

# A Picture of ACT's Children and Young People | 2012

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## Acknowledgment of Country

The ACT Government acknowledges the traditional custodians of the ACT, the Ngunnawal people. The ACT Government acknowledges and respects their continuing culture and the contribution they make to the life of this city and this region.

## Acknowledgments

The framework contained within *A Picture of ACT's Children and Young People* utilises a number of outcomes and indicators focused on children and young people's health, wellbeing, learning and development. It acknowledges the contribution of the Council of Australian Governments, Australian Institute of Health and Welfare, and the Victorian Government in their work in identifying outcomes and reporting on evidence based indicators, which have been used as the basis of this framework.

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## Message from the Head of the ACT Public Service

Optimising the health, wellbeing, learning and development of children and young people is a key priority in the ACT, and across Australia.

Research continues to support our understanding of the importance of childhood and adolescence and highlights that optimal experience for growth and development is the foundation for a productive and fulfilled life.

Within the ACT, the *ACT Children's Plan 2010–2014* and the *ACT Young People's Plan 2009–2014* provide the policy platform to support government and the community to ensure all children and young people achieve their potential.

First released in 2011, *A Picture of ACT's Children and Young People* complements these plans and provides a snapshot of how children and young people, families and their communities are faring against key health, wellbeing, learning and development outcomes.

*A Picture of ACT's Children and Young People* has now been updated for 2012, drawing together key ACT Government and national datasets.

The indicators reported on in 2012 build from those included in the inaugural report to incorporate data on primary and high school attendance, outcomes for school leavers, volunteering and rates of smoking during pregnancy. The inclusion of these indicators aims to ensure *A Picture of ACT's Children and Young People* continues to reflect the contemporary evidence.

It is evident from the data presented in *A Picture of ACT's Children and Young People 2012* that most children and young people in the ACT are achieving positive health, wellbeing, learning and developmental outcomes. In addition the report also challenges us to consider the areas where improvements are required.

A strong evidence base, solid public policy, high quality services and monitoring of the collective effort is crucial in maximising outcomes for children and young people.

I encourage anyone whose work is related to children and young people to read *A Picture of ACT's*

*Children and Young People 2012.*

**Andrew Cappie-Wood**

Head of Service and Director-General, Chief Minister and Cabinet Directorate  
October 2012

# Introduction

*A Picture of ACT's Children and Young People* complements the work being undertaken nationally and within jurisdictions across Australia to measure outcomes for children and young people.

This report incorporates nationally recognised indicators of child and young people's health, wellbeing, learning and development along with ACT specific indicators. Maximising the use of data to evaluate progress and to identify changing trends is a vital component in building a child and youth friendly city. Investment in the collection and analysis of data is assisting with the development of responsive policy, programs and services within the ACT.

This is the second year the ACT Government has compiled key data on the health, wellbeing, learning and development of ACT's children and young people in one report. The inaugural report, released in 2011, highlighted that most children and young people in the ACT were faring well. This trend continues in the 2012 release of *A Picture of ACT's Children and Young People*. The 2012 report highlights many positive outcomes for ACT children, young people, their families and communities including:

- The percentage of ACT women smoking during pregnancy has decreased significantly between 2001 and 2009.
- The ACT continues to report one of the highest levels of fully immunised children at 5 years of age.
- The proportion of Aboriginal and Torres Strait Islander students in the ACT achieving at or above the national minimum standard in reading, writing and numeracy continues to be higher than students nationally across years 3, 5, 7 and 9.
- The year 10–12 apparent retention rate has increased from 2007 and is significantly higher than Australian results.
- An increase in the percentage of ACT year 12 graduates employed or studying six months after completing an ACT year 12 certificate.
- A reduction in the number of substantiated child protection reports.

The report also highlights areas for improvement including:

- Increasing the proportion of children who are of a healthy weight.
- Reducing the proportion of Aboriginal and Torres Strait Islander women and teenage women who smoke during pregnancy.
- Reducing the overrepresentation of Aboriginal and Torres Strait Islander young people in the youth justice system.

*A Picture of ACT's Children and Young People* is a key initiative supporting Canberra as a child and young people friendly city. *The ACT Children's Plan 2010–2014* and *ACT Young People's Plan 2009–2014* are the key policy documents, providing the strategic direction in achieving this goal.

*The ACT Children's Plan 2010–2014* aims to make Canberra a great and safe place for children, and to ensure their needs are a priority for government and the community. The plan is informed by UNICEF's child friendly cities and is focused on achieving outcomes in six key building blocks.

*The ACT Young People's Plan 2009–2014* acknowledges that young people have many strengths and needs and provides a framework to achieve positive outcomes for young people through collaboration between young people, governments, and the community.

## **Background to the ACT Children and Young People Framework**

*A Picture of ACT's Children and Young People* is structured around the Children and Young People outcomes framework. This framework reflects the ecological perspective of development and highlights the key protective, risk and other known factors that may be impacting on children and young people's health and wellbeing in the ACT. The interplay between and accumulation of these protective and risk factors during childhood and adolescence has a significant impact on outcomes, both in the short term and over the course of a lifetime.<sup>1</sup>

The framework focuses primarily on outcomes for children and young people and includes indicators focused upon physical health and mental wellbeing, development in the early years, education and healthy and pro-social behaviors. The achievement of positive health, wellbeing, learning and development outcomes in childhood and adolescence is a rich interplay between the relationships and environments children and young people grow up in. The most significant influence on children and young people is their family. The communities children, young people and their families grow up in also have an influence, by providing the resources and environments for families to thrive. In recognition of the importance of families and communities, outcomes for these key areas are also reflected in the framework.

## **About this report**

The ACT Children and Young People Outcomes Framework provides a conceptual map of outcomes and indicators relating to the health, wellbeing, learning and development of children and young people. Part one of *A Picture of ACT's Children and Young People 2012* reports on indicators relating to children and young people. Indicators relating to families are outlined in part two, and part three reports on indicators relating to communities, environments and services.

In 2012 additional indicators have been included in the report, focusing on smoking during pregnancy, primary and high school attendance, volunteering and transition from school to further education or work. The inclusion of these indicators has been guided by national headline reporting and priorities. The outcomes and indicators included in the report are regularly reviewed to ensure alignment with national and territory priorities.

The indicators detailed in *A Picture of ACT's Children and Young People* are primarily measuring how the ACT is tracking over time. Included for each indicator is a description, rationale for the indicator's inclusion and an evaluation of how the ACT is faring. The symbols shown on the left have been used to represent how the ACT is performing.

Most of the indicators contained in the report outline how the ACT is progressing over time. For some indicators this time series data is not currently available. It is envisaged data over time in the ACT will be available for most indicators by 2013.

Data on how Aboriginal and Torres Strait Islander children are faring has been included for a small number of indicators. The selection of data for this report has been prioritised by the targets set in the *Closing the Gap* reform, where this data was available. As the ACT is a small jurisdiction, data cannot be reported on for some of the indicators due to smaller numbers which could lead to

identification.

## An overview of ACT's children and young people

### How many children and young people live in the ACT?

As of August 2011 there were 357,222 people living in the ACT and 121,092 of these people were children and young people aged 0–24 years. Children and young people aged between 0 and 24 years of age comprised 33.9% of the total population in the ACT. 2.4% of ACT children and young people identified as Aboriginal and Torres Strait Islander.

#### Figure 2: The proportion of ACT residents in each age group, 2011

Data source: Australian Bureau of Statistics, Census 2011.

The ACT reports the second highest proportion of total residents aged 0–24 years nationally.

#### Figure 3: The proportion of the total population who are aged 0–24 years in each Australian state and territory, 2011

Data source: Australian Bureau of Statistics, Census 2011.

### Where do ACT's children and young people live?

The districts with the highest total number of children and young people aged 0–24 in 2011 were Belconnen (31,406) and Tuggeranong (31,299). The districts with the highest proportion of residents aged 0–24 are Gungahlin (38.2%) followed by Tuggeranong (36.1%) and Belconnen (34.0%)

#### Figure 4: Total number and proportion of district population, by age group in the ACT, 2011

| District       |      |      |       |       |       | Proportion of residents aged 0–24 |
|----------------|------|------|-------|-------|-------|-----------------------------------|
|                | 0–4  | 5–9  | 10–14 | 15–19 | 20–24 |                                   |
| Belconnen      | 6542 | 5521 | 4986  | 6053  | 8304  | 34.0%                             |
| Gungahlin      | 4442 | 3787 | 3409  | 2919  | 3489  | 38.2%                             |
| North Canberra | 2264 | 1927 | 1772  | 3234  | 7324  | 34.3%                             |
| South Canberra | 1086 | 1184 | 1304  | 1363  | 1584  | 27.0%                             |
| Tuggeranong    | 6011 | 5605 | 6196  | 7005  | 6482  | 36.1%                             |

|              |      |      |      |      |      |       |
|--------------|------|------|------|------|------|-------|
| Weston Creek | 1623 | 1433 | 1313 | 1271 | 1126 | 29.7% |
| Woden        | 1776 | 1877 | 1955 | 1983 | 2143 | 29.5% |

Data source: Australian Bureau of Statistics, Census 2011.

## Where will ACT's children and young people live in the future?

Growth of the 0–24 year old population is projected to occur within some districts in the ACT, along with a decline in the growth rate in others. The ACT districts with the highest projected growth of 0–24 year olds (from 2009 to 2021) are Gungahlin-Hall (12,900) and the new district of Molonglo (8800).

**Figure 5: Projected annual growth of 0–24 year olds 2009–2021**

| District         | 2009 population numbers<br>(0–24 year olds) | 2021 population<br>numbers<br>(0–24 year olds) |
|------------------|---|--|
| North Canberra   | 15,450                                      | 16,100   |
| Belconnen        | 31,400                                      | 31,000   |
| Woden Valley     | 10,250                                      | 9600   |
| Weston Creek     | 6850  | 6000   |
| Molonglo         | -   | 8800   |
| Tuggeranong      | 33,300                                      | 24,900   |
| South Canberra   | 7100  | 7000   |
| Gungahlin-Hall   | 15,300                                      | 28,200   |
| Remainder of ACT | 100   | 100  |

Data source: Chief Minister and Cabinet Directorate, ACT population projections for suburbs and districts: 2009–2021, ACT Government, 2011.



**Figure 6: Projected annual growth of 0–24 year olds in each ACT district  
2009–2021**

## Part one: Children and young people

| Outcomes  | Indicators  |
|---|---|
| Optimal physical health and mental wellbeing                      | <ul style="list-style-type: none"> <li>• Smoking during pregnancy</li> <li>• Low birthweight in newborns</li> <li>• Infant mortality</li> <li>• Breastfeeding</li> <li>• Children fully immunised</li> <li>• Leading causes of hospitalisation</li> <li>• Psychiatric hospitalisation</li> <li>• Dental health</li> </ul> |
| Optimal development in the early years                            | <ul style="list-style-type: none"> <li>• Children entering school with basic skills for life and learning</li> <li>• Children enrolled in preschool</li> </ul>  |
| Educational engagement and success                                | <ul style="list-style-type: none"> <li>• Primary school and high school attendance</li> <li>• Students achieving at or above the national minimum standard in literacy and numeracy</li> <li>• Year 10–12 apparent retention</li> <li>• Transition from school to further education or work</li> </ul>                    |
| Children and young people adopt healthy and pro-social lifestyles | <ul style="list-style-type: none"> <li>• Children and young people who are overweight and obese</li> <li>• Young people who use drugs</li> <li>• Young people who offend</li> <li>• Young people convicted and placed on a community order</li> <li>• Young people in youth justice facilities</li> </ul>                 |

### Smoking during pregnancy

|                             |   |  |
|-----------------------------|---|--|
| Indicator description       | The percentage of ACT women who smoked tobacco during pregnancy.  |  |
| What do we measure?         | The number of women who report using tobacco during pregnancy.  |  |
| Why is this important?      | Smoking during pregnancy is an important risk factor for pregnancy complications, and is associated with poorer perinatal outcomes such as low birthweight, preterm birth, small for gestational age babies and perinatal death. <sup>2</sup>   |  |
| How is the ACT progressing? | <p>The percentage of women smoking during pregnancy decreased significantly from 14.6% to 10.4% between 2001 and 2009 (<math>p &lt; 0.05</math>). The percentage of ACT women who smoke during pregnancy is consistently significantly lower than the national rate.<sup>3</sup></p> <p>However, the percentage of ACT Aboriginal and Torres Strait Islander women who reported smoking during pregnancy was five times higher (50.6%) compared with the overall ACT percentage in 2009. Women in younger age groups were also significantly more likely to smoke during pregnancy with smoking rates for teenage women who gave birth approaching 50%.<sup>4</sup></p> |  |

**Figure 7: Percentage of women who smoked during pregnancy, ACT residents, 2001–2009**

Data source: Health Directorate, Epidemiology Branch. Maternal and Perinatal Data Collection, unpublished data.

