

Overarching indicators (0–19 years)



This section presents data on six indicator topics for the broad age group 0–19 years. The indicators included here represent issues that affect children and young people of all ages in the areas of health (mortality and disability), family socioeconomic status (jobless families and family economic situation), and safety/social breakdown (homelessness, and child abuse and neglect).

The following table shows how children and young people fare against various measures of the six indicator topics. Measures and trends are reported for the broad age group as well as each of the specific age groups on which this report is focused. Where time series data has been referred to on an indicator page, the direction of the recent trend is shown in the table.

Indicator	Measure	Value	Trend
Mortality	Deaths per 100,000 persons aged 1–19 years	20	✓
	Deaths per 100,000 persons aged 1–4 years	21	✓
	Deaths per 100,000 persons aged 5–12 years	10	✓
	Deaths per 100,000 persons aged 13–19 years	31	✓
Disability	Percentage of 0–19 year olds with disability	8	✗
	Percentage of 0–4 year olds with disability	4	..
	Percentage of 5–12 year olds with disability	10	..
	Percentage of 13–19 year olds with disability	10	..
	Percentage of 0–19 year olds with severe or profound core activity limitation	4	✗
	Percentage of 0–4 year olds with severe or profound core activity limitation	3	..
	Percentage of 5–12 year olds with severe or profound core activity limitation	5	..
	Percentage of 13–19 year olds with severe or profound core activity limitation	3	..
Jobless families	Percentage of children aged 0–14 years living in jobless families	15	✓
	Percentage of children aged 0–4 years living in jobless families	16	✓
	Percentage of children aged 5–12 years living in jobless families	15	✓
Family economic situation	Mean equivalised disposable household income of all low-income households with children aged 0–19 years	\$346	✓
	... where eldest child was aged 0–4 years	\$353	✓
	... where eldest child was aged 5–12 years	\$347	✓
	... where eldest child was aged 13–19 years	\$342	✓
Child abuse and neglect	Child protection substantiations per 1,000 children aged 0–17 years	7	?
	Child protection substantiations per 1,000 infants aged less than 1 year	17	?
	Child protection substantiations per 1,000 1–4 year olds	8	?
	Child protection substantiations per 1,000 5–12 year olds	6	?
	Child protection substantiations per 1,000 13–17 year olds	4	?
Homelessness	Average daily number of 0–19 year olds with unmet requests for SAAP accommodation	415	..
	Average daily number of children aged 0–11 years with unmet requests for SAAP accommodation	221	..
	Average daily number of young people aged 12–19 years with unmet requests for SAAP accommodation	167	..

Key: ✓ = favourable trend; ✗ = unfavourable trend; .. = no trend data presented; ? = Rate has been increasing, but as data are reflection of Departmental Child Protection activity it is unknown whether an increase indicates an unfavourable or favourable trend.

► Mortality

Measure: Number of deaths of children and youth aged 1–19 years, per 100,000 population

Mortality rates and causes of mortality are key indicators of the health of a population and, as many deaths are potentially preventable, provide crucial information for public health policy and planning. They not only reflect circumstances around the time of death, but also provide insight into changes in social and environmental conditions, medical interventions, lifestyles and trends in underlying risk factors.

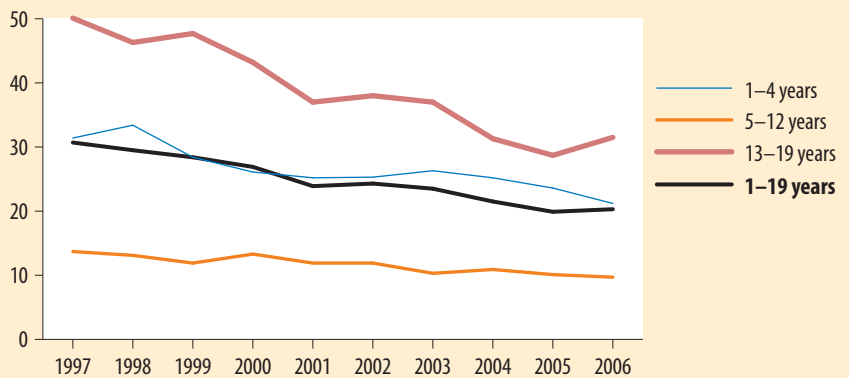
High rates of child mortality are strongly associated with social and economic disadvantage, including maternal age, health and parity, exposure to environmental contaminants, nutrition, risk of injury, personal preventive measures and access to medical treatment.^{5,6,7,8} For older children and adolescents these factors are exacerbated by the increased independence that comes with adolescence, the period where new skills are developed, such as driving and job skills, and increased exposure to alcohol and other drugs. Injuries from traffic accidents, psychological problems and the harmful effects of alcohol and other drug use are prominent hazards for young people.

