The State Of Victoria's Children Report

A focus on health and wellbeing

2017

INFOGRAPHIC SUMMARY



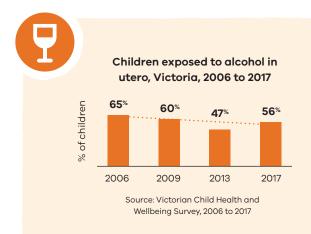
Education and Training

A healthy start



A healthy start is proven to have long-term impacts on health and wellbeing, with investments in the early years delivering better results at a lower cost in the long term.

Good maternal health during pregnancy is a critical first step. In Victoria, we have seen a reduction in mothers engaging in risky behaviour during pregnancy and improvements in perinatal mortality rates for Aboriginal children.

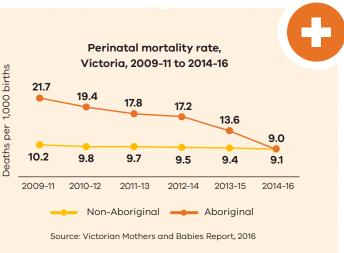


Exposure to alcohol and tobacco can increase the risk of complications during pregnancy.

The proportion of Victorian children from the least disadvantaged areas that are exposed to alcohol in utero (61%) is higher than the Victorian average. Fewer mothers are reporting drinking during the later stages of pregnancy – down from 34% in 2006 to 14% in 2017.

Perinatal mortality* is a key measure of maternal health, as it can reflect the quality of health services and exposure to risk.

Victoria's overall perinatal mortality rate is decreasing. Since 2010-12, the rate among Aboriginal children has more than halved.



*The perinatal mortality rate measures the rate of stillbirths and neonatal deaths (death of an infant in the first 28 days after birth).



Engagement with key services can contribute to better health and educational outcomes later in life. Victoria enjoys high vaccination rates and strong participation in key early childhood services, with particular improvements seen among Aboriginal children.



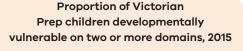
Source: Australian Immunisation Record, 2018

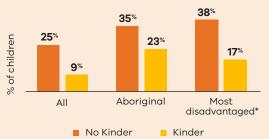
Vaccinations protect children against dangerous diseases, with a high uptake required in order to be most effective.

While Victorian vaccination rates at 12, 24 and 60 months of age are high, statewide coverage at 24 months has fallen from 94% in 2008 to 91% in 2017 while the other age groups have increased.

Children's participation in quality early childhood education is associated with reduced developmental vulnerability and improved educational outcomes.

While kindergarten participation amongst Victorian children from disadvantaged areas and Aboriginal backgrounds is high, the lower quality of services in disadvantaged areas contributes to worse developmental outcomes.





Source: Australian Early Development Census, 2015 & DET analysis *SEIFA-IRSD used as measure of disadvantage



Families and family environment



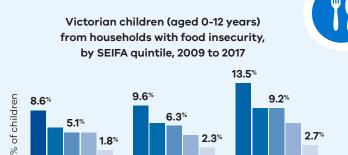
The financial security of families has a significant influence on the family environment and children's wellbeing. In 2016, more than a third of Victorian children from single parent families lived in jobless households, compared to only 5% of children from couple parent families.

2009

Q1

Food insecurity* can cause distress and often causes families to rely on unhealthy low-cost foods which has ramifications for children's health.

While the proportion of Victorian children experiencing food insecurity increased from 6% in 2006 to 7% in 2017, the increase has been larger amongst children in disadvantaged areas.



Most disadvantaged \longleftrightarrow Least disadvantaged

Q3

Q2

2013

Q4

2017

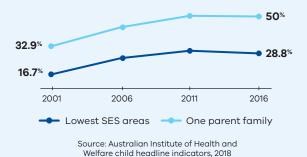
Q5

Source: Victorian Child Health and Wellbeing Survey, 2009-2017 *Food insecurity is defined here as running out of food and not being able to afford more.

Housing stress* places significant pressure on family budgets and makes it difficult to provide for children's other needs.

