influencing their likelihood to explore roles in these spaces. One participant observed: *"so there's a lot of negative press, as well as all these other interconnected factors like ageism, as well as people who work in the sector may be perceived from kind of low status groups"* (FGD: Student, 25-35F). Male FGDs participants particularly noted the sector's female-dominated workforce, while both genders observed a high proportion of migrant workers. As such, this reinforced the assumption that these were low-paid, low-skilled, and dead-end jobs, which reduced overall interest in working in this space.

Entry requirements and limited career progression

FGDs identified limited career advancement as a significant barrier, with participants describing these as *'dead-end jobs'*. However, survey data showed less concern about career progression compared to other factors, which might be more salient deterrents to these roles. Only 15.9% and 13.6% of respondents indicated *'Lack of prospects for career progression'* among the top three barriers to aged care and youth work roles, respectively.

3.1.3 Evidence of gendered differences in job preferences

When asked what they were looking for in a job, men and women exhibited different job preferences. As shown in Figure 9, both men and women value good pay and jobs that prioritise flexibility. '*A job that offers security*' ranks in 4th and 6th place for men and women, respectively. Finally, compared to men, women prioritise jobs that are not stressful. While this exercise provides a general picture of how job preferences vary across genders, it is not informative of how men and women trade different job attributes when they apply for jobs. This will be elaborated in more detail in section 3.2, which explores specific attributes of community sector roles.
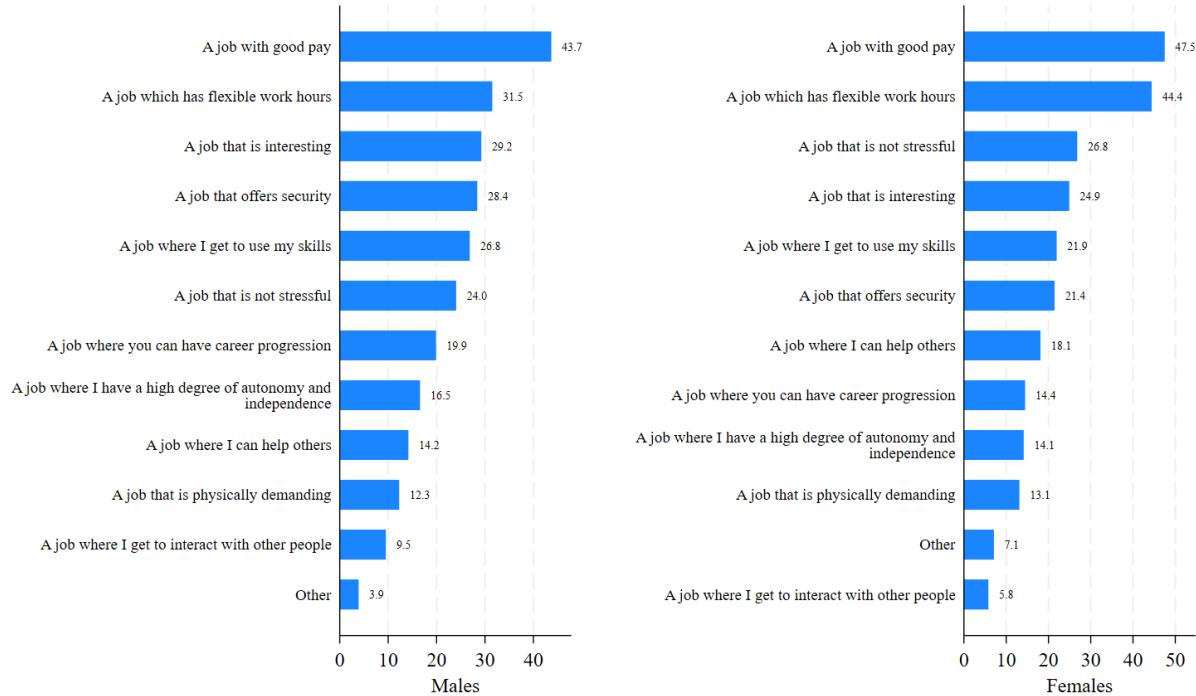
Figure 9: What are you looking for in a job? (responses by gender). Respondents could select up to three choices. N males=1,420. N females=1,475

3.2 Results across different job attributes

The previous section provided an overview of research participants' core perceptions of the community sector, highlighting the complex interplay of intrinsic and extrinsic factors that influence attraction to and deterrence from community sector employment. While meaningful impact, relationship-building, and community connection strongly attract potential workers, significant barriers exist, including emotional burden, physical demands, safety concerns, inadequate compensation, and perceived low social status. As outlined, there are also gendered differences in job preferences, with women prioritising flexibility and lower stress, while men value security. The disconnect between the sector's meaningful work and its structural challenges highlights the need for targeted strategies to address perception issues and improve workplace conditions. With this foundation, this section looks at preferences for attributes of community sector roles (e.g., contract type and leave arrangements, flexibility, organisational support), at how potential workers trade and narrate these attributes, and whether they attract different demographics.

3.2.1 Contract type and leave arrangements

This section covers how contract type (casual, permanent part-time (PT), permanent full-time (FT)) and leave (no leave versus pro-rated leave for casuals, standard versus additional leave for PT and FT) impact attraction and retention in the sector. Overall, very similar trends emerge across the aged care and youth work roles, suggesting that these results might be similar across other community sector roles as well. The following sections demonstrate the crucial role of contract type and leave arrangements for workforce attraction and highlight differences in preferences across demographics.

Preference for full-time positions

The results of the DCSE point to a strong preference for permanent full-time positions (Figure 10). Jobs offering a permanent full-time position were about 20 percentage points more likely to be chosen by respondents compared to jobs offering standard casual arrangements. This was true for both jobs in aged care and youth work. Permanent part-time work was also preferred to casual arrangements, but increased the probability of choosing a job by only 3 to 5 percentage points.
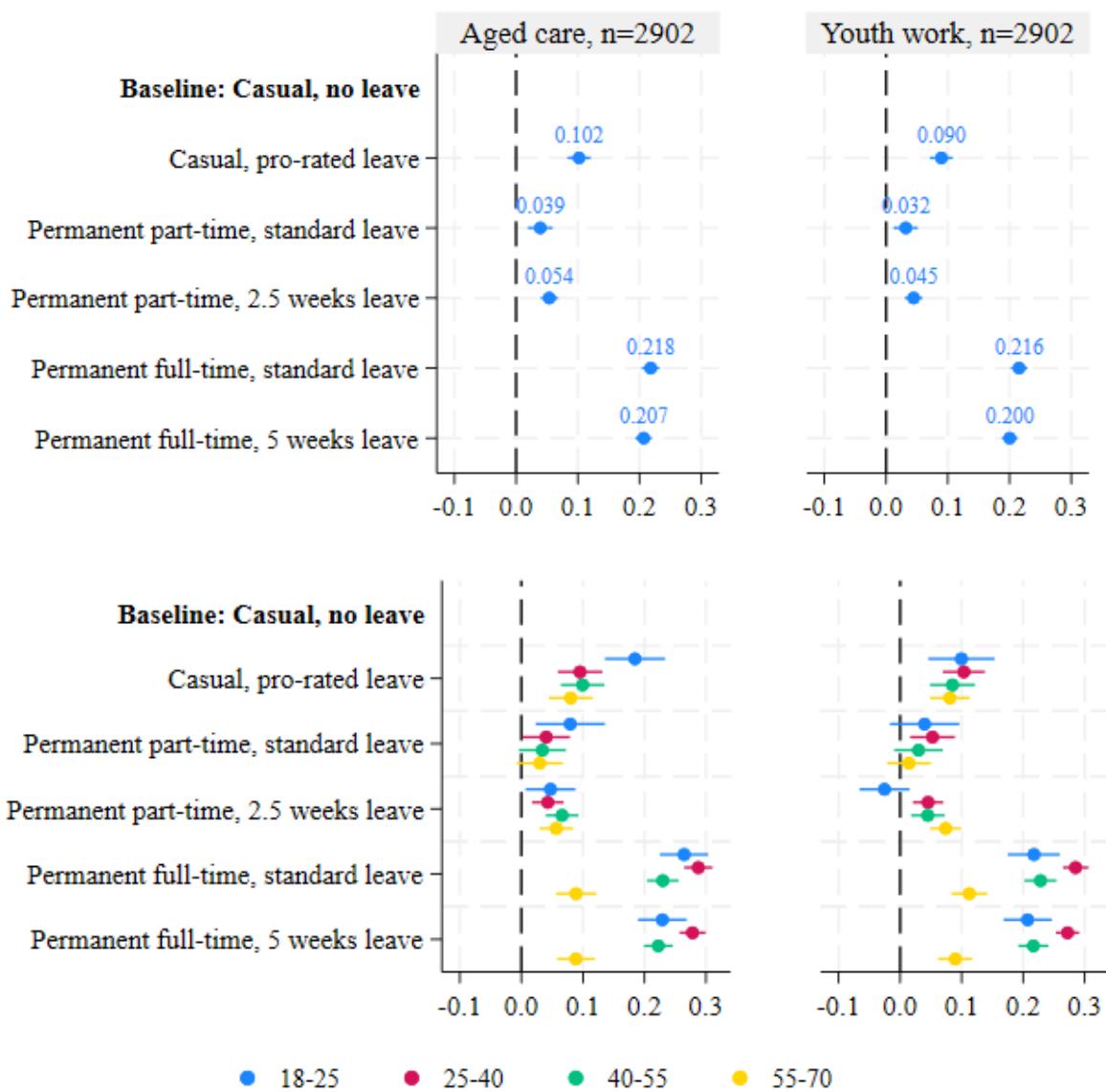
Figure 10: Effect of contract and leave arrangements on the probability of choosing a job profile over another, on total sample (above panel) and by age (below panel).

Interestingly, offering either standard or longer leave arrangements for permanent jobs did not shift preferences for jobs significantly. On the other hand, offering pro-rated leave on casual contracts increased the probability of choosing a job by about 9 to 10 percentage points. This finding suggests that the attractiveness of standard casual arrangements can be greatly increased by allowing prospective employees to accumulate leave.

We also examined whether preferences for contractual and leave arrangements vary across different age groups. Respondents aged 25-40 had the strongest preference for permanent full-time contracts. This is consistent with most people in this age group having completed their studies, and potentially seeking to save for a home or other life costs. Young people aged 18-25 were also about 20 percentage points more likely to prefer permanent full-time work to standard casual work, challenging assumptions that young people seek increased flexibility that is offered by this latter contractual arrangement.

We also found that casual arrangements coupled with pro-rated leave were most attractive for young people aged 18-25 for aged care roles. Finally, while offering a permanent full-time contract increased the probability of choosing a job by around 20-30 percentage points across younger demographics, this effect was only around 10 percentage points for respondents aged 55-70. This is consistent with individuals in this age group nearing the end of their careers and being less interested in permanent full-time work.

Casual work and leave at the intersection with work flexibility

The evidence from the DCSE points to the standing of full-time permanent employment, compared to part-time casual arrangements and other contractual forms. As detailed in section 4, this can also be linked to the fact that more than half the respondents either currently work or worked with a permanent full-time contract in their last job, which represents the norm. Moreover, cost-of-living pressures and the fact that most respondents are at an age where they are focused on building savings may contribute to this. This clashes with the reality of the community sector, where casual contracts are common.

The semi-structured interviews with people who currently work in the sector reveal a more nuanced view that highlights how community sector workers frame casualisation as a potentially positive aspect of the job. This was particularly evident among respondents working in aged care roles, who preferred casual work due to the higher pay and flexibility it offers. An aged care worker, for instance, notes, *"I'm a casual, it's better money because it's casual. We don't get sick leave or anything like that. But, yeah, I prefer it because I'm basically working full time"* (PCW25-35f). In this case, the interviewee had the opportunity to work casual full-time hours, an option that was not available in the hypothetical jobs proposed in our DCSE, where casual work was only half a week part-time, in line with what is common for ASQ employees.

The flexibility dimensions that part-time and casual work provide also support individuals' needs. An older youth worker with physical mobility issues notes *"I think flexibility is good. I mean, for the last 17 years, I've only worked on a casual basis, at part-time because I've been on the disability pension. I always had flexibility, because my bosses knew of my back injury. If I have a week off, I don't gotta get a doctor's certificate"* (SSI: YW, 50-65M). This points to the potential benefits of these arrangements for employees facing health challenges that prevent them from working a standard permanent full-time schedule.

Leave is also seen as a way to address workforce challenges: in addition to contract type to support flexibility, it was noted that leave is also a way to address the emotional and burnout barriers detailed above. As an interview participant put it: *"taking a holiday that was one of the driving factors for me going away, was that I was very burnt out and mentally drained... So yeah, obviously taking breaks when I can, but most of the time that doesn't happen"* (SSI: DSW, 25-35F).

Special leave arrangements also raised some red flags in FGDs and SSIs. For some FGDs participants, unlimited leave (where one can take unpaid leave for as long as desired) was seen as a 'red flag,' as it's too difficult to implement. Equally, one SSW in aged care noted, *"when other people like go to vacation or something, then it's*

worse for everyone else, cause we need to do double shifts, because they don't have other casuals who can fill in. So you feel pressure from everyone not to take leave" (SSIs: SSW, 25-35F). This indicates that additional leave can only be implemented after resolving staff shortages.

Gender differences in contract and leave preferences

Preferences for different contractual and leave arrangements can vary by gender, given the persistence of social norms that place the burden of caregiving mostly on women and that of making ends meet on men. This can become even sharper depending on whether people have dependents. We investigated this aspect further by replicating the analysis from the upper panel of Figure 10 separately for males and females. We also accounted for whether they have dependents, resulting in four subgroups analysed.

While both men and women tend to prefer permanent full-time jobs over other contractual arrangements, we also observe a sharp gendered dynamic. Men with dependents stand out as being the ones with the strongest preference for permanent full-time work. This contractual arrangement increases the probability of choosing a job by about 30 percentage points for this group, compared to standard casual work. This pattern is consistent with prevalent societal expectations for men to be the primary breadwinners, exhibiting a preference for contractual arrangements that guarantee pay and hours worked.
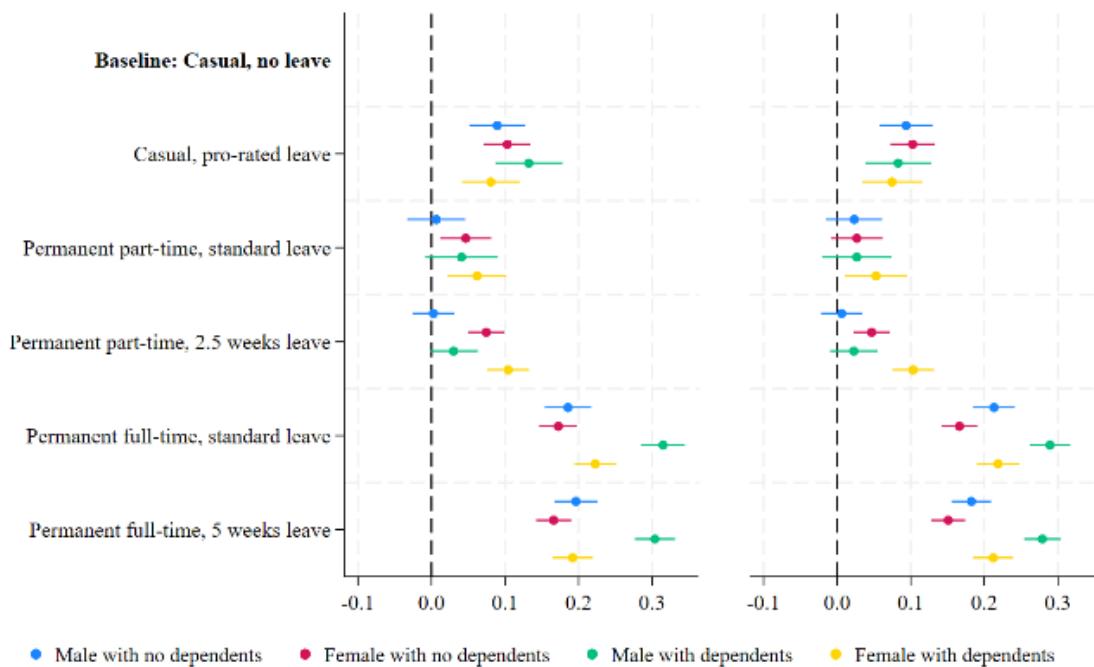
Figure 11: Effect of contract and leave arrangements on the probability of choosing a job profile over another, by gender and presence of dependents.