As more than half of all deaths before the age of 20 occur in the first year of life, and the causes of mortality in infants are quite different from mortality in children and adolescents, infant mortality is addressed in a separate indicator (p.14), and is not included under this indicator.

COAG has committed to halving the mortality gap for Indigenous children under five within a decade.⁹ Improvements in Indigenous child mortality require better access to antenatal care, teenage reproductive and sexual health services, child and maternal health services, and integrated child and family services.¹⁰

- ▶ 1,055 Australians aged 1–19 years died in 2006—a rate of 20 per 100,000 population. Indigenous children and youth were twice as likely to die between the ages of 1–19 as their non-Indigenous counterparts.
- ▶ Among people aged 1–19 years, mortality rates were highest for teenagers.
- ▶ Rates fell by around one-third (1997–2006), and to a greater extent among males (38%) than females (25%).

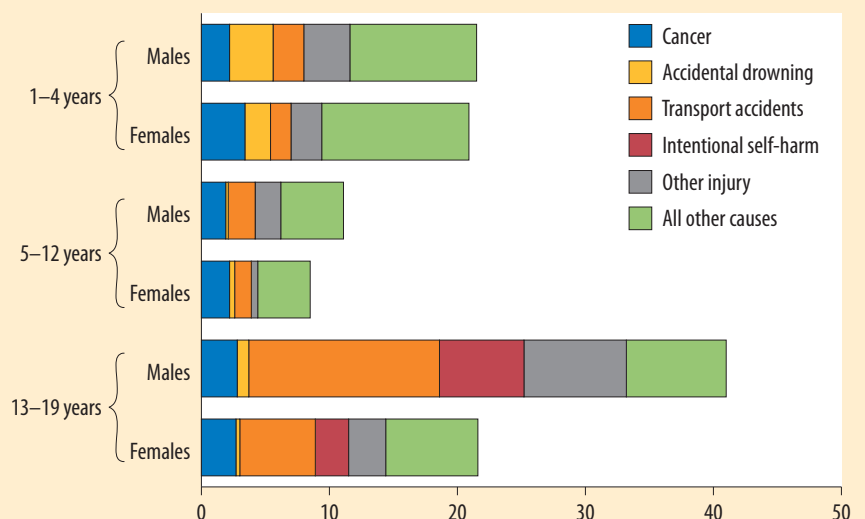
Deaths per 100,000 population



Source: AIHW National Mortality Database.

- ▶ The leading specific causes of death were cancers and accidental drowning (each at a rate of 3 per 100,000) for children aged 1–4 years; cancers and transport accidents for children aged 5–12 years (each 2 per 100,000); and transport accidents and intentional self-harm for teenagers (11 and 5 per 100,000).
- ▶ Mortality rates were twice as high for teenage males as females, largely due to higher mortality from transport accidents, intentional self-harm and other injuries.

Leading causes of mortality, 2006 (deaths per 100,000 population)



Source: AIHW National Mortality Database.

Key messages

- ▶ Australia's under-5 mortality rate is in the best fifth of the world, but the worst third of the OECD (24th out of 30 countries).¹¹
- ▶ Overall mortality rates are decreasing, but among 1–19 year olds the Indigenous rate is still twice as high as the non-Indigenous rate.
- ▶ Many of the leading causes of death in children and young people are potentially preventable: half of all deaths of 1–19 year olds were caused by injuries, and half of these were transport accidents.

Disability

Measure: Percentage of children and young people with disability, severe or profound core activity limitations, or schooling restrictions

Disability is a characteristic that goes beyond the presence or absence of particular health conditions; it relates to the way in which an individual functions in society and is strongly influenced by environmental factors. Disability is measured in terms of impairments, activity limitations and participation restrictions, covering the range of activities that people perform in everyday life. People who sometimes or always need assistance with one or more of the core activities of daily living (self-care, mobility or communication tasks) are referred to as having severe or profound core activity limitation.