## Low birthweight in newborns

|                             |  |  |
|-----------------------------|--|--|
| Indicator description       | The proportion of live born babies in the ACT (to ACT women) with a birthweight of less than 2500g.  |  |
| What do we measure?         | The birthweight of all babies born in the ACT.   |  |
| Why is this important?      | A baby's birthweight is a key indicator of health status. <sup>5</sup> Low birthweight babies have a greater risk of poor health and death, require a longer period of hospitalisation after birth and are more likely to develop significant disabilities. <sup>6</sup> |  |
| How is the ACT progressing? | The proportion of babies with low birthweight has remained relatively stable between 2000 and 2009.  |  |

The proportion of babies born in the ACT to ACT resident women with a birthweight less than 2500 grams is low. The most recently available data shows the proportion of low birthweight babies fluctuated between 4.7% and 6.4% between 2000 and 2009. Annual fluctuations in the percentage of low birthweight babies occur due to the small number of births in the ACT each year. The proportion of low birthweight babies in the ACT is similar to the national rate.

**Figure 8: Percentage of low birthweight live born babies, ACT residents, 2000–2009**

Data source: Health Directorate, Epidemiology Branch, Maternal and Perinatal Health Series, unpublished data.

## Infant mortality

|                             |   |
|-----------------------------|---|
| Indicator description       | The number of infant deaths (at less than 1 year of age) per 1000 live births in the ACT.   |
| What do we measure?         | The number of infant deaths and the number of live births in the ACT.   |
| Why is this important?      | Infant mortality (i.e. deaths under one year of age) is commonly viewed as an important indicator of the general health and wellbeing of a population, and has a large influence on life expectancy at birth. A high infant mortality rate lowers life expectancy, while a low infant mortality rate contributes to increased life expectancy. <sup>7</sup> |
| How is the ACT progressing? | The infant mortality rate for ACT babies has remained relatively stable between 2000 and 2010.  |

The infant mortality rate for ACT babies fluctuated between 3.0 and 6.9 per 1000 live births between 2000 and 2010. Apparent annual fluctuations in the infant mortality rate occur due to the very small number of infant deaths in the ACT each year. Over the same time period the infant mortality rate for Australia ranged from 4.1 to 5.3 per 1000 live births.<sup>8</sup>

**Figure 9: Infant mortality rate per 1000 live births, ACT residents, 2000–2010**

Data source: ABS. Deaths, Australia, 2010. Cat. no. 3302.0, 2011.

## Breastfeeding

|                             |  |  |
|-----------------------------|--|--|
| Indicator description       | The proportion of infants being breastfed in the ACT.  |  |
| What do we measure?         | In 2009, the ACT Government Health Directorate implemented a simple data collection for babies presented for immunisation at Child Health Immunisation Clinics at 2, 4, 6 and 12 months of age. During the immunisation encounter the nurse asked if the baby is breastfed. Given the success of the initial implementation, and in line with the nationally recognised data indicators, enhanced data collection has occurred since July 2011. Information is now collected on indicators including 'exclusive', 'predominant' and 'any' breastfeeding. The quality of this data is being monitored and will be available for future reports. |  |
| Why is this important?      | The benefits of breastfeeding are well-established. The National Health and Medical Research Council (NHMRC) recommend exclusive breastfeeding for the first six months of life. The NHMRC has suggested a goal of 90% initiation rate, with 80% of infants continuing to be breastfed at six months of age. <sup>9</sup>  |  |
| How is the ACT progressing? | In 2009, 73% of babies who presented at Child Health Immunisation Clinic for their two month immunisation were still being breastfed, 63% at four month immunisations, 50% at six month immunisations and 23% at 12 month immunisations.   |  |
|                             | In 2011, 76% of babies who presented at Child Health Immunisation Clinics for their two month immunisation were still being breastfed, 68% at four month immunisations, 56% at six month immunisations and 23% at 12 month immunisations.  |  |

**Figure 10: Child Youth and Women's Health Program clients breastfeeding at 2, 4, 6, 12 months, 2010–2011**

Data source: Health Directorate, Maternal and Child Health Program, 2010–11.

## Children fully immunised

|                        |   |  |
|------------------------|---|--|
| Indicator description  | The proportion of ACT children aged 60 to 63 months of age who are fully immunised.   |  |
| What do we measure?    | The proportion of children aged 60 to 63 months of age who are fully immunised according to the Australian Childhood Immunisation Register.   |  |
| Why is this important? | Immunisation protects children (and adults) against harmful infections before they come into contact with them in the community. Immunisation uses the body's natural defence mechanism — the immune response — to build resistance to specific infections. Immunisation helps children stay healthy by |  |

|                             |   |  |
|-----------------------------|---|--|
|                             | preventing serious infections. <sup>10</sup>  |  |
| How is the ACT progressing? | The proportion of ACT children aged 5 fully immunised has increased. 84% of children were fully immunised in 2008–2009, 89% in 2009–2010 and 91% of children were fully immunised in 2010–2011 and 2011–2012 (part year figure only). |  |

**Figure 11: Proportion of ACT children aged 5 fully immunised**

The ACT continues to report one of the highest levels of fully immunised children at age 5 in the nation.

% Fully immunised = No. children vaccinated/No. Children in register x 100. Only vaccines administered before 60 months are included in the coverage calculation.

**Figure 12: Proportion of children aged 60–63 months assessed as fully immunised by state or territory (age calculated at 31 December 2011)**

Data source: *The Australian Childhood Immunisation Register Statistics*, Medicare Australia, March 2012 and *Medicare Australia Annual Reports*.

**Figure 13: The National Immunisation Program (NIP) — current schedule**

|           |   |   |
|-----------|---|---|
| Birth     | Hepatitis B   |   |
| 2 months  | Diphtheria<br>Pertussis<br>Hib<br>Pneumococcal ( <i>refer to note 1</i> )<br>5)                                       | Tetanus<br>Polio<br>Hepatitis B<br>Rotavirus ( <i>refer to note</i>                   |
| 4 months  | Diphtheria<br>Pertussis<br>Hib<br>Pneumococcal ( <i>refer to note 1</i> )<br>5)                                       | Tetanus<br>Polio<br>Hepatitis B<br>Rotavirus ( <i>refer to note</i>                   |
| 6 months  | Diphtheria<br>Pertussis<br>Hib ( <i>refer to note 2</i> )<br>months)<br>Pneumococcal ( <i>refer to note 1</i> )<br>6) | Tetanus<br>Polio<br>Hepatitis B ( <i>or at 12</i><br>Rotavirus ( <i>refer to note</i> |
| 12 months | Measles<br>Rubella<br>Hepatitis B ( <i>or at 6 months</i> )<br>to note 3)   | Mumps<br>Hib<br>Meningococcal C ( <i>refer</i>  |

|           |  |                                |
|-----------|--|--------------------------------|
| 18 months | Varicella ( <i>refer to note 4</i> )<br><i>note 7)</i> | Pneumococcal ( <i>refer to</i> |
| 4 years   | Diphtheria<br>Pertussis<br>Measles<br>Rubella          | Tetanus<br>Polio<br>Mumps      |

#### Notes:

Pneumococcal vaccine is funded under the NIP for children born from 1 January 2005.

Four doses of Hib vaccine are due at 2, 4, 6 and 12 months of age when 'PRP-T Hib' containing vaccine is used.

Meningococcal C vaccine is funded under the NIP for children born from 1 January 2002.

Varicella vaccine is funded under the NIP for children born from 1 May 2004.

Rotavirus vaccine is funded under the NIP for children born from 1 May 2007.

Three doses of Rotavirus vaccine are due at 2, 4 and 6 months of age when RotaTeq vaccine is used.

Four doses of Pneumococcal vaccine are due at 2, 4, 6 and 18 months of age when Synflorix vaccine is used.

## Leading causes of hospitalisations

|                             |   |  |
|-----------------------------|---|--|
| Indicator description       | The leading causes of hospitalisations for ACT children.  |  |
| What do we measure?         | The top 25 causes of hospitalisation for Canberra residents aged 14 or under at ACT public hospitals (excluding episodes related to births).  |  |
| Why is this important?      | This indicator outlines the leading causes of hospitalisation and enables health planners to ensure that health promotion, early intervention and our public hospital services are able to respond effectively to major changes in the demand for hospital services for children. |  |
| How is the ACT progressing? | <p>The main causes of hospitalisation for children are injury and infectious disease.</p> <p>The top 25 diagnoses for the hospitalisation of children, account for more than half of all hospital episodes for people aged 14 years or younger at ACT public hospitals.</p>       |  |

In 2010–2011, there were 4024 inpatient hospital episodes recorded at ACT public hospitals for Canberra residents aged 14 years or younger. This is similar to the number of inpatient hospital episodes in 2009–2010, where there were 4162 episodes.

The major cause of hospitalisation for children in 2010–2011 was tonsillectomy and/or

adenoidectomy with 358 episodes, followed by injury to the forearm, wrist, hand or foot with 325 episodes.

**Figure 14:** ACT public hospitals, Top 25 diagnoses for hospital admission by volume, persons aged 14 years or less, 2010–2011

| Diagnosis  | Separations |
|--|-------------|
| Tonsillectomy and/or adenoidectomy                             | 358         |
| Injury to forearm, wrist, hand and/or foot                     | 325         |
| Bronchitis and asthma diagnoses                                | 212         |
| Other factors influencing health status                        | 211         |
| Inflammatory bowel disease                                     | 173         |
| Respiratory infections and inflammations                       | 160         |
| Abdominal pain   | 153         |
| Seizures   | 120         |
| Reticuloendothelial <sup>1</sup> and immunity system disorders | 100         |
| Testes procedures  | 99          |
| Otitis media <sup>2</sup> and upper respiratory infections     | 92          |
| Dental extract and restorations                                | 86          |
| Myringotomy and tube insertion                                 | 86          |
| Appendicectomy   | 85          |
| Diabetes   | 84          |
| Humerus, tibia, fibula and/or ankle procedures                 | 82          |
| Injury to shoulder, arm, elbow, knee and/or leg                | 77          |
| Removal of internal fixation — hip and femur                   | 74          |
| Other gastroscopy and non-major digestive system disorders     | 73          |

|                                     |    |
|-------------------------------------|----|
| Metabolic disorders                 | 72 |
| Whooping cough and acute bronchitis | 70 |
| Cellulitis                          | 69 |
| Gastroenteritis                     | 69 |
| Viral illness                       | 61 |
| Kidney and urinary tract infections | 57 |

Data source: ACT Health, Admitted patient care data set, hospital separations for persons aged 14 years or younger 2010–11  
(excludes admissions for births, ACT residents only)

## Psychiatric hospitalisation

|                             |   |  |
|-----------------------------|---|--|
| Indicator description       | The rate of hospitalisation of ACT young people for mental and behavioural disorders.   |  |
| What do we measure?         | The rate per 1000 people aged 14 years or younger, who are residents of the ACT and who are admitted to hospital with a mental or behavioural disorder (as per the International Classification of Diseases, Australian Modification: ICD10-AM).  |  |
| Why is this important?      | Early intervention and support in the community is essential for the best possible management of mental health and behavioural disorders, and the best possible health and social outcomes. This is particularly important for young people. Positive interventions within the community reduce the likelihood of hospitalisation of children for psychiatric conditions. |  |
| How is the ACT progressing? | Less than one in a thousand ACT residents aged 14 years or less are hospitalised for mental health or behavioural diagnoses.  |  |

**Figure 15:** ACT public hospitals, Hospitalisation rate per 1000 population for mental health and behavioural disorders (person aged 14 years or less) from 2007–2008 to 2010–2011

The small number of people aged 14 or less hospitalised for mental health or behavioural disorders can result in fluctuations between years.



