Early childhood indicators of how young Aboriginal children are faring

The percentage of Aboriginal children seen at the 3.5 year key ages and stages visit in the Northern Metropolitan region was 35.9 per cent, compared to 40.3 per cent across Victoria.

36.2 per cent of Aboriginal young children in Darebin (C) were re-reported to child protection services within 12 months of a notification, compared to 40.9 per cent in Victoria.

The rate of child protection substantiations in Darebin (C) was 122.3 per 1000 Aboriginal children aged 0 to 8 years, compared to a rate of 68.2 for Aboriginal young children across Victoria.

90.0 per cent of children in Darebin (C) were fully immunised at age 1, 77.8 per cent were fully immunised at age 2 and 90.9 per cent were fully immunised at age 5.

In 2008, there were 34 Aboriginal children enrolled in four year old kindergarten in Darebin (C).

Over the three year period from 2006 to 2008, 73.6 per cent of Aboriginal students enrolled in government schools in Darebin (C) were achieving a reading accuracy score of 90% or more on Level 1 texts in Prep, 93.6 per cent of Aboriginal Year 1 students were reading Level 5 texts with 90-100% accuracy and 87.3 per cent of Aboriginal Year 2 students were reading Level 15 texts with over 90% accuracy.

Over the three year period from 2005-06 to 2007-08, the rate of asthma separations for Aboriginal children aged 0 to 8 years in Darebin (C) was 8.8 per 1000 Aboriginal children aged 0 to 8 years. The rate of hospital separations for asthma across Victoria during this period was 7.7 per 1000 Aboriginal young children.

Over the three year period from 2004-05 to 2006-07, the teenage birth rate in Aboriginal women in Darebin (C) was near to 6 times higher than that of non-Aboriginal women.

Note: Due to the small population of Aboriginal young children and their families in the local area, large percentage variations may be the result of minor changes in the actual numbers.

Data for the broader region which contains the local government area may be supplemented where there are quality or confidentiality issues with the local area data.