At the same time, women are more likely than men to prefer permanent part-time contracts, especially if they offer 2.5 weeks of leave. This is more so for women with dependents, for whom this contractual arrangement increases the probability of applying for a job by about 10 percentage points, compared to a standard casual contract. When it comes to casual contracts with pro-rated leave, we find a rather homogenous positive effect on the probability of choosing a job across genders. This latter finding highlights that offering the option of accumulating leave, alongside casual contracts, attracts both men and women.

Overall, while permanent full-time arrangements are more likely to attract men with dependents, permanent part-time arrangements tend to attract more women with dependents. This reveals that the choice of contract types and

leave arrangements offered can influence the gender composition of a potential pool of applicants. In particular, if there is an intention to increase the attractiveness of the sector for men, our findings indicate that this would entail offering more permanent full-time positions.

3.2.2 Reimagining flexibility: balancing diversity, well-being and high-quality care

This section explores three key themes around flexibility. First, organisational approaches highlight how different models and management strategies can support flexible work. Second, worker-centred flexibility focuses on tailoring arrangements to individual needs across life stages. Third, care quality-focused flexibility examines how flexibility affects both staff well-being and the quality of care. Drawing on both the qualitative and quantitative data, we show how different sources complement each other to provide a more holistic view. Focus groups and interviews reveal how the public and community sector workers view workplace flexibility, while the discrete choice survey experiment captures preferences for jobs with varying levels of flexibility, including gig-work style flexibility.

Organisational approaches to flexibility

The analysis of the qualitative and quantitative data suggests that the way flexibility is designed and implemented depends on broader organisational policies and infrastructure. Beyond individual organisations, the landscape of community care is also shifting, with gig-style 'disruptors' offering alternative operational models that support flexibility.

From standard work hours to gig work models and platform work

In the interviews with community sector workers, Mable and other gig-work style apps were perceived as a way to provide voice and agency in how flexibility is implemented. These platform employment models were seen as providing workers with more choice and a valuable alternative to simply receiving variable schedules determined by the organisation. One interview participant notes that Mable *"just sort of simplifies being an independent... you do get more flexibility and freedom on who you want to work with, and then also you can get paid a bit more than what we were at the company"* (SSI: DSW, 25-35F). In focus groups and interviews, the use of digital innovations, online platforms, scheduling tools, and artificial intelligence was seen as a way to accommodate different flexibility requirements for both staff and clients. Gig-style work (e.g., Mable) was also noted as a way for individuals to take more ownership of the work they were doing. As illustrated by a personal care worker: "*I got a little bit bored, but I also got way too attached to the residents. I'm a very emotional girl, so it was very hard for me to look after the people... watching them really decline and then eventually passing away. It was taking a toll on me*" (SSI: PCW, 25-35F).

This said, there is also existing research that suggests, in both NDIS and aged care roles, that 'gig' style employment undermines minimum employment conditions, employee benefits and results in inferior WHS protections (Australia Institute 2023; Khan 2024). Our qualitative evidence points to workers resorting to gig-style platforms in part as a response to the lack of flexibility in larger organisations. This poses a question about what would happen if large traditional community service providers adopted employment models that mirror gig-work style arrangements. In the DCSE, we answered this question by including among the possible flexibility arrangements the following: "*you can choose to work from 3 hours to a full week, we will work around your weekly schedule. Move hours across weeks for the same total pay, or earn less for fewer hours worked*". This represents a form of flexibility that closely mirrors the one provided by gig-work arrangements, as it gives employees complete control over their schedule. At the same time, it can be adapted to various contract types, which could be implemented by larger organisations. We tested the relevance of this form of flexibility compared to (1) no flexibility, (2) flexibility to adjust work start and finish time, and (3) flexibility to work the assigned weekly hours in fewer, longer days (compressed work week). While the first represents the baseline, the other options represent flexibility arrangements that are already available in some organisations.

Figure 12 shows that across the full sample of respondents, gig-style flexibility appears to matter most, increasing the probability of choosing a job by about 5 percentage points compared to no flexibility. This is true for both jobs in aged care and youth work. Flexible start and finish times also increase the probability of choosing a job, although only by about 2 percentage points, compared to no flexibility. On the other hand, the compressed work week does not seem to attract much interest from respondents. While these findings appear consistent across age groups[2], notable differences emerge by gender. Males, on average, are not significantly attracted to any of the flexible work arrangements presented, and those with dependents are slightly discouraged by options such as flexible start and finish times. In contrast, females show a general preference for all forms of flexibility, with a particularly strong preference for gig-style work arrangements. These findings indicate that while innovative flexibility arrangements can enhance job attraction, they may also reinforce the feminisation of the workforce in the sector.
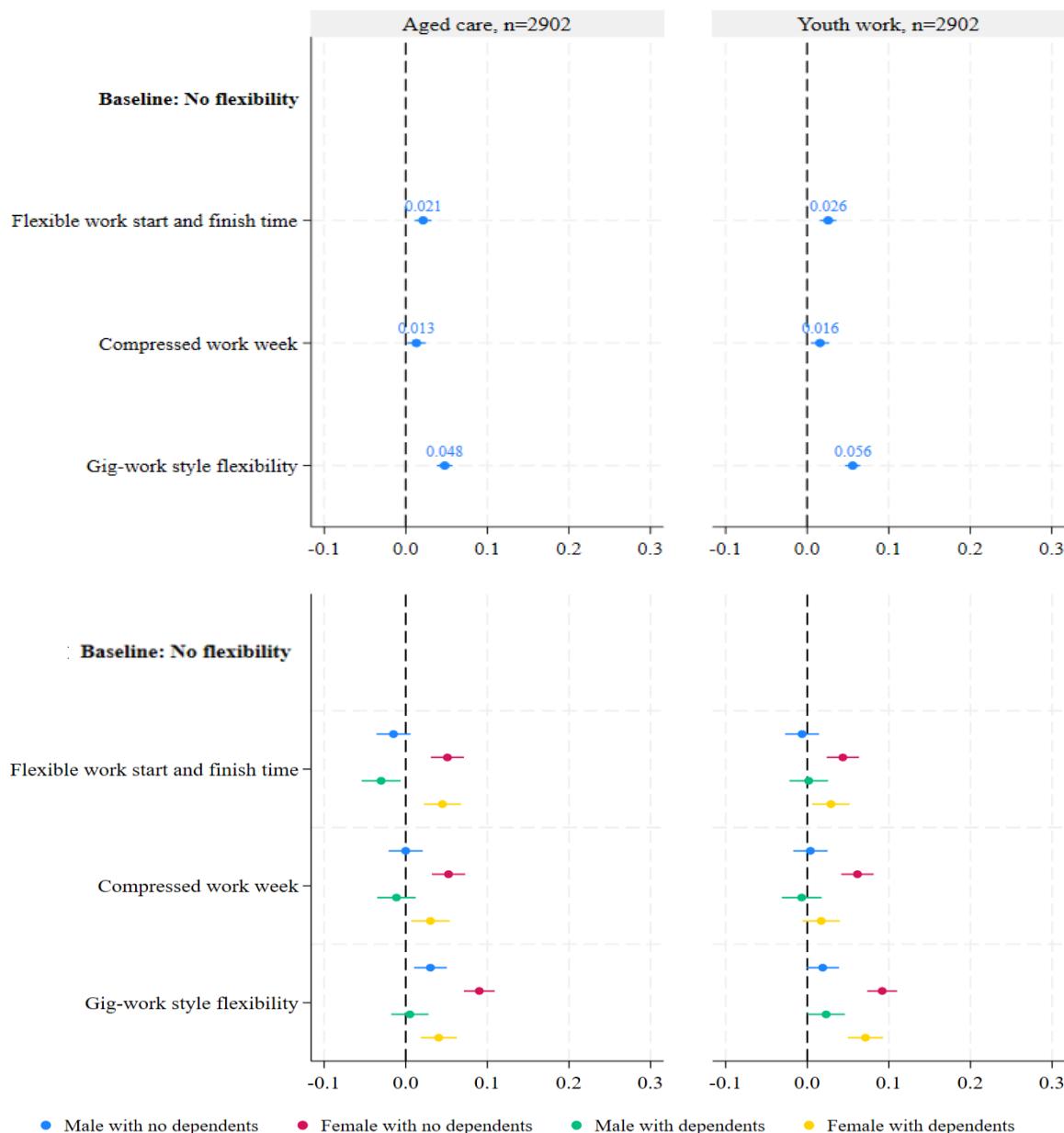

Figure 12: Effect of flexibility arrangements on the probability of choosing a job profile over another on the total sample (upper panel) and by gender and the presence of dependents (lower panel).

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[2] The figure for this finding is not displayed due to space considerations.

Structural flexibility

The care sector requires flexibility in practices due to the vast diversity of individuals it serves, each with unique needs, backgrounds, and circumstances. Organisations with rigid operational structures are required to adapt approaches for different ages, abilities, cultural backgrounds, and medical conditions. One participant in the qualitative part of the research noted that in aged care, organisational routines often don't match resident preferences. An occupational therapist in aged care notes "*after 7:30 pm everyone should be in a bed, sleeping in pyjamas and everything... I know most of the residents are still awake*"(SSI: OT, 25-35M). This was further articulated when voicing frustration at not being able to work later: "*I love to work during the night... {but} after dinner, at like five o'clock, after at like six o'clock, that's it, done!*" (SSI: OT, 25-35M). In recognising the inherent diversity in patient care and needs, there is scope to accommodate both staff and residents for collective positive outcomes.

This diversity extends to various care settings and professional roles, necessitating adaptable systems that can respond effectively to each person's specific requirements. Unlike facility-based care in controlled environments, roles like home visits and youth outreach require greater workplace flexibility. Particularly during crises, it was noted that the best youth workers are those embedded in the community, those who are able to react to ad-hoc, spontaneous situations that arise, with this often occurring outside of standard business operating hours.

> *Flexibility for some organisations, [they] think crisis only happened Monday, Friday, nine to five. It's just not the case…youth services need to be able to be more flexible, to respond to the needs, and to react to crisis as they occur, not the next day when, you know, police might drop a kid off at a youth shelter or something like that.*
>
> SSI: Youth Worker, 50-65M

Worker-centred flexibility

This section focuses on the importance of meeting individual staff needs, in terms of balancing informal and formal care, accommodating cultural and gender specific needs and adopting a holistic and systemic view of wellbeing.

Balancing family caregiving responsibilities

Flexibility stands out in the qualitative data as important for workers managing multiple caregiving roles. The FGDs data highlight the need for flexibility around drop-off time to balance family responsibilities. A participant referred to work design and WFH as a way to address these needs: "*flexible working arrangements, if you want to do something with the kids or in the morning, and then you can work afternoon from home, writing reports or whatever it is you're doing*" (FGD: Administration, 35-50F). This demonstrates the role of flexibility in providing options for parents who are managing competing needs. This is reinforced in the SSIs data, with older male youth workers emphasising that "*flexibility for females with children is another important factor… You need the ability to be able to take time off when your kids are sick, whatever you know*" (SSI: YW, 50-65M).

Rethinking rigid scheduling could reduce the barrier to workforce participation in care sectors. Another youth worker noted the flexibility in their workplace, where "*if folks need to sort of finish work early for childcare responsibilities or other things, then they can. I guess it's just recognising that people kind of bring, bring their whole selves to work, I guess*" (SSI: YW, 35-50F), resulting in better team dynamics and employee satisfaction. Beyond flexible work arrangements, interviewees emphasised that workplaces must recognise employees as whole people with outside responsibilities who choose care work because of their empathy and compassion. This sentiment was expressed clearly when discussing the treatment of staff, with one personal care worker stating "*I feel like we are machines, and they [patients] are also the machines*"(SSI: PCW, 25-35F)*,* reinforcing the disconnect with the human-centred nature of the work.

Accommodating cultural and gender-specific needs

Consideration for culturally-specific and gender-specific flexibility needs was also recognised in the data analysis. These included cultural and religious leave considerations, for Ramadan, or 'Sorry business' (cultural mourning practices for Aboriginal and Torres Strait Islander peoples). Gender-specific references, to acknowledge the female-heavy workforce, include leave for miscarriage or menstrual days.

In youth work, the discussion about leave included a wider reference to attracting different demographics or types of people to roles. Referencing workforce diversity and hiring practices, a youth worker noted *"wanting to attract people with lived experience into that role, you need to factor that into... be more understanding and have different requirements around leave"* (SSI: YW, 35-50M). This includes flexibility in leave arrangements and a better understanding of staff who entered the sector from precarious situations themselves, such as supporting staff members who were formerly homeless or have faced addiction or trauma. These measures will help ensure work environments are supportive and safe spaces.

Well-being-oriented

Flexibility was seen as a tool to also mitigate the emotionally demanding nature of care work, allowing workers to minimise stress and burnout. In focus groups, the ability to work from home, the choice in who one works with (colleagues or clients) and the ability to choose tasks were all seen as options to minimise the emotional toll of the work.

This was reinforced in SSIs again, with WFH being acknowledged as difficult, given the daily responsibilities of youth or aged care work. However, flexibility in being able to do some tasks from home is organisations' "*just recognising that people kind of bring, bring their whole selves to work, I guess*" (SSI: YW, 35-50F), as stated by a participant. Flexibility in rostering was also seen as a way to actively minimise difficult situations in workplaces. One youth worker (SSI: YW, 35-50M) noted the importance of being able to share and shift activities amongst staff, meaning individuals can have respite or focus their attention elsewhere, should they be under personal strain. This, however, requires an adequate staffing level and team environment. This was also referenced concerning difficult client and staff relationships. A service support worker in aged care noted "*one house, it has one woman, she's very racist, racist. So I prefer not to clean her room, because I don't want a problem or anything, so I say this to my manager, and he says, 'yeah, it's okay, another person will go to clean that room*" (SSI: SSW, 25-35F).