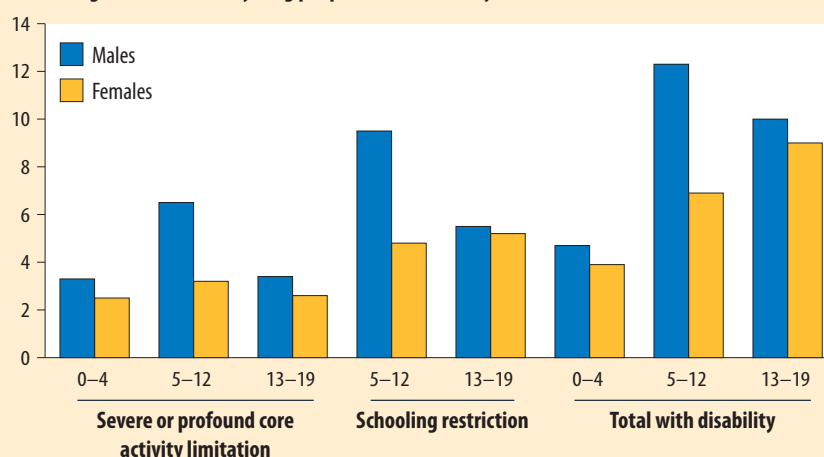
People with disability may also experience restrictions in other aspects of their lives. For example, children and adolescents with disability may experience schooling restrictions that result in needing special assistance, arrangements or equipment at school, attending special classes or a special school, needing frequent time off school or having difficulty with aspects of schoolwork or the school environment.

Overall, people with disability achieve lower educational qualifications than people without disability, and often have poorer labour market outcomes.¹² However, because the experience of disability stems from the interaction of individual and external factors, it is possible to reduce the impact of disability on the person's participation in all aspects of life through early intervention, and environmental and societal modifications.

The new National Disability Reform Agenda aims to place people with disabilities, their families and carers at the centre of services across Australia and to improve the availability, flexibility and consistency of services across all jurisdictions.¹³

- ▶ In 2003, 440,300 young people (8%) aged 0–19 years had a disability, including almost 200,000 (4%) with severe or profound core activity limitations and more than 250,000 (6% of 5–19 year olds) with schooling restrictions.
- ▶ Boys aged 5–12 years were twice as likely as girls to have schooling restrictions or severe or profound core activity limitations.

Percentage of children and young people with a disability, 2003



Note: Children and young people with schooling restrictions may have also had severe or profound core activity limitations.
Source: ABS 2003 Survey of Disability, Ageing and Carers, unpublished data.

- ▶ Almost one in four children with disability had asthma.
- ▶ All children aged 5–12 years with autism had schooling restrictions, and 91% had severe or profound core activity limitations.
- ▶ 77% of children and youth aged 5 years or over with ADHD and 85% with intellectual disability experienced schooling restrictions, and half had severe or profound core activity limitations.

Estimated number of children with disability who had selected health conditions, 2003

	Asthma	ADD/ADHD	Intellectual disability	Autism	All conditions
Severe or profound core activity limitations					
0–4 years	6,900	—	*3,600	n.p.	35,900
5–12 years	23,900	20,900	16,900	15,300	105,100
13–19 years	10,400	11,200	15,700	n.p.	56,400
Schooling restrictions					
5–12 years	35,500	32,500	28,900	16,700	154,500
13–19 years	18,700	15,700	24,400	*3,900	101,200
All with disability					
0–4 years	12,200	—	*3,700	n.p.	53,500
5–12 years	51,200	34,800	31,900	16,700	207,300
13–19 years	37,300	27,900	30,900	n.p.	179,500

ADD/ADHD = Attention Deficit Disorder and Attention Deficit Hyperactivity Disorder; n.p. = not published but included in totals.
* Estimate has a relative standard error of between 25% and 50% and should be interpreted with caution.
Note: Children and young people with schooling restrictions may have also had severe or profound core activity limitations.
Source: ABS 2003 Survey of Disability, Ageing and Carers, unpublished data.

