

### What kind of families and communities do Australian children live in? (continued)

Indicator	Measure	Justification
<b>Economic security</b>	Proportion of children aged 0–14 years living in families where no parent is employed	Families with no parent employed generally have low incomes and live in poor economic circumstances—they are also more likely to be socially isolated than families with an employed parent. Living in a jobless family may have long-term effects on children’s development, their educational progress and their own employment prospects. Long-term unemployment often leads to stress, tension and family conflict, which may impact on children’s emotional and mental health (McClelland 1994).
<b>Social support networks</b>	Proportion of households with children under 15 years of age where respondent was able to get support in time of crisis from persons living outside the household	A cohesive society is one that promotes wellbeing via a large range of mutually supportive interactions, at the individual, group and social level (AIHW 2003). This is a relatively new area for statistical measurement but one whose importance is increasingly recognised.
<b>Parents with disability and chronic illness</b>	Proportion of parents with a disability	Parental disabilities may be associated with children’s lateness and poor school attendance, and also have adverse effects on basic parenting tasks (Cassino et al. 1997).  Children may also be ‘young carers’ of a disabled parent, which can restrict social and educational opportunities and increase stress (Mukherjee et al. 2002).
	Proportion of parents rating their health as ‘fair’ or ‘poor’	Parents’ health and wellbeing impact on the health and wellbeing of the child in several ways. Children rely on their primary carer for their physical, emotional, and economic needs and support. When disruption to parenting or caregiving occurs, as sometimes happens with the onset of a physical or mental illness, the needs of the child may receive less attention or may not be met at all (Silburn et al. 1996).
<b>Parental mental health</b>	Proportion of parents with a mental health problem	While many parents who have a mental illness are capable parents, mental health problems can affect parent–child relationships in a number of ways. Problems may include relationship discord, discontinuity of care, poor general parenting skills, social isolation and exclusion (AICAFMHA 2001).

### A complete picture?

Through these key indicators, the Picture of Australia’s Children 2005 report will aim to present data on as many aspects of children’s health, development and wellbeing possible. The contexts and influences that are known to be so important in determining outcomes for children will be presented in one report for the very first time.

The challenge that remains, however, is that there are still aspects of children’s wellbeing for which there are no national or even jurisdictional data available to paint a statistical picture. Themes such as parenting style, postnatal depression, father’s involvement in parenting, school absenteeism, bullying, aspects of disability and motor and social development are just some of the areas for which national data development are required and data collection are vital.

In addition, the available statistical information in areas such as children’s mental health and overweight and obesity is now outdated. Renewed data collection in these areas is needed before they risk adding to existing data gaps.

The data emerging from *Growing Up in Australia—The Longitudinal Study of Australian Children* will go some way to filling these data gaps by providing a snapshot of two cohorts of children, starting with infants and children 4 years of age, which may be useful



## Key national indicators of children's health, development and wellbeing

for monitoring in some areas. However, the real purpose and power of this type of longitudinal data is really to investigate the latent effects of poor child health and the impact of cumulative exposures, not to provide the basis for national monitoring.

Monitoring is different from the more complex analysis possible in other research. For example, it is expected that the Growing Up in Australia study will be able to answer questions about how child outcomes are interlinked with their wider circumstances and environment, and while some population estimates will be available, the focus of that study is to examine two cohorts and their journey through time. So it is important that a national program for indicator development dovetails with the research program for projects such as the Growing Up in Australia data so that information needs are covered from both the individual/longitudinal and population/point-in-time perspectives.

### **Data sources**

The selected indicators are derived from a wide range of national and jurisdictional data sources, including: the AIHW mortality, morbidity and cancer clearinghouse databases, AIHW child protection and supported accommodation assistance program data, AIHW National Diabetes Register, ABS surveys and recorded crime statistics, disease surveillance data and state-based surveys. Data derived from Wave 1 of Growing up in Australia, being undertaken by the Australian Institute of Family Studies (and funded by the Australian Government Department of Family and Community Services), provide a new national data source for the report (Australian Institute of Family Studies 2003, Nicholson & Sanson 2003). As with any report based on key indicators, the number of potential indicators is restricted by current data limitations and data gaps. The final report will identify limitations in existing data sources and outline the areas where new information needs to be developed. Through partnership with key stakeholders, including state and territory jurisdictions, the AIHW is either developing or implementing national minimum data sets in children's services, juvenile justice, out-of-home-care and child protection to fill some of these gaps and improve data quality in existing collections.

### **Collaborating partners**

Much of the Institute's work on reporting and monitoring of Australia's children has been carried out with collaboration from national bodies such as the Australian Bureau of Statistics and the Australian Institute of Family Studies. At the jurisdictional level, the AIHW collaborates with working groups, such as the National Child Protection and Support Services Data Working Group, the Juvenile Justice Data Sub Committee, the Children's Services Data Working Group and the National Community Services Management Information Group. The Institute's collaborating partners, such as the National Perinatal Statistics Unit, based at the University of New South Wales, also play an important role in meeting the information requirements needed to monitor early childhood.

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