Overall, increased flexibility with who and how one performs certain aspects of care work contributes to staff well-being by creating changing work modalities, boundaries between client and other staff, and potentially reducing burnout and increasing sustainability in care roles.

Care-quality focused flexibility

This section examines how flexibility can support positive care outcomes for both staff and clients. However, it also provides a warning call as to how flexibility might impact patient care. A balance needs to be struck between these two dimensions.

Flexibility can be mutually beneficial for workers and care objectives

Flexibility can be conceptualised not as a one-way employee benefit, but as a reciprocal arrangement that improves both working conditions and service quality. This supports both staff well-being and care outcomes, in line with core recommendations from the Aged Care Royal Commission.

For instance, FGDs participants identified employee-driven scheduling approaches as a key improvement strategy. These approaches would give employees more choices while better matching client and staff needs, ultimately improving attraction through increased flexibility. Similarly, one service support worker noted the approach at her facility where *"the good things here are you can propose new ideas to the manager... if I start this shift early*

because the resident is not sleeping, normally it's okay" (SSI: SSW, 25-35F), meaning she is able to manage her schedule more effectively.

A youth worker exemplifies this, stating "*that flexibility kind of goes both ways"* (SSI: YW, 35-50F). Clients' needs can be balanced when individual staff are given autonomy to make decisions that are in the best interest of the people they are working with. She uses an example of a colleague, a committed worker who can manage their own schedules and takes responsibility for their clients, who states "*I have to leave early one day… but I can start early this other day to make sure that this young person can get to their court appearance"* (SSI: YW, 35-50F). Flexibility in this case can be seen as acknowledging both workers' personal circumstances and as a strategic approach that aligns workforce practices with client-centred service delivery.

Balancing worker flexibility with care needs

While flexibility was seen as a net positive across all community care staff interviewed, there was also a resounding acknowledgement that flexibility can also negatively impact patient care. This paragraph addresses the different, real tensions that exist between providing consistent care experiences for clients while accommodating worker flexibility needs.

The care needs and challenges of clients, whether they be around mental, emotional or disability, require consistency of care. A disability support worker highlights this with her patients: *"I think it's complicated, because obviously, flexibility is very important…but there's a fine line, because with disability work, and I'm sure it's the same for aged care and youth work, the clients kind of require that consistency"* (SSI: DSW, 25-35F). This was also highlighted concerning patients with dementia or behavioural issues, where the constant rotation of staff can impact clients' security and health. She highlighted that *"putting the same staff in the same ward also helps, because then the residents know that every time, every day, the same person is coming... if they are seeing every day and every shift different people, that's hard for them as well"* (SSI: PCW, 25-35F).

This tension between flexibility and client wellbeing can impact clients' mental health, create unnecessary tension in caring relationships, and in some cases, was highlighted as exacerbating safety issues. In one facility, a DSW recounted an instance where *"one of my clients said she actually fears for her safety, because you're having strangers come into your house... They don't get to meet them first"* (SSI: DSW, 25-35F). This demonstrates the importance of organisations considering both clients' and staff needs when designing flexibility, as a poorly designed approach can detrimentally impact both groups.

3.2.3 Organisational support for job attraction

To support attraction and retention in the community services sector, organisations must consider a combination of strategies rather than relying on a single solution. Key levers include providing comprehensive wellbeing support that responds to the emotional and psychological demands of care work, establishing professional growth infrastructure that supports both immediate needs and long-term career development, and fostering a compassionate organisational culture that values and supports staff as much as it expects them to care for clients. The qualitative evidence on these aspects is described in detail in what follows. Finally, through the discrete choice survey experiment, we test whether promoting different forms of organisational support can be a lever for attracting people to apply for jobs in the community sector.

Wellbeing support systems

The way organisations address the barriers identified around well-being was identified across the data as key to addressing the emotional toll and burnout associated with care work.

Mental health resources

Psychology, trauma support and counselling sessions

> *I feel like if you're going to be dealing with, you know, the pointy end of any stick, which is mental health, which is aged care and dying, which is all of those things, you need debriefing. You need really good supports.*
>
> FGD: Physiotherapist, 35-50F

were seen as important resources. One participant states: "*not necessarily mental health plans, but a very accessible platform for workers to comfortably access when they need help on their own to personally cope with it. Just some outlet that is offered to the workers, that acknowledges the weight that this sector carries*" (FGD: Student, 18-25F).

This was reinforced in SSIs. Current staff acknowledged that some organisations "*do provide sort of free counselling, which I think is a great idea… at the same time, even the companies that do provide that they don't sort of advertise it that well, so support workers are still not aware that these things exist for them*" (SSI: DSW, 25-35F), indicating these resources need to be acknowledged as core services provided to staff. Interview participants also noted that these support services need to be external to organisations to ensure confidentiality of staff and that what is disclosed will not impact their position.

Practical wellbeing benefits

Individuals are responsible for taking control of their mental health, with a DSW noting *"I really just try to maintain my own mental health, definitely make sure I'm exercising regularly… I personally like to do things like meditation and breath work, going for walks, things like that as well, to really help"* (SSI: DSW, 25-35F). This said, organisations can also put measures in place that allow staff to manage their wellbeing and health personally. Gym memberships and yoga access were raised in FGDs and SSIs, in addition to mental health or 'family' days off, as ways organisations can address the full spectrum of staff needs. These initiatives create supportive environments where staff can sustainably perform care work without excessive personal cost.

This also extends to practical benefits to support the different lived experiences and needs of staff. One FGD participant noted, given the female-heavy nature of the workforce, "*I think childcare [a creche] is really good… even in two-parent households, the majority of the time, most of the childcare and stuff will fall to women.*" (FGD: Receptionist, 18-25F). Furthermore, a creche could attract single parents or those seeking to enter the workforce after starting a family.

Organisations to support individuals' growth

Participants identified structured mechanisms that leverage existing expertise to support staff growth as key to attraction. By helping to 'share' the emotional toll of care work, these mechanisms can make the sector less daunting for new entrants. Below, we discuss some of these mechanisms.

Supervision and mentorship

Outside of external, professional psychological support detailed above, the role that supervisors or identified 'senior' mentors might play in community sector organisations was a core dimension raised in FGDs and SSIs. As a way to address the load of work, particularly on new staff, a youth worker (SSI: YW, 50-65M) highlights that "*one of the biggest element to me is that there are a range of other stuff in terms of adequate supervision: so debriefing on an ongoing basis… is so important to stop burnout and that sort of thing*". He also notes that "*once upon a time, every organisation that was funded by the government was given funding for professional supervision... No, it's no line item anymore. If organisations want to give their staff professional supervision, they've gotta find it in their budget somewhere*" (SSI: YW, 50-65M)*,* indicating this is part of a wider challenge for the sector and a result of privatisation and cost-cutting.

> "*Being relatively new in a team leader role myself, that's something that I've really enjoyed, being able to have those discussions with workers around their practice and supporting their reflection and their sort of growth in that area.*"
>
> SSI: Youth Worker, 35-50F

This mentorship not only supports new staff but also acknowledges the role of senior staff and the expertise they bring to the community care sector. In discussing her team, a youth worker notes that informally "*we know folks in the team who are very, very experienced, [they] can sort of give back and provide that mentoring to younger workers... So, particularly for newer workers to the sector, they'll go, 'I'm going to talk to so and so, because they've been doing this for forever and a day, and I've got a lot to learn from them*" (SSI: YW, 35-50F). As will be discussed in section 3.2.4, acknowledging the role of senior staff as integral supports in organisations celebrates their contributions while providing support for new entrants.

Peer learning systems

Across the qualitative data, the collective knowledge and peer resources were seen as important organisational assets that can be leveraged to support staff. One interview participant noted that "*we do a lot of kind of informal, kind of peer supervision and discussions and debriefing*" (SSI: YW, 35- 50f), leveraging the collective expertise of a group to identify best practices or problem-solving solutions with clients. In focus groups, work design was identified as a way to improve flexibility while also supporting staff. Job-sharing arrangements, for instance, were supported by prospective entrants into the sector. This was seen as a way to share the emotional load of difficult clients by having someone familiar with individual cases to share experiences, compare notes and discuss strategies.

Can organisational support be a lever for attraction?

Based on evidence gathered from the focus groups and the survey co-design workshop discussions, we identified three key organisational support measures to trial in the discrete choice survey experiment. The first was the Employee Assistance Program, which is a common support measure across many organisations in Australia. Accordingly, this was adopted as the baseline and was compared to (1) the option to share your work with a buddy, (2) the option to have a senior mentor. All the organisational supports were meant to provide support with managing work-related issues and stress.

Results show that compared to the Employee Assistance Program, other organisational support measures tend to prime respondents negatively for jobs in aged care (Figure 13, upper panel). The probability of choosing a job in aged care that involves support from a buddy or a senior mentor decreases by 2.2 and 2.6 percentage points, respectively, compared to jobs that offer the Employee Assistance program. We did not find a significant effect of these organisational supports for jobs in youth work. This result suggests that highlighting these supports may signal to applicants that the work is emotionally stressful. In other words, job seekers might not be willing to apply for a job that involves a level of emotional stress such that these supports are required. In this experiment, we

provided realistic job descriptions for both roles (see Figures A2 and A3 in Annex 3), including tasks that FGDs participants identified as problematic, such as assisting elderly clients with personal hygiene or helping youth de-escalate emotional situations. The observed backlash effect from organisational support measures (compared to the Employee Assistance Program) may therefore be amplified by pairing these supports with particularly candid job descriptions.
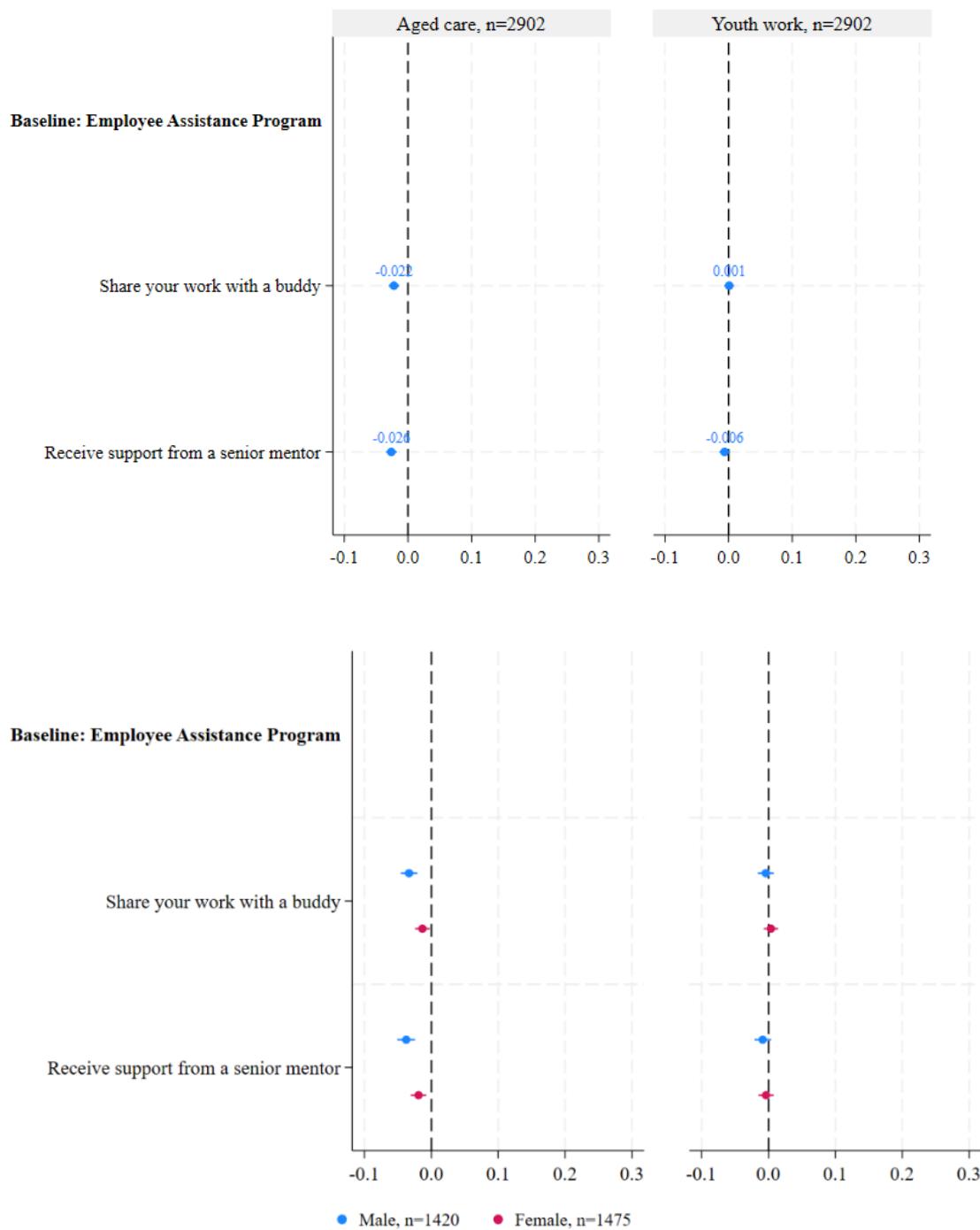

Figure 13: Effect of organisational support measures on the probability of choosing a job profile over another on the total sample (upper panel) and by gender (lower panel).

We also found a gendered pattern in these results (Figure 13, lower panel). For jobs in aged care, men are more averse to organisational support measures that involve a 'buddy' or a senior mentor compared to women. This could reflect two aspects. The first is that men might prefer to resolve emotional stress and pressures by themselves. The second is that men might have a greater aversion to emotionally intense jobs, as signalled by the presence of more developed organisational support measures.

These findings indicate that what might work for the retention of staff might not work for attracting new hires. The qualitative data demonstrates the importance of organisational support for the retention of staff. Yet, the discrete choice experiment indicates that emphasising organisational supports in job advertisements could deter underrepresented groups, especially men, from applying. This effect may be amplified by the realistic job descriptions used in the study. More broadly, these insights speak to the need to curate the image of the sector to increase attraction, starting from how jobs are currently advertised. At the same time, it is key to ensure that there is adequate support once people are on the job to maximise retention.

3.2.4 The importance of opportunities for development

Attracting community sector workers also requires meaningful growth opportunities. The majority of FGDs participants perceived the sector as providing limited career progression pathways. At the same time, the discrete choice survey experiment shows that traditional ways of promoting career development opportunities did not have a significant impact on attracting respondents to jobs in the sector. These two themes are presented below, with further elaboration in Chapter 5, where opportunities for career development were an important factor for people already holding roles in the sector.

Addressing the perceived limited internal advancement paths

The research reveals that the perception of community care roles as 'dead-end jobs' exacerbates the challenges with attraction to these sorts of roles. As such, there is a perception that advancement opportunities are limited in the sector, creating a significant barrier to entry for career-minded individuals.

Advancement once in these roles was seen as critical, with FGDs respondents noting "*if I didn't see anywhere kind of, to move to [in my career] then I, you know, I would look for the exit*" (FGD: Support Coordinator, 35- 50F). Participants more broadly highlighted that organisations need to invest in professional development and training and provide space for individuals to 'grow and evolve' in their roles.

