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Australian Institute of
Health and Welfare

Australia's welfare



The great divide?

Exploring the dynamics of family and child wellbeing
in Australia

Alan Hayes

Director, Australian Institute of Family Studies





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AIHW

Australia's welfare 2009 Conference

Whose needs? How well met?

17 November 2009
Canberra

The views expressed in this paper are those of the author
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Acknowledgements

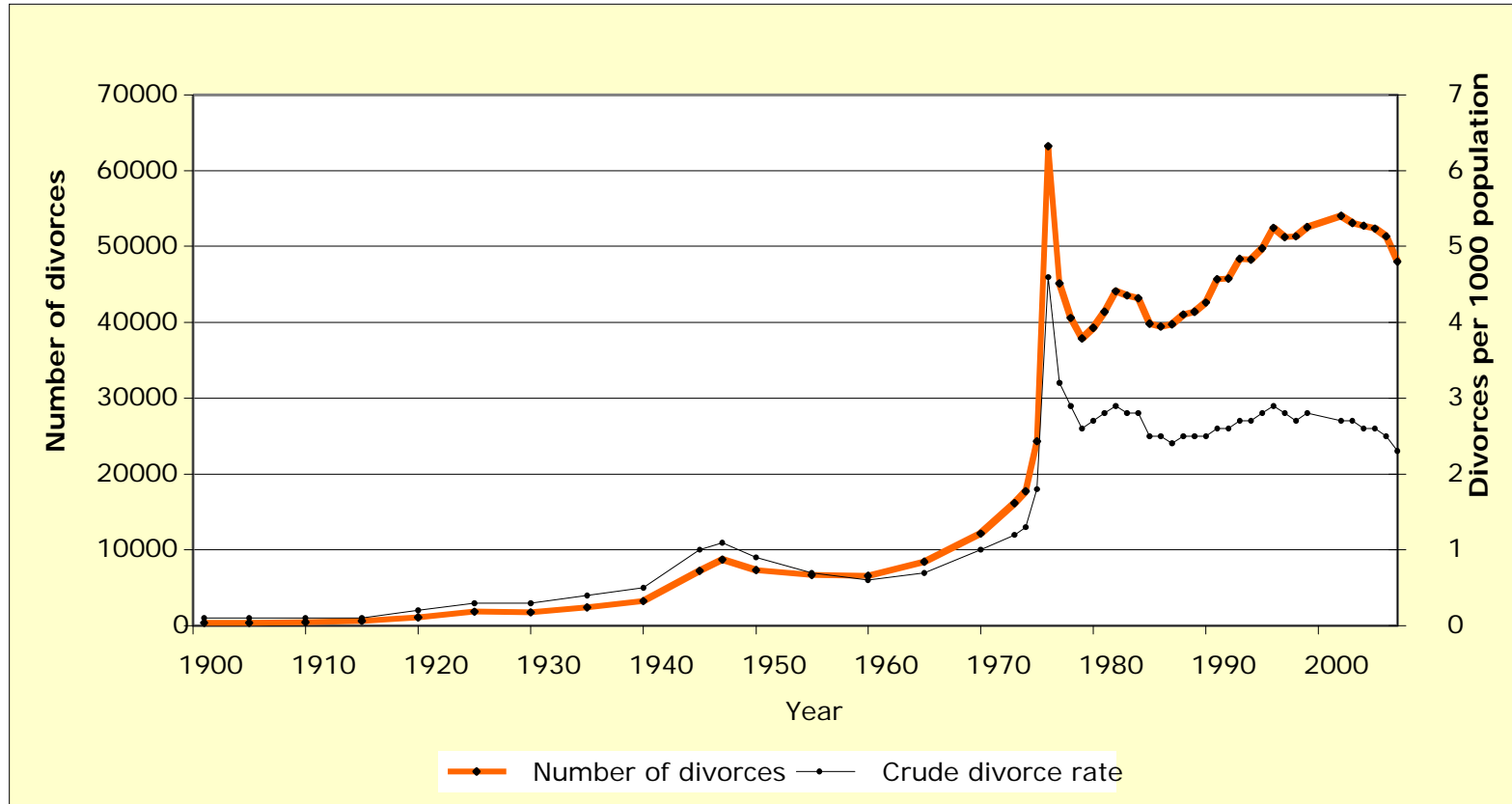
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Crude divorce rates and number of divorces, 1901-2007