Data source: The Australian Bureau of Statistics for Resident ACT population for people aged 14 years and younger by year and the Health Directorate Admitted Patient Care data set.

## Dental health

|                             |  |  |
|-----------------------------|--|--|
| Indicator description       | The mean number of decayed, missing or filled teeth (DMFT) among ACT primary school children aged 12 years.  |  |
| What do we measure?         | The number of teeth decayed, missing or extracted due to decay, or with fillings of children aged 12 years, visiting Health Directorate dental services. The number of decayed, missing or filled teeth is expressed as the DMFT (for permanent teeth).  |  |
| Why is this important?      | This indicator provides an indication of the effectiveness of prevention, early intervention and treatment services.   |  |
| How is the ACT progressing? | <p>The Health Directorate mean DMFT figures for 2011–2012 are 0.62 at 12 years.</p> <p>This figure is representative of ACT Health Directorate clients only.</p> <p>The mean DMFT is lower, when compared to the figures available from the most recent Child Dental Health Survey (2007). This survey indicated that the mean DMFT for ACT children aged 12 was 0.80. The mean DMFT for children aged 12 years nationally was 0.95.</p> |  |

Data source: Health Directorate Dental Program client database Titanium and the Australian Institute of Health and Welfare, *Dental Health of Australia's teenagers and pre-teen children: the Child Dental Health Survey*, Australia 2007.

## Children entering school with the basic skills for life and learning

|                       |  |  |
|-----------------------|--|--|
| Indicator description | The proportion of ACT children who are developmentally vulnerable on one or more domains of the Australian Early Development Index (AEDI).   |  |
| What do we measure?   | <p>The proportion of kindergarten children who are developmentally on track, developmentally at risk and developmentally vulnerable on each domain of the Australian Early Development Index. The AEDI is a population measure of children's development as they enter school and was first conducted in 2009. The AEDI measures five domains of early childhood development: physical health and wellbeing, social competence, emotional maturity, language and cognitive skills and communication skills and general knowledge.</p> <p>Also presented is the proportion of Aboriginal and Torres Strait Islander children in the ACT who are developmentally vulnerable on one or more and</p> |  |

|                             |  |  |
|-----------------------------|--|--|
|                             | two or more domains.   |  |
| Why is this important?      | Successful transition to school is greatly shaped by children's attainment of the basic skills for life and learning in the early years. <sup>11</sup> Children's development in the years before school has an impact on both their ability to be ready to learn at school entry and their social and economic outcomes over the course of a lifetime. The quality of the relationships, environments and experiences in the early stages of development are crucial in shaping a child's health, wellbeing and developmental outcomes. |  |
| How is the ACT progressing? | The results of the AEDI indicate that overall the majority of children in the ACT are developmentally 'on track' and doing well. The proportion of ACT children  |  |
|                             | developmentally vulnerable is lower than their Australian peers. 22.2% of children living in the ACT are developmentally vulnerable on one or more domains, compared to 23.6% of children nationally. 10.9% of children living in the ACT are developmentally vulnerable on two or more domains, compared to 11.8% nationally.   |  |

The proportion of children developmentally vulnerable varies across ACT regions. The lowest proportion of children developmentally vulnerable on one or more domains is in South Canberra (12.4%) and Woden (17.8%). The highest proportion of children developmentally vulnerable on one or more domains is in Weston Creek (27.9%) and Gungahlin (23.6%).

When reviewing each of the individual developmental domains of the AEDI once again most ACT children are developmentally on track. Proportions of developmental vulnerability within the physical health and wellbeing and emotional maturity domains are slightly higher than the Australian proportions.

**Figure 16:** The proportion of ACT and Australian children developmentally vulnerable, AEDI, 2009

**Figure 17:** The proportion of children developmentally vulnerable on one or more domains of the AEDI in each region within the ACT, 2009

**Figure 18:** The proportion of Australian and ACT children developmentally on track, vulnerable and at risk on each domain of the AEDI, 2009

| Domain                                     | Developmentally on track (%) |             | Developmentally at risk (%) |             | Developmentally vulnerable (%) |            |
|--|------------------------------|-------------|-----------------------------|-------------|--------------------------------|------------|
|  | Australia                    | <b>ACT</b>  | Australia                   | <b>ACT</b>  | Australia                      | <b>ACT</b> |
| Physical health and wellbeing              | 77.7                         | <b>76.3</b> | 13.0                        | <b>14.3</b> | 9.3                            | <b>9.4</b> |
| Social competence                          | 75.3                         | <b>74.8</b> | 15.2                        | <b>16.3</b> | 9.5                            | <b>8.9</b> |
| Emotional maturity                         | 75.6                         | <b>75.4</b> | 15.5                        | <b>15.6</b> | 8.9                            | <b>9.0</b> |
| Language and cognitive skills              | 77.1                         | <b>83.8</b> | 14.0                        | <b>10.5</b> | 8.9                            | <b>5.7</b> |
| Communication skills and general knowledge | 75.0                         | <b>75.2</b> | 15.8                        | <b>15.9</b> | 9.2                            | <b>8.9</b> |

The proportion of ACT Aboriginal and Torres Strait Islander children developmentally vulnerable is lower than their Australian peers. 37.0% of Aboriginal and Torres Strait Islander children living in the ACT are developmentally vulnerable on one or more domains, compared to 47.4% nationally. 26.0% of Aboriginal and Torres Strait Islander children living in the ACT are developmentally vulnerable on two or more domains, compared to 29.6% nationally.

Overall the proportion of Aboriginal and Torres Strait Islander children who are developmentally vulnerable is higher than non-Aboriginal and Torres Strait Islander children across all jurisdictions in Australia. The ACT and Tasmania reported the smallest gap between the proportion of Aboriginal and Torres Strait Islander children and non-Aboriginal and Torres Strait Islander children developmentally vulnerable.

**Figure 19:** The proportion of Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander children developmentally vulnerable on one or more domains in the AEDI, 2009

Data source: Centre for Community and Child Health and Telethon Institute for Child Health Research 2009, *A Snapshot of Early Childhood Development in Australia — AEDI National Report 2009* (Re-Issue 2011), Australian Government, Canberra.

## Children enrolled in preschool

|                       |  |
|-----------------------|--|
| Indicator description | The proportion of children enrolled in a preschool program in the ACT. |
|-----------------------|--|

|                             |   |  |
|-----------------------------|---|--|
| What do we measure?         | The proportion of children, as a percentage of the estimated resident population, enrolled in a preschool program in the year before attending full-time schooling. Also presented is the proportion of Aboriginal and Torres Strait Islander children in the ACT who were enrolled in an early childhood education program in the year before full-time schooling.   |  |
| Why is this important?      | Preschool is one of the important early learning experiences for children. It provides a rich environment to facilitate the development of children's language, social, emotional, motor, cognitive and independence skills. It also assists with children's school readiness and transition to full time schooling. Early school experiences can have a lasting impact on a person's attitude to education and training and confidence in their learning abilities.  |  |
| How is the ACT progressing? | <p>In August 2011, a total of 4,477 children aged 4 or 5 years were enrolled in preschool programs provided through public schools and long day care centres (LDC) representing 94% of the estimated preschool age population. Approximately 620 children were enrolled in preschool programs provided by non-government schools. Combined with the enrolments in public and LDC preschool programs this represents a total estimated enrolment of 107% of the eligible preschool age population.</p> <p>90% of the estimated eligible Aboriginal and Torres Strait Islander children were enrolled in preschool programs in 2011.</p> <p>Note: These data are not comparable to data reported in previous years due to changes in the data sources and methodologies used.</p> |  |

Data sources: ABS, *Experimental Estimates of Preschool Education*, Australia, cat. no. 4240.0; ABS *Australian Demographic Statistics*, Sep 2011, cat. no. 3101.0; ABS *Estimated Indigenous Resident Population 2011*, cat. no. 3238; ACT Education and Training Directorate February and August School Census 2011.

## Primary school and high school attendance

|                       |  |
|-----------------------|--|
| Indicator description | Student attendance rate is the number of actual full-time equivalent student-days attended by full-time students as a percentage of the total number of possible student-days attended in the first semester of the school year.   |
| What do we measure?   | <p>Attendance is analysed for the first semester of the school year.</p> <p>Attendance data are collected through the electronic school management system at the school. For primary schools, teachers record student attendance in the morning and afternoon. Absence data are aggregated at the end of each term and entered in the school management system. Term 1 and 2 data are analysed at the end of semester 1 for national and local</p> |

|                             |  |
|-----------------------------|--|
|                             | reporting purposes.  |
| Why is this important?      | Attendance at school is essential for learning and for enabling students to benefit from the full range of educational programs offered at school. Attendance is an accepted indicator of student engagement.  |
| How is the ACT progressing? | <p>The student attendance rates of year one to ten students have been maintained over 2009–2011.</p> <p>Student attendance data are reported for full-time students in years 1–10, but are not collected uniformly across Australian jurisdictions and schooling sectors and are therefore not comparable.</p> |

**Figure 20: Attendance rate (%) at primary and high school**

|             | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | Year 6 | Year 7 | Year 8 | Year 9 | Year 10 |
|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|---------|
| <b>2009</b> | 94     | 94     | 94     | 94     | 93     | 93     | 91     | 88     | 87     | 87      |
| <b>2010</b> | 94     | 94     | 94     | 94     | 94     | 93     | 92     | 89     | 87     | 86      |
| <b>2011</b> | 93     | 93     | 94     | 93     | 93     | 93     | 91     | 89     | 87     | 86      |

Data source: ACT Education and Training Directorate

## Students achieving at or above the national minimum standard in literacy and numeracy

|                       |   |
|-----------------------|---|
| Indicator description | The proportion of ACT students in years 3, 5, 7, and 9 achieving at or above the national minimum standard in literacy (reading and writing) and numeracy.  |
| What do we measure?   | The results are based on the number of students at each year level who participated in the National Assessment Program: Literacy and Numeracy (NAPLAN) testing in each given year. The proportion is calculated as the percentage of total participants who achieved at or above the national minimum standard. Also included is the proportion of Aboriginal and Torres Strait Islander students in the ACT achieving at or above the national |

|                             |   |
|-----------------------------|---|
|                             | minimum standard in literacy and numeracy.  |
| Why is this important?      | Literacy and numeracy skills acquired in the schooling years are the building blocks for further education, social development and employment. The ability to read, write and perform mathematics is essential in day-to-day life and for educational opportunities and employment prospects.   |
| How is the ACT progressing? | <div>ACT students are among the highest performing in the country.</div> <div>The proportion of year 3 and 5 students achieving at or above the national minimum standard in reading and numeracy has increased or remained stable between 2008 and 2011. The proportion of year 7 students achieving at or above the national minimum standard in reading has increased slightly between 2008 and 2011. The ACT has consistently performed better than the national average in all subjects across all school years.</div> |