> *The reason that a lot of people go into certain careers is the potential for career growth… Youth care and aged care aren't particularly fields that jump out to me as something like that [offer career growth].*
>
> FGP: Public Servant, 25-35M

The perceived lack of collectivisation and structures to connect community sector workers was also seen as a barrier to attraction. Quoting, for instance, Union membership, one FGDs participant noted "*I suppose the thing that would make a lot of these jobs more appealing for me is stronger Union representation*" (FGD: Office Worker, 35-50F). This was envisaged to result in stronger advocacy for rights, benefits and respect. Overall, this perception reflected a broader lack of understanding about the work itself, required qualifications, and pathways into the sector. This will be elaborated in more detail in the following section 3.2.5, on qualifications.

Career development opportunities in a job post: Do they matter to increase attraction?

The qualitative evidence outlined above highlights the importance of career development for attraction in the community sector, which tends to have a negative reputation in this respect. Cognisant of this, some organisations, such as ASQ, already include statements in their job advertisements that highlight opportunities for career development, signalling a commitment to supporting workers' growth and advancement within the sector.

However, it is unclear if these work in increasing attraction. In the DSCE, we trialled two types of statements highlighting opportunities for career development. The first is the one already in use in ASQ job ads, which reads as follows: '*Grow your skills and progress your career with opportunities across the organisation*'. Based on the discussion of the co-design workshop and on the findings from the qualitative data, we decided to trial this against a statement that emphasises more concretely the type of support provided. This second statement reads as follows: '*We offer paid professional development and training to support your career progression*'.

As shown in Figure 14, we do not find that advertising a job with either statement makes a difference in terms of job preferences. Moreover, it could be that the negative perception of the sector in terms of providing limited avenues for career advancement is not easily overcome through simply changing the framing of a job ad. As highlighted in section 3.1, this will require a more holistic approach across the whole sector to improve the image and the working conditions in the sector.
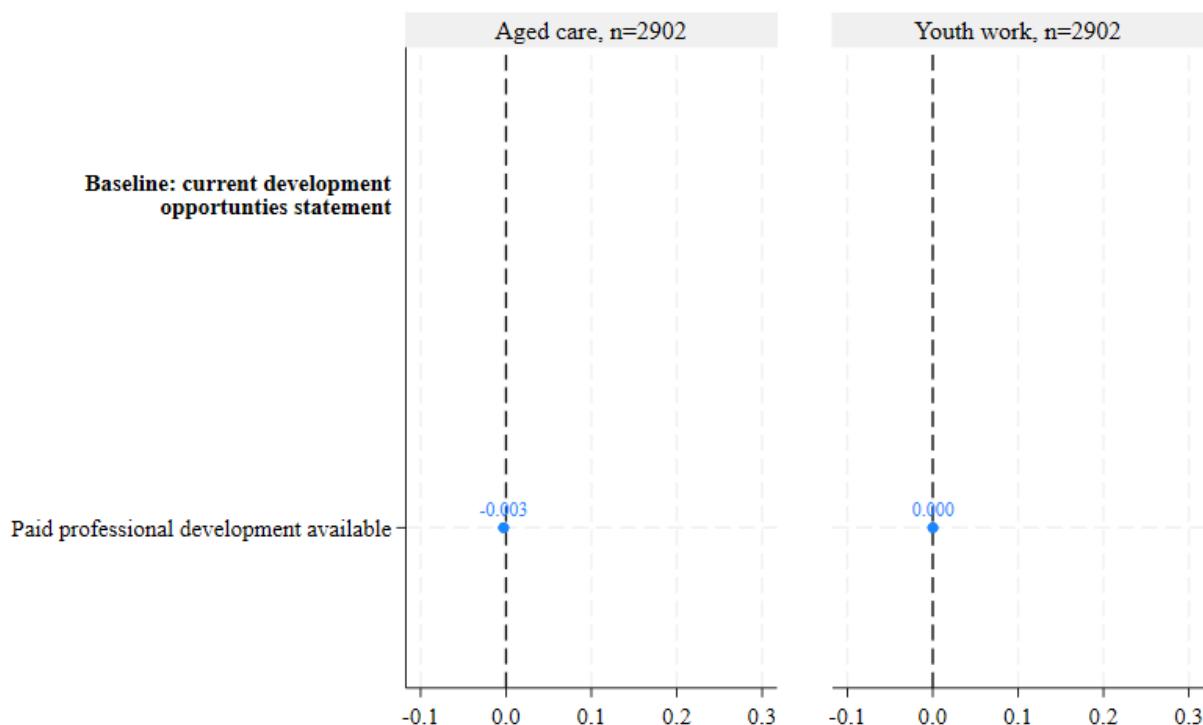
Figure 14: Effect of different development opportunities statements on the probability of choosing a job profile over another in the total sample (upper panel) and by gender (lower panel).

3.2.5 Qualifications and career entry pathways in the sector

The community sector is a regulated industry, and entry into its workforce is conditional on the attainment of mandatory qualifications. In this section, we discuss the role of formal qualifications and the extent to which they represent a barrier to entry in the sector. We also look at how lived experience and recognition of prior learning have the potential to play an important role in facilitating entry into the sector.

Formal qualifications are a barrier to entry

Figure 15 reveals that formal qualifications represent a significant barrier to entry for potential community care workers. A substantial proportion of respondents expressed reluctance toward attaining a certification, with 35.1% not interested in obtaining a Certificate IV in Child, Youth & Family Intervention and an even higher 41.8% disinclined to pursue a Certificate III in Aged Care. At the same time, approximately one-quarter of respondents

(26.8% in youth work and 23.9% in aged care) would consider obtaining a qualification in the space if they didn't have to pay for it.
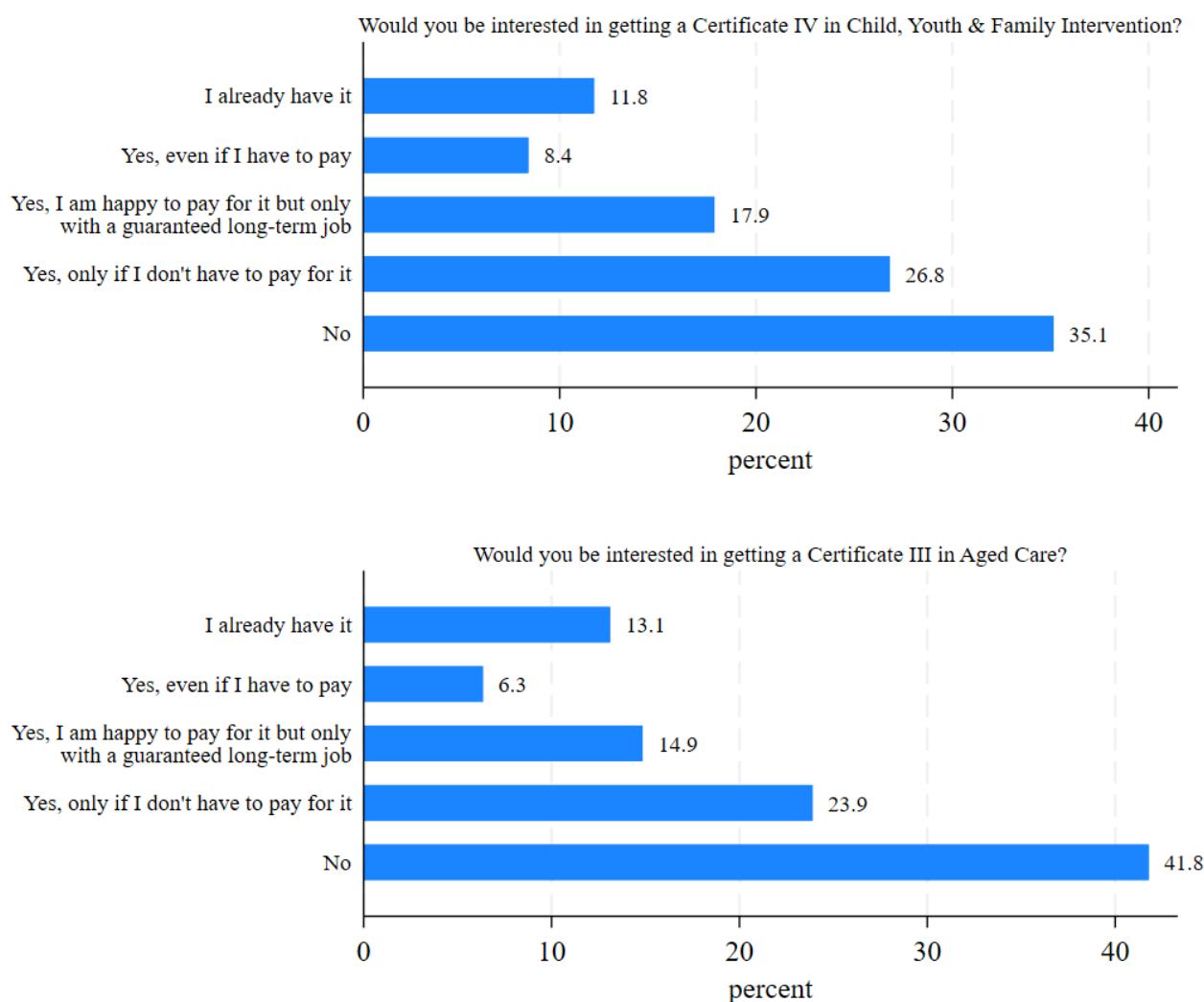
Figure 15: Respondents having a relevant qualification in youth work and aged care, or interested in getting one.

A smaller percentage of survey respondents noted their preparedness to pay for a qualification themselves (8.4% youth work, 6.3% aged care), with a little more than double these respondents (17.9% youth work, 14.9% aged care) prepared to pay if there were job assurances at the completion of the qualification. Interestingly, we find a stronger preference for full-time contracts among those who have a qualification or are interested in getting one (Figure 16). Given the high barrier to entry that qualifications pose, there is scope for organisations to increase attraction by combining guaranteed full-time employment opportunities for new entrants with paid training and certification.
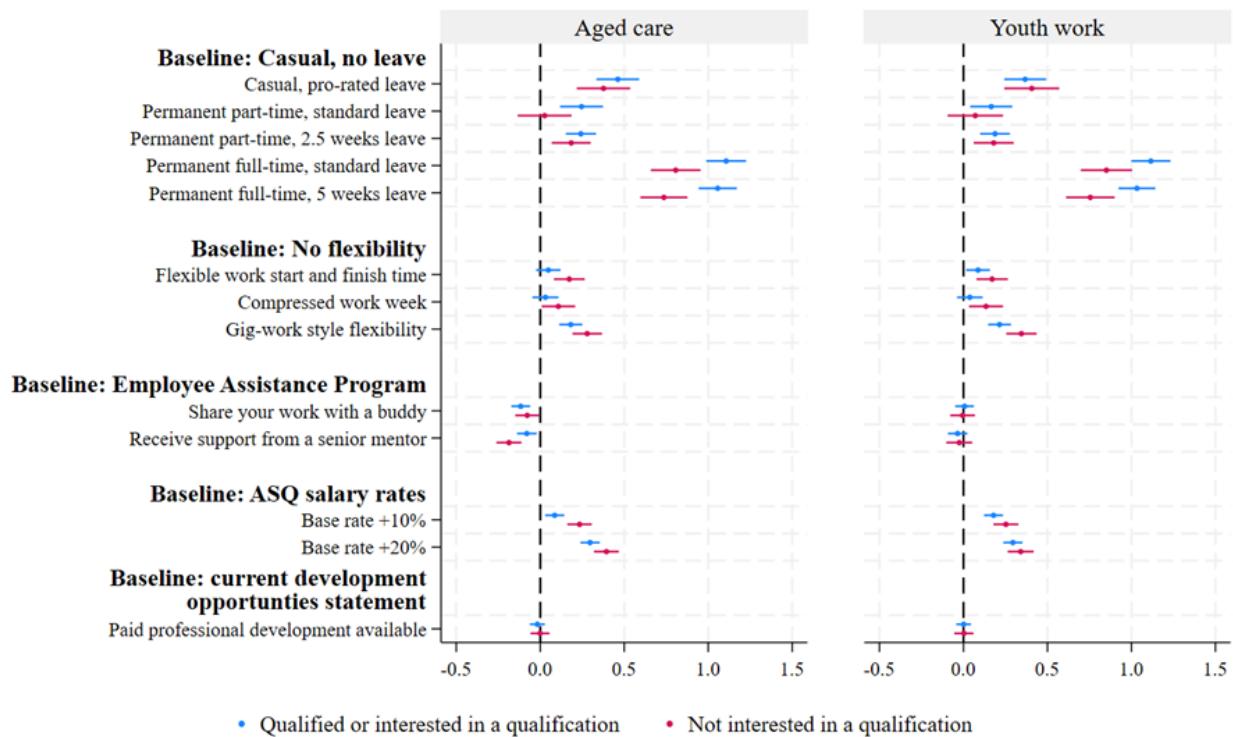
Figure 16: Effect of job characteristics on odds of choosing a job over another, by interest in getting a qualification in the sector (odds ratios).

Diverse pathways into the sector

The focus groups and interviews revealed a range of alternative approaches to meeting qualification requirements, including different ways of valuing staff's existing skills, prior learning and passions.

Lived experience to complement formal qualification

While formal qualifications are currently required to enter the sector, interviews with youth workers highlighted how real work experience and more flexible hiring practices might increase the pool of potential staff entering the sector.

For good youth worker, there's two elements that you need. You need people who actually have the necessary life skill and skill set to be able to actually do youth work, and then you need for those people to stay in those jobs for long enough to be able to actually build the trusting relationship with young people to actually do that good work.

SSI: YW, 50-65M

Data from interviews highlighted the importance of youth workers being able to effectively understand the challenges facing young people, an understanding that can be derived from personal experience. While these individuals may not fit conventional employment profiles, they offer unique capabilities to empathise, relate, and authentically connect with vulnerable youth populations: core capabilities to succeed in these roles.

Youth workers who have overcome personal challenges such as involvement in the justice system, substance use issues, or housing instability were seen to bring invaluable perspective and credibility to their roles and an ability to foster genuine rapport with young people. Some community care workers interviewed had overcome these challenges themselves, providing tangible examples of positive transformation possible within the sector.

In order to capitalise on attracting new workers, organisations might seek to implement more inclusive recruitment frameworks that recognise experiential knowledge alongside formal qualifications. These could be developed alongside onboarding processes, flexible qualification pathways, and tailored professional development structures. Recruitment strategies that acknowledge alternative career trajectories and lived experience as legitimate professional assets can deliver better quality care. These approaches also create meaningful employment pathways for individuals who might not traditionally be able to enter the sector.

Transferable skills

Across FGDs, which involved a broad sample of different individual job profiles, a common theme was recognising that, if you're going to attract people from other roles, from other sectors, recognising what they might bring to the sector is important. Certain professions and their associated 'soft skills,' were seen as transferrable, for instance "*it seems like somebody from the education side, a teacher, they are involved in talking to people and helping them: I would think that that sort of background would help the aged care or youth care*" (FGD: Men's shed member, 50-70M). Similar professions, such as nurses, social workers, childcare and hospitality, were all identified in focus groups as roles that had transferable skills for youth and aged care roles.