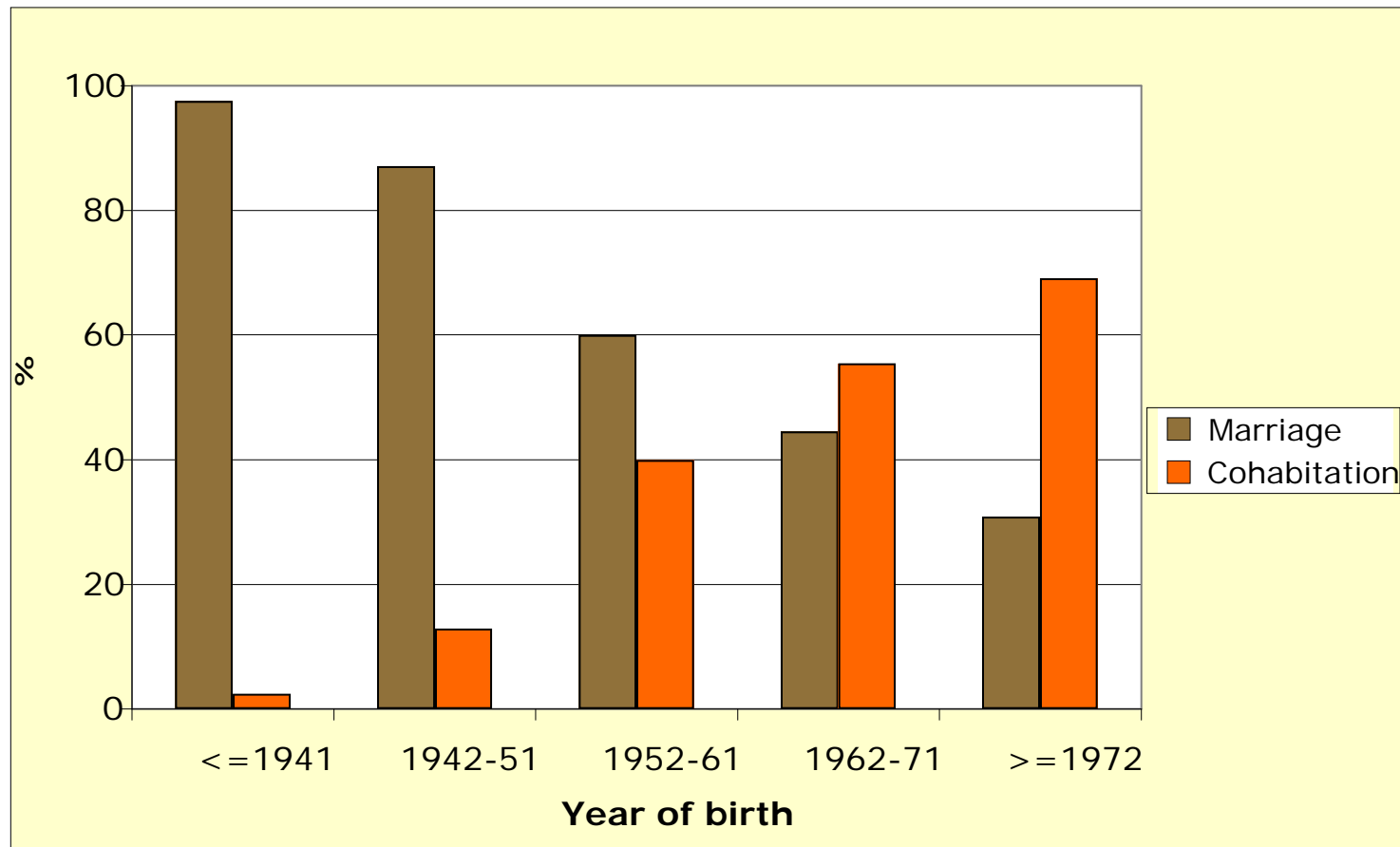


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Sources: ABS (various years), *Marriages and Divorces Australia*, Catalogue No. 3310.0

Women ever partnered: start of first couple relationship by year of birth

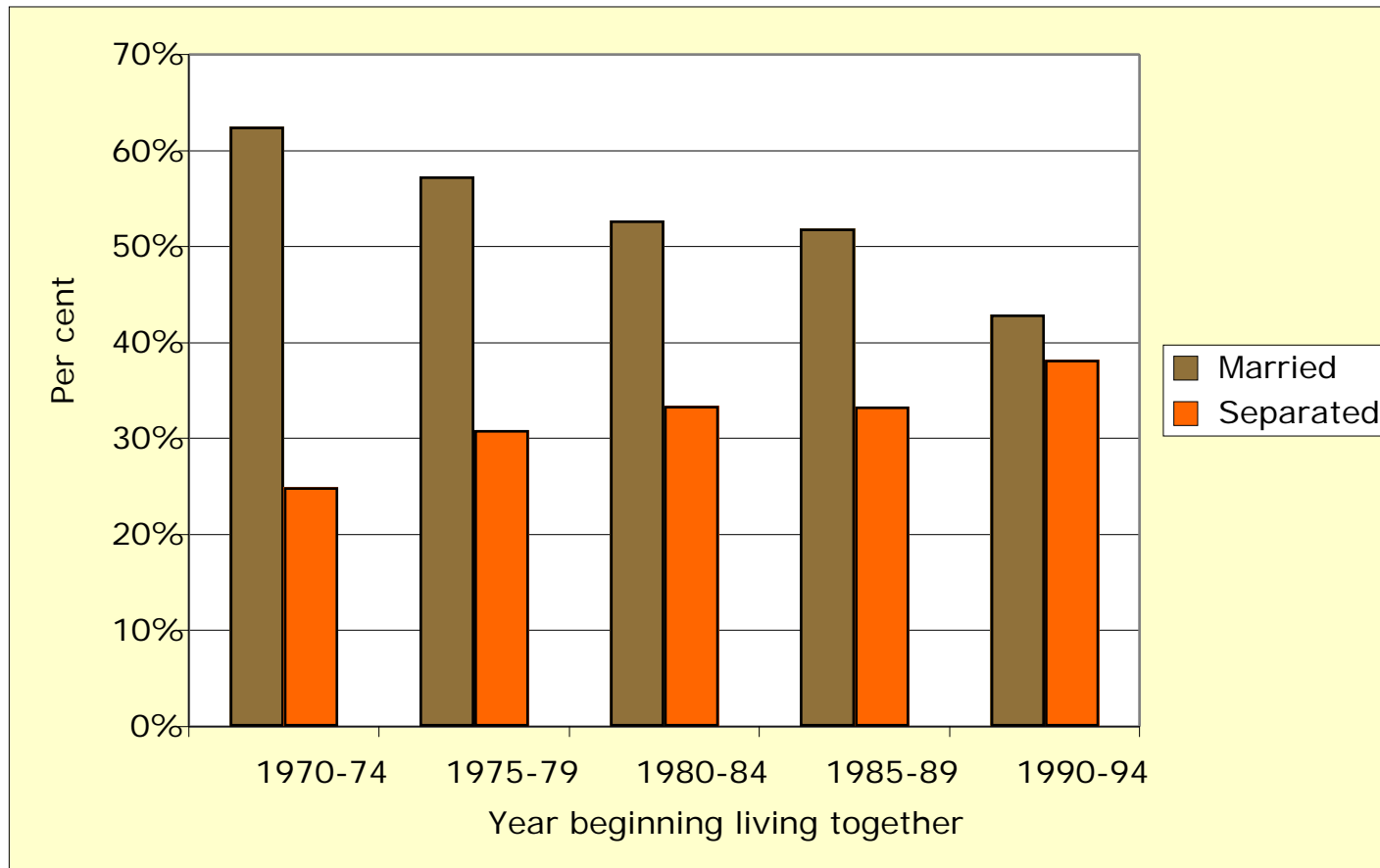


Long-term cohabitation

Cohabitation began	Still cohabiting by 2001
1970-74	1%
1975-79	1%
1980-84	2%
1985-89	4%
1990-94	9%



Outcomes of cohabitation by 5 years



Family stability by social marital status of parents

Wave 2 (2006)	Wave 1 (2004)	
	Married families	Cohabiting families
Still together	89.2	74.9
Step families	0.1	0.5
Sole parent	3.2	8.7
Attrition	7.5	15.8
Total	100.0	99.9
N	3578	379