Key messages

- ▶ 8% of Australians aged 0–19 years had a disability in 2003; rates were higher for boys than girls.
- ▶ Reported rates of disability and severe/profound core activity limitations in children aged under 15 years have increased since the 1980s.¹⁴
- ▶ More than 90% of children with autism had severe or profound core activity limitations and all had schooling restrictions.

Jobless families

Measure: The number of children with no co-resident employed parent, as a percentage of all children

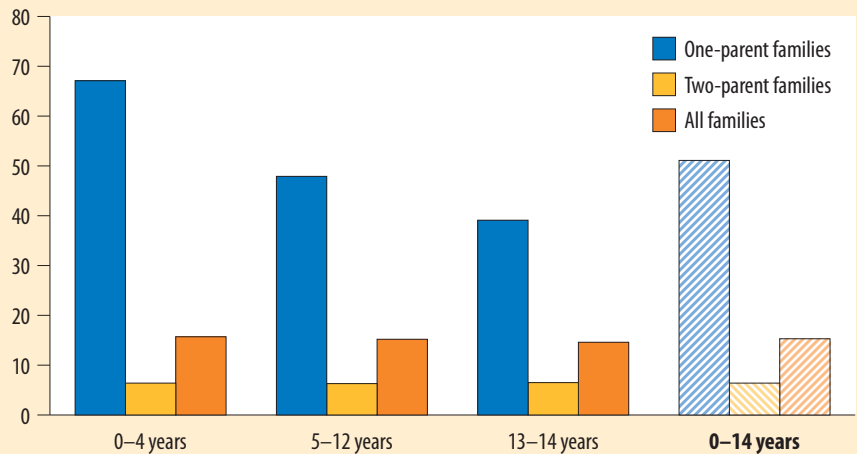
One of the notable results of labour market trends over the past generation has been what is termed 'employment polarisation'. As the unemployment rate of individuals has fallen and an increasing number of families have two working parents, joblessness has become more concentrated within some households.¹⁵ Jobless households are disproportionately likely to be reliant on welfare, have low incomes and experience financial stress, and members of these households report worse physical and mental health and lower life satisfaction than members of households where someone is employed.¹⁶

Studies on the effects of unemployment on other family members have identified relationships between parental joblessness and family conflict, family breakdown and child abuse.¹⁷ Secure employment provides financial stability, self-confidence and social contact for parents, with positive effects flowing onto their children. Paternal employment in particular was associated with adolescent psychological wellbeing, sociability, satisfaction and happiness.¹⁸ Reducing jobless families would not only be a major improvement for society at the time, but could also have positive inter-generational effects, as the likelihood of a young person completing secondary school and finding secure employment is affected by their parent's socioeconomic status.¹⁹

The Australian Government has identified addressing the incidence and needs of jobless families with children as an early priority for Australia's Social Inclusion Agenda.²⁰

- ▶ 15% of all children aged 0–14 years (543,600) lived in jobless families in 2006.
- ▶ Half (51%) of all children in one-parent families did not live with an employed parent, compared with 6% in two-parent families.

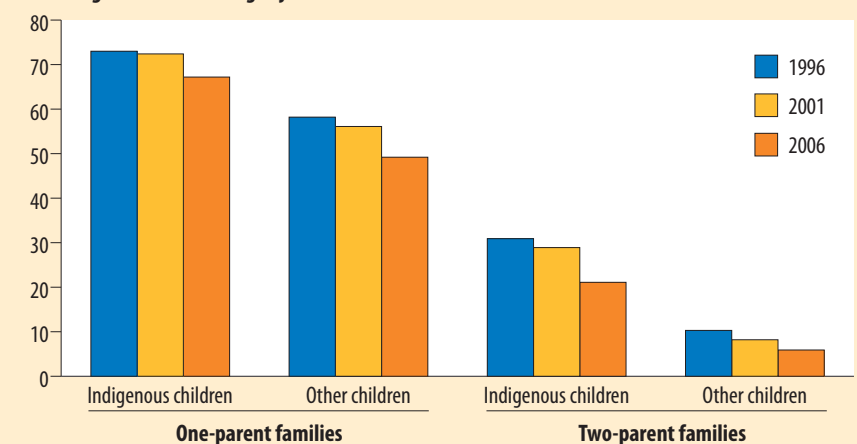
Percentage of children living in jobless families, 2006



Note: Based on the employment status of co-resident parents.
Source: ABS 2006 Census, unpublished data.