**Figure 21:** The proportion of year 3, 5, 7 and 9 students at or above the national minimum standard in reading, writing and numeracy in the ACT and Australia in the 2008, 2009, 2010 and 2011 NAPLAN testing

|        |          | ACT  |      |      |      | Australia |      |      |      |
|--------|----------|------|------|------|------|-----------|------|------|------|
|        |          | 2008 | 2009 | 2010 | 2011 | 2008      | 2009 | 2010 | 2011 |
| Year 3 | Reading  | 94.4 | 94.7 | 95.7 | 95.6 | 92.1      | 93.7 | 93.9 | 93.8 |
|        | Writing* | 96.3 | 95.9 | 96.6 | 96.2 | 95.4      | 95.7 | 95.5 | 95.3 |
|        | Numeracy | 96.4 | 94.8 | 96.6 | 96.5 | 95.0      | 94.0 | 94.3 | 95.6 |
| Year 5 | Reading  | 94.8 | 94.0 | 94.2 | 94.5 | 91.0      | 91.7 | 91.3 | 91.5 |
|        | Writing* | 94.9 | 93.9 | 94.8 | 93.7 | 92.6      | 93.0 | 93.1 | 92.5 |
|        | Numeracy | 94.9 | 95.5 | 95.3 | 95.4 | 92.7      | 94.2 | 93.7 | 94.4 |
| Year 7 | Reading  | 96.3 | 95.5 | 96.9 | 96.8 | 94.2      | 94.0 | 94.9 | 94.7 |
|        | Writing* | 93.4 | 93.2 | 94.6 | 91.8 | 91.8      | 92.5 | 92.6 | 91.1 |
|        | Numeracy | 97.1 | 95.7 | 96.8 | 95.7 | 95.4      | 94.8 | 95.1 | 94.5 |
| Year 9 | Reading  | 96.6 | 94.1 | 93.7 | 94.4 | 92.9      | 92.2 | 90.8 | 92.4 |

|  |          | ACT  |      |      |      | Australia |      |      |      |
|--|----------|------|------|------|------|-----------|------|------|------|
|  |          | 2008 | 2009 | 2010 | 2011 | 2008      | 2009 | 2010 | 2011 |
|  | Writing* | 88.9 | 89.4 | 89.0 | 85.5 | 87.2      | 87.8 | 87.2 | 84.8 |
|  | Numeracy | 96.6 | 95.4 | 94.7 | 94.6 | 93.6      | 95.0 | 93.1 | 93.0 |

Data source: National Assessment Program, Literacy and Numeracy, *Achievement in Reading, Writing, Language Conventions and Numeracy, National Report for 2009, 2010 and 2011*.

In 2011 and 2010, ACT students excelled in reading, performing significantly ahead of the proportion of students nationally at or above the national minimum standard. Year 3 scores were significantly higher than most other jurisdictions and results for years 5, 7 and 9 were equal highest.

When considering only Aboriginal and Torres Strait Islander students, the proportion of students in the ACT achieving at or above the national minimum standard in reading, writing and numeracy continued to be higher than students nationally across years 3, 5, 7 and 9. In 2011 as in previous years, the proportion of Aboriginal and Torres Strait Islander students in the ACT who were achieving at or above the national minimum standards was below the proportion of non-Aboriginal and Torres Strait Islander students in the ACT, as was the case across all jurisdictions.

**Figure 22:** The proportion of Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander year 3, 5, 7 and 9 students at or above the national minimum standard in reading, writing and numeracy in the ACT and Australia from 2010 to 2011

|        |          | ACT         |          |             |          | Australia   |          |             |          |
|--------|----------|-------------|----------|-------------|----------|-------------|----------|-------------|----------|
|        |          | 2010        |          | 2011        |          | 2010        |          | 2011        |          |
|        |          | ATSI        | Non-ATSI | ATSI        | Non-ATSI | ATSI        | Non-ATSI | ATSI        | Non-ATSI |
| Year 3 | Reading  | <b>83.0</b> | 96.0     | <b>86.8</b> | 95.8     | <b>75.1</b> | 95.0     | <b>76.3</b> | 94.9     |
|        | Writing  | <b>84.6</b> | 96.9     | <b>90.5</b> | 96.3     | <b>79.0</b> | 96.6     | <b>79.9</b> | 96.2     |
|        | Numeracy | <b>84.4</b> | 96.9     | <b>88.9</b> | 96.6     | <b>76.6</b> | 95.3     | <b>83.6</b> | 96.4     |
| Year 5 | Reading  | <b>78.9</b> | 94.5     | <b>86.0</b> | 94.7     | <b>66.2</b> | 92.7     | <b>66.4</b> | 92.9     |
|        | Writing  | <b>83.2</b> | 95.1     | <b>87.0</b> | 93.9     | <b>70.5</b> | 94.4     | <b>68.9</b> | 93.9     |
|        | Numeracy | <b>82.1</b> | 95.6     | <b>86.0</b> | 95.6     | <b>71.4</b> | 95.0     | <b>75.2</b> | 95.5     |
| Year 7 | Reading  | <b>88.5</b> | 97.1     | <b>86.1</b> | 97.1     | <b>76.6</b> | 95.9     | <b>77.1</b> | 95.7     |

|        |          | ACT         |          |             |          | Australia   |          |             |          |
|--------|----------|-------------|----------|-------------|----------|-------------|----------|-------------|----------|
|        |          | 2010        |          | 2011        |          | 2010        |          | 2011        |          |
|        |          | ATSI        | Non-ATSI | ATSI        | Non-ATSI | ATSI        | Non-ATSI | ATSI        | Non-ATSI |
|        | Writing  | <b>81.8</b> | 94.9     | <b>69.3</b> | 92.4     | <b>69.8</b> | 93.9     | <b>66.9</b> | 92.6     |
|        | Numeracy | <b>85.6</b> | 97.1     | <b>79.6</b> | 96.1     | <b>77.0</b> | 96.1     | <b>76.5</b> | 95.5     |
| Year 9 | Reading  | <b>84.0</b> | 93.9     | <b>89.0</b> | 94.6     | <b>64.2</b> | 92.2     | <b>71.9</b> | 93.5     |
|        | Writing  | <b>71.3</b> | 89.4     | <b>62.7</b> | 86.1     | <b>59.0</b> | 88.7     | <b>55.0</b> | 86.4     |
|        | Numeracy | <b>83.1</b> | 95.0     | <b>83.0</b> | 94.9     | <b>70.4</b> | 94.3     | <b>72.0</b> | 94.1     |

Data source: National Assessment Program, Literacy and Numeracy, *Achievement in Reading, Writing, Language Conventions and Numeracy, National Report for 2009, 2010 and 2011.*

## Year 10–12 apparent retention

|                        |   |
|------------------------|---|
| Indicator description  | The proportion of ACT year 10 students continuing to year 12.   |
| What do we measure?    | The number of full-time equivalent year 12 students enrolled in a given year as a proportion of students enrolled in year 10 two years earlier. Also presented is the year 10–12 apparent retention rate of full time Aboriginal and Torres Strait Islander students.   |
| Why is this important? | <p>Higher education levels are associated with increased opportunities for employment, improving future income, increased standards of living and access to health care. Completing school provides many opportunities to improve both economic and social wellbeing. As the number of low-skilled jobs in the employment market decreases, the importance of educational qualifications increases.</p> <p>Other factors being constant, a higher or increasing apparent retention rate suggests that a large number of students are continuing to participate in school education which is likely to result in improved educational and employment outcomes.</p> |



|                             |  |  |
|-----------------------------|--|--|
| How is the ACT progressing? | The year 10–12 apparent retention rate for all ACT students has increased from 2007 to 2011 and is significantly higher than Australian results. The rate declined marginally from 2010 to 2011. |  |
|-----------------------------|--|--|

**Figure 23:** **The year 10–12 apparent retention rate of ACT students from 2007 to 2011**

From 2007 to 2011, the ACT year 10–12 apparent retention rate continued to be in excess of 10 percentage points higher than the Australian year 10–12 apparent retention rate.

The year 10–12 apparent retention rate of full-time Aboriginal and Torres Strait Islander students has also increased considerably from 59.0% in 2007 to 78.4% in 2011. Nationally, the year 10–12 apparent retention rate of full-time Aboriginal and Torres Strait Islander students was 48.5% in 2007 increasing marginally to 53.5% in 2011.

Determining the retention rate is inherently difficult, as it does not take into account students who repeat, move interstate, transfer between schools or school sectors, and students who have left school previously but return to continue their school education.

Data source: ABS, *Schools: Australia 2011*, cat. no. 4221.0, Table 64a: Apparent Retention Rates.

## Transition from school to further education or work

|                        |   |
|------------------------|---|
| Indicator description  | The percentage of ACT year 12 graduates employed or studying six months after completing an ACT Year 12 Certificate.  |
| What do we measure?    | <p>The data for this indicator is obtained from the annual survey of students who completed an ACT Year 12 Certificate in Australia in the reference year. The survey excludes full fee paying international students and includes students who were awarded a Year 12 Certificate from the Canberra Institute of Technology.</p> <p>The indicator is calculated by dividing the estimated number of graduates who were employed or studying six months after graduation by the total number of graduates in the target population. Studying includes graduates who were actively undertaking some study in the year following graduation, including those attending university, technical and further education (TAFE), undertaking an apprenticeship or repeating year 12. Employed includes graduates who are participating in any type of work including full-time, casual, temporary or part-time work, if it was for one hour or more over a two-week period.</p> |
| Why is this important? | The ACT Government is committed to providing learning pathways for students which result in an educated and skilled workforce that meets the present and future needs of the ACT and region. The destination of students  |

|                             |   |  |
|-----------------------------|---|--|
|                             | after leaving school remains an important piece of information contributing to the ongoing development and provision of appropriate education and training options into the future.   |  |
| How is the ACT progressing? | Of those who completed year 12 in the ACT in 2010, 93.9% reported that they were employed or studying in 2011. This was significantly higher than the 90.1% reported for the 2009 graduate survey. Data relating to Aboriginal and Torres Strait Islander children and young people is not available for this indicator due to the small number of Aboriginal and Torres Strait Islander students in ACT. |  |

**Figure 24: Percentage of ACT year 12 graduates employed or studying six months after completing an ACT Year 12 Certificate**

| Year of graduation              | 2007 | 2008 | 2009 | 2010 |
|---------------------------------|------|------|------|------|
| Percentage employed or studying | 92.1 | 91.1 | 90.1 | 93.9 |

For 2010 year 12 graduates, the ACT results for this indicator were slightly higher than the other states and territories (Victoria, Queensland and Western Australia) who published similar data in the Report on Government Services 2012.