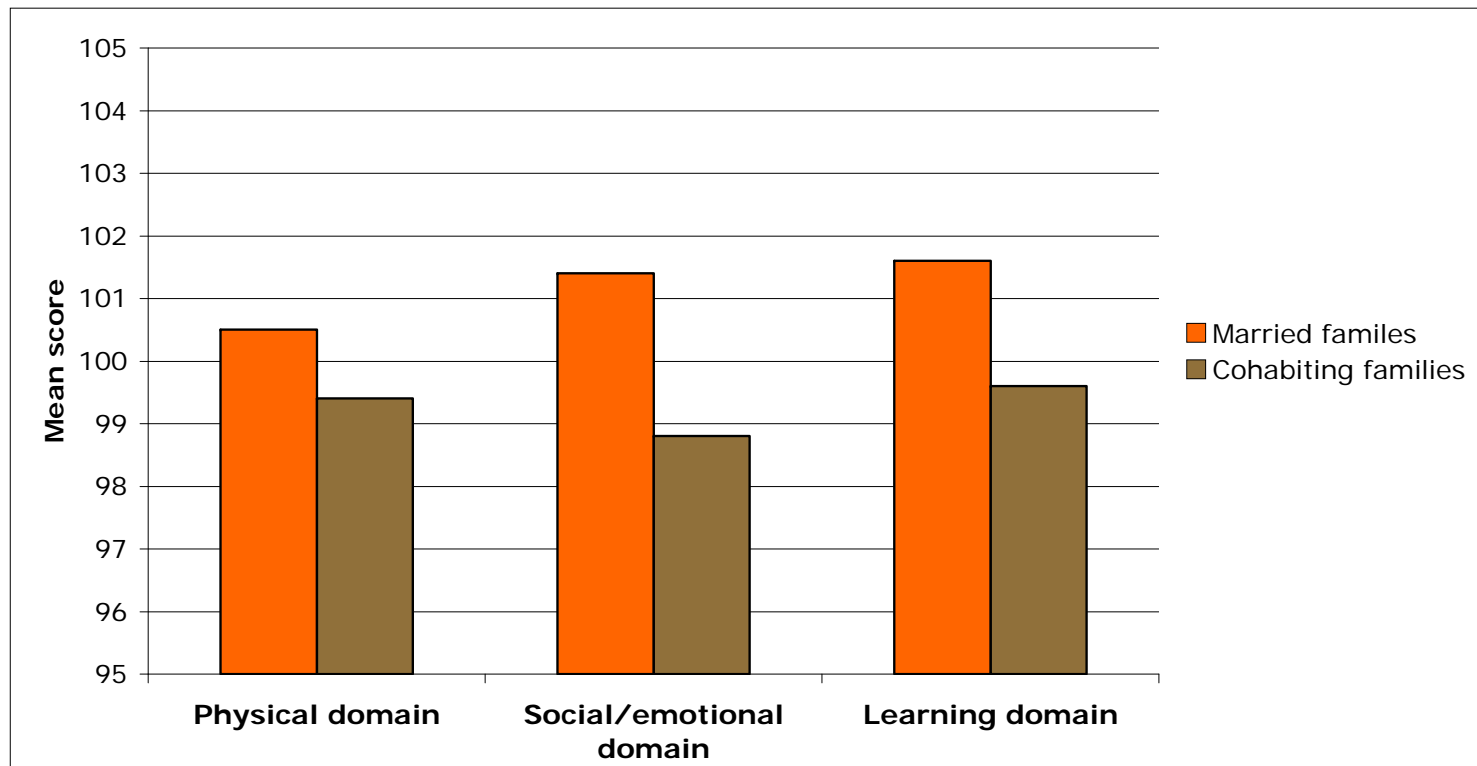


Selected characteristics of children and mothers by social marital status of parents

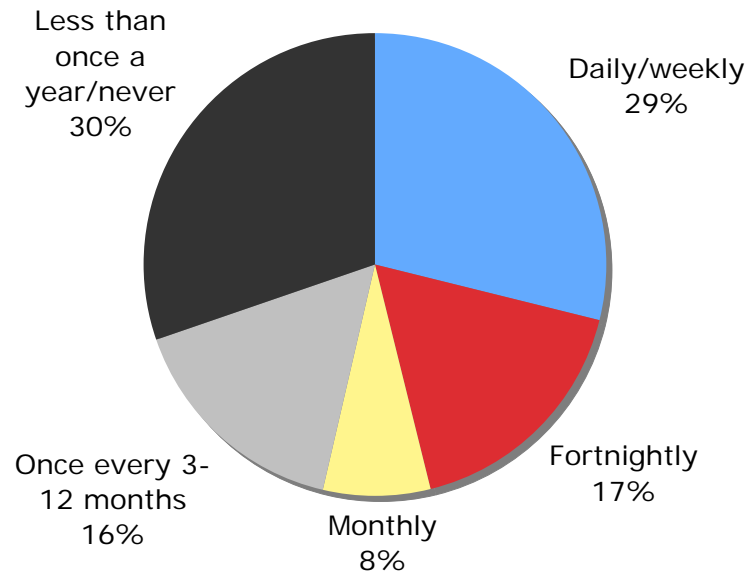
	Married families	Cohabiting families
Children		
Boys	50.5%	51.2%
Age (years) (mean)	4.8	4.8
Born in Australia	95.0%	98.4%
Mothers		
Mother's age (mean)	35.3	33.6
Mothers' education - a degree or higher	33.7%	16.1%
Mothers in paid work	61.0%	54.4%
Parental income weekly \$1500	41.9%	22.0%
Experienced any of 7 financial hardships in the last 12 months	22.7%	39.3%



Children's well-being measures by social marital status of parents



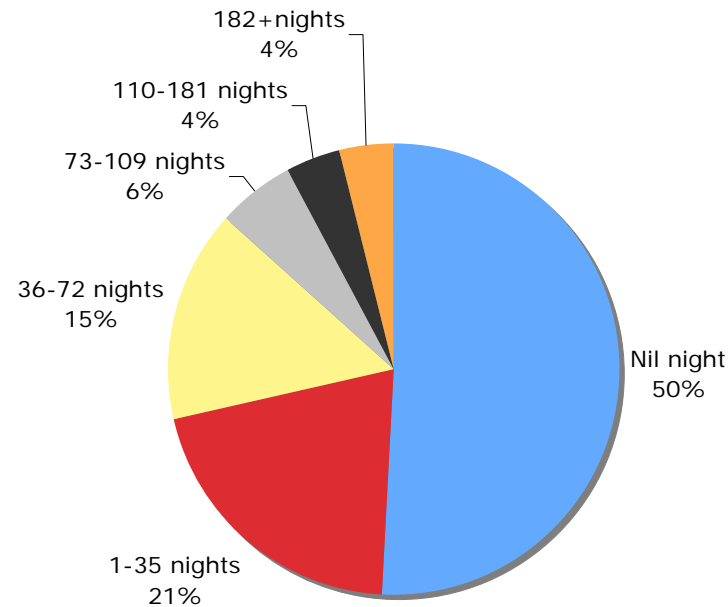
Children aged 0-17 who had a natural parent living elsewhere: Frequency of face-to-face contact (2007)



Note: Reported by resident parents. These results exclude children whose contact arrangements were not known.



Children aged 0-17 who had a natural parent living elsewhere: Number of overnight stays (2007)



Note: Reported by resident parents. These results exclude children whose contact arrangements were not known.



Quality of co-parental relationship and contact frequency

LSAC data: parents' reports about social/emotional wellbeing of children (age 4-5 years):

- **Relatively better off where:**
 - ◆ in intact family with
 - little hostility between parents;
 - ◆ parents are separated and
 - child sees other parent frequently **and little hostility between parents**
- **Relatively worse off (in separated families) where:**
 - ◆ hostility, regardless of how often they see other parent or
 - ◆ never see this parent



How are children now
(as compared to 20 years ago)?