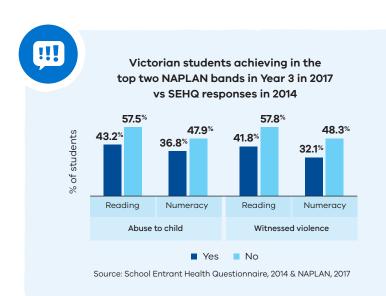
From 2001 to 2016, the proportion of Victorian children (aged 0-14 years) in households experiencing housing stress increased from 13% to 21%.

*Housing stress is defined as households spending more than 30% of their gross income on housing. Proportion of Victorian children (aged 0-14 years) living in households with housing stress, 2001 to 2016





While four in five Victorian families enjoy good family functioning, for the families that don't, the impacts on children can be grave. Family violence, child abuse and neglect, can have lasting impacts on children's health and academic outcomes.

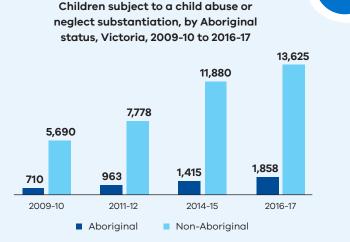


Exposure to family violence can have devastating impacts on children and young people, and is associated with lower academic achievement.

Instances of family violence in Victoria have risen to more than 76,000 in 2016-17 with a child present in nearly 32% of cases.

Child abuse is debilitating for children and young people, with severe longterm consequences on health and wellbeing.

Substantiations of child abuse or neglect have risen sharply, with these children more likely to face challenges like homelessness, mental health issues and family violence.



Source: Australian Institute of Health and Welfare, 2009-2017



Communities play a significant role in the health and wellbeing of children, providing them with the strength, support and resources that they need, as well as a positive environment that enables children to flourish.

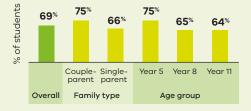


A supportive community for children, with trusted adults and support in times of need, contributes to a happy and healthy childhood. In 2017, around 94% of Victorian families reported they had access to support in times of need.

Having a trusted adult is an important protective factor for children, providing a role model and reducing the likelihood of them engaging in risky behaviours.

While most school aged children in Victoria reported having a trusted adult in 2016, older students and those from single-parent families were less likely to do so.

Victorian students (Years 5, 8 & 11) with a trusted adult, 2016



Source: Victorian Student Health and Wellbeing Survey, 2016

Providing the physical infrastructure that children need is another vital ingredient to an inclusive and enabling community. In 2017, almost nine in ten Victorian families reported having good access to parks and playgrounds.

When children have good access to parks and playgrounds, it offers them better opportunities for physical activity.

Although most Victorian families do have parks and playgrounds close by, those from the most disadvantaged backgrounds are much less likely to have good access than those from more affluent families.

Victorian families who believe their children (aged 0-12 years) have good access to parks and playgrounds, 2017

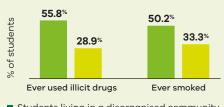


Source: Victorian Child Health and Wellbeing Survey, 2017



When children enjoy a safe living environment, they are more likely to engage and participate in social and academic activities. In 2017, more than nine in ten Victorian families believed that the communities they lived in were safe.

Victorian students (Years 5, 8 & 11) living in disorganised* communities who have ever smoked or used illicit drugs, 2016



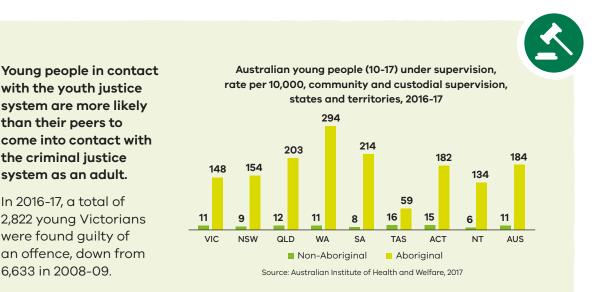
Students living in a disorganised community
Students not living in a disorganised community

Source: Victorian Student Health and Wellbeing Survey, 2016

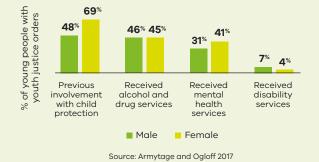
Feeling safe is a key precursor to health and wellbeing. Conversely, unsafe communities are associated with risky behaviours.