Highlighting how community sector roles can align with individuals' values

Across FGDs, participants noted they had little understanding as to how to enter community care roles, but were attracted to the work because of the values they shared at an individual and community level (see section 3.1.1). The data suggests that alignment between personal and community values can be leveraged to support the community sector. Focus group discussions revealed that many participants had a limited understanding of entry pathways into community care roles. However, they could potentially see themselves in these positions as they resonated with their core values around contributing meaningfully to society.

The community care workers interviewed highlighted personal connections to the work through friends or family experience (also with ageing grandparents or family members), interest in community groups or clubs, or research and school-based interests. This suggests an opportunity to strengthen proactive outreach to highlight career opportunities, particularly in educational settings. One youth worker with 30 years of experience noted the absence of community

> *So, I got into youth work, essentially through I studied social work straight out of high school, and I was sort of passionate about it because of personal experience with friends. .. I got really passionate about particularly the gap between mental health and drug and alcohol services.*
>
> SSI: Youth Worker, 35-50M

sector representation in schools, talking about youth work as a career path: "*we don't have people like nurses and the army going to high schools, planting seeds*" (SSI: YW, 50-65M). This suggests that targeted campaigns that explicitly communicate the values-based nature of community sector work, showcasing meaningful career pathways for young people who share these values, can also increase attraction.

3.2.6 Addressing low pay in the community services sector

Remuneration in the care sector was seen as a barrier to entry in focus group discussions. Jobs in the sector were seen as 'underpaid' across most SSIs and FGDs. Moreover, around a quarter of survey respondents indicated low pay as one of the three main factors preventing them from considering youth worker or personal care worker roles (Figure 8). This

> *So I think that's, that's a big part of it, like, if, if organizations aren't paying their workers properly, then the workers probably just aren't going to stay.*
>
> SSI: Youth Worker, 35-50F

clearly impacts both attraction and retention of staff in these roles. The following provides insights into the

relevance of salary compared to other job attributes and on how it impacts attraction to the sector for different demographics.

Security is as important as salary increases

Figure 17 shows that higher salaries do increase job attractiveness. A 20% salary increase is likely to increase the job selection probability by approximately 7 percentage points across both aged and youth worker roles. However, employment security demonstrates a substantially greater impact on job attractiveness than hourly wage improvements. While pay matters, job security may offer a more effective lever for workforce attraction.
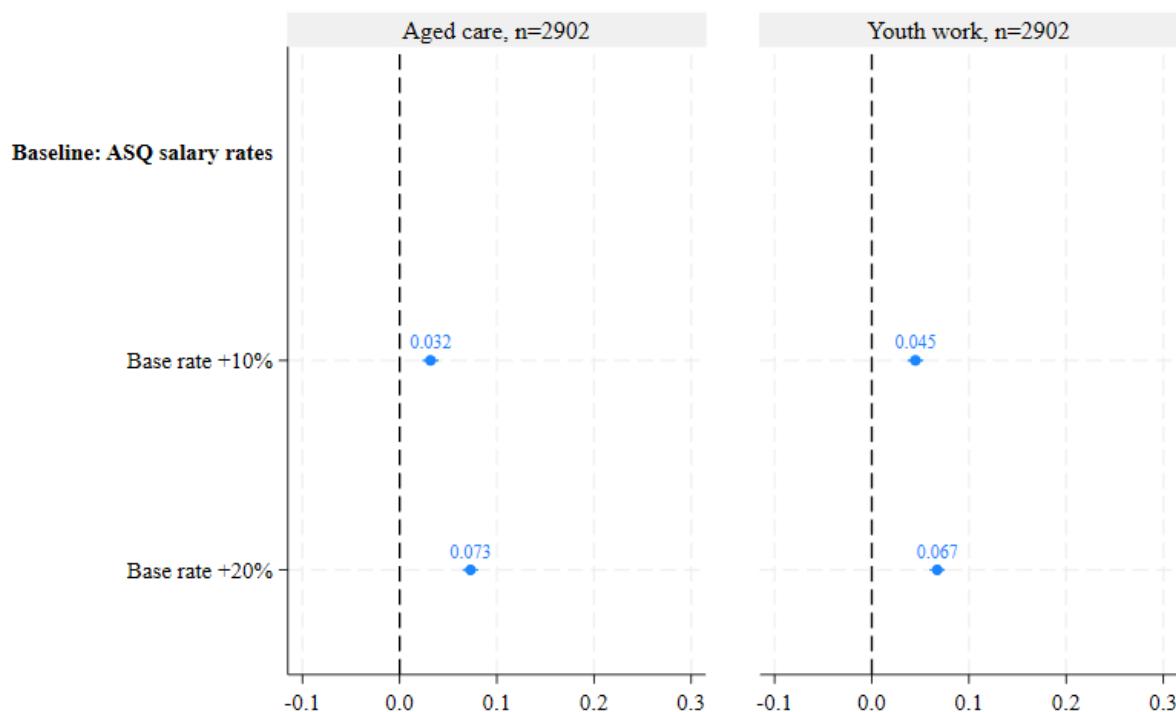
Figure 17: Effect of hourly wage increases on the probability of choosing a job profile over another in the total sample.

Demographic variations

The issue is further complicated by demographic factors and the nature of the work itself. Respondents tend to be more sensitive to wage increases as they become older (Figure 18). This pattern could reflect the expectation that wages should rise with age and experience. At the same time, this trend is less linear for aged care roles. A larger share of people might be unwilling to work in these roles due to the nature of the work, irrespective of the compensation offered.
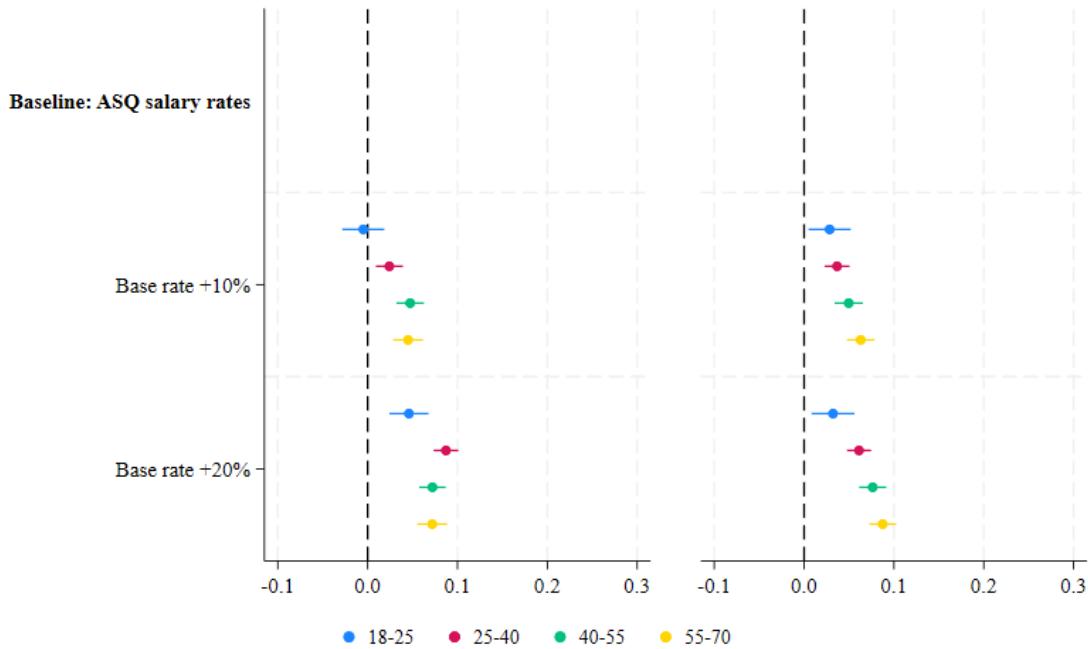
Figure 18: Effect of hourly wage increases on the probability of choosing a job profile over another, by age.

This suggests that organisations with more nuanced compensation structures could be better placed to attract workers. Such structures would acknowledge the demanding nature of community care work, recognising differences in expectations across career stages.

3.2.7 Estimating the monetary value of each job attribute

In the previous section, we described how respondents perceived different job attributes. We considered qualitative evidence, which provided an in-depth overview of how people feel about different attributes. Moreover, we complemented this with quantitative evidence from the discrete choice survey experiment, which showed us how likely a job attribute is to make respondents choose a job over another. Another way to look at how job seekers value job attributes is to measure their 'willingness to pay' for each of them. In other words, studying willingness to pay helps us answer the following question: 'What is the monetary value that respondents attach to each job attribute?'. Understanding willingness to pay is useful for employers to design competitive salary packages and identify the benefits employees value the most.

In Figure 19, we present the analysis of willingness to pay for all the job characteristics presented to participants in the discrete choice survey experiment. Negative values indicate that respondents are willing to give away part of their hourly wage for a certain job characteristic, revealing that this characteristic is valuable to them. Conversely, positive values indicate that respondents demand higher wages to accept jobs with certain characteristics, meaning they dislike those features and need compensation for them.

What stands out in Figure 19 is that respondents exhibit a very large willingness to pay for permanent full-time work compared to standard casual work. This is in line with evidence from previous sections showing that these work arrangements have the largest impact on the probability of choosing a job. This reflects two aspects. The first is the fact that full-time permanent employment is the standard contractual arrangement for over 50% of respondents (Figure 20). The second is that permanent jobs have a lower hourly wage than casual jobs, due to the casual loading. This strong result illustrates that respondents clearly prefer the security of permanent full-time work, even if it means giving up the casual loading.

Furthermore, respondents would be willing to forgo, respectively $12.8 (in aged care) and $14.1 (in youth work) per hour to work in a standard permanent part-time position compared to a standard casual position. This further reinforces the importance of the security of work hours for respondents over casual loading. Compared to standard casual work, respondents value casual arrangements with pro-rated leave at $9.4 and $10.4 an hour in aged care and youth work, respectively. While the willingness to pay for this type of arrangement is still lower than that of alternative options, it still represents a way to improve the attractiveness of casual work.

When we look at flexibility arrangements, we find that respondents place the greatest value on gig-work style flexibility, whereby they have complete freedom in choosing their schedule. They are willing to forgo $4.8 (in aged care) and $7.2 (in youth work) per hour on their wage to obtain this type of flexibility. While we also find some willingness to pay for flexible work start and finish times, this only ranges between $2-3 per hour. This evidence suggests that novel and broader flexibility paradigms might be successful in increasing attraction, especially for youth worker jobs.

Interestingly, we observed that respondents will need an hourly wage increase of $2.6 and $2.7 per hour to choose a job in aged care that involves working with a buddy or receiving support from a senior mentor, respectively. As noted earlier, this probably happens because these supports signal that the role involves significant stress. This result suggests that organisational support might not be sufficient alone to attract people in the sector. Organisational support will have to be complemented by adequate monetary compensation for the stress associated with the job, as emerged also in the focus groups and semi-structured interviews.
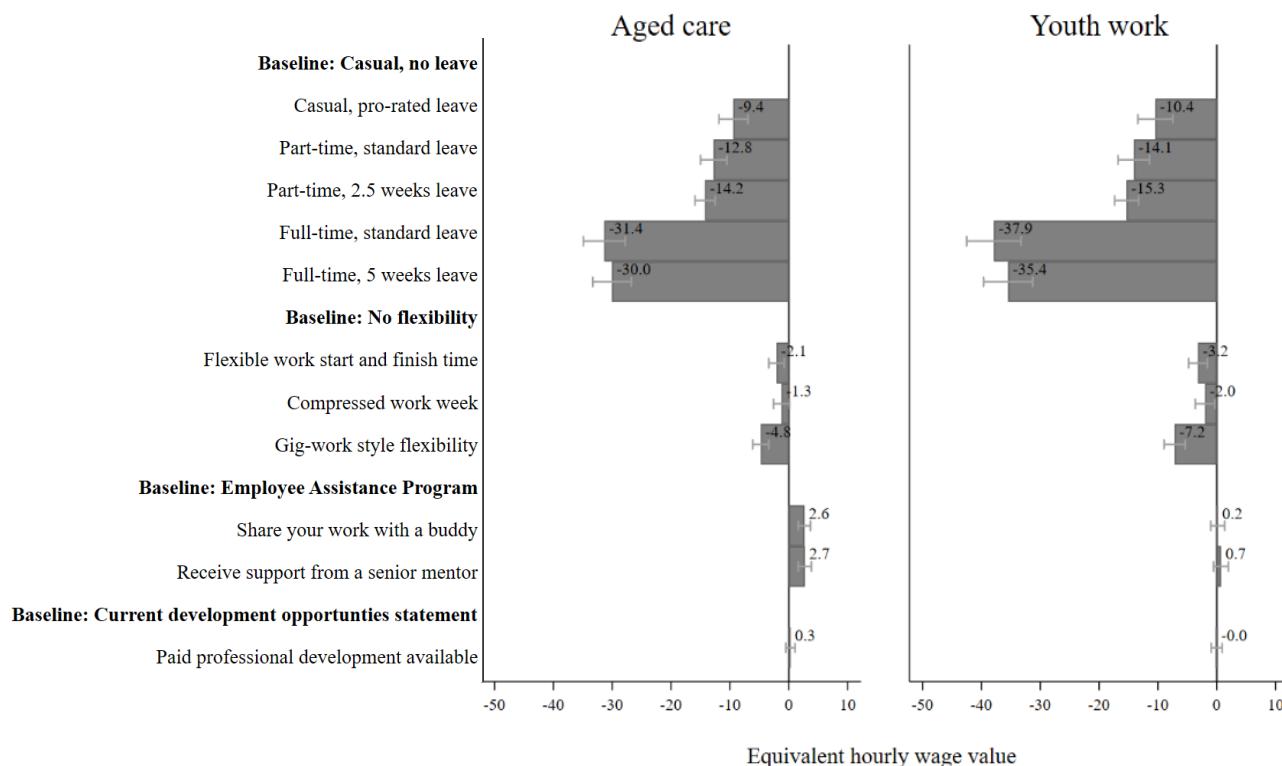
Figure 19: Equivalent hourly wage reduction (increase) that corresponds to providing each job attribute (also known as willingness to pay)