- ▶ 42% of Indigenous children (67,000) lived in jobless families—the rate was 40% higher and 3.6 times as high as other children in one- and two-parent families respectively.
- ▶ The proportion of Indigenous and other children without an employed parent decreased for both family types between 1996 and 2006.

Percentage of children living in jobless families



Note: Based on the employment status of co-resident parents.
Source: ABS 1996, 2001 and 2006 Census, unpublished data.

Key messages

- ▶ Australia had the second highest percentage of working-age jobless families out of 24 OECD countries in 2000,²¹ largely due to the relatively high rate of one-parent households in Australia and the high rate of joblessness among this group.²²
- ▶ Indigenous children are 3 times as likely as other children to live in jobless families.
- ▶ The proportion of children living in jobless families has decreased over the last decade, but half of all children in one-parent families still live with a jobless parent.

Family economic situation

Measure: Mean equivalised disposable household income of low-income households with dependent children aged 0–19 years

Children living in families without regular adequate income are at increased risk of poor health and educational outcomes, both in the short and long-term.^{23,24} Living on a low income can affect a child's nutrition, access to medical care, environmental safety, quality and stability of their care, and the provision of appropriate housing, heating and clothing. A primary concern for economically disadvantaged children is being excluded from activities that other children take for granted.

Income disadvantage is also a relative concept, as some Australian families may have higher absolute incomes than people in the past, or in other countries, and still experience relative income disadvantage.

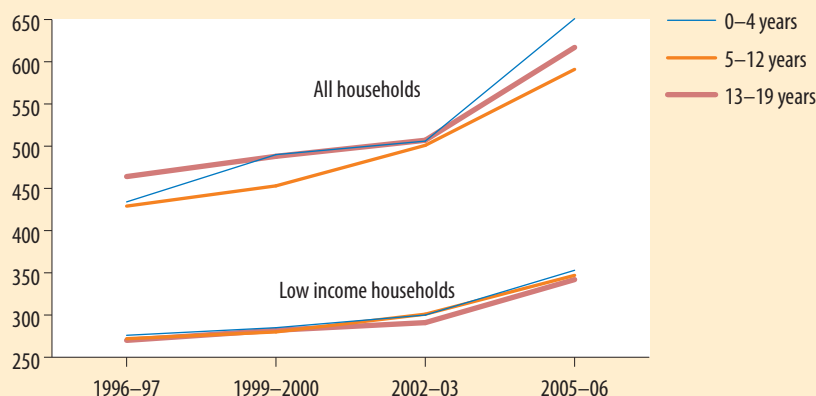
Equivalised disposable household income is the after-tax total of all income sources, adjusted for the size and composition of the household. A household's equivalised income shows how much income a person living alone would need to enjoy the same level of economic wellbeing as a household comprising more than one person.²⁵

The average real equivalised disposable household income for households with children aged 0–12 years in the 2nd and 3rd income deciles has been endorsed by Health, Community and Disability Services Ministers as a Headline Indicator for children's health, development and wellbeing.³

The Australian Government has identified addressing the incidence and needs of jobless families with children and secure employment as early priorities for Australia's Social Inclusion Agenda.²⁰

- ▶ Mean equivalised income of low-income households with dependent children (\$346 per week in 2005–06) was \$269 less than the average for all households with dependent children aged 0–19 years.
- ▶ Relative income growth for low-income households with dependent children was lower than for all households with dependent children over last decade (27% vs. 37%).

CPI-adjusted mean equivalised income by age of eldest child (\$ per week)



Notes

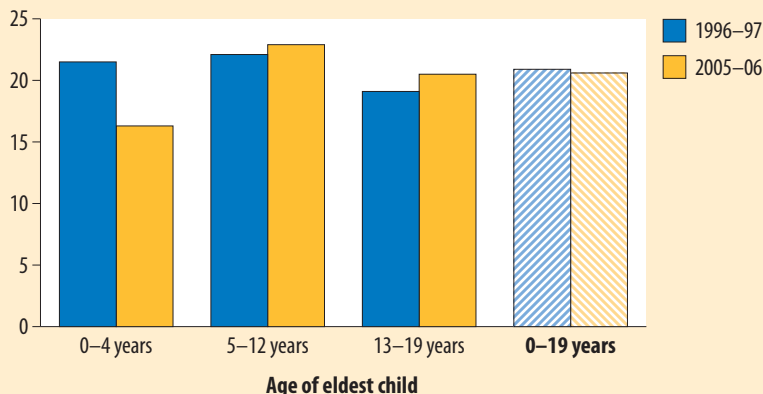
1. In 2005–06 dollars, adjusted using changes in the Consumer Price Index.