While 98% of children under 13 years in the least disadvantaged areas reportedly live in safe neighbourhoods, this dropped to 81% in the most disadvantaged areas.

*Survey defined disorganisation through student responses to questions about how safe they feel, the presence of fights, and crime in their neighbourhood.



Young people receiving youth justice orders who've engaged with DHHS services, Victoria, 2015-16



Young people in custody are among the most vulnerable in the community, with many facing challenges related to mental health, disability and homelessness.

More than half of young people in the youth justice system had prior interactions with child protection services, while over a third had accessed mental health services.



Education and Training

Physical and mental health



Good mental and physical health early in life is intrinsically important and proven to lead to better outcomes later in life.



Children who are happy, healthy and confident are better able to fully engage in their environment, helping them to fulfil their potential.

Most Victorian children are faring well.

Three in four students report being satisfied with their lives, while almost nine in ten report good, very good or excellent health.

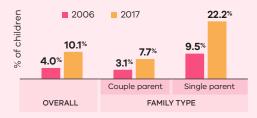
However, the proportion of children with an emotional, developmental or behavioural difficulty has risen to one in ten in 2017.

Victorian students in Years 5, 8 & 11 who are happy and healthy, Victoria, 2016



Source: Victorian Student Health and Wellbeing Survey, 2016

Victorian children (aged 6 months – 12 years) with an emotional, developmental or behavioural difficulty, 2006 and 2017



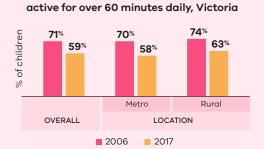
Source: Victorian Child Health and Wellbeing Survey, 2006 and 2017

Monitoring protective factors such as nutrition and physical activity provides insight into the physical and mental health of children and young people.

The proportion of children who are physically active has declined to around six in ten, and is lower for those in metro areas.

Meanwhile, over 30 per cent of 5 to 17year-olds in Victoria are overweight or obese. Younger children (aged 5-11) are overweight or obese at higher rates.

Children (aged 5-12) who are physically



Source: Victorian Child Health and Wellbeing Survey, 2006 and 2017

Children (aged 5-17) who are overweight or obese, Victoria, 2014-15



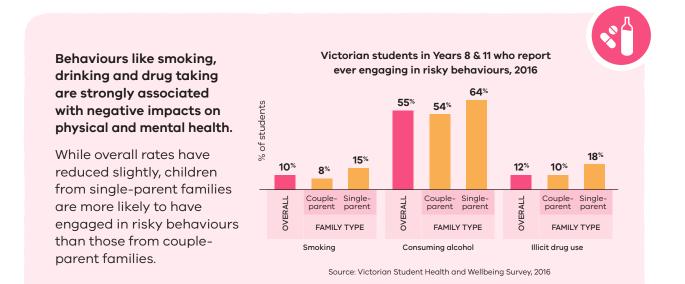
Source: Australian Bureau of Statistics, cat no. 4364.0, 2015



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Certain risky behaviours, such as smoking and drinking, are important indicators of the current and future health and wellbeing of young people.

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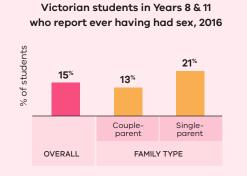
Engaging in unsafe sexual activity is another potentially risky behaviour that can impact the health and wellbeing of young people.

Just under one in six Victorian students report having ever had sex, and a quarter of those students report always using condoms.