## Children and young people who are overweight and obese

|                        |  |
|------------------------|--|
| Indicator description  | The proportion of ACT children and young people who are overweight and obese.  |
| What do we measure?    | Measured (not self-reported) height and weight of children and young people in the ACT aged 5 to 17 years.   |
| Why is this important? | Children who are not sufficiently physically active and do not have a balanced, well-proportioned diet are at risk of becoming overweight and obese. Increases in childhood overweight and obesity are now emerging as a serious global public health issue with the World Health Organization (WHO) describing this increase as an epidemic in some countries. <sup>12</sup> In Australia, the National Health and Medical Research Council (NHMRC) estimates that between 20% and 25% of Australian children are now overweight or obese, an increase from 1985, where 10% to 12% were estimated as overweight or obese. <sup>13</sup> |

|                             |   |  |
|-----------------------------|---|--|
| How is the ACT progressing? | The percentage of ACT children who were overweight and obese was similar to the percentage of Australian children overweight and obese.   |  |
|                             | Overall, 21.0% of ACT children aged 5 to 17 years were overweight or obese in the <i>2007–2008 National Health Survey</i> . The percentage of children who were overweight was 15.8% and 5.2% were obese. Comparisons with earlier time periods are not available as previous data is based on self-reported height and weight, whereas data collected in 2007–2008 is based on measured height and weight. |  |

**Figure 25: The percentage of ACT and Australian children aged 5 to 17 years who were overweight or obese, 2007–2008**

Data source: ABS, *National Health Survey: Summary of Results; State Tables, 2007–08*, cat. no. 4362.0 and ABS, *National Health Survey: Summary of Results, 2007–08*, cat. no. 4364.0

## Young people who use drugs

|                        |   |  |
|------------------------|---|--|
| Indicator description  | The proportion of ACT young people who use alcohol, tobacco or illicit drugs.   |  |
| What do we measure?    | The proportion of secondary students who report current use of alcohol, tobacco and illicit drugs. The <i>ACT Secondary Student Alcohol and Drug Survey</i> is conducted on a three yearly basis with the most recently available survey data being for 2008.   |  |
| Why is this important? | <p>The harms to individuals, families, communities and Australian society as a whole from alcohol, tobacco and other drugs are well known. Adolescence is a critical age for monitoring the initiation of illicit drug use.</p> <p>Drinking alcohol in adolescence can be harmful to young people's physical and psychosocial development. Alcohol-related damage to the brain can be responsible for memory problems, inability to learn, problems with verbal skills, alcohol dependence and depression.<sup>14</sup> Young people are more at risk of motor vehicle accidents, injuries, accidental death and suicide whilst under the influence of alcohol and drugs. They are also highly susceptible to being victims of crime.<sup>15</sup> Tobacco smoking is one of the top risk factors for chronic disease including many types of cancer, respiratory disease and heart disease.<sup>16</sup></p> |  |

|                             |   |  |
|-----------------------------|---|--|
| How is the ACT progressing? | <b>Tobacco use</b> The prevalence of tobacco use by secondary students in the ACT has decreased steadily over time.   |  |
|                             | <b>Alcohol use</b> Alcohol use amongst ACT secondary school students has remained similar over time. <sup>17</sup> In 2008, a quarter (24.2%) of students reported consuming alcohol on at least one day in the last seven days and 7.1% reported harmful drinking (according to NHMRC guidelines). <sup>18</sup> |  |
|                             | <b>Illicit substance use</b> There was a decrease in the proportion of students reporting the use of illicit substances between 1996 and 2008. <sup>19</sup> The 2008 survey shows a continued reduction in the percentage of students who have used illicit substances,  |  |
|                             | including those who have ever used: any illicit substance (2008: 14.8%, 2005: 20.3%); cannabis (2008: 13.2%, 2005: 16.9%); hallucinogens (2008: 2.4%, 2005: 4.1%); amphetamines (2008: 3.3%, 2005: 5.8%); and cocaine (2008: 1.6%, 2005: 3.4%). <sup>20</sup>   |  |

**Figure 26: Tobacco use, ACT secondary students (%), 1996–2008**

Data source: Epidemiology Branch, ACT Health. ACT Secondary Student Drug and Health Risk Behaviours: Results of the 2008 ACT Secondary Student Alcohol and Drug Survey.

**Figure 27: Alcohol consumption, ACT secondary students (%), 1996–2008**

## Young people who offend

|                        |   |
|------------------------|---|
| Indicator description  | The number of youth offenders per 100,000 of the ABS Estimated Resident Population.   |
| What do we measure?    | The youth offender rate measures the number of youth offenders per 100,000 of the population and can be compared to offending rates across individual states and territories as well as over time. The youth offender rate includes offenders aged between 10 and 19 years of age.  |
| Why is this important? | <p>This indicator is important because it provides an indication of trends in offending by young people. Importantly, it shows the proportion of young people in the population that commit offences, as well as the proportion of young offenders of the total offender population.</p> <p>Young people are likely to face new challenges, learn new skills and lead more independent lives. During adolescence, risk taking behaviour can be part of this change. While many young people exhibit some risk taking behaviour only a minority will come into contact with the formal justice system.</p> |

|                             |  |  |
|-----------------------------|--|--|
|                             | <p>Young people's offending can be visible and a concern to their families, school and wider community. Research indicates that young people who enter the formal justice system are more likely to go on to be adult offenders. Young people are also vulnerable to being victims of crime, and they may need support to reduce the likelihood of their victimisation.</p> <p>The ACT Government has a strong emphasis on the diversion of young people away from the formal justice system. Diversion is a critical element of the <i>Blueprint for Youth Justice in the ACT 2012–22</i>.</p> <p>This information can inform government policies and services about measures that are effective in minimising young people's contact with the formal justice system and help to support young people to stay safe.</p> |  |
| How is the ACT progressing? | The rate of youth offending for the ACT has remained consistent overtime comparing 2008–2009 (2949.3) to 2009–2010 (2422.9) and 2010–2011 (2429.0).  |  |

Data source: ABS, *Recorded Crime — Offenders, 2010–11*, cat. no. 4519.0.

## Young people convicted and placed on a community order

|                        |   |  |
|------------------------|---|--|
| Indicator description  | A measure of the number of young people under community-based supervision orders in the ACT.  |  |
| What do we measure?    | The number of young people under community-based supervision orders in the ACT.   |  |
| Why is this important? | <p>This indicator is important because it measures how many young people who attend court are required to be supervised in the community by the Community Services Directorate. If a young person is placed on a community-based supervision order, the Community Services Directorate provides support and supervision for the young person and referral to other appropriate services.</p> <p>The ACT Government provides a range of programs to support and divert young people who are in the criminal justice system or at risk of coming into contact with the criminal justice system. These programs target young people with drug and alcohol issues, disconnection from education and training, mental health issues and a need for accommodation support, family connection and cultural support.</p> <p>This information can inform government policies and services to address the needs of young people and to highlight where services are needed.</p> |  |

|                             |   |  |
|-----------------------------|---|--|
| How is the ACT progressing? | The number of young people under community-based supervision orders in the ACT has decreased from 275* young people in 2009–2010 to 248 young people 2010–2011. |  |
|-----------------------------|---|--|

\* This figure corrects the 2009–2010 figure of 209 young people under community-based supervision orders provided in *A Picture of ACT's Children and Young People 2011*.

Data source: *Community Services Directorate Quarterly Reports 2010–2011* presented to the ACT Legislative Assembly biannually.

## Young people in youth justice facilities

|                             |   |  |
|-----------------------------|---|--|
| Indicator description       | A measure of the number of young people detained in the ACT.  |  |
| What do we measure?         | The number of young people aged 10–18 (and some young people up to age 21) detained at the Bimberi Youth Justice Centre (Bimberi) in the ACT and the number of Aboriginal and Torres Strait Islander detainees.   |  |
| Why is this important?      | <p>This indicator is important because it shows the number of young people who are detained at Bimberi in a defined period, as well as the characteristics of the young people detained such as their gender and Aboriginal and Torres Strait Islander status.</p> <p>Research shows that any period of detention at a justice facility can have negative implications for the life of a young person in areas such as education, employment and personal relationships.<sup>21</sup> More significantly, a period of detention may draw the young person further into the justice system, and develop negative peer relationships and attitudes towards themselves and the community.</p> <p>This information can inform government policies and services that address the needs of young people and divert young people from coming into the criminal justice system.</p> |  |
| How is the ACT progressing? | The overall number of young people detained at Bimberi has decreased in the last two years from 107 young people (March 2010 quarter) to 61 (March 2012 quarter).   |  |
|                             | <p>The number of young people detained remained stable from the March 2011 quarter, when 65 young people were detained, to the March 2012 quarter, when 61 young people were detained. An increase in the number of young people detained occurred in the September 2011 quarter, which decreased in the December 2011 and March 2012 quarters.</p> <p>The number of Aboriginal and Torres Strait Islander young people detained at</p>   |  |

|  |  |
|--|--|
|  | <p>Bimberi has remained stable from 23 (March 2011 quarter) to 22 (March 2012 quarter), with the exception of an increase in the September 2011 quarter.</p> <p>Of the total 61 young people detained at Bimberi Youth Justice Centre in the March 2012 quarter:</p> <ul style="list-style-type: none"> <li>• 17 (28%) were Aboriginal and Torres Strait Islander males</li> <li>• 5 (8%) were Aboriginal and Torres Strait Islander females</li> <li>• 35 (57%) were Non-Aboriginal and Torres Strait Islander males</li> <li>• 4 (7%) were Non-Aboriginal and Torres Strait Islander females.</li> </ul> |
|--|--|

**Figure 28: Total number of young people detained in Bimberi Youth Justice Centre, March 2010 quarter – March 2012 quarter**

Data source: ACT Criminal Justice Statistical Profiles.

The most common offences for young people that resulted in their custodial detention between March 2010 and March 2012 were those against justice procedures and government operations followed by acts intended to cause injury and property damage and environmental pollution.

**Figure 29: Most common offences between the March 2010 quarter and the March 2012 quarter, number of young people detained per quarter**

| Outcomes  | Indicators  |
|---|---|
| Families have access to sufficient material wellbeing         | <ul style="list-style-type: none"> <li>• Parental employment status</li> <li>• Household income</li> <li>• Family income spent on housing</li> </ul>  |
| Families are free from abuse and neglect                      | <ul style="list-style-type: none"> <li>• Substantiated child abuse</li> <li>• Children and young people on care and protection orders</li> <li>• Children and young people in out of home care</li> </ul> |
| The individual needs of families are recognised and supported | <ul style="list-style-type: none"> <li>• Teenage fertility</li> <li>• Education level of parents</li> </ul>   |

## Parental employment status

|                       |  |
|-----------------------|--|
| Indicator description | An indicator of the employment status of parents in the ACT, whether they be sole or dual income families. |
|-----------------------|--|

|                             |  |  |
|-----------------------------|--|--|
| What do we measure?         | Family composition and labour force status of parents/partners by gross weekly family income; and gross weekly family income by labour force status of parents — one parent; or a couple with children.  |  |
| Why is this important?      | Parental employment status is an important indicator to assess the usage of child care, time spent and connection with children and the overall wellbeing of children and parents. It is important for government to know for planning and informational purposes.   |  |
| How is the ACT progressing? | <p>2006 Census data shows that since the last Census in 2001, the number of one parent families and couples with children who are employed in either part-time or full-time work has increased.</p> <p>Single parent families that are employed full-time has increased by 14%, and single parent families employed part time has increased by 6%. Couples with children who work full-time have increased 7% and those in part-time employment has increased by 4%. Couples with children have also increased in the number of those with one partner working full-time/part-time (up 5%). The number of one parent families stating they are unemployed has reduced by 34%. The number of couples with children stating they are unemployed has also reduced by 12%.</p> |  |

Data source: ABS Census, Table number 20680: *Family Composition and Labour Force Status of Parent(s)/Partners by Gross Family Income (weekly)* — Time Series Statistics (1996, 2001, 2006 Census Years) — Australian Capital Territory.

## Household income

|                        |  |  |
|------------------------|--|--|
| Indicator description  | The median household income per week of all households in the ACT. This represents the sum of the individual incomes of each resident present in the household when surveyed.  |  |
| What do we measure?    | Household income consists of all current receipts, whether monetary or in kind, that are received by the household or by individual members of the household, and which are available for, or intended to support, current consumption.            |  |
| Why is this important? | Regular household income is a major determinant of economic wellbeing for most people. Low family income can negatively influence access to sufficient housing, nutrition and medical care and impact a child's health, education and self-esteem. |  |



|                             |   |  |
|-----------------------------|---|--|
| How is the ACT progressing? | As at 2009–2010, the median gross household disposable income per week was recorded at \$2,008 in the ACT. The gross household disposable income per week   |  |
|                             | has increased by 35% since 2000–2001. Jurisdictional comparisons show that the ACT recorded the highest median disposable income and was 52% greater than the national average. The rising household incomes could be linked to the high level of education in the ACT, and the high proportion of professional employment relative to other jurisdictions. |  |

ACT households have a higher median income compared to the national average.