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Differences on *toddler behaviour problems*

	ATP	LSAC	P <
Night waking	10%	11%	n.s.
Difficulty falling asleep	8%	2%	.001
Worries a lot	3%	4%	n.s.
Destructive	9%	5%	.001
Hurts other children	5%	2%	.001



Toxic environments and child and family outcomes



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Child protection statistics

- **317,526 reports** to statutory child protection services were made nationally (2007-08)
- **Three times** the number of reports 10 years ago (103,302)
- **55,120 substantiated**
- **Neglect and emotional abuse** (including witnessing DV) most commonly substantiated
- **31,166 children in out-of-home care** (30 June 2008)



Aboriginal and Torres Strait Islanders

- Aboriginal and Torres Strait Islander children over-represented in:
 - ◆ child protection (**6 x more likely** to be substantiated)
 - ◆ out of home care (**9 x more likely** to be in care)
- Sexual abuse is a significant, but under-reported, problem
- Aboriginal and Torres Strait Islander women are **35 times more likely** to be hospitalised due to family violence-related assaults



Impacts of child abuse and neglect in childhood and adolescence

- Attachment and social interaction problems
- Physical health problems
- Learning & developmental problems
- Behavioural problems
- Trauma & psychological problems
- Mental Health problems
- Youth suicide
- Eating disorders
- Drug and alcohol abuse
- Aggression, violence and criminal behaviour
- Teenage pregnancy
- Homelessness
- Death (fatal abuse)



Which children are more vulnerable
to abuse and neglect?



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Those with medical, disability and behavioural problems are particularly at risk

- Children with disabilities are 3.4 times more likely to be maltreated than non-disabled peers (US data)
- Parental abuse risk can be exacerbated by stress and demands of child's condition
- Child sexual abuse perpetrators can target disabled children as they are less likely to be detected



Developmental differences are important

- Infants are most physically vulnerable
 - ◆ most likely to be fatally abused
 - ◆ represent 42% of removals into care
- Older children and adolescents (particularly girls) are most vulnerable to sexual abuse



The hard edge of disadvantage



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Typical characteristics of young offenders

- Chronically disadvantaged ...
- With a history of:
 - ◆ Neglect;
 - ◆ High family conflict;
 - ◆ Low levels of educational attainment;
 - ◆ Family break up;
 - ◆ Participation in substance misuse;
 - ◆ Antisocial behaviour including
 - Physical aggression and violence; and/or
 - Mental illness.



Abuse, neglect and detention

- 30-40% of those in detention or under supervision had experienced physical abuse
- 11-14% had experienced sexual abuse
- One third to half had suffered neglect



Intergenerational transmission?

New South Wales data show:

- A history of parental imprisonment applied to
 - ◆ around half of those in juvenile detention and
 - ◆ around a third of those under community-based supervision.
- A parent currently incarcerated applied to
 - ◆ 11% of those in detention and
 - ◆ 5% of those under supervision.



Inequality and experience of conflict

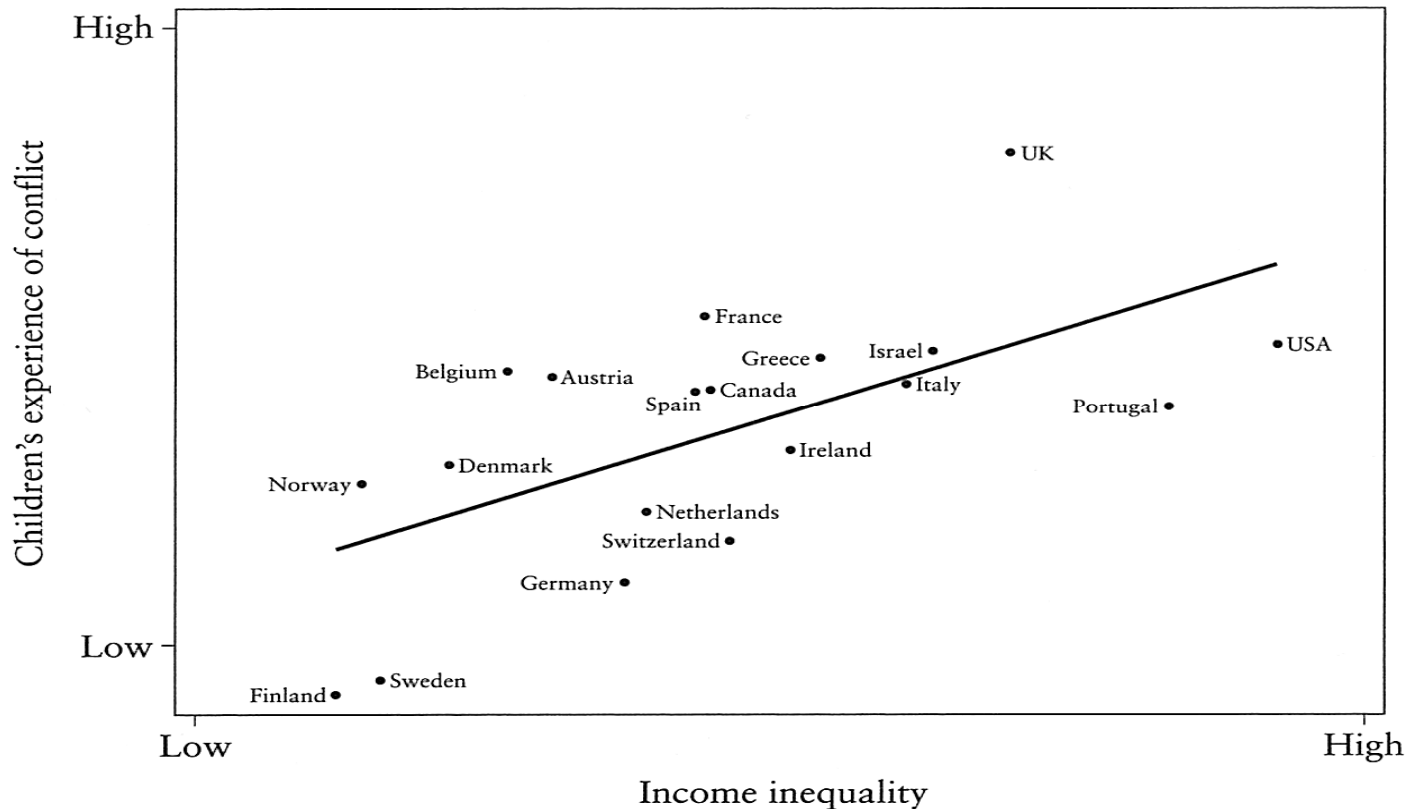


Figure 10.4 *There is more conflict between children in more unequal countries (based on percentages reporting fighting, bullying and finding peers not kind and helpful).*