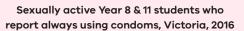
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Source: Victorian Student Health and Wellbeing Survey, 2016



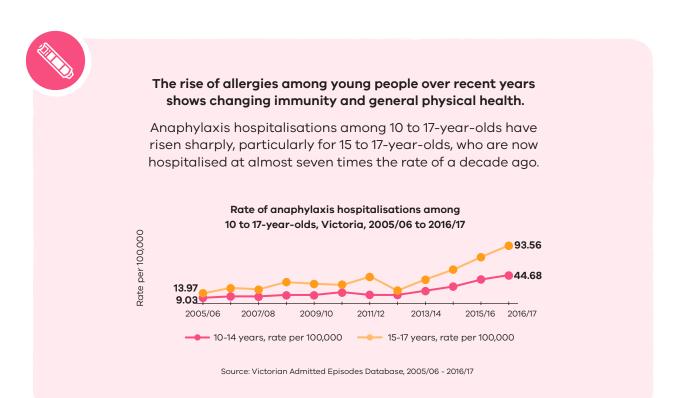


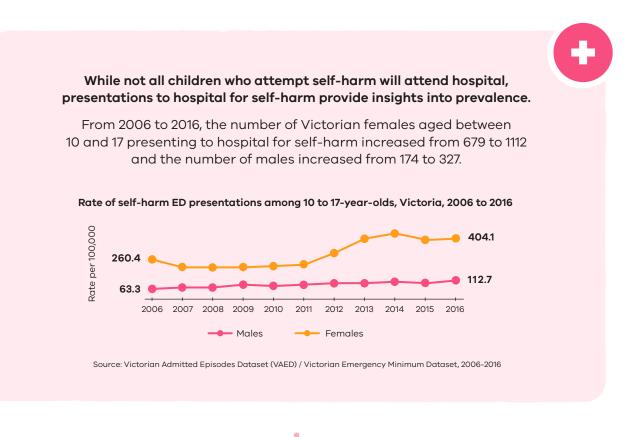
Source: Victorian Student Health and Wellbeing Survey, 2016



Families' use of hospitals, including presentations at emergency departments, indicate some of the trends in the health and wellbeing of children and young people.

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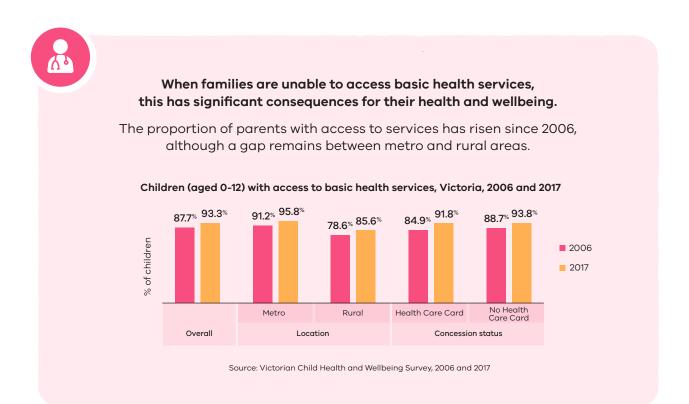


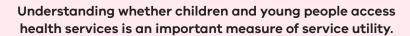


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The provision of high-quality and easily accessible health services is key to combatting issues around physical and mental health.

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Around 14% of Australian children aged four to 17 experience a mental disorder. Around 75% of mental health conditions occur before the age of 25.



Victorian young people (aged 0-24) using MBS subsidised mental health services, 2011-12 and 2016-17

Source: Report on Government Services, 2011/12 - 2016/17



Learning and education



Health, wellbeing and education are complementary and interrelated. Health and wellbeing are prerequisites for positive outcomes at school, and education is key to long-term health and wellbeing.

Early childhood development is key to children's success at school. In 2015, one in five Victorian children were assessed as being developmentally vulnerable at school entry.

Developmental vulnerability at school entry is associated with poorer educational achievement years later.

Linked data for Victoria shows that children who are developmentally vulnerable at school entry are half as likely to achieve in the top bands in Year 5 NAPLAN Reading as those classified as on track.

Proportion of developmentally vulnerable children achieving in the top two bands for Year 5 NAPLAN Reading, by domain, Victoria, 2014



Source: Australian Early Development Census, 2009 & NAPLAN, 2014



Positive parenting in the early years fosters stronger relationships with children, can help mitigate the effects of poverty on development and enhances learning outcomes.