Note: Negative values indicate characteristics that respondents prefer and therefore are willing to forgo some part of their salary to have them. Positive values indicate characteristics that respondents want to avoid, and therefore, they need a higher salary to compensate for them.
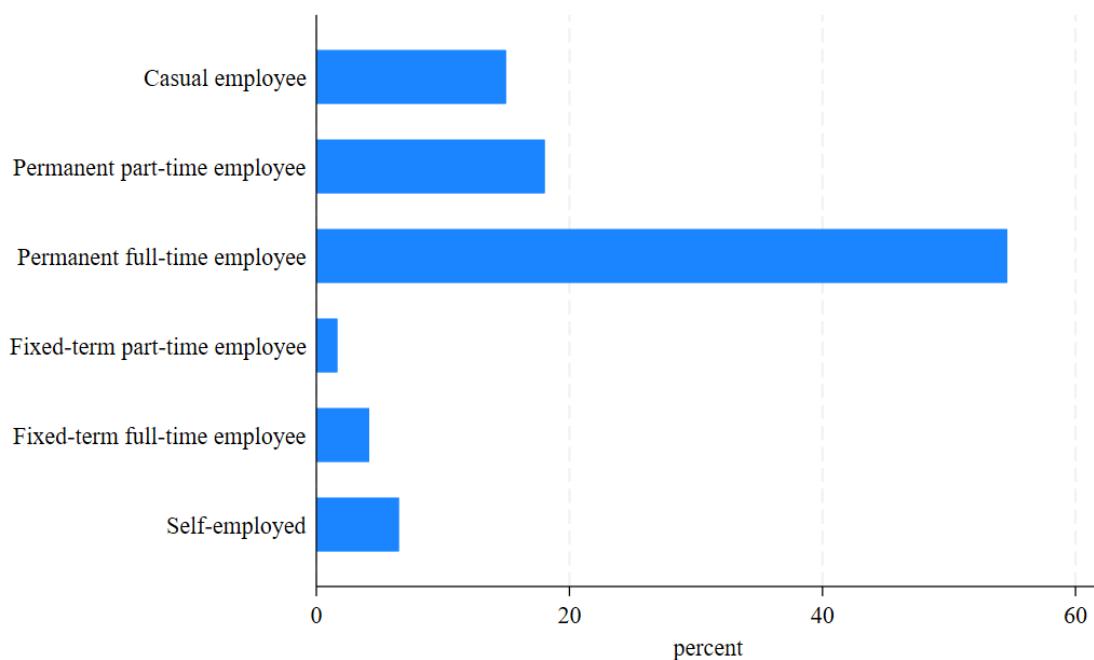
Figure 20: Percentage of respondents who work or have ever had a job by current or last contract type (N=2776)

4. Attracting workers to the community sector from other industries

The analysis of the discrete choice survey experiment data presented in the previous sections only provides information on whether people would choose a job in aged care or youth work compared to another job in the same role, but with different job characteristics. While this is useful to understand how to best package jobs in aged care and youth work, it does not tell us if people would choose these jobs over *their* (current or past) jobs. In this part of the report, we provide evidence on respondents' job preferences when they can choose among three options: either one of the two jobs in the pairs we show (in the aged care or youth work), or their current job. For respondents who were out of work at the time of the interview but that worked in the past, we asked them if they would prefer their last job over the pair of jobs in the community sector that we proposed. By doing this, we can paint a more realistic picture of what kind of people would be more likely to transition to a job in the community sector and if the value they place on job attributes stays the same once we also take into account their actual experience in the labour market.

Figure 21 shows the proportion of choices made for a job in aged care (upper panel) and youth work (lower panel) over all the job pairs presented to respondents, stratified by the industry they work/worked in. For simplicity, we will refer to these as 'transition probabilities'. This analysis reveals which worker types are most likely to transition to the community sector, enabling more targeted recruitment strategies.

Interestingly, there are rather sharp differences across respondents coming from different industries. Of all the job pairs presented to respondents who worked/working in Agriculture, Forestry and Fishing, over 70% were selected as the preferred job option over respondents' current/last job. On the other hand, this value is below 30% for respondents in Mining and Public Administration and Safety. Overall, the top 5 industries in terms of transition probabilities were Agriculture, Forestry and Fishing, Accommodation and Food Services, Retail Trade, Manufacturing and Wholesale Trade, with transition probabilities above 60%. This points to the relevance of these industries for workforce attraction in the community sector. On the other hand, the bottom 5 industries are represented by Rental, Hiring and Real Estate Services, Professional Scientific and Technical Services, Education and Training, Mining and Public Administration and Safety, where transition probabilities are below 55%. Workers who either work or have worked in these industries are less likely to be attracted to jobs in the community sector, and attempting to recruit them might result in a low chance of a successful hire.

We also repeated the analysis of the effect of each job dimension on the probability of choosing a job. This time, however, we constructed the job profile of each respondent and treated it as a possible choice option. In other words, respondents could choose one of two job pairs in the community sector or their current (or last) job. As a result, among the contractual arrangements, we now also include self-employment to represent respondents who are (or were) self-employed. Moreover, the hourly wage ranges between $16 and over $56 per hour, since this variable now reflects respondents' actual wages rather than just the wages in our presented job pairs.
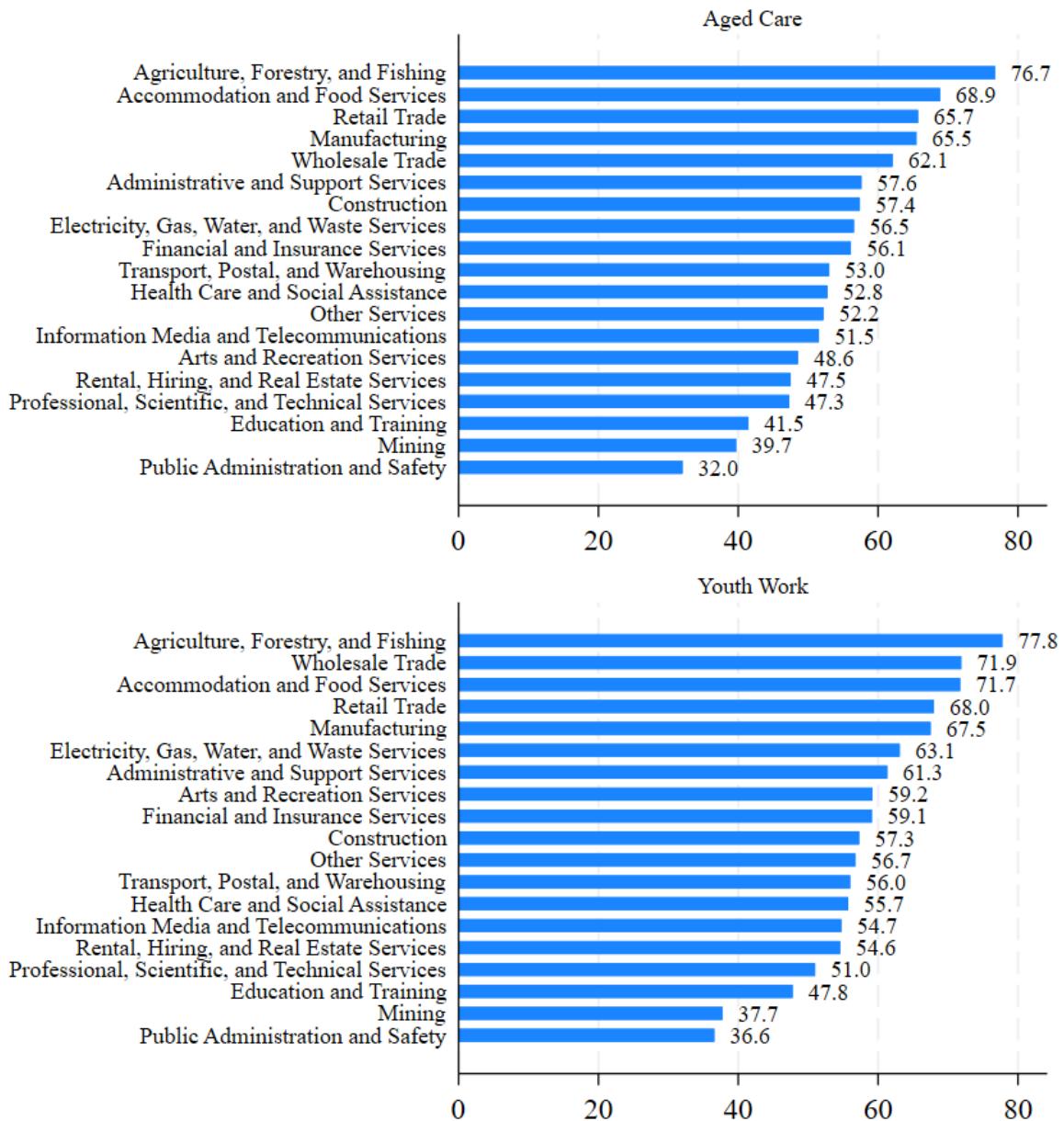
Figure 21: Proportion of choices made for a job in aged care (above) and youth work (below) on the total of job pairs presented to respondents, by industry of current/last job of the respondent (transition probabilities).

Figure 22 shows that even when we consider respondents' current/last job, we still get similar results as in the main analysis in section 3.2. In particular, respondents are more likely to choose permanent full-time jobs. However, those self-employed are over 20 percentage points more likely to choose their current self-employment status than a job in either aged care or youth work, suggesting that it is very difficult to convince these workers to transition to community sector jobs. Interestingly, when we also take into account respondents' current (last) job, flexibility does not seem to attract them as much. Yet, in section 3.2, we observed that when respondents are limited to choosing jobs in the community sector, flexibility, and in particular gig-work style flexibility, does matter.

This contrast suggests that workers might still have doubts about whether these flexibility arrangements are truly feasible and would choose what they know (such as their current or last job) over unfamiliar options. Currently, jobs in aged care and youth work sit on hourly wages ranging between $33 and $47 per hour. For this salary range, the probability of choosing a job increases by about 7 percentage points, compared to a baseline offering $16 or $33 per hour. This indicates that these roles in the community sector currently offer salary levels able to attract mostly

low-paid workers. Yet, jobs paying $47 to $56 per hour are most likely to be chosen, compared to those offering $16 or $33 per hour, regardless of other job features. Interestingly, wages above $56 per hour produce smaller gains in choice probability than the $47-$56 range, suggesting this mid-range represents a 'sweet spot' for worker attraction.
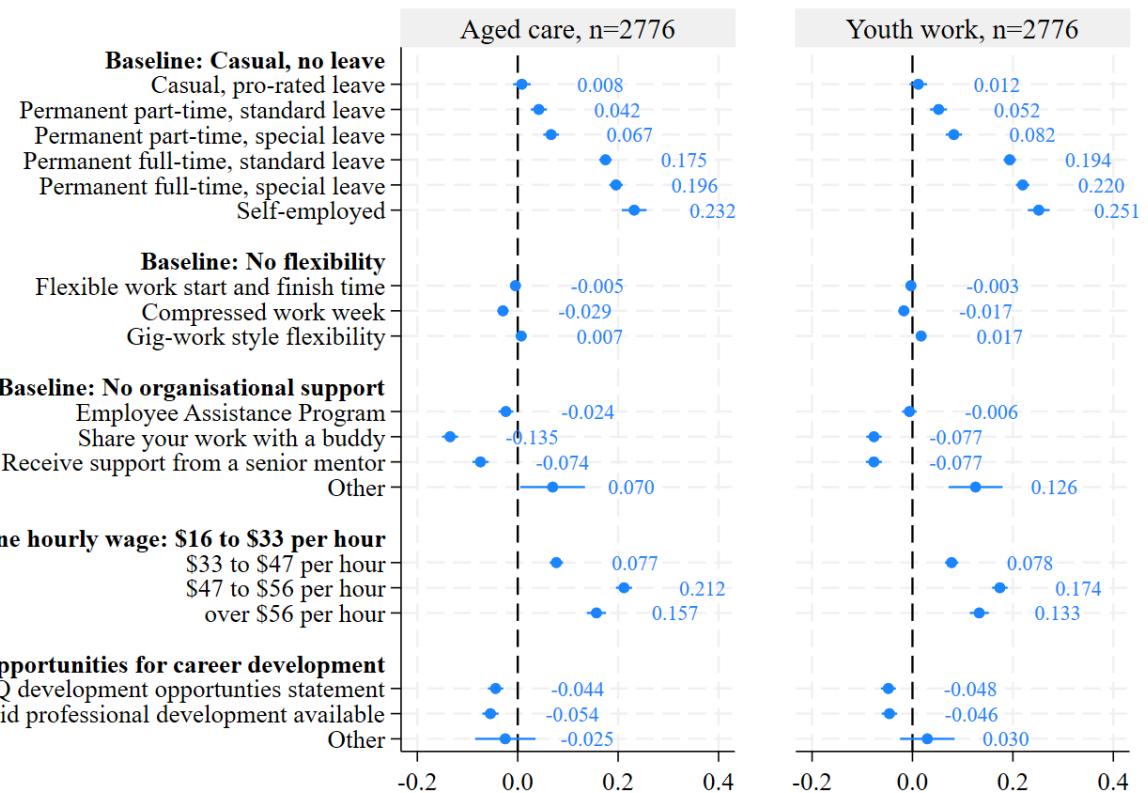
Figure 22: Effect of each job dimension on the probability of choosing either one of the two job profiles in aged care and youth work or current/last job, analysis on the total sample that worked or ever worked (N=2,776).

5. Retaining staff in the community services sector

The previous chapters have highlighted the challenges and opportunities in attracting new, qualified, and passionate workers to the community care sector at a time when demand for this workforce is expected to increase in the future. The ability to retain this valuable workforce represents an equally pressing concern that directly impacts the quality of care and organisational sustainability. Staff retention and attraction are intimately linked. Effective recruitment is only effective when the hired workforce stays in these roles, minimising costly staff turnover and re-recruitment, providing less disruption to services, and maintaining organisational culture and team dynamics.

In this section, we focus on the retention of workers in the community sector. We do this by drawing primarily on the insights gathered through the SSIs, which involved participants already working in the sector. Our analysis is further supported by data from the FGDs, where reflections on experiences from other sectors have been used to complement findings from the SSIs. We offer some specific considerations for ASQ, and the sector more broadly, on how staff, once recruited, can be supported by organisations to stay in these roles and build long-term careers in the community sector.

5.1 Organisations supporting their staff

Well-being support systems are noted in section 3.2.3, which describes the emotional toll and propensity for burnout in the community sector workforce. The interviews resonated with many of these same sentiments. These highlighted the importance of flexibility in scheduling to create time for self-care, the need for debriefs with colleagues or professional psychology and counselling, and the practical benefits for staff, such as yoga or gym memberships, that can support their overall well-being. In addition to these practical, self-care approaches, the retention of staff was also seen as dependent on good leadership, management, and being treated with respect, linked closely with individual and organisational integrity and values. These factors are discussed in more detail below.

5.1.2 Leadership and management that is appropriate and empathetic to frontline staff

The importance of organisational culture and a supportive workplace was a prominent theme. There was some criticism about poor leadership in the community services sector, including how management treats and supports frontline staff. This was highlighted across both youth work and aged care roles, referencing managers being parachuted into roles without understanding what frontline work entailed, and in doing so, undermining opportunities for development within these teams. One youth worker noted that *"increasingly, we've had people coming from outside the sector in those positions of management... professional managers rather than ex youth workers"* (SSI: YW, 50-65M). An aged care worker pointed out that *"there are some managers that get the roles when they don't have any experience in healthcare, there was one in particular, I remember a lady who was running a facility, and she was a hotel manager"* (SSI: PCW, 25-35F). This lack of knowledge about the sector from leadership also contributes to a loss in internal mentoring and knowledge sharing, as 'professional' managers coming from outside of the sector are not able to provide the required level of training, supervision and mentorship to new staff.