**Figure 30: Median weekly household income in the ACT and Australia**

Data source: ABS, *Household Income and Income Distribution*, collected from the Survey of Income and Housing, cat. no. 6523.0

## Family income spent on housing

|                             |  |  |
|-----------------------------|--|--|
| Indicator description       | The percentage of the total gross household income in the ACT that is spent on housing related costs.  |  |
| What do we measure?         | Housing costs reported in Housing Occupancy and Costs (ABS Cat No. 4130.0) covers housing-related mortgage payments, rates payments (general and water) and rent payments. The gross household income is then used to derive what proportion of family income is spent on housing costs. The data presented are compiled from the Survey of Income and Housing (SIH).  |  |
| Why is this important?      | For most families, whether owning or renting, the cost of housing involves a substantial expenditure throughout their lives. As each household goes through its life-cycle different housing and housing costs are experienced. The proportion of gross income spent on housing is an important indicator of wellbeing, as the income left can be used for other essential items such as food, health services, education and transport costs. |  |
| How is the ACT progressing? | <p>The total gross mean household income spent on housing costs in 2009–2010 in the ACT was 13%, marginally lower compared to 14% nationally.</p> <p>In 2007–2008, 13% of gross household income was spent on housing in the ACT compared to 13% nationally.</p> <p>In 2009–2010, home owners with a mortgage spent 16% of their gross income on housing costs in the ACT and 18% nationally.</p>  |  |

|  |  |  |
|--|--|--|
|  | <p>Renters in the ACT spent 18% of their gross income on housing costs, compared with 20% nationally. Home owners without a mortgage spent the lowest proportion (2%) of their gross income on housing costs in the ACT and 3% nationally.</p> <p>ACT public housing tenants reported in 2009–2010, that 18% of their income was spent on housing costs, down from 22% in 2007–2008. However, nationally public housing tenants reported 19% of their income was spent on housing costs.</p> |  |
|--|--|--|

Data source: ABS, *Housing Occupancy and Costs*, cat. no. 4130.0

## Substantiated child abuse

|                             |   |  |
|-----------------------------|---|--|
| Indicator description       | The number of reports received during the year that were subsequently appraised and substantiated.  |  |
| What do we measure?         | Under section 360 of the <i>Children and Young People Act 2008</i> Care and Protection Services will investigate a child protection report. An appraised report is substantiated when the matter reported meets the criteria as set out in sections 342 and 343 of the <i>Children and Young People Act 2008</i> .  |  |
| Why is this important?      | <p>Children are more likely to have enhanced health and wellbeing outcomes when they grow up in nurturing and supportive home environments. The immediate and later outcomes for children who have experienced abuse, or neglect, are often poor, compared to those of children raised in supportive and secure environments.<sup>22</sup></p> <p>In the ACT, Care and Protection Services have a crucial role in ensuring children grow up in nurturing and supportive home environments. Care and Protection Services will investigate a child protection report, and on the basis of evidence and professional judgement, establish if a child or young person has been, is being, or is likely to be abused, neglected or otherwise harmed. To ensure the ongoing safety of children and young people, it is crucial that the appraisal process involves working with families to resolve protective concerns for all children. This measure can assist in improving community and Care and Protection Services response to increased child protection reporting rates.</p> |  |
| How is the ACT progressing? | During 2010–2011 there were 636 child protection reports that were subsequently substantiated. This is a 14% decrease from 2009–2010 when 741 child protection reports were substantiated.  |  |
|                             |   |  |

**Figure 31:  
to 2010–2011**

**Investigated and substantiated cases of child abuse 2008–2009**

Data source: Australian Institute of Health and Welfare (AIHW), *Child Welfare Series No 53 in Child Protection Australia 2010–2011* and Australian Institute of Health and Welfare (AIHW), *Child Welfare Series No 51 in Child Protection Australia 2009–2010*.

## Children and young people on care and protection orders

|                             |   |  |
|-----------------------------|---|--|
| Indicator description       | A measure of ACT children and young people (0–17 yrs) who are on a Children’s Court order which allocates parental responsibility to the Director-General or a third party other than parents, and/or has a provision requiring supervision by the Director-General, Community Services Directorate; as well as children on a Voluntary Care Agreement which shares parental responsibility between the Director-General and the parent(s).   |  |
| What do we measure?         | The number of children on a care and protection order as at 30 June. This measure does not include children on a Children’s Court order with Youth Justice provisions only or whose care and protection order was made interstate and receive support in the ACT.   |  |
| Why is this important?      | It is recognised that all children’s bests interests are served by being in the care of their parents/family, if their developmental, emotional and safety needs are being met. However, this may not be the case for some children and it may be deemed necessary for them to enter into the care of the Director-General, Community Services Directorate to ensure their safety and wellbeing. This is only considered after other, less intrusive measures, have been attempted to support the child and family.<br>This measure provides an indication as to how many children and young people have been placed in the care, or supervision, of the Director-General, Community Services Directorate.  |  |
| How is the ACT progressing? | As of 30 June 2011, 723 children and young people were on a care and protection order. This is a 10.7% increase from the last recording period (as of June 2010), where 653 children and young people were on a care and protection order. Increasing numbers of  |  |
|                             | children on care and protection orders is a trend occurring nationally, due to the cumulative effect of children entering the care and protection system at a younger age and remaining on long term orders. In the ACT 17% of children on care and protection orders as of June 2011 are either on supervision orders where they remain living at home and the parent(s) retain parental responsibility (11%) or in a permanent placement where the carer has been granted long term full parental responsibility (6%). Over the last two years there has been a 153% increase in the granting of long term full parental responsibility orders to the carer. This reflects an increasing focus on permanency planning and stability for children. |  |

**Figure 32: Total number of children and young people on care and protection orders as of June 2009, June 2010 and June 2011**

Data source: Australian Institute of Health and Welfare (AIHW), *Child Welfare Series No 53 in Child Protection Australia 2010–2011* and Australian Institute of Health and Welfare (AIHW), *Child Welfare Series No 51 in Child Protection Australia 2009–2010*.

## Children and young people in out of home care

|                             |   |  |
|-----------------------------|---|--|
| Indicator description       | A measure of ACT children and young people (0–17 yrs) who have been placed in an out of home care placement by Care and Protection Services. Out of home care includes foster care, kinship care and residential/refuge placements.   |  |
| What do we measure?         | The number of children residing in an out of home care placement at June 30. This includes children on care and protection orders and those not on care and protection orders where the directorate makes a payment for their overnight care. This measure does not include children case managed by Care and Protection Services where a care and protection order has been issued to another state or territory. Data on young people who reside independently is also not included.  |  |
| Why is this important?      | If a child or young person is placed in the care of the Director-General, Community Services Directorate, all reasonable attempts will be made to support the child being in the care of their extended family. This is important to maintain the child's sense of identity and family connectedness. However it may not always be possible, or appropriate, for a child to be placed in kinship care. Having assumed parental responsibility, Care and Protection Services need to ensure that all children and young people are placed in suitable accommodation for their age and circumstances. This may range from foster care to supported independent living. This measure is important in showing the demand for different types of out of home care and is relevant to assist agency planning for resource allocation. |  |
| How is the ACT progressing? | As of 30 June 2010, there were 532 children placed in out of home care. Of these, 266 were in kinship care (50.0%); 219 were in foster care (41.2%) and 47 were in residential care (8.8%).   |  |
|                             | As of 30 June 2011, there were 540 children placed in out of home care. Of these, 280 were in kinship care (51.9%); 214 were in foster care or other home-based care (39.6%), 45 were in residential care (8.3%) and 1 (0.2%) was in an alternate placement.<br><br>The data shows a slight increase, over the 12 month reporting period, in the number of children who are in out of home care placements. It also shows an  |  |

|  |  |
|--|--|
|  | increase in the proportion of children placed in kinship care and a resulting reduction of children placed in foster and residential care. |
|--|--|

**Figure 33: Proportion of children and young people in out of home care placements by type 2010 and 2011**

Data source: Australian Institute of Health and Welfare (AIHW), *Child Welfare Series No 53 in Child Protection Australia 2010–2011* and Australian Institute of Health and Welfare (AIHW), *Child Welfare Series No 51 in Child Protection Australia 2009–2010*.

## Teenage fertility

|                             |  |  |
|-----------------------------|--|--|
| Indicator description       | The annual number of live births to women aged less than 20 years per 1000 women in that age group.  |  |
| What do we measure?         | The number of live births by age of mother and the ACT resident female population of that age.   |  |
| Why is this important?      | Teenage pregnancy is recognised both in Australia and internationally as an important risk factor for both poor obstetric and perinatal outcomes and for poor social outcomes for both mother and child. |  |
| How is the ACT progressing? | The proportion of teenage women who gave birth is consistently low in the ACT. Between 2000 and 2010 the ACT teenage fertility rate remained consistently lower than the national rate.                  |  |

**Figure 34: Percentage of ACT resident women aged less than 20 years who gave birth in the ACT, 2000–2010**

Data source: ABS, *Births Australia, 2010*, cat. no. 3301.0.

## Education level of parents

|                       |  |  |
|-----------------------|--|--|
| Indicator description | The proportion of ACT children at or above national minimum standards in reading, writing and numeracy, by parental education level.   |  |
| What do we measure?   | The proportion of ACT children in year 3 achieving at or above the minimum standards in reading, writing and numeracy by parental education levels. This information is based on the National Assessment Program Literacy and Numeracy, National Report for 2010 and 2011. The higher level of education that either parent has completed is reported. |  |

|                             |  |
|-----------------------------|--|
| Why is this important?      | Research has indicated that parental education levels, among other factors including the amount of time parents spend discussing books with their child and the presence of study aids, is an important influence over a child's attainment of literacy and numeracy. <sup>23</sup> Research has indicated that children whose mothers did not complete secondary school, for example, are at substantially greater risk of having low literacy scores. <sup>24</sup>  |
| How is the ACT progressing? | Results within the ACT indicate that a higher proportion of students in year 3, whose parents have a bachelor degree or diploma, are at or above the national minimum standard when compared to the proportion of students whose parents have a year 11 equivalent. This reflects the wider trends within Australia.<br><br>It is important to note that these results are indicative only since parental education data was not available for 17 % of ACT year 3 students and 13 % of year 3 students nationally in 2010. Parental education data was not available for 15% of ACT year 3 students and 11% of year 3 students nationally in 2011. |

**Figure 35: Proportion (%) of students in year 3 achieving at or above national minimum standards in reading, writing and numeracy by parental education within the ACT and Australia, 2010 and 2011**

|                    | Child's reading |      |            |      | Child's writing |      |            |      | Child's numeracy |      |            |      |
|--------------------|-----------------|------|------------|------|-----------------|------|------------|------|------------------|------|------------|------|
| Parental education | ACT             |      | Australian |      | ACT             |      | Australian |      | ACT              |      | Australian |      |
|                    | 2010            | 2011 | 2010       | 2011 | 2010            | 2011 | 2010       | 2011 | 2010             | 2011 | 2010       | 2011 |
| Bachelor           | 97.7            | 97.3 | 97.8       | 97.8 | 97.7            | 97.3 | 98.0       | 98.0 | 98.1             | 97.7 | 97.9       | 98.3 |
| Diploma            | 96.3            | 95.5 | 96.1       | 96.1 | 97.0            | 95.3 | 97.2       | 97.0 | 96.9             | 96.5 | 96.3       | 97.2 |
| Certificate        | 93.9            | 93.0 | 94.1       | 93.7 | 95.7            | 94.7 | 96.4       | 95.6 | 95.4             | 93.9 | 94.6       | 95.8 |
| Year 12            | 95.2            | 95.4 | 93.7       | 93.2 | 97.0            | 96.0 | 95.8       | 95.3 | 96.1             | 96.1 | 94.1       | 95.2 |
| Year 11            | 90.5            | 87.0 | 86.9       | 86.1 | 91.2            | 91.3 | 90.8       | 90.0 | 91.1             | 91.9 | 87.8       | 90.1 |
| Not stated         | 95.1            | 95.6 | 89.4       | 88.5 | 96.2            | 96.8 | 91.5       | 90.6 | 96.5             | 96.9 | 90.1       | 92.0 |

Data source: Australian Curriculum, Assessment and Reporting Authority, *NAPLAN Achievement in Reading, Writing, Language Conventions and Numeracy: National Report for 2010 and 2011*.