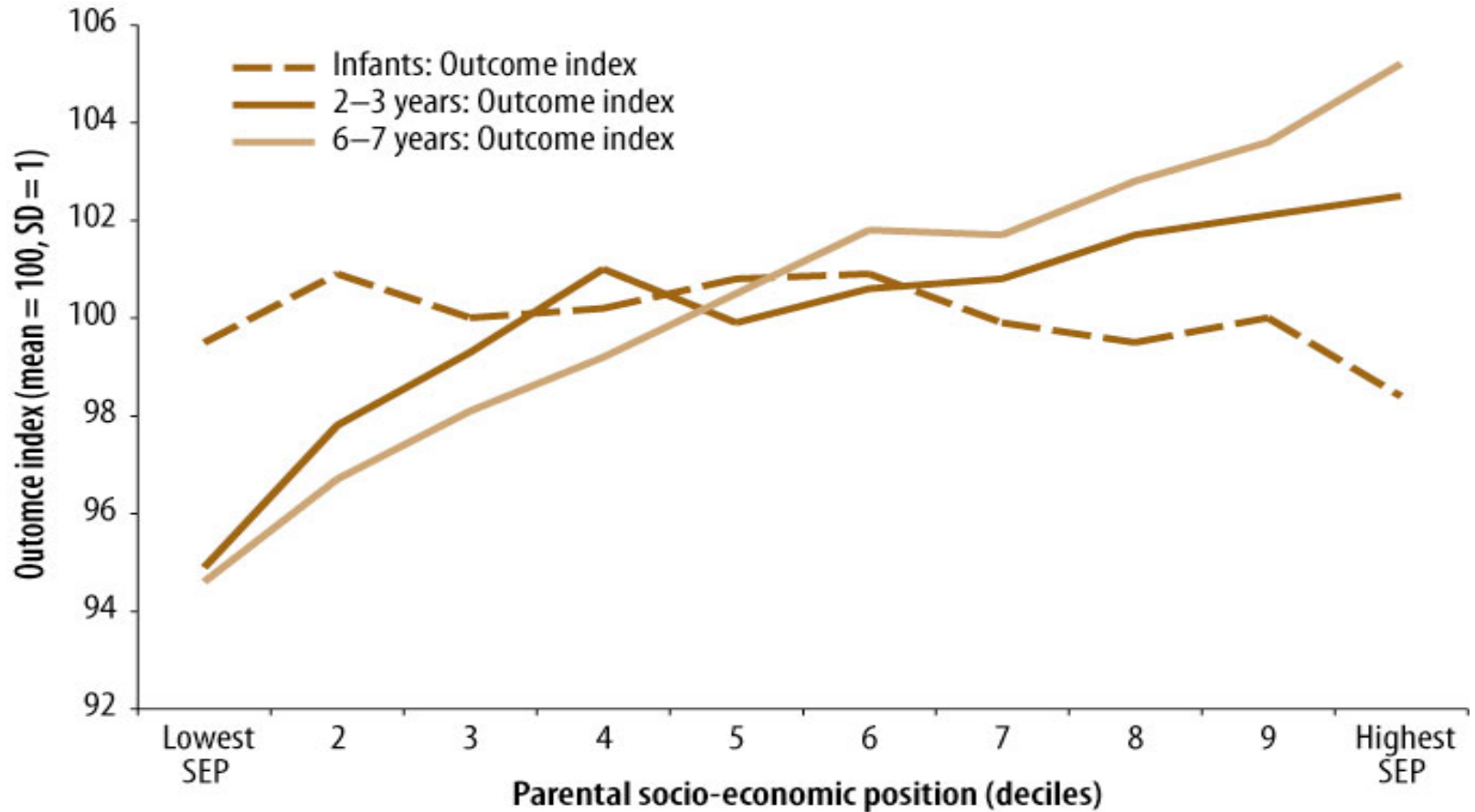
Inequality operates early in life
(and across the life course)