This is also reflected in the quality of care delivered in facilities with poor management practices. One disability support worker notes *"the company I was with was not run very well, and they didn't value the support workers for one so, obviously, then when the support workers are being overworked, underpaid and exhausted, then some of the support workers were probably not acting as good as they could..."*

> *Some of those elements of management are more easily transferable to a youth worker who's been around, like, you can learn management skills, but you can't learn Youth Work Skills sitting behind a desk.*
>
> SSI: Youth Worker, 50-65M

(SSI: DSW, 25-35F*)*, indicating that unsupportive management also impacts quality of care. Poor communication between management and staff was also highlighted as a source of increased tension and stress on the frontline. For example when a service support worker was not informed about a client's death: *"I walked in and said, 'Hey, Jeffrey, you're on my run. Where's Betty?' And then he says, 'oh, Betty's passed away,' and breaks down"* (*SSI: SSW, 35-50F).*

This reflects a wider imbalance between management and frontline staff, where more consideration is needed of how leadership engages and empathises with the pressure and daily responsibilities faced by frontline staff. By contrast, managers who are actively engaged with frontline staff and elderly residents or youth are seen as more approachable and friendly. As a result of their connection with those providing and receiving services, they are able to make more informed and effective management decisions. In one aged care facility, the manager who is *"talking to all of the staff, and at breakfast time, he sits on this seat outside, and he talks to every one of the residents that come in"* (SSI: PCW, 25- 35F), and knows where issues are and how most effectively to address them.

5.1.3 Integrity and values

How organisations 'live their values' and their mission was also consistently highlighted in the qualitative data. As such, for many staff, this was a question of 'integrity'. As a youth worker noted *"unless you have them [values] and you breathe life into them, they become forgotten, and then your actions and what you actually aspire to are two different things"* (SSI:

> *Ultimately, you want to know that your employer is caring about you the same way that you're caring about the people that you're working with.*
>
> FGD: Financial advisor, 35-50M

YW, 50-65M). With many staff attracted to this work because of their values and altruism, they recognise that *"they do the work because of the values and because of the values alignment, you know, because, I mean, let's be frank, you could probably finding easier, better paid work elsewhere"* (SSI: YW, 35-50F). It is the values alignment between individuals and organisations that makes workers come back to work each day.

This values alignment was also reflected in how organisations supported staff within challenging working contexts. In various interviews, participants highlighted the importance of organisations actively defending staff when faced with racism, homophobia, or other forms of discrimination from clients. As illustrated by one personal care worker who noted "*I have seen that some of the residents can't feel comfortable with... they want a white Australian like their daughter to be helping them not... someone who looks like me*" (SSI: PCW, 25-35F). Organisations that actively address such incidents, rather than expecting staff to simply tolerate discrimination, demonstrate their commitment to their stated values. As such, workers noted that when organisations 'have their backs' in challenging situations, they feel supported and more likely to stay in their roles.

This final point around racism in the sector is important to acknowledge, as migrants play an important role in this workforce, and skilled visas are used to actively target migrant groups to fill the critical lack of staff in the sector (PMC 2023). Organisations are therefore required to protect these staff and champion the diversity they provide to the workforce, otherwise racism and discrimination will be exacerbated.

5.2 Career progression and mobility improvement

For staff already in the sector, there was a strong desire for professional development and career progression. These covered both dimensions of structural changes within the organisation to support career advancement, and the need for training and knowledge sharing across the sector.

5.2.1 Career progression opportunities

Limited internal advancement paths

There was frustration expressed across the interviews that organisations are not providing career advancement opportunities. As a participant put it "*if I want to work in a higher position or something like that, it's on me as an individual*" (SSI: PCW, 25- 35F). This was seen as particularly difficult for certain demographics of care workers, for instance, *"if they're a migrant, they're working in aged care, there's no career progression for them often"* (SSI: YW, 35-50M). This limited mobility was seen as pushing talented staff out of the sector entirely, with one youth worker noting, *"I can't really move up in this organisation, I can't really progress my career, I'll leave and do something else"* (SSI: YW, 35-50M).

> *If you're lucky, your service manager might die or something, and you will accidentally end up in a management position, which is what happened to me.*
>
> SSI: Youth Worker, 50-65M

Recognising the diversity and talent in the workforce

The perception of 'dead-end jobs' was reinforced when existing staff felt their skills and experiences were not being harnessed by organisations. One service support worker (who was on a working visa) notes *"For me, I'm a trained nutritionist, I tell my manager I'm a nutritionist and I could work in the kitchen, for example, but they're like, no, we have one dietitian, not interested"* (SSI: SSW, 25-35F), voicing frustration that her skills are being wasted.

As discussed in section 3.2.3 on organisational support, experienced staff, and their on-the-job knowledge and expertise can be recognised as opportunities for promotion and development. They *"have a sense of, not quite mastery, but a sense of professional accomplishment, and that they can sort of give back and provide that mentoring to younger workers"* (SSI: YW, 35-50F). These skills can be acknowledged through promotions or formal mentoring roles. This suggests that organisations that actively create pathways for advancement by recognising and utilising workers' experience can better retain staff seeking meaningful careers rather than just jobs.

Training and professional development

Analysis of the interview data indicates that ongoing professional development serves multiple purposes, including skill enhancement, career advancement, and professional satisfaction in the role. A series of barriers, however, limit this professional development, including access and opportunity for staff, partly driven by funding cuts. A youth worker of 30 years notes *"with some of the funding models and funding cuts, it has meant that things like training, supervision, group, debriefing, all of those sorts of things have disappeared, so workers are not getting the necessary support and professional development."* (SSI: YW, 50-65M). Despite the financial challenges, other avenues to support training and professional development are outlined below.

Investment in professional development

It was highlighted that training and personal development opportunities vary across organisations. One youth worker stated "*I'm quite lucky in that the organisation does invest quite a bit in training and development... I think that's a mix of in-service training, where if there's things that a lot of workers want to get trained in on, we'll have someone come in.*" (SSI: YW, 35-50F). Other participants had never been provided the option or were unaware of available opportunities. In line with career development opportunities detailed above, in one aged care role, training was offered to support internal progression: "*as an SSW, you know, if you want to become a HCW [Health Care Worker], here's the course. I think we had to, I can't remember whether we had to pay for it all, or if the aged care place would pay for it*" (SSI: SSW, 35-50F). This employee notes she would not pay for it herself, unless the return would be worth the investment, something that was not demonstrated for this particular role.

Professional organisations, conferences and shared learning opportunities

The lack of collectivisation and structures to connect across community sector workers was seen as a missed opportunity that might support wider work culture, professionalisation and ultimately retention. Historically, there have been youth work conferences where people could share best practices across organisations and frontline staff. Comparing Queensland to other jurisdictions in Australia, one youth worker also noted *"the Southern states, like Victoria, they've got youth work courses, and they sort of are putting a prerequisite for becoming a member of the professional association as having a Youth Work degree"* (SSI: YW, 50-65M). This desire to share knowledge and best practice across the profession and build solidarity across community care workers was seen as an important way to improve retention rates.

The 'professionalisation' of community sector staff aligns with the Royal Commission's vision for the future of aged care work. However, across other community sector roles, as youth work for instance, it was noted that this can drive a paternalistic culture, one where "*we're professionals, we know better than you [young people], let us tell you what to do, let us manage your life… those social work professionals, … young people can't relate with them, they're not interested in people who wear uniform and work nine to five*". This comment illustrates the unintended consequences of professionalism and that different approaches are required across different parts of the community care sector to ensure that rapport can be developed between staff and clients.

5.3 Addressing structural challenges in the community services sector

The community services sector faces some entrenched structural challenges that significantly impact workforce attraction and retention, which go well beyond individual organisational practices. These systemic issues, such as understaffing, gendered workforce dynamics, and tensions between organisational scale and effective service delivery, require coordinated responses. Addressing these structural barriers is important for improving working conditions, enhancing service quality and ensuring the sector's sustainability in meeting growing community needs.

5.3.1 Understaffing

Staffing shortages were highlighted as problematic, particularly in aged care, driven by underfunding and cost-cutting in some cases, which impacts the working culture, dynamics between staff, quality of care and increases rates of burnout and disenfranchisement from staff. Quality of care was identified as an important factor for many staff, with understaffing being seen as a barrier to quality due to the lack of people available for the number of tasks. This was also a core contributor to burnout, exhaustion and staff leaving roles.

While community care workers responded positively when discussing flexibility and more tailored leave and contract arrangements, they were also sceptical as to whether any of these could be implemented unless there was a critical mass of staff that allowed for such interventions to be rolled out. Other staff indicated that they are less likely to take leave or days off, as it would put additional pressure on colleagues. While this is a noble display of solidarity and commitment to the work, it is unsustainable and only reinforces the challenges already present for frontline staff in the sector.

5.3.2 Confronting gendered realities

The interviews reveal significant gendered dimensions within the community services workforce that organisations must address to improve both attraction and retention. As one youth worker observed, "*It is very, very female orientated... women dominate at the coalface*" (YW, 50-65M). This gender imbalance creates specific service delivery challenges, as client preferences often align with gender considerations, particularly in intimate care situations where *"a lot of the residents, even the male residents, prefer to have women taking care of them"* (PCW, 25-35F).

Despite the predominantly female workforce, male workers do fulfil important roles in the community sector. This may be with regards to safety considerations: *"I have been in quite a few situations where I've been looking after*

these men who are much taller than me, much bigger than me... if they got aggressive... working with the male staff... made me feel safer" (PCW, 25-35F). The same was noted for male workers being able to meets specific client needs, particularly for young men seeking positive male role models: "that missing father figure, that sort of a guide, that's sort of a lot of the young guys are looking for" (YW, 50-65M).

Organisations that recognise these gendered dimensions and actively work toward creating diverse teams that include women, men, and non-binary professionals can better serve client needs while creating more balanced workplace dynamics.

5.3.3 Scale vs effective service delivery

The increasing consolidation of community services into larger organisations presents significant structural challenges that directly impact workforce effectiveness and satisfaction. Community sector staff from smaller, local organisations presented strong critiques of how large organisations operate within local communities when services are contracted out,

> *Lots of youth services have been defunded because orgs, like Anglicare, Mission Australia and Salvation Army have got all the money*
>
> SSI: Youth Worker: 50-65M

with one experienced youth worker asserting: "*here's the issue, the barriers are the big organisations... coming into small communities, winning the tender. They don't know the community. They don't know the locals. They don't hire locals, and they wonder why they fail. They pay shit wages, and they wonder why they fail*" (SSI: YW, 50-65M). The disconnect between marketisation and local community needs can undermine staff effectiveness on the ground.

Organisations that successfully navigate these challenges prioritise community-driven approaches where frontline workers have meaningful input. As suggested in the research, effective workforce models would "*start looking at programs that we know work, not ones that bureaucrats tell me work... speaking to people on the ground... funding those programs*" (SSI: YW, 50-65M). This approach not only improves service delivery outcomes but also increases staff satisfaction by validating their expertise and connection to the communities they serve.

Tackling these structural challenges requires multi-faceted approaches that combine policy reform, organisational innovation, and shifts in sector culture. Policy reform will need to continue to focus on establishing minimum staffing ratios with appropriate funding models to prevent understaffing, developing targeted strategies for workforce diversification that acknowledge gendered dimensions of care work, and creating governance models that balance the resources of larger organisations with local autonomy and community-driven practices. By addressing these foundational issues, the sector can create an environment where workers feel valued, supported, and empowered to deliver high-quality care, ultimately improving both the attraction and retention of skilled professionals who are essential to meeting Australia's growing community service needs

6.   Conclusion

Drawing on the insights gathered from this research project, the challenges of building a diverse and sustainable workforce for the future in the community services sector are clearly evident. The analysis, focusing on aged care and youth work roles, reveals a complex interplay of factors influencing both the attraction of new individuals to the sector and the retention of existing staff. This situation exists within a wider ecosystem that includes institutions and systems alongside the work these groups are doing, suggesting that solutions must address not only individual and organisational dynamics but also broader systemic issues.

The community services sector is vital for societal well-being, and it is a growing part of the economy. However, it faces significant workforce challenges in the face of increasing demand. Attracting and retaining qualified workers is challenging, influenced by unpredictable government funding, under recognition of the care economy, job insecurity, and unclear career pathways. New pressures, such as an ageing population, AI and automation and the evolving nature of programs like the National Disability Insurance Scheme, further complicate this landscape. The sector relies on a diverse workforce, and understanding the perceptions and motivations of different groups is crucial for addressing these challenges.

Ultimately, the challenges facing the community services workforce require a multifaceted response. Structural issues, such as underfunding and staffing levels, directly impact the ability to implement flexible work arrangements and provide adequate support. Addressing the gendered nature of the workforce, acknowledging client preferences while ensuring staff safety and well-being, and developing inclusive recruitment and support frameworks are essential. This requires a balancing act: improving public perceptions to attract a diverse workforce, while simultaneously investing in improved working conditions, support systems, and career pathways to retain valuable staff. The diversity and sustainability of the Anglicare workforce and the organisation's ability to continue to deliver high-quality care hinge on successfully navigating these complex workforce challenges as a shared responsibility.

7. Appendices

7.1 Annex 1: FGD question guide

Focus group questions – Attracting and retaining community sector workers

Knowledge of community services

- What sorts of jobs come to mind when you think about community services?
- What sorts of training and experience do you think is required for this line of work?
- What do you think attracts people to this type of work? *(What might attract you to this type of work?)*
- What do you think are the main challenges of working in the community services, particularly front-line work in sub-sectors such as aged care?
- The literature shows that the community services sector is an industry where mainly females work, particularly at the frontline of care work in areas such as aged care and disability services. What do you think explains the high proportion of women that work in this sector?
- The literature also shows that young people (under the age of 25) only make up a small number of the workers in this sector. What do you think are the main factors that explain the lack of young people working in community services?

Attracting and retaining workers in the community sector

- What do you think would be the main aspects of job satisfaction working in the community services sector?
- How important would pay and conditions be in deciding whether you would want to work in the community services sector?
- How important would 'flexible working' conditions (flexible hours, breaks, work location) be in attracting you to these kinds of jobs?
- What factors would deter or discourage you from taking up jobs in the community sector, including aged care? (Prompts include lack of awareness of jobs or careers in the community sector, negative media coverage of aged care jobs, and strong gender norms)
- How important would career advancement be for you in continuing to work in the community services sector, e.g. into supervisory/management roles?
- How important would contact with your co-workers be in terms of job satisfaction?

Wrap up

- Were there any surprises for you in the group discussion about working in the community services sector?
- Is there anything else you would like to add that hasn't already been raised about working in the community services sector?

7.2 Annex 2: SSI question guide

1) **Introduction (5 minutes)**
- Introduce the interviewer and the project
- Seek consent (written or verbal) to audio record/ to use data in the research/ to share findings if requested/ de-identifiable data.
- Confirm payment will be via a Gift Card via email at the end of the interview.
- Clarify any questions prior to commencing.