2. Persons in low-income households are those in the 2nd and 3rd income deciles after being ranked by their equivalised disposable household income.

Source: ABS Surveys of Income and Housing, unpublished data.

- ▶ 20% of all households with dependent children under 20 years were low-income households. Relatively fewer households whose eldest child was aged 0–4 years were low-income households (16%) compared with households with older children.
- ▶ Households with the eldest child aged 0–4 years were less likely to be low-income in 2005–06 than in 1996–97, but there was no significant change for households with older children and dependent youth.

Percentage of households with dependent children and youth that were low-income



Note: Persons in low-income households are those in the 2nd and 3rd income deciles after being ranked by their equivalised disposable household income.

Source: ABS Surveys of Income and Housing, unpublished data.

Key messages

- ▶ The mean equivalised income of low-income households with dependent children aged 0–19 years (more than half a million households) was \$346 per week in 2005–06.
- ▶ The income of low-income households with children and dependent youth has not grown as fast as that of all households with children and youth generally.
- ▶ Australia ranked 13th of 24 OECD countries in terms of the percentage of children living in relative income poverty in 1999.²¹

▶ Child abuse and neglect

Measure: Number of children aged 0–17 years who were the subject of a child protection substantiation in a given year, per 1,000 population

‘Children everywhere have the right to survival... to protection from harmful influences, abuse and exploitation.’²⁶

There is a demonstrated relationship between the health and wellbeing of children and the environment in which they grow up. Children who are raised in supportive, nurturing environments are more likely to have better social, behavioural and health outcomes.^{27,28} The reverse is also true: children who have been abused or neglected often have poor developmental outcomes, such as lower social competence, poor school performance and a higher likelihood of criminal offending later in life.

In Australia, statutory child protection systems are the responsibility of the state and territory governments. Child protection substantiation refers to the determination, after investigation, that a child has been, is being or is likely to be abused or neglected or otherwise harmed. Child abuse may include physical, sexual or emotional abuse or neglect. Due to variation in child protection legislation, policy and practice between jurisdictions and over time, the comparison of substantiation rates across time and across jurisdictions is problematic.

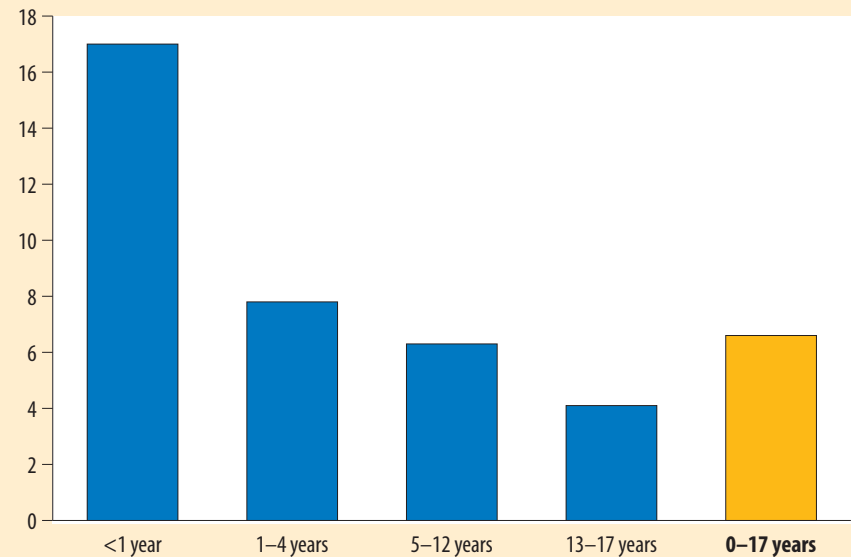
Child abuse and neglect has been endorsed by Health, Community and Disability Services Ministers as a Headline Indicator for children’s health, development and wellbeing.³

The Australian Government has committed to developing a National Child Protection Framework which will focus on preventing abuse through early intervention and better integration of family services.²⁹ COAG has also committed to identify joint reforms and implementation timetables for basic protective security from violence for Indigenous parents and children.³⁰

▶ 32,585 children aged 0–17 years were subject to child protection substantiations for notifications received during 2006–07—a rate of 7 per 1,000 population.