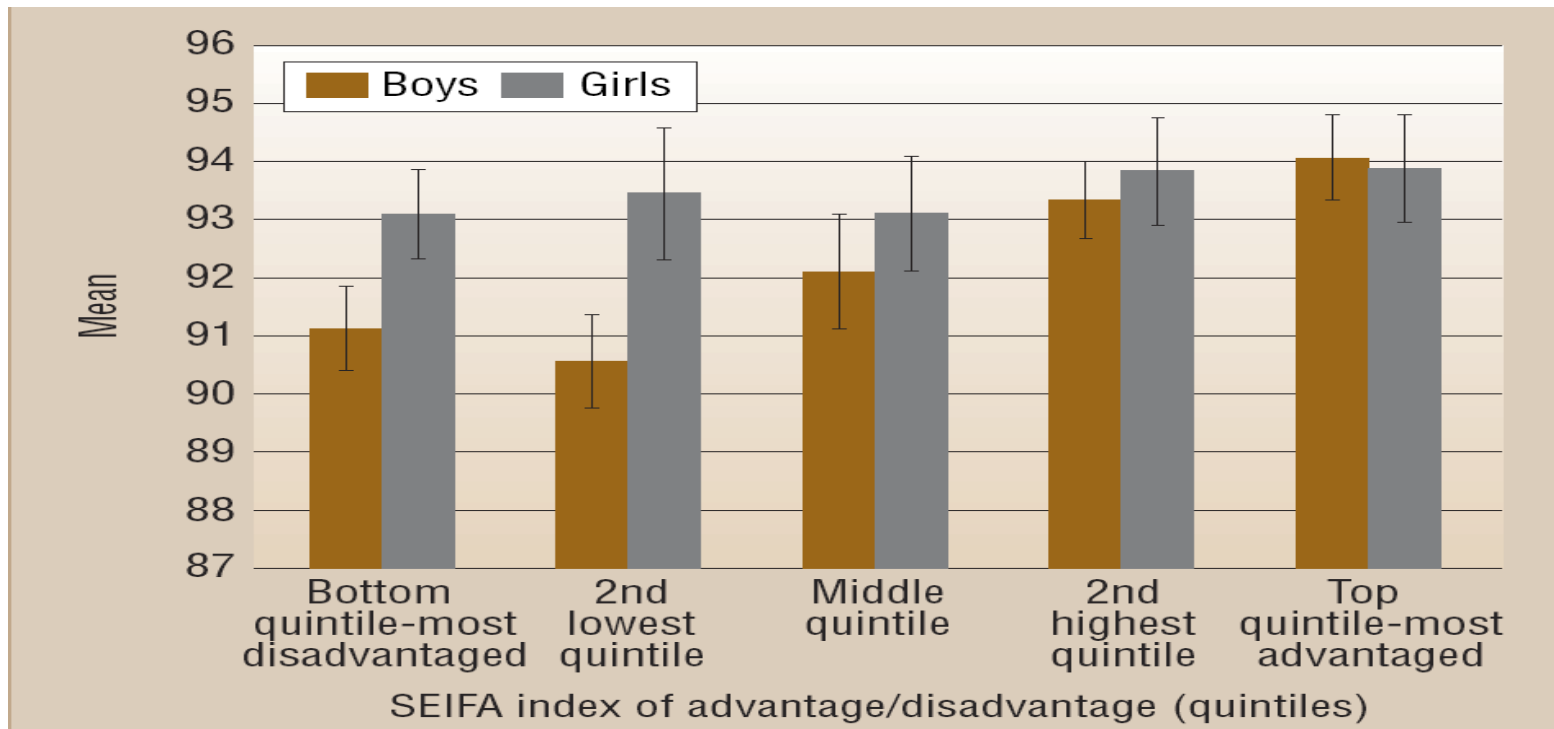
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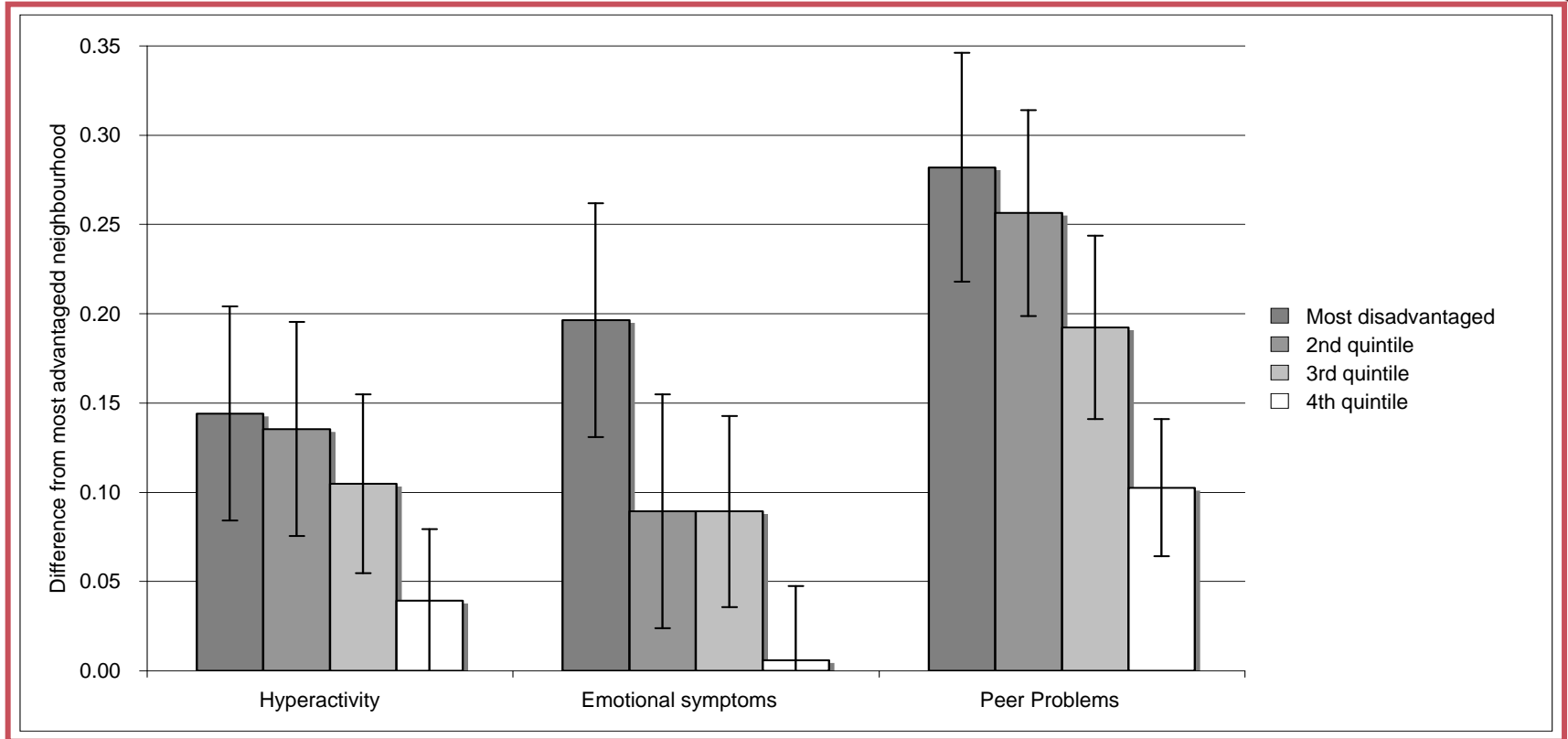
Child outcomes, by parental socio-economic position and age of child



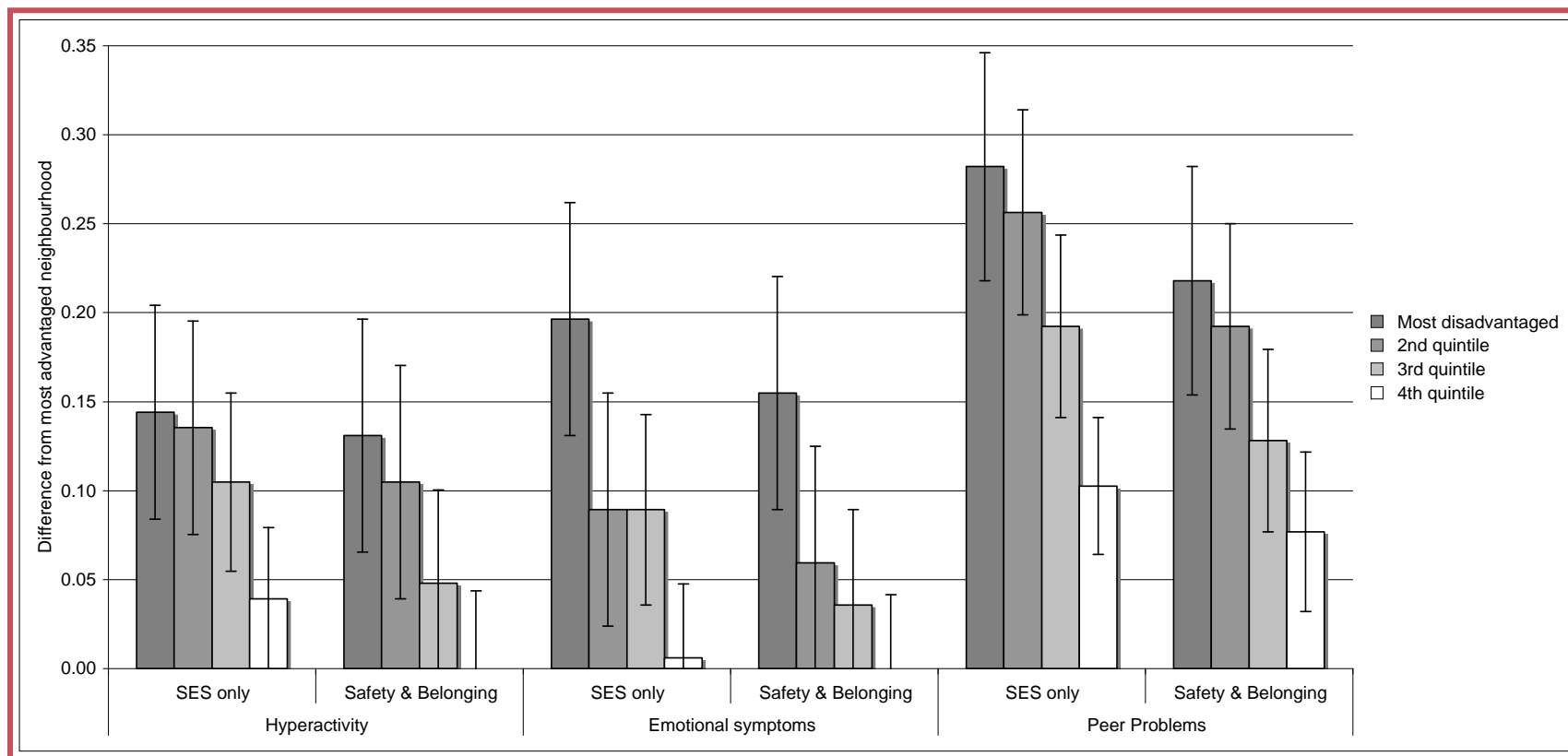
The impact of disadvantaged neighbourhoods on boys' social/emotional outcomes