|                 |                   |
|-----------------|-------------------|
| <b>Outcomes</b> | <b>Indicators</b> |
|-----------------|-------------------|

|   |   |
|---|---|
| Accessible local recreation spaces, activities and community facilities | <ul style="list-style-type: none"> <li>• Children and young people living in neighbourhoods with good parks, playgrounds and play spaces</li> <li>• Children registered as library users</li> </ul>   |
| Adequate family support services to meet the needs of parents           | <ul style="list-style-type: none"> <li>• Families who care for a child/young person with a disability accessing services through Therapy ACT</li> <li>• Families accessing coordinated locally based services through the Child and Family Centres</li> </ul> |
| Supportive and connected communities                                    | <ul style="list-style-type: none"> <li>• Families attending at least one cultural venue or event in the preceding year</li> <li>• Young people who volunteer</li> </ul>   |

## Children and young people living in neighbourhoods with good parks, playground and play spaces

|                             |  |  |
|-----------------------------|--|--|
| Indicator description       | A measure of the proportion of ACT residents who have access to local or central play spaces within 400 metres of their homes.   |  |
| What do we measure?         | The percentage of urban residents residing within 400 metres of a play space.  |  |
| Why is this important?      | Children need access to a variety of quality public play spaces that encourage exploration of the self and the environment. Through creative, physical, social and cognitive play children begin to understand their world and develop skills necessary for adulthood. Through exploration of their environments children learn about themselves and the complex world in which they live. |  |
| How is the ACT progressing? | As of May 2012 there were 502 play spaces across the ACT, meeting or exceeding the ACT Design Standards, to ensure that 95% of urban residents generally have access, at a minimum, to a local neighbourhood play space within 400 metres of their home.   |  |
|                             | <p>These local neighbourhood play spaces provide for a range of users, with the target age group being 0–9 years with a guardian accompanying. The proportion of urban residents who have access to a local play space within 400 metres of their home is the same as in 2011.</p> <p>95% of residences also have access to central neighbourhood play spaces</p>                          |  |

|  |   |
|--|---|
|  | <p>within a one kilometre radius. These play spaces cater for a range of users, with the target age group being 10–14 years, sometimes accompanied by a guardian.</p> <p>The 2010–2011 Market Attitude Research Services survey found that about 64% of ACT residents regularly visited neighbourhood parks in 2010–2011, which is less than 2009–2010 (74%) and similar to visitation numbers in previous years.</p> |
|--|---|

Data sources: 2010–2011 Market Attitude Research Services Briefing Report, Parks and City Services; TAMS Design Standards for Urban Infrastructure 15 Playgrounds and Playground Equipment.

## Children registered as library users

|                             |   |  |
|-----------------------------|---|--|
| Indicator description       | A measure of the number of children living in the ACT who are registered library users.   |  |
| What do we measure?         | The number of children (aged 0–15) who are registered members of an ACT Public Library managed by Libraries ACT.  |  |
| Why is this important?      | <p>A child's access to a range of learning opportunities, including language and literacy activities, is integral to their early development. Activities such as shared reading, exposure to print and language activities and games are influential in a child's early literacy development.<sup>25</sup> As children grow, reading remains a crucial factor in their success in education and life.</p> <p>Public libraries play an important role in the development of early literacy skills through shared book reading and exposing children to various forms of print, encouraging all members of the family to read and exposing children and families to songs and rhymes. They also provide an avenue to access a vast array of books and other resources and encourage a lifelong engagement with reading.</p> <p>Monitoring the number of children who are registered members of an ACT Public Library is important information for Libraries ACT in planning programs and services as well as profiling collections aimed at children.</p> |  |
| How is the ACT progressing? | As of May 2012, there were, 39,000 children aged 0–15 who were registered library members. This represents 17.3% of the total number of ACT public library members. This is similar to figures as of May 2011, where 35,764 children aged 0–15 were registered as library members (17.7% of ACT public library members).  |  |
|                             | This is the second year Libraries ACT has reported on this indicator and is maintaining its performance. It may be that children using the library are  |  |



|  |   |
|--|---|
|  | <p>under reported, as some parents and guardians prefer to use their own library membership to manage their family's use of the library.</p> <p>In addition to library membership, Libraries ACT run a range of successful early childhood programs to promote early literacy. As of June 2012, over 38,000 children and carers participated in early childhood literacy programs 'Giggle and Wiggle' and 'Story Time' at an ACT Public Library. 'Giggle &amp; Wiggle' is for children aged from birth to 2 years and attracted 15,033 participants. 'Story Time' is for children aged 3–5 years and attracted 23,540 participants in 2011–2012. This represents 17% of the total number of ACT Public Library members.</p> |
|--|---|

Data source: ACT Government Library Database, May 2012.

## Families who care for a child or young person with a disability accessing services through Therapy ACT

|                             |   |  |
|-----------------------------|---|--|
| Indicator description       | The number of ACT families with a child or young person with a developmental delay or disability who receive support from Therapy ACT in a 12 month period.   |  |
| What do we measure?         | The number of Therapy ACT clients aged between 0 and 25 who had an open case in a 12 month period.  |  |
| Why is this important?      | Families with a child with a significant developmental delay or diagnosed disability are under significant stress. Support from therapists can assist children and young people to function more independently and assist families with additional strategies to best support their child.  |  |
| How is the ACT progressing? | <p>In 2010–2011, 3145 families with a child or young person with a disability or significant developmental delay received support from allied health professional staff. The number of families receiving support is similar to in 2009–2010 where 3326 families received support.</p> <p>There is no national comparative data as the service structures and models vary in each jurisdiction.</p> |  |

**Figure 36:** The number of families receiving support from Therapy ACT from 2007–2008 to 2010–2011

Data source: National Disability Agreement (NDA) *National Minimum Data Set* (NMDS).

## Families accessing coordinated locally based services through the Child and Family Centres

|                             |   |  |
|-----------------------------|---|--|
| Indicator description       | The number of ACT families accessing coordinated locally based services through the Child and Family Centres.   |  |
| What do we measure?         | The number of families accessing a range of early intervention and prevention services through the Child and Family Centres located in Gungahlin, Tuggeranong and West Belconnen.   |  |
| Why is this important?      | <p>All families, during the early years of their child's development, require access to a range of services to meet their child's health, wellbeing, learning and development needs. Early intervention and prevention services are provided to ensure that all families are supported to assist their child reach their full potential.</p> <p>The Child and Family Centres provide integrated service delivery, with child and family support services provided alongside other services including the Health Directorate's maternal and child health services, midwifery services, nutrition services, Therapy ACT, Housing ACT and Relationships Australia. Together, the services provide support and advice on child health, development and parenting issues, immunisations, the growth and care of babies, speech and physiotherapy drop-in services with links to early childhood education and the care sector, supportive counselling and case coordination for vulnerable families.</p> |  |
| How is the ACT progressing? | <p>The number of families accessing services from the Child and Family Centres (provided by the staff of the Child and Family Centres) increased rapidly from 2006–2007 to 2008–2009. The number of families accessing services has</p>   |  |
|                             | <p>remained relatively stable over the period 2008–2009 and 2009–2010. An increase was observed over the 2010–2011 period, with the opening of a new centre in West Belconnen.</p>  |  |

**Figure 37: Number of families accessing services from the Child and Family Centres (services provided by staff of Child and Family Centre) over period 2006–2011**

Data source: ACT Government, *The Department of Disability, Housing and Community Services ACT Annual Report* (2006–2007, 2007–2008, 2008–2009, and 2009–2010) and *Community Services Directorate Annual Report* (2010–2011).

## Families attending at least one cultural venue or event in the

## preceding year

|                             |   |  |
|-----------------------------|---|--|
| Indicator description       | Proportion of ACT families who attended at least one cultural venue or event in the preceding year.   |  |
| What do we measure?         | The proportion of ACT families who attended a cultural venue or event by household composition (couple with no children, couples with dependent children and single parents with dependent children).   |  |
| Why is this important?      | <p>The arts make a strong contribution to community strength and identity and are recognised for facilitating communication across social, economic, cultural and ethnic groups. Cultural events provide an outlet that increases our wellbeing, education and respect.</p> <p>in experiencing the benefits in el of interestThis indicator measures the accessibility of cultural events in our community and the lev attending these events</p>   |  |
| How is the ACT progressing? | <p>Couples with at least one dependent child had the highest attendance rate within the ACT, with 95.0% attending at least one cultural venue or event over 2009–2010. This was followed by couples with no children (94.0% attending at least one cultural venue or event) and single parents with at least one dependent child (92.6% attending at least one cultural venue or event). The ACT's attendance rate was higher than the average Australian attendance for all family groups.</p> <p>ACT data over time is not currently available.</p> |  |

**Figure 38: Proportion of ACT and Australian families attending at least one cultural event or venue over 2009–2010**

Data source: ABS, *Attendance at Selected Cultural Venues and Events, Australia, 2009–2010*, cat. no. 4114.0.

## Young people who volunteer

|                       |   |  |
|-----------------------|---|--|
| Indicator description | The proportion of young people who have undertaken voluntary work.  |  |
| What do we measure?   | <p>The proportion of young people aged 18–24 in the ACT who have undertaken voluntary work in the last 12 months. The Australian Bureau of Statistics defines a volunteer as someone who willingly provides unpaid help, in the form of time, service or skills, through an organisation or group. People completing unpaid work under some form of compulsion because of employment (for example work for the dole) or as part of study commitments are excluded from this measure.<sup>26</sup></p> |  |

|                             |  |  |
|-----------------------------|--|--|
| Why is this important?      | <p>Participation in voluntary work provides important outcomes for both individuals and the broader community. Volunteer work provides young people with many key skills supporting their transition to adulthood and in becoming active citizens.<sup>27</sup> Research indicates that volunteering enhances social cohesion, strengthens communities and provides benefits to the volunteer themselves. Volunteering can increase social inclusion, physical and psychological wellbeing and career opportunities.</p> <p>The ABS estimated that in 2006–2007, the 4.6 million volunteers who supported community organisations contributed 623 million hours. The economic value of these hours was estimated to be \$14.6 billion.</p> |  |
| How is the ACT progressing? | <p>In 2006, the volunteer rate of young people aged 18-24 in the ACT was 28.9%. In 2010 this rate had increased to 35.2%, and was one of the highest volunteer rates nationally.</p>   |  |

**Figure 39: Proportion of young people aged 18–24 who have undertaken voluntary work in the last 12 months within the ACT and Australia, 2006 and 2010.**

Data source: ABS, *Voluntary Work, Australia*, cat. no 4441.0

## Territory and national policies and frameworks influencing children and young people

When reviewing individual, family and community outcomes, it is important to acknowledge the broader policy and social influences. There are several Australian Government and Australian Capital Territory policies that influence child health, wellbeing, learning and development within the ACT.

### ACT policies and frameworks

#### The Canberra Plan: Towards our second century

*The Canberra Plan: Towards Our Second Century* outlines the ACT Government's vision for Canberra and provides the overarching framework for government strategy and policy. The framework is built around seven strategic themes that are priorities for the ACT Government. Within these priority areas are many strategies that support children, families and the community in achieving the optimal health and wellbeing of children and young people. *The Canberra Plan* includes social priorities for the future and details the ACT Government investment and key actions in areas of quality health care, education and skills development, housing, family support and community safety.

*Measuring our Progress* is the ACT Government's online report card on life in Canberra, aligned with the seven strategic themes of *The Canberra Plan: Towards Our Second Century*. It provides a snapshot of life in areas including health, safety, sustainability, and education to provide a picture of progress, as a community and as a government, towards a healthy, safer and more prosperous city.

#### The Canberra Social Plan 2011

The vision of *The Canberra Social Plan 2011* is that all people reach their potential, make a contribution and share the benefits of an inclusive community. This vision for Canberra is based on the themes of connection, belonging and collaboration. These themes are closely linked to keeping people and communities at the centre of the ACT Government's work.