▶ Infants had the highest substantiation rate—twice that of other age groups.

Child protection substantiations, 2006–07 (per 1,000 population)

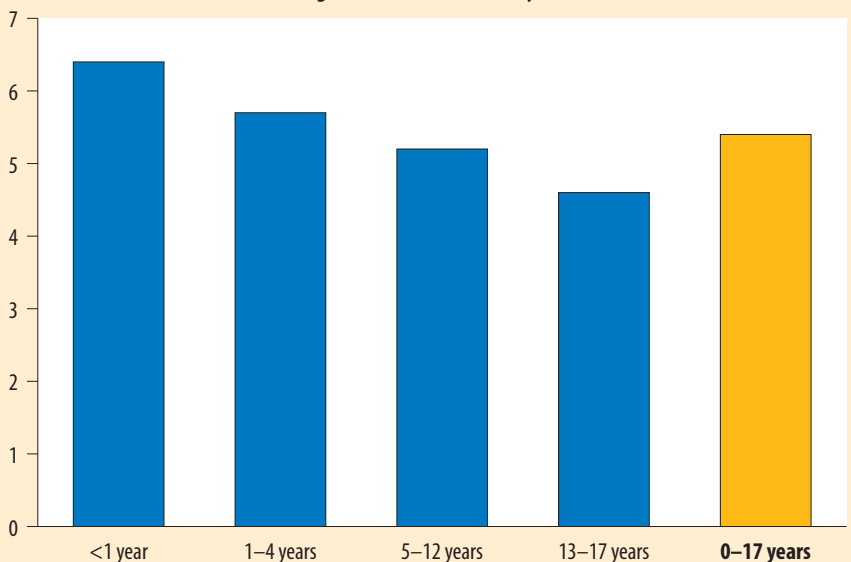


Source: AIHW Child Protection Database.

▶ Child protection substantiation rate for Indigenous children was 5 times that of other children.

▶ The gap between substantiation rates for Indigenous and other children was greatest for infants, and declined with age.

Rate ratio of substantiations for Indigenous to other children/youth, 2006–07



Source: AIHW Child Protection Database.

Key messages

- ▶ Indigenous children are over-represented in child protection substantiations.
- ▶ Substantiation rates are highest for infants, due partly to an increased focus on early intervention.
- ▶ At the state and territory level, substantiation rates are not directly comparable due to differences in jurisdictional child protection policy, legislation and practice.

Homelessness

Measure: Average daily number of 0–19 year olds with unmet requests for accommodation from the Supported Accommodation Assistance Program (SAAP)

Children who are homeless, whether as part of a family unit or on their own, experience significant negative social and health consequences. Homelessness is associated with increased prevalence of a number of health conditions including gastroenteritis, bronchitis, asthma, depression and schizophrenia.³¹ Young people who become homeless face increased risk of exposure to physical and sexual assault, poor diet and inadequate shelter, and are more likely than other youth to engage in risky behaviours such as smoking, drug and alcohol abuse, and unsafe sex.³²

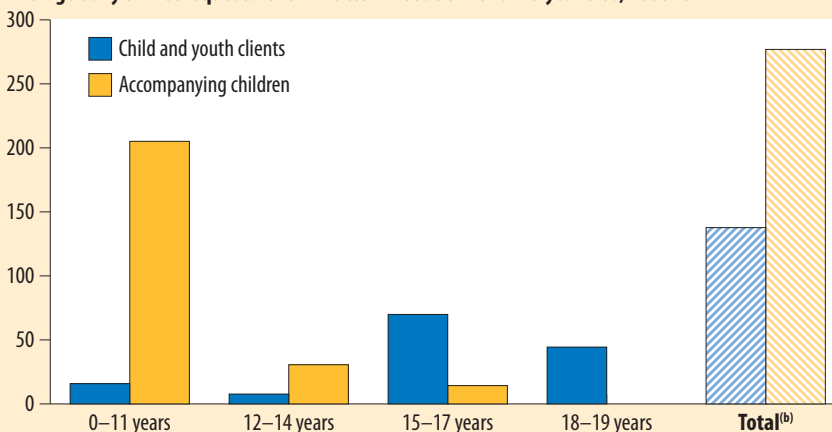
The factors contributing to homelessness are complex, and may be the result of domestic violence, family or relationship breakdown, poverty or financial crisis, mental illness or lack of affordable housing. Responding to homelessness requires a multi-sectoral approach.

