Western Australia's Children and Their Health

A COLLABORATION BETWEEN THE TELETHON INSTITUTE FOR CHILD HEALTH RESEARCH AND THE WA HEALTH AND WELLBEING SURVEILLANCE SYSTEM



SOUTH METROPOLITAN AREA HEALTH SERVICE - POPULATION PROFILE

A Profile of Western Australian Children



This report is the first in a series of reports about WA's children and their health. The series is being prepared by the Telethon Institute for Child Health Research, primarily using indicator data collected by the WA Department of Health.

The purpose of the series is to provide health care decision makers in Health Areas/Regions with a profile of indicators of the health needs of children who live within their departmental boundaries. This information is intended to be an aid to program planning and resource allocation.

A challenge for health care decision makers is to respond fairly, effectively and efficiently to health care needs of the populations they serve. This responsibility is complex and no single approach in isolation offers a wholly adequate solution. Rather, health care decision makers must make judgements about community health needs by taking into account a variety of information. While the sources and foci of such information are likely to be diverse, a core set relates to the broad characteristics of the population being served. This includes general parameters such as population size, location, and so on.

Because broad measures of population are central to any assessment of health needs, this category of indicators is the first focus area in the series. In characterising the population of WA children aged between 0-15 years within each Health Region, an attempt has been made to place children in a context of the family and household settings in which they live.

Subsequent papers in this series will continue to explore health needs indicators within themes that are relevant to decision making.

Future Papers on Western Australian Children and Their Health

Future papers in this series will focus on the following topics:

- A healthy start to life
 Pregnancy, birth and early caring behaviours.
- **2.** A healthy home life

 Parenting and the home
 environment.
- **3. Health care needs**Chronic health conditions.
- **4. Health care services**Service utilisation.
- **5. Health behaviours**Risk and protective behaviours.

POPULATION PROFILE HEALTH RISKS ILLNESS/DISEASE HEALTH CARE USE MORTALITY COMMUNITY WELLBEING FAMILY WELLBEING INDIVIDUAL WELLBEING INDIVIDUAL WELLBEING

▲ Indicator: A statistic chosen to describe (indicate) a situation concisely, help assess progress and performance, and act as a guide to decision making... (AIHW 2006)

SMAHS POPULATION PROFILE

| Indicator | Description of indicator | SMAHS % (95% CI) | State % (95% CI) | Source |
|--|---|------------------|-------------------------|------------------|
| Population | Proportion of total population of WA children 0-4 | 34 | 100 | 2001 Census |
| | Proportion of total indigenous population of WA children 0-4 | 20 | 100 | 2001 Census |
| | Proportion of total population of children 0-4 that is indigenous | 4 | 6 | 2001 Census |
| | Proportion of total population of WA children 0-15 | 34 | 100 | 2001 Census |
| | Proportion of total indigenous population of WA children 0-15 | 20 | 100 | 2001 Census |
| | Proportion of total population of children 0-15 that is indigenous | 3 | 6 | 2001 Census |
| Children born in Australia | Proportion of total population of children 0-4 born in Australia | 97.8 (96.2-99.4) | 97.2 (96.0-98.4) | 2002-5 HWSS Data |
| | Proportion of total population of children 0-15 born in Australia | 93.2 (91.8-94.6) | 93.5 (92.6-94.4) | 2002-5 HWSS Data |
| Children living in financially stressed households | Proportion of children 0-4 living in households that spend more than they earn | 6.3 (1.1-11.6) | 5.3 (3.0-7.8) | 2002-5 HWSS Data |
| | Proportion of children 0-15 living in households that spend more than they earn | 6.0 (3.3-8.7) | 4.8 (3.7-5.9) | 2002-5 HWSS Data |
| Children living in sole parent households | Proportion of children 0-4 living in sole parent households | 7.2 (4.6-9.8) | 7.2 (5.6-8.7) | 2002-5 HWSS Data |
| | Proportion of children 0-15 living in sole parent households | 13.3 (11.5-15.0) | 11.7 (10.6-12.7) | 2002-5 HWSS Data |
| Parents born overseas | Children 0-4 who have one parent who was born overseas | 41.0 (35.3-45.3) | 38.2 (35.1-41.4) | 2002-5 HWSS Data |
| | Children 0-4 who have two parents who were born overseas | 13.0 (9.6-16.5) | 12.2 (9.9-14.6) | 2002-5 HWSS Data |
| | Children 0-15 who have one parent who was born overseas | 47.3 (44.6-50.0) | 43.0 (41.2-44.7) | 2002-5 HWSS Data |
| | Children 0-15 who have two parents who were born overseas | 16.9 (14.9-19.0) | 14.9 (13.6-16.2) | 2002-5 HWSS Data |

Why childhood is an important focus for healthcare decision makers...