Differences between children's level of hyperactivity, emotional symptoms and peer problems by neighbourhood disadvantage



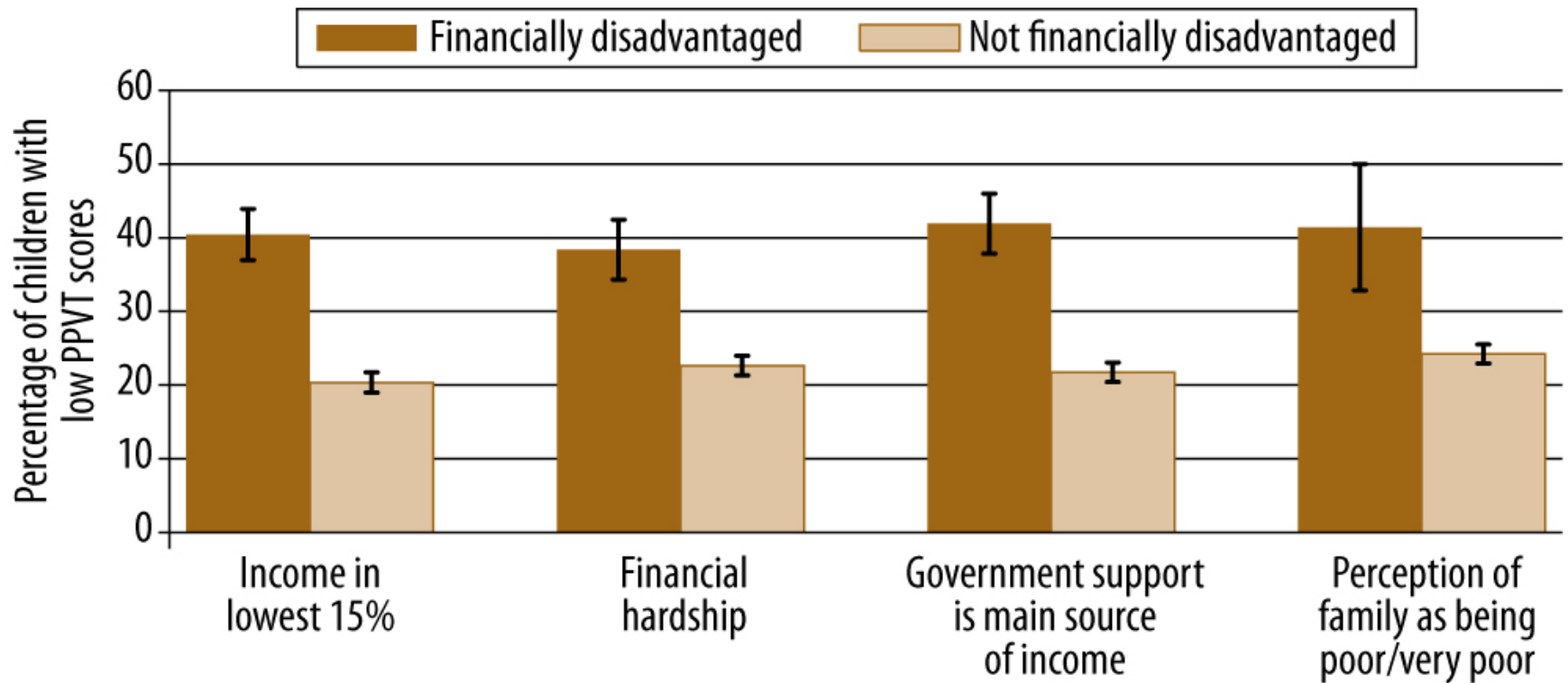
Differences between children's level of hyperactivity, emotional symptoms and peer problems by neighbourhood disadvantage and safety & belonging



Differences between children's level of hyperactivity, emotional symptoms and peer problems by neighbourhood disadvantage before and after including neighbourhood safety and belonging