The major government response to homeless people or people at risk of homelessness is SAAP. SAAP provides a range of assistance including emergency accommodation, meals and showers, counselling and advocacy. Children and young people may access SAAP services individually as a SAAP client, or they may accompany a parent or guardian who is a SAAP client.

The Australian government has identified addressing the incidence of homelessness as an early priority for Australia's social inclusion agenda. As part of the new National Housing Affordability Agreement COAG has committed to service delivery improvements to reduce homelessness.¹⁰ The Australian Government will also be releasing a White Paper (policy paper) on homelessness in late 2008 articulating the future policy approach for reducing homelessness in Australia.

- ▶ 24,900 clients aged under 20 years and 69,100 accompanying children used SAAP services in 2006–07.³³
- ▶ On average, 415 people aged under 20 had a valid unmet accommodation request per day; two-thirds were accompanying a parent/guardian and half required accommodation within 24 hours.

Average daily unmet requests for SAAP accommodation for 0–19 year olds, 2006–07



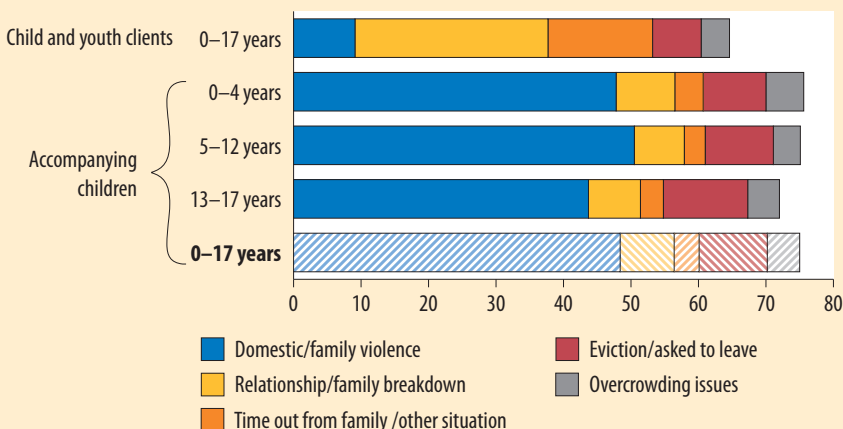
(a) Based on the collection periods 2–8 August 2006 and 16–22 May 2007; excludes invalid requests.

(b) Includes accompanying children of unknown age.

Source: AIHW SAAP Demand for Accommodation Collection; AIHW 2008.³⁴

- ▶ Domestic/family violence was the most common reason for children accompanying a parent/guardian to seek SAAP assistance (around 50% of clients).
- ▶ Relationship/family breakdown was the most common reason for seeking SAAP assistance for clients aged less than 17 years (29%), followed by time out from family/other situation (16%).

Main reasons for seeking SAAP assistance, 2006–07 (per cent)



Note: Reliable data not available for specific age groups for child and youth clients less than 17 years.

Source: AIHW SAAP National Data Collection, unpublished data.

Key messages

- ▶ More than 400 young people aged under 20 years have a valid unmet request for SAAP accommodation on an average day.
- ▶ Domestic violence and family breakdown are major drivers of children and families seeking SAAP assistance.
- ▶ Indigenous accompanying children are over-represented in SAAP and account for over a quarter of all accompanying children under 18 years (77 per 1,000 compared to 14).³⁵
- ▶ 34,100 children and adolescents were homeless on Census night in 2006 (one-third of the homeless population). Children accounted for a higher proportion of the homeless population in 2006 than in 2001 (22% increase), while the proportion of adolescents has declined.³⁶