In recent years, childhood has become a policy focus for most State and Commonwealth Governments. Vimpani, Patton and Hayes 2002 have outlined several reasons for this, including:

- Worsening of indicators of developmental health and wellbeing among children;
- Recognition that health problems in later life often have roots in early environments and experiences; and
- Evidence that childhood is often a more cost effective time for intervention to address health problems.

SMAHS POPULATION PROFILE

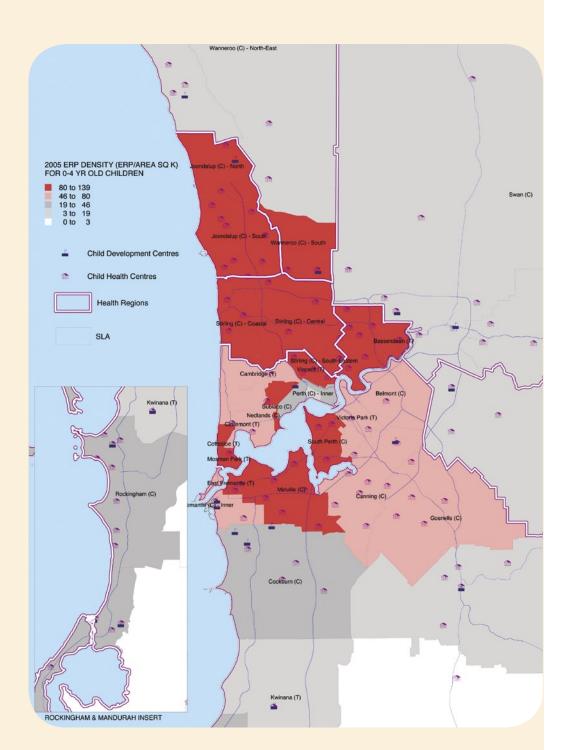
Population Density 0-4 Year Olds

The data indicate that...

- The SMAHS is home to

 1 in 3 of the State's children
 and youth aged between

 0-15 years.
- The highest concentrations of children in the SMAHS live in a series of river-side suburbs between East Fremantle and Rivervale and the south eastern suburbs of the Area.
- While the proportion of the State's Aboriginal children and youth that live in the SMAHS is substantially lower than that of their non-Aboriginal counterparts, the Area is nonetheless home to one in five (20%) of the State's indigenous children and youth.
- Indicators of disadvantage among families with children aged 0-15 years in the SMAHS appear to be at similar levels to those found across the State as a whole.
- Most 0-15 year old children living in the SMAHS were born in Australia, however, approximately 4 in 10 have at least one overseasborn parent.



A core message to be drawn from the data is that the SMAHS catchment includes a substantial proportion of the State's children and youth. Population indicators suggest that child and youth health needs within the Area mirror those found in the State as a whole. As a consequence, the SMAHS should be a primary operational focus for the delivery of child and youth health services in the State.

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Australia's Children - Did you know that...

Approximately 4 million 0-14 year old children live in Australia. This comprises 20% of the Australian population.

- Two in three (64%) children live in major cities.
- Indigenous children comprise 4.5% of all children.
- One in seventeen (6%) Australian children were born overseas.
- Most common countries of birth for overseas born Australian children are New Zealand and England.
- Most common countries of birth for Australian children born in countries where English is not the main language are the Philippines, India, China, South Korea, Indonesia, Iraq, Sri Lanka, Singapore, Malaysia and Vietnam. (AIHW, 2006)

Virtually every aspect of early human development, from the brain's evolving circuitry to the child's capacity for empathy, is affected by the environments and experiences that are encountered in a cumulative fashion, beginning early in the prenatal period and extending throughout the early childhood.

(Shonkoff and Phillips, 2000, p.6).

About the Data...

The WA Health & Wellbeing Surveillance System (HWSS) is a continuous data collection system using Computer Assisted Telephone Interviews (CATI) to survey 550 people throughout Western Australia every month. The system began in March 2002 and up to July 2006, 27,000 interviews had been conducted.

People are asked questions on a range of indicators related to health and wellbeing. Topics include chronic health conditions, lifestyle risk factors, protective factors and socio-demographics. Since the surveillance system began, response rates have been between 78-80 percent of all the people contacted.

Discussion points for Area decision makers...

Are health care services that target children and youth, particularly those within the primary care category, equally accessible across the SMAHS?

What mechanisms are in place to examine and respond to changing population densities across the Area?

References

- 1. Australian Institute of Health and Welfare (2006). Australia's health 2006. AIHW cat. no. AUS 73. Canberra: AIHW.
- 2. Shonkoff, J.P. and Phillips, D.A. (eds) (2000), From Neurons to Neighbourhoods: The Science of Early Childhood Development, National Academy Press, Washington, DC.
- 3. Vimpani, G., Patton, G., and Hayes, A. (2002) The relevance of child and adolescent development for outcomes in education, health and life success, in Sanson, A. (ed) Children's Health and Development: New Research Directions for Australia. Australian Institute of Family Studies, Melbourne.