Links between financial disadvantage and children's cognitive school readiness



Percentage of children with poor language skills at 4-5 years



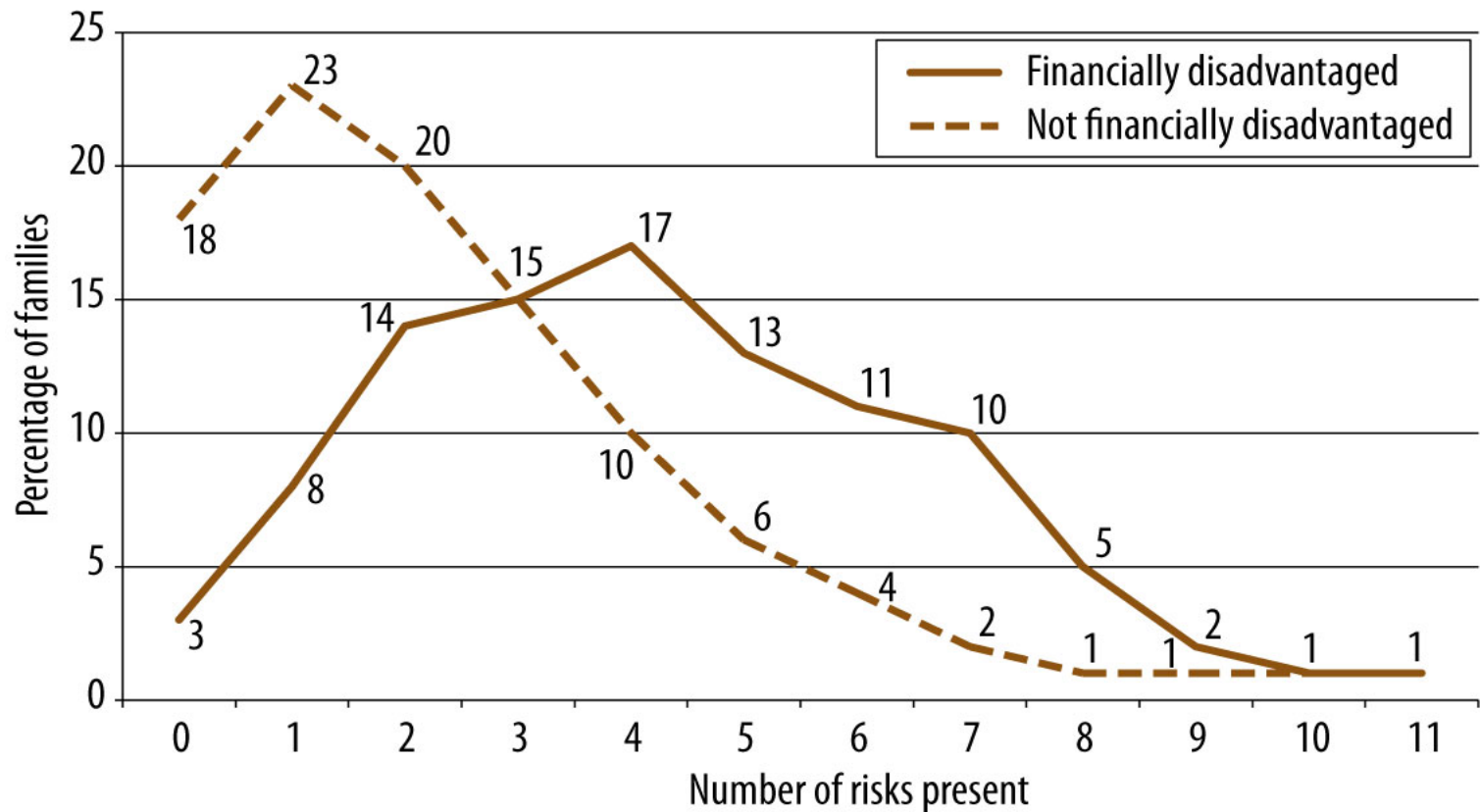
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Risk burden of disadvantaged families and other families



Number of family and neighbourhood risk factors present



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Prevention in context



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The Communities for Children model

Facilitating Partners

CfC Committee

Develop plans & manage funds

Community Partners deliver services

Logic = provide new services + increased service coordination and cooperation = improved outcomes



Does it work? CfC Impacts

Positive effects:

- Lower rates of *jobless households*
- *Improved parenting* (reduced harsh parenting, increased confidence)
- for disadvantaged families more *community engagement and involvement*
- *Improved verbal ability* among children with mothers with low education and those that were not hard-to-reach
- fewer children were experiencing *emotional or behavioural problems* in the non-HTR group



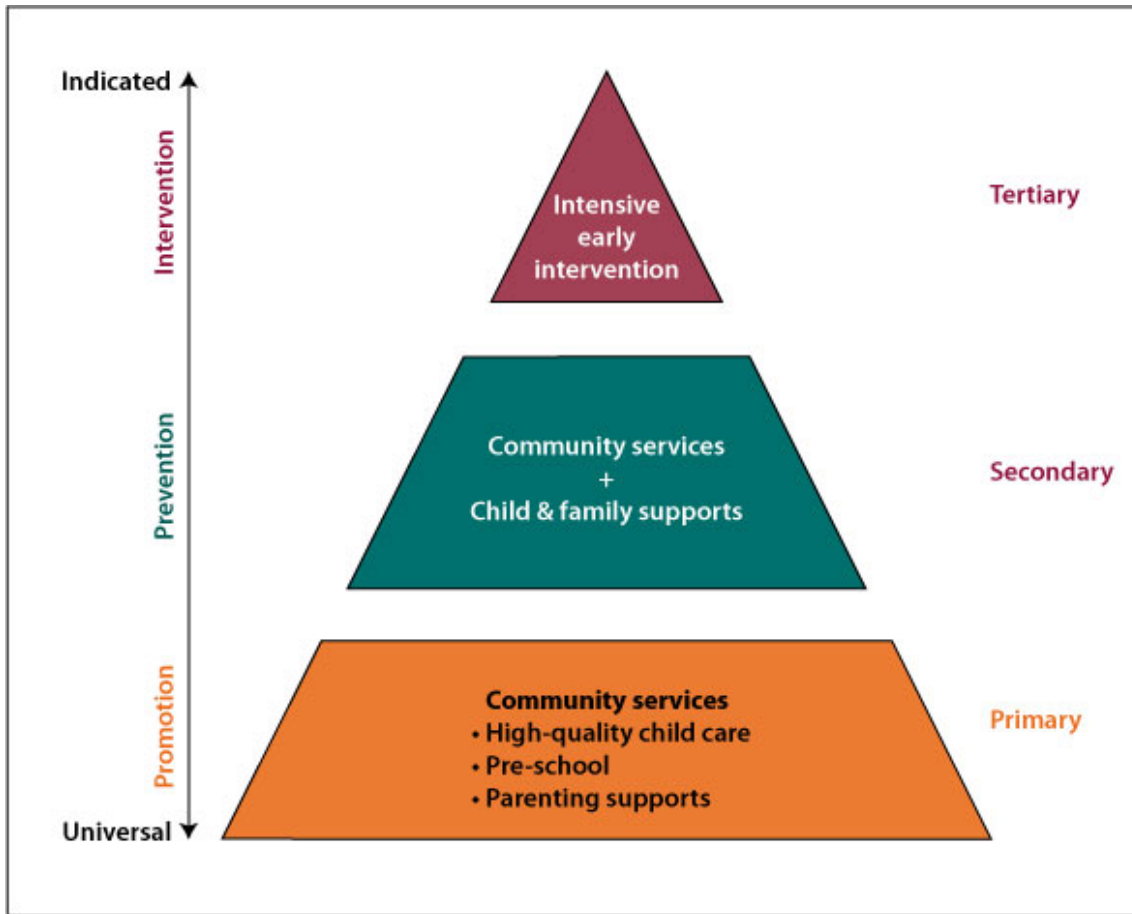
Does it work? CfC Impacts (continued)

There was a *small* negative effect on *child physical health* overall and a small negative effect on *parent health* for disadvantaged groups.

- Probably due to greater parental awareness in CfC sites.



A model of promotion, prevention and early intervention in early childhood



In conclusion

- Social address and family dynamics have impacts on children's outcomes

But

- Risk is not destiny
- Protection is no guarantee



In conclusion (continued)

- Advocacy does not necessarily constitute evidence
- Policy can be evidence informed (though rarely evidence based)

and

at times evidence biased!

- The rhetoric of prevention needs to be translated into the evidence of effective action to overcome the “Great” (and enduring) “Divide”