Reading to children in the preschool years has a significant impact on their learning, and on Year 3 NAPLAN scores with 69% of Victorian children under five read to by a family member daily.

Children under five read to daily by a family member, Victoria, 2006 and 2017 by SEIFA quintile

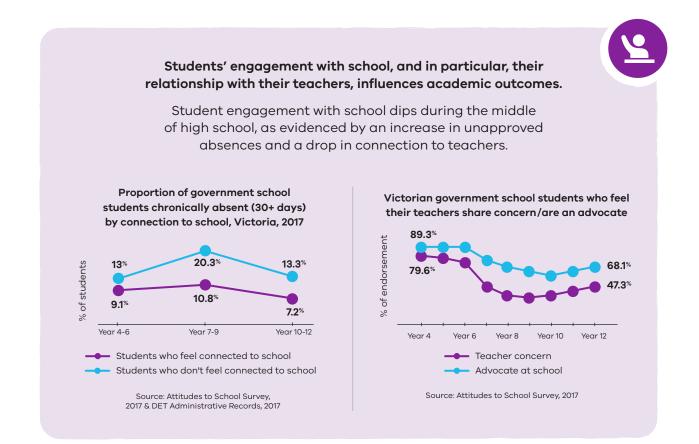


Source: Victorian Child Health and Wellbeing Survey, 2006 and 2017



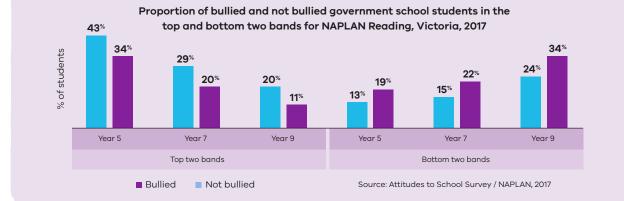
The nature of the school environment impacts not only on learning and education outcomes, but also on health and wellbeing – particularly around the mental health of young people.

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When a poor school environment includes bullying, this can have a detrimental impact on wellbeing and educational achievement.

The proportion of students experiencing bullying has increased in recent years and Aboriginal students are more likely than their peers to experience bullying.





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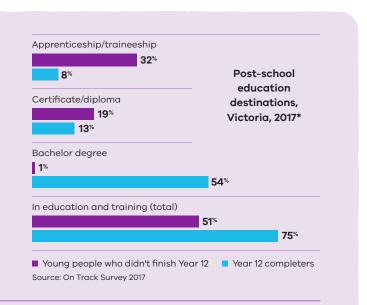
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Young people who finish school and go on to further education enjoy better health and employment outcomes.



Young people who finish school are more likely to go on to further education and enjoy better mental health, are less likely to develop chronic illness and or suffer from social isolation.

Victoria has high levels of school completion with approximately eight out of every ten Victorians either completing Year 12 or an equivalent qualification by age 19.



*Figures may not add up to total due to rounding

Higher levels of educational attainment provide better employment pathways, reducing economic and social disadvantage.

Recent employment figures show that those with post-school qualifications are more likely to be employed than Year 12 non-completers.



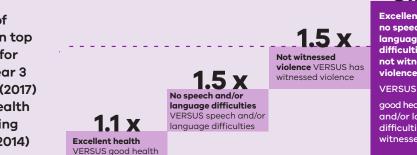
Source: Australian Bureau of Statistics, cat no. 6202.0, 2017

Wellbeing in early childhood makes a significant contribution to achieving educational excellence in school.



To better understand how these domains are associated, departmental analysis linked early childhood health and wellbeing data to learning outcomes, and controlled for the influence of different demographic factors. The data linkage shows that as indicators of poor health and wellbeing accumulate prior to school entry, the influence on a child's academic achievement in primary school compounds, creating even greater challenges.

Increase in likelihood of achieving in top two bands for NAPLAN Year 3 Numeracy (2017) by SEHQ health and wellbeing indicator (2014)



5.7 X Excellent health,

no speech and/or language difficulties, has not witnessed violence

good health, speech and/or language difficulties, has witnessed violence

Source: School Entrant Health Questionnaire 2014 and NAPLAN 2017

