3.8 Wellbeing of Indigenous children

There were an estimated 240,620 Indigenous children in Australia aged 0–14 in 2011, accounting for 5.7% of all children. Indigenous children represent more than one-third of the Indigenous population (36%) compared with 18% for non-Indigenous children (ABS 2013). Most Indigenous children lived in Major cities and Inner and outer regional areas in 2011 (58%); however, Indigenous children were almost 12 times as likely as non-Indigenous children to live in Remote and very remote areas. Similar proportions of Indigenous and other households consisted of a couple family with dependent children in 2011 (27% and 26%, respectively), while a larger proportion of Indigenous households were one-parent families with dependent children (21% compared with 6% of other households) (see also Chapter 1 ‘Who we are’).

Social determinants have an important impact on the health and welfare of families and their children. The Indigenous population is disadvantaged on a range of social determinants compared with the non-Indigenous population: they report lower incomes, higher rates of unemployment, lower educational attainment, lower rates of home ownership and are over-represented among jobless families (AIHW 2015b; Baxter et al. 2012).

Health outcomes and risk factors
Indigenous children often experience poorer early health outcomes compared with non-Indigenous children, placing them at risk of disadvantage in other aspects of life.

- Nearly half (47%) of Indigenous mothers smoked during pregnancy in 2012 compared with 14% of non-Indigenous mothers.

- Babies born to Indigenous mothers were twice as likely as babies born to non-Indigenous mothers to be of low birthweight (less than 2,500 grams) in 2012 (12% compared with 6%).

- Infant mortality rates were more than 1.5 times as high for Indigenous infants as non-Indigenous infants in 2013. Since 2006, the gap in mortality rates between Indigenous and non-Indigenous infants has narrowed (Figure 3.8.1) (AIHW 2015a).

- In 2012–13, 15% of Indigenous children aged 2–14 met the Australian dietary guidelines for daily fruit and vegetable intake. For the same period, Indigenous children were 1.6 times as likely as non-Indigenous children to be obese (10.2% and 6.5% respectively), which was statistically significant. There was no significant difference in the proportions of overweight children (20% and 18% respectively) (ABS 2014).

Education
Education is an important determinant of health and welfare. Indigenous children often fare worse than non-Indigenous children on educational outcomes (see also Chapter 3 ‘Closing the gap in Indigenous education’, ‘Transition to primary school’ and ‘How are our children faring at school?’).

- The proportion of Indigenous children aged 4–5 enrolled in preschool in the year before full-time school was 75% and the proportion attending was 70% compared with 96% and 93% of other Australian children respectively in 2014 (AIHW analysis of the National Early Childhood Education and Care Collection).

- Indigenous children were more than twice as likely as non-Indigenous children to be developmentally vulnerable on one or more domains of the Australian Early Development Census at school entry in 2012 (43% and 21% respectively) (Department of Education 2013).
Children who are vulnerable

Indigenous children have higher rates of death and hospitalisation due to injury than non-Indigenous children and are over-represented in the child protection, youth justice and homelessness systems.

- Injury hospitalisation rates for Indigenous children aged 0–14 in 2011–12 were around 1.5 times as high as for non-Indigenous children (AIHW: Pointer 2014). The death rate due to injuries was 3 times as high for Indigenous children as for non-Indigenous children in 2009–2013 (15 and 5 deaths per 100,000 population respectively) (AIHW 2015a).

- Indigenous children aged 0–12 were almost 7 times as likely to be the subject of a substantiation of a notification for child abuse and neglect in 2013–14 as other children. Over time, substantiation rates for Indigenous children have increased from 35 to 45 per 1,000 children between 2007–08 and 2013–14. Although a real change in the incidence of abuse and neglect may contribute to this change, increased community awareness and changes to policy, practice and legislation are also contributing factors.

- Indigenous children aged 10–14 were 36 times as likely to be in detention in the youth justice system on an average day in 2013–14 compared with non-Indigenous children.

- In 2013–14, 32% of specialist homelessness services clients aged 0–14 were Indigenous (excludes those for whom Indigenous status was not stated); however, Indigenous children accounted for only 5.6% of children in the total 0–14 population.
SNAPSHOT

For more information on vulnerable children, see also Chapter 3 ‘Young people aged 10–14 under youth justice supervision’ and ‘Child protection in Australia’, Chapter 4 ‘Vulnerable young people (aged 15–24)’ and Chapter 7 ‘How are Indigenous Australians faring?’.

What is missing from the picture?
The majority of data presented in the health outcomes and risk factors section above are from the AIHW Children’s headline indicator portal. Data are available by Indigenous status for all of these indicators except family economic situation.

Where do I go for more information?
More information on the health and wellbeing of children, including Indigenous children, is available from AIHW publications such as A picture of Australia’s children 2012, Children’s headline indicators, Child protection Australia: 2012–13, Indigenous child safety and The health and welfare of Australia’s Aboriginal and Torres Strait Islander peoples 2015.
Information specifically on Indigenous Australians is also available from the Closing the Gap Clearinghouse website.

References
ABS 2013. Estimates of Aboriginal and Torres Strait Islander Australians, June 2011. ABS cat. no. 3238.0.55.001. Canberra: ABS.
AIHW 2015b. The health and welfare of Australia’s Aboriginal and Torres Strait Islander peoples 2015. Cat. no. IHW 147. Canberra: AIHW.