2) **About you and your work (15 minutes):**
- Name, age (if comfortable), and how they got into the sector?
- What is/ was your role in the community care sector?
  - Clarify residential or in-home, youth or aged
- What were/are your main responsibilities?
- How long have/ had you been working in this role?
- What do you think are the most rewarding aspects of this work?
- What do you think are the most challenging aspects of this work?
  - Probe regarding their perception of the typical workload in their roles?
  - Probe: Does the workload feel manageable most of the time?
  - Probe: How is work-related stress typically managed by those working in these roles?
  - Probe: What do you see as the main emotional and physical challenges of working in youth work roles?
- What qualifications did you have coming into this role? Do you think they have been adequate or excessive for your responsibilities?
- Are you seeking to stay in this role? If you left, why did you leave this role?
  - What types of roles are you now seeking?
  - What appeals to you about that/those new roles?

3) **Flexibility (10 minutes)**
- People often talk about wanting more flexibility in their jobs, but that can mean different things to different people. Is it something that's important to you in your role?
- If so, how would you define flexibility in the context of your work?
  - Probe: When you think about flexibility, what specific changes or options would appeal to you? Contract, location, working hours flexibility, etc.

4) **Organisational Support (10 minutes)**
- When you think about the kind of support you receive from your employer or your co-workers in your role, what things come to mind?
- How does this support, or lack thereof, affect your ability to handle challenges in your job?
- How do you view diversity in the youth work/ aged care workforce, such as differences in age, gender, race, ethnicity, sexuality?
- What are your thoughts on the availability of career development/advancement opportunities for people in these roles? What about training and professional development opportunities?

5) **Summary and Open Insights (15 minutes)**
- Based on the above conversation, or any other information we did not cover, what factors do you think are most important in retaining people in community care roles?
- Imagine you have a magic wand and could make immediate changes to improve the role of a youth/ aged care worker. What would be different?

- Before we conclude the interview, is there anything else you think is important for us to understand about working in community care roles?
- **Close**
  - Thanks for your time.
  - Snowball: Do you know anyone else whom we can interview?

7.3 Annex 3: Discrete choice survey experiment

Job attributes		Attribute Levels
Contract and work hours	1	Casual (~50% of full-time, hours not guaranteed)
	2	Permanent part-time (50% of a full-time position)
	3	Permanent full-time
Leave arrangements • 1C and 2C for casuals only • 1PT and 2PT for permanent part-time only • 1FT and 2FT for permanent FT only	1C	No leave accrued (standard casual arrangement)
	2C	Accumulate paid leave as in permanent jobs, but pro-rated by hours worked
	1PT	2 weeks of paid annual leave
	2PT	2.5 weeks of paid annual leave
	1FT	4 weeks of paid annual leave
	2FT	5 weeks of paid annual leave
Flexibility Arrangements (To assess different flexible work options)	1	Standard shifts are assigned to you based on the needs of the organisation
	2	You can choose when you start and finish shifts within our daily hours of operation
	3	You can choose to work your weekly hours in fewer longer days (compressed work week)
	4	You can choose to work from 3 hours to a full week, we will work around your weekly schedule. Move hours across weeks for the same total pay or earn less for fewer hours worked.
Organisational Support (To address burnout and mental health barriers identified in FGDs)	1	Employee Assistance Program: Get free confidential counselling sessions to support you and your family manage personal and work-related stress.
	2	You can share the care of your clients with a 'work-buddy' and support each other with tasks and work-related stress.
	3	Along with your supervisor, you can choose a senior mentor for confidential support, guidance and to manage work-related stress.
Salary expectations • 1C, 2C, 3C for casuals only • 1PT, 2PT, 3PT for permanent part-time only • 1FT, 2FT, 3FT for permanent full-time only	1C	$ 47 per hour, estimated at ~$ 46,000 a year (~50% of full-time, hours not guaranteed) + 11.5% superannuation (Youth Worker) $42 per hour, estimated at ~$41,000 a year (~50% of full-time, hours not guaranteed) + 11.5% superannuation (Personal Care Worker)
	2C	$51 per hour, estimated at ~$51,000 a year (~50% of full-time, hours not guaranteed) + 11.5% superannuation (Youth Worker) $46 per hour, estimated at ~$45,000 a year (~50% of full-time, hours not guaranteed) + 11.5% superannuation (Personal Care Worker)

	3C	$56 per hour, estimated at ~$55,000 a year (~50% of full-time, hours not guaranteed) + 11.5% superannuation (Youth Worker) $50 per hour, estimated at ~$50,000 a year (~50% of full-time, hours not guaranteed) + 11.5% superannuation (Personal Care Worker)
	1PT	$37 per hour, equivalent to $37,000 a year (50% of a full-time salary) + 11.5% superannuation (Youth Worker) $33 per hour, equivalent to $33,000 a year (50% of a full-time salary) + 11.5% superannuation (Personal Care Worker)
	2PT	$41 per hour, equivalent to $41,000 a year (50% of a full-time salary) + 11.5% superannuation (Youth Worker) $37 per hour, equivalent to $36,000 a year (50% of a full-time salary) + 11.5% superannuation (Personal Care Worker)
	3PT	$45 per hour, equivalent to $44,000 a year (50% of a full-time salary) + 11.5% superannuation (Youth Worker) $40 per hour, equivalent to $40,000 a year (50% of a full-time salary) + 11.5% superannuation (Personal Care Worker)
	1FT	$37 per hour, equivalent to $74,000 a year (full-time salary) + 11.5% superannuation (Youth Worker) $33 per hour, equivalent to $66,000 a year (full-time salary) + 11.5% superannuation (Personal Care Worker)
	2FT	$41 per hour, equivalent to $82,000 a year (full-time salary) + 11.5% superannuation (Youth Worker) $37 per hour, equivalent to $72,000 a year (full-time salary) + 11.5% superannuation (Personal Care Worker)
	3FT	$45 per hour, equivalent to $88,000 a year (full-time salary) + 11.5% superannuation (Youth Worker)

		$40 per hour, equivalent to $80,000 a year (full-time salary) + 11.5% superannuation (Personal Care Worker)
Opportunities for development (To assess value in career development)	1	Grow your skills and progress your career with opportunities across the organisation
	2	We offer paid professional development and training to support your career progression

Table A2. Full matrix of attributes and levels that respondents could see in the discrete choice survey experiment
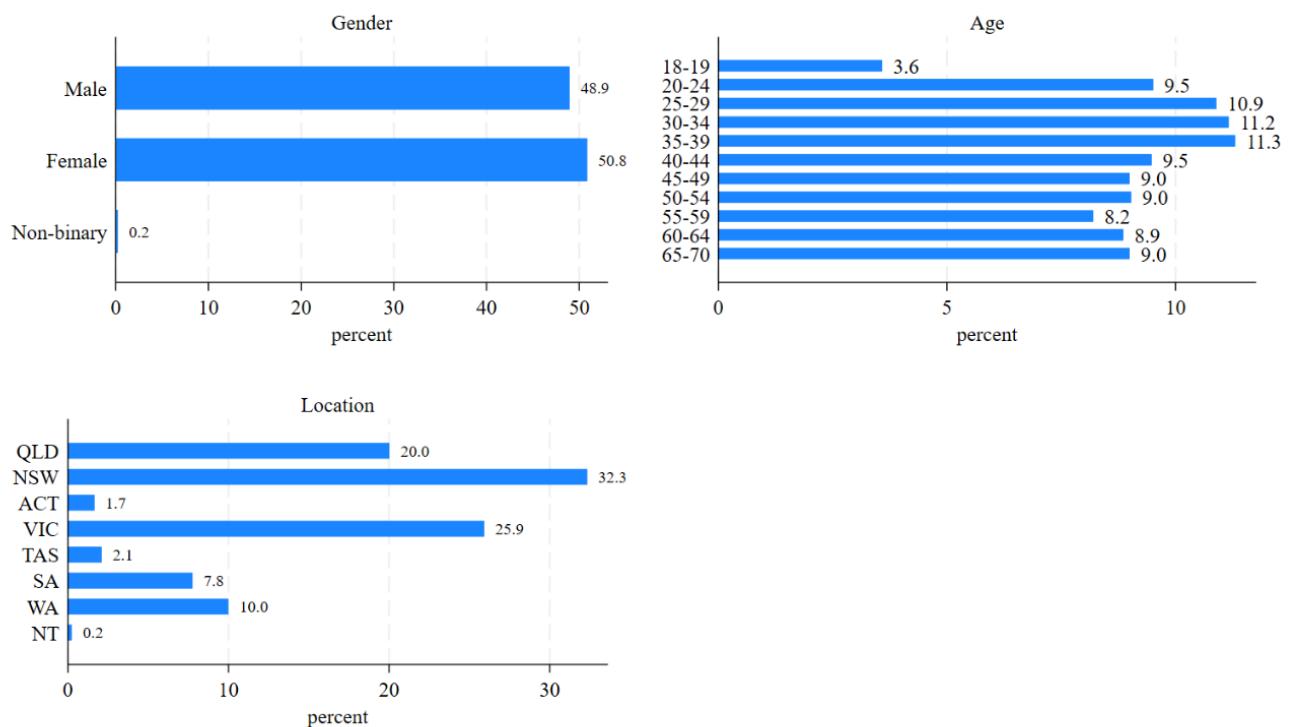
Figure A1. Descriptive statistics of discrete choice survey experiment participants

Note: N=2,901 for the variable 'Gender' due to 1 respondent who indicated 'prefer not to say'. For all other variables N=2,902.

Below you will be asked to **choose between 6 pairs of jobs** as **personal aged care worker.**

This position gives you a chance to **build relationships with our elders** and **make a difference in their life with your daily work**. It typically involves **supporting the elderly client living in a residential setting** with:

- Social and recreational activities
- Assistance with conducting activities of daily life (e.g., walking, eating, dressing/undressing, personal hygiene)
- Emotional, social and spiritual support

Please reply assuming that the jobs indicated are all **within reach from where you live**, that there are **no barriers in terms of the qualifications required** for this job, that **any arrangements mentioned are realistic** and that **there are no other arrangements besides those explicitly specified**.

Figure A2. Job description for personal care worker in the discrete choice experiment

Below you will be asked to **choose between 6 pairs of jobs** as **youth worker.**

This position gives you a chance to be a **mentor** and **positive role model for young people**. It typically involves **supporting vulnerable youth in residential settings** in:

- Purposeful activities aimed at developing life skills and self-worth
- De-escalating emotions and behaviour through trauma-informed approaches
- Preserving healthy relationships with peers, carers and family of origin

Please reply assuming that the jobs indicated are all **within reach from where you live**, that there are **no barriers in terms of the qualifications required** for this job, that **any arrangements mentioned are realistic** and that **there are no other arrangements besides those explicitly specified**.

Figure A3. Job description for youth worker in the discrete choice experiment

Doing work that is meaningful

Male 18-24	25.4
Male 25-39	37.5
Male 40-54	39.2
Male 55-70	35.0
Female 18-24	38.2
Female 25-39	40.7
Female 40-54	38.5
Female 55-70	37.2

Providing support to those that are vulnerable within our community

Male 18-24	26.8
Male 25-39	31.6
Male 40-54	25.2
Male 55-70	36.0
Female 18-24	41.8
Female 25-39	39.7
Female 40-54	39.5
Female 55-70	38.8

Making a difference in someone's life

Male 18-24	48.8
Male 25-39	42.6
Male 40-54	44.8
Male 55-70	46.0
Female 18-24	55.3
Female 25-39	51.0
Female 40-54	51.6
Female 55-70	53.7

Building relationships with elderly people

Male 18-24	39.7
Male 25-39	28.0
Male 40-54	27.0
Male 55-70	25.7
Female 18-24	29.4
Female 25-39	30.3
Female 40-54	28.8
Female 55-70	28.9

Figure A4. Responses to "What are the top three factors that attract you to a job as a personal aged care worker?" By gender and age (continuing in Figure A5)

Being part of a growing and secure industry

Male 18-24	37.3
Male 25-39	20.7
Male 40-54	17.6
Male 55-70	8.0
Female 18-24	17.1
Female 25-39	15.3
Female 40-54	14.4
Female 55-70	7.2

Flexibility of work hours

Male 18-24	38.3
Male 25-39	35.7
Male 40-54	42.7
Male 55-70	29.3
Female 18-24	35.3
Female 25-39	38.1
Female 40-54	34.7
Female 55-70	28.7

It is a job that provides good pay

Male 18-24	29.2
Male 25-39	26.4
Male 40-54	23.7
Male 55-70	14.5
Female 18-24	28.8
Female 25-39	23.7
Female 40-54	16.4
Female 55-70	11.1

Nothing attracts me to this job

Male 18-24	10.0
Male 25-39	11.0
Male 40-54	16.5
Male 55-70	27.0
Female 18-24	10.6
Female 25-39	13.3
Female 40-54	18.4
Female 55-70	26.6

Figure A5. Responses to "What are the top three factors that attract you to a job as a personal aged care worker?" By gender and age

Doing work that is meaningful

	Value
Male 18-24	28.2
Male 25-39	33.9
Male 40-54	32.6
Male 55-70	30.9
Female 18-24	29.4
Female 25-39	35.5
Female 40-54	37.2
Female 55-70	28.7

Providing support to those that are vulnerable within our community

	Value
Male 18-24	20.1
Male 25-39	21.9
Male 40-54	18.3
Male 55-70	18.6
Female 18-24	30.0
Female 25-39	30.1
Female 40-54	29.5
Female 55-70	25.5

Making a difference in someone's life

	Value
Male 18-24	35.4
Male 25-39	40.0
Male 40-54	41.0
Male 55-70	39.2
Female 18-24	52.4
Female 25-39	46.8
Female 40-54	48.4
Female 55-70	44.5

*Figure A6. Responses to "What are the top three factors that attract you to a job as a youth worker?" By gender and age (continuing in Figure A7)*

Mentoring young people

	Value
Male 18-24	45.0
Male 25-39	40.2
Male 40-54	41.7
Male 55-70	34.4
Female 18-24	40.0
Female 25-39	44.0
Female 40-54	39.2
Female 55-70	32.1

Being a role model

|	Value
Male 18-24	45.0
Male 25-39	31.4
Male 40-54	34.9
Male 55-70	22.8
Female 18-24	45.9
Female 25-39	30.9
Female 40-54	25.3
Female 55-70	21.2

Figure A7. Responses to "What are the top three factors that attract you to a job as a youth worker?" By gender and age (continuing in Figure A8)

Being part of a growing and secure industry

Male 18-24	27.8
Male 25-39	18.3
Male 40-54	15.5
Male 55-70	6.1
Female 18-24	12.4
Female 25-39	12.2
Female 40-54	6.9
Female 55-70	3.8

Flexibility of work hours

Male 18-24	30.1
Male 25-39	25.2
Male 40-54	29.5
Male 55-70	19.6
Female 18-24	20.6
Female 25-39	26.8
Female 40-54	23.8
Female 55-70	15.1

It is a job that provides good pay

Male 18-24	19.1
Male 25-39	17.8
Male 40-54	16.8
Male 55-70	6.4
Female 18-24	17.1
Female 25-39	13.9
Female 40-54	12.2
Female 55-70	5.4

Nothing attracts me to this job

Male 18-24	10.5
Male 25-39	11.6
Male 40-54	14.8
Male 55-70	35.4
Female 18-24	12.4
Female 25-39	13.1
Female 40-54	19.6
Female 55-70	38.4

*Figure A8. Responses to "What are the top three factors that attract you to a job as a youth worker?" By gender and age*

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