### **The ACT Children's Plan 2010–2014**

The *ACT Children's Plan 2010–2014* is guided by *The Canberra Plan: Towards Our Second Century* and aims to make Canberra a great and safe place for children, and to ensure their needs are a priority for government and the community. The plan outlines six building blocks, informed by UNICEF's child friendly cities building blocks, that are required in order for Canberra to become Australia's most child friendly city.

*A Picture of ACT's Children and Young People 2011* assists in meeting the goal stated in Building Block four. Through the development of an outcome based data monitoring system and regular reporting, the state of children's health, wellbeing, learning and development can be assessed. Strategies to target areas of need can then be formulated, with a coordinated response across the whole of the ACT Government and the wider community.

### ***The ACT Children's Plan 2010–2014: Six building blocks for a child-friendly city***

#### ACT Young People's Plan 2009–2014

The *ACT Young People's Plan 2009–2014* is closely aligned with the *ACT Children's Plan 2010–2014* and shares in the vision to build Canberra as a child and youth friendly city. The *ACT Young People's Plan 2009–2014* acknowledges while some young Canberrans are well placed to reach their potential and make valuable contributions, others require additional support to deal with the challenges they face. The plan provides a framework to guide the work of the ACT Government, young people and the community to achieve better outcomes for all young Canberrans. The *ACT Young People's Plan 2009–2014* is based around five priority areas:

- health, wellbeing and support
- families and communities
- participation and access
- transitions and pathways
- environment and sustainability

The *ACT Young People's Plan* is aimed at ensuring collaboration and coordination between policies and services developed and delivered by government and non-government agencies.

## **National policies and frameworks**

The current initiatives within the ACT fit within a broader national policy context focused on monitoring and promoting positive outcomes for children and young people. Current initiatives influencing the development of children and young people nationwide include:

- *Investing in the Early Years — A National Early Childhood Development Strategy* (2009) aims to build an effective early childhood development system in Australia that will contribute to the nation's human capital and productivity.

- *National Quality Framework for Early Childhood Education and Care* recognises the importance of quality early childhood education and care and aims to implement national quality standards to ensure consistent and high quality practices.
- *Protecting Children is Everyone's Business: National Framework for Protecting Australia's Children* aims to build parenting and community capacity to care for children and reduce child abuse over time.
- *Closing the Gap* is a national integrated strategy to improve the lives of Indigenous Australians, and in particular provide a better future for Indigenous children.
- *Australian National Breastfeeding Strategy 2010–2015* aims to contribute to improving the health, nutrition and wellbeing of infants and young children, and the health and wellbeing of mothers, by protecting, promoting, supporting and monitoring breastfeeding.
- *National Strategy for Young Australians* describes what it's like to be young in Australia today and highlights eight priority areas for government action now and into the future.

## Looking for more data?

### *Measuring our progress*

This online report provides a snap-shot of life in Canberra against 28 indicators in areas including health, safety, sustainability, and education to provide a picture of progress, as a community and as a government, towards a healthy, safer and more prosperous city. [www.measuringourprogress.act.gov.au](http://www.measuringourprogress.act.gov.au)

### *Health Directorate Epidemiology Branch*

The Health Directorate Epidemiology Branch provides a range of reports on the health of the ACT population, to assist with the development and evaluation of policies and interventions to improve health. Reports outlining the health status of children and young people in the ACT include: the biennial Chief Health Officer's Report, the Health Status of Young People in the ACT 2011 report, and maternal and perinatal health publications. [www.health.act.gov.au](http://www.health.act.gov.au)

### *A Social Overview of the ACT: 2009–2010*

A Social Overview of the ACT: 2009–2010 is a collation of publicly available data which provides an overview of the social and demographic conditions of the ACT. [www.cmd.act.gov.au](http://www.cmd.act.gov.au)

### *Report on Government Services*

Every year, the Australian Government's Productivity Commission releases the *Report on Government Services* (ROGS) to provide information on the effectiveness and efficiency of government services across Australia. Chapters relating to children and young people are included in Part B (early childhood, education and training) and Part F (community services).

[www.pc.gov.au](http://www.pc.gov.au)

### *Australian Early Development Index (AEDI)*

The Australian Early Development Index (AEDI) is a national population measure of children's development at school entry in five domains of physical health and well-being; emotional maturity; social competence; language and cognitive skills; and communication and general knowledge.

The AEDI website also provides contextual community data from the Australian Census (2006), relevant to the development of children. [www.aedi.org.au](http://www.aedi.org.au)

### *Australian National Children's Nutrition and Physical Activity Survey 2007*

This survey provides an assessment of children's food and nutrient intake, physical activity levels and physical measurements against the existing national dietary and physical activity guidelines. [www.health.gov.au](http://www.health.gov.au)

### *The Longitudinal Study of Australian Children (LSAC)*

LSAC investigates the health, education, child and family functioning, child care and socio-demographics of Australian children. Data collection began in 2004 on two cohorts of children, infants and four/five year olds. The study will continue to follow these two cohorts of children to the ages of 14–15 years and 18–19 years. [www.aifs.gov.au](http://www.aifs.gov.au)

### *National headline indicators for children's health, development and wellbeing*

The children's headline indicators are a set of 19 indicators designed to focus policy attention on priorities for children's health, development and wellbeing. [www.aihw.gov.au](http://www.aihw.gov.au)

### *The State of Australia's Young People report (2009)*

This report describes how young people aged 12–24 years in Australia are faring and identifies those who may need additional support to do well.

### *Australian Research Alliance for Children and Youth*

The Australian Research Alliance for Children and Youth (ARACY) is a national non-profit organisation working to improve the wellbeing of children and young people, by advancing collaboration and evidence-based action. [www.aracy.org.au](http://www.aracy.org.au)

### *Australian Bureau of Statistics (ABS) Children and Youth theme page*

This theme page provides a guide to both ABS and non-ABS data, identifying the wide range of information available on children and youth. [www.abs.gov.au](http://www.abs.gov.au)

### *Australian Institute for Health and Welfare (AIHW)*

The Australian Institute of Health and Welfare (AIHW) is a major national agency which provides reliable, regular and relevant information and statistics on Australia's health and welfare. [www.aihw.gov.au](http://www.aihw.gov.au)

## References

1. Council of Australian Governments, *Investing the early years — A national early childhood development strategy*, Canberra, 2009, viewed at <[www.deewr.gov.au](http://www.deewr.gov.au)>
2. Z Li, L McNally, L Hilder and EA Sullivan, *Australia's mothers and babies 2009*, Perinatal statistics series no. 25, cat. no. PER 52, AIHW National Perinatal Epidemiology and Statistics unit, Sydney, 2011
3. Epidemiology Branch, ACT Health, *Maternal and perinatal health in the ACT 1999–2008*, ACT Government, Canberra, 2011
4. Epidemiology Branch, ACT Health, *Maternal and perinatal health in the ACT 1999–2008*, ACT Government, Canberra, 2011

5. Z Li, L McNally, L Hilder and EA Sullivan, *Australia's mothers and babies 2009*, Perinatal statistics series no. 25, cat. no. PER 52, AIHW National Perinatal Epidemiology and Statistics unit, Sydney, 2011
6. RL Goldenberg & JF Culhane, 'Low birth weight in the United States', *American Journal of Clinical Nutrition*, 85, 584S–90S, 2007
7. Australian Bureau of Statistics, *Measures of Australia's Progress 2010*, cat. no. 1370.0, 2010,
8. Australian Bureau of Statistics, *Deaths, Australia, 2010*, cat. no. 3302.0, Canberra, 2011,
9. National Health and Medical Research Council, *Dietary Guidelines for Children and Adolescents in Australia*, 2003, viewed at <[www.nhmrc.gov.au](http://www.nhmrc.gov.au)>
10. Department of Health and Ageing, *Understanding Childhood Immunisation*, Australian Government, 2010, viewed at <[www.immunise.health.gov.au](http://www.immunise.health.gov.au)>
11. Australian Institute of Health and Welfare, *A Picture of Australia's Children 2009*, Cat. no. PHE 112, Canberra, 2009
12. World Health Organization, *Global Strategy on Diet, Physical Activity and Health*, 2005, viewed at <[www.who.int](http://www.who.int)>
13. National Health and Medical Research Council (NHMRC), *Clinical Practice Guidelines for the Management of Overweight and Obesity in Children and Adolescents*, Commonwealth of Australia, 2003  
AM Magarey, LA Daniels, and TJC Boulton, 'Prevalence of overweight and obesity in Australian children and adolescents: reassessment of 1985 and 1995 data against new standard international definitions', *Medical Journal of Australia*, 194: 561–564, 2001
14. Ministerial Council on Drug Strategy, *The National Drug Strategy 2010–2015: A framework for action on alcohol, tobacco, and other drugs*, Publications Number: D0224, 2011, viewed at <[www.nationaldrugstrategy.gov.au](http://www.nationaldrugstrategy.gov.au)>
15. Ministerial Council on Drug Strategy, *The National Drug Strategy 2010–2015: A framework for action on alcohol, tobacco, and other drugs*, Publications Number: D0224, 2011, viewed at <[www.nationaldrugstrategy.gov.au](http://www.nationaldrugstrategy.gov.au)>
16. Ministerial Council on Drug Strategy, *The National Drug Strategy 2010–2015: A framework for action on alcohol, tobacco, and other drugs*, Publications Number: D0224, 2011, viewed at <[www.nationaldrugstrategy.gov.au](http://www.nationaldrugstrategy.gov.au)>
17. Epidemiology Branch, ACT Health, *ACT Secondary Student Drug and Health Risk Behaviours: Results of the 2008 ACT Secondary Student Alcohol and Drug Survey*, ACT Government, 2010 viewed at <<http://health.act.gov.au/publications/reports/act-secondary-student-alcohol-and-drug-report-2008-assad>>
18. Epidemiology Branch, ACT Health, *ACT Secondary Student Drug and Health Risk Behaviours: Results of the 2008 ACT Secondary Student Alcohol and Drug Survey*, ACT Government, 2010 viewed at <<http://health.act.gov.au/publications/reports/act-secondary-student-alcohol-and-drug-report-2008-assad>>
19. Epidemiology Branch, ACT Health, *ACT Secondary Student Drug and Health Risk Behaviours: Results of the 2008 ACT Secondary Student Alcohol and Drug Survey*, ACT Government, 2010



viewed at <<http://health.act.gov.au/publications/reports/act-secondary-student-alcohol-and-drug-report-2008-assad>>

20. Epidemiology Branch, ACT Health, *ACT Secondary Student Drug and Health Risk Behaviours: Results of the 2008 ACT Secondary Student Alcohol and Drug Survey*, ACT Government, 2010 viewed at <<http://health.act.gov.au/publications/reports/act-secondary-student-alcohol-and-drug-report-2008-assad>>
21. Department of Disability, Housing and Community Services, Discussion paper — towards a diversionary framework for the ACT, ACT Government, Canberra, 2011
22. Australian Institute of Health and Welfare, *A Picture of Australia's Children 2009*, Cat. No. PHE 112, Australian Government, Canberra, 2009
23. Australian Institute of Health and Welfare, *A Picture of Australia's Children 2009*, Cat. No. PHE 112, Australian Government, Canberra, 2009
24. UNICEF, *A League Table of Educational Disadvantage in Rich Nations*, Innocenti Report Card No. 4, UNICEF Innocenti Research Centre, Florence, 2002
25. Centre for Community Child Health, *Policy Brief No 13 2008 Literacy in Early Childhood*, The Royal Children's Hospital, Melbourne, 2011, viewed at <[www.rch.org.au/ccch/policybriefs.cfm](http://www.rch.org.au/ccch/policybriefs.cfm)>
26. Australian Bureau of Statistics, *Voluntary Work, Australia*, cat. no 4441.0, ABS, 2010
27. L Moffit and Volunteering Tasmania, *Engaging Young People in Volunteering: What works in Tasmania?*, Volunteering Tasmania, 2011