

Health and Wellbeing of Children in Western Australia, July 2007 to June 2008, Overview and Trends



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1 INTRODUCTION

1.1 Background

The WA Health & Wellbeing Surveillance System (HWSS) is a continuous data collection system, which was developed to monitor the health and wellbeing of Western Australians. Each month, 550 people throughout Western Australia are interviewed. The HWSS began in March 2002 and as at June 2008 more than 45,000 interviews have been conducted. Of these, 7,351 were conducted with parents/carers of children up to the age of 15 years. The overview is based on data collected from July 2007 to June 2008 and the trend data presents information collected over the past four financial years.

Parents/carers are asked questions on a range of indicators related to their child's health and wellbeing. Topics include health conditions, lifestyle risk factors, school and friendships, protective factors and socio-demographics. Questions about the health and wellbeing are also asked of the respondent for the child (usually the mother) and about the partner of the respondent.

The questions that are included on the HWSS for children were selected to provide information about State or National indicators of health and wellbeing. The Telethon Institute of Child Health Research (TICHR) 1996 Child Health Survey methodology and questionnaire¹ guided development of these questions.

Information from the survey is used to monitor the health status of Western Australian (WA) children, to inform health education programs, to evaluate interventions, to inform health policy development and to identify and monitor emerging trends.

All the information provided in this report is based on self-reported data collected from the child's parent/guardian. Testing has shown that the responses to the questions on the survey are reliable but in a very few cases, may not be completely accurate. For example, parents are unlikely to know the exact amount of physical exercise their child does, but test-retest information shows that the estimate they give is consistent over time. This means that although the estimates of things like physical activity and weight will probably not be the 'true' estimate, they can be used to show patterns of change over time. The identification of patterns over time is the basis of a monitoring and surveillance system.

While the information provided in this report is representative of WA children as a whole, it may not be representative of minority groups within the population such as Aboriginal children and children living in homes without telephones. For information on Aboriginal child health please see the reports generated from the WA Aboriginal Child Health Survey conducted in 2001-2002² and also the *2004-05 National Aboriginal and Torres Strait Islander Health Survey*.³

1.2 Methodology

1.2.1 Mode of Administration and Sampling

The HWSS is conducted as a Computer Assisted Telephone Interview (CATI). Households are selected from the most recent Electronic White Pages^a by a stratified random process. An approach letter is sent to all selected households informing them about the survey and that their household has been selected to participate. The approach letter explains the purpose of the survey, gives the time within which they can expect to be contacted by the data collection agency and explains that one person from the household will be selected to participate. A specially prepared brochure is included in the letter, which explains about the HWSS and provides contact numbers for people to call for more information.

1.2.2 Weighting the Data

One of the most important features of a report describing the health and wellbeing of any population is the ability to make comparisons between and within areas or categories. In order to do this, data must be weighted to the population that is being described, which in this case is the population of WA children under the age of 16.

The HWSS data are weighted to compensate for the over-sampling in the rural and remote areas of WA^b and then adjusted to the most recent Estimated Resident Population (ERP) for the year of the survey. To ensure any changes in prevalence estimates were not a result of changes in the age and sex distribution of the population, all years were standardised by weighting them to the 2006 Estimated Resident Population.⁴

a The 2004 EWP is the last publicly available version available. A new sampling frame is being developed for 2009 as the 2004 EWP is now very out-of-date.

b Rural and remote areas of WA are over-sampled proportional to their populations within WA. This is done to provide enough interviews to enable reliable and robust estimates to be made.

As the information collected on children has been weighted to the age by sex distribution of the Australian population, the information regarding the parent/guardian respondent to the survey has not been weighted.

1.2.3 Response Rates

A very important part of any survey is the response rate as low response rates may produce estimates that are not representative of the population or that are unreliable or biased. Each year since the HWSS began response rates of between 78% and 80% have been attained. The response rate for each month of the 2007/8 financial year is shown in Table 1. numbers refer to the entire sample for the HWSS. It is not possible to extract the information for children only but the consistency of the response rates over the year provides an excellent basis for assuming a high overall response rate within age groups.

Table 1: Response rate for Health and Wellbeing Survey by month, HWSS 2007/08

July 2007 to June 2008	Sample Frame	Out of Scope (a)	Eligible Sample	No answer after 10 attempts	Eligible Contacts (b)	Refused	Interviews	Raw Response Rate	Adjusted Response Rate	Participation Rate (c)
July	1367	501	866	94	772	73	636	73.4%	82.4%	89.7%
August	1366	499	867	85	782	83	634	73.1%	81.1%	88.4%
September	1368	495	873	97	776	74	631	72.3%	81.3%	89.5%
October	1366	511	855	88	767	81	618	72.3%	80.6%	88.4%
November	1368	477	891	82	809	87	659	74.0%	81.5%	88.3%
December	1365	480	885	83	802	83	646	73.0%	80.5%	88.6%
January	1379	442	937	68	869	89	712	76.0%	81.9%	88.9%
February	1381	488	893	65	828	78	696	77.9%	84.1%	89.9%
March	1380	444	936	76	860	76	727	77.7%	84.5%	90.5%
April	1377	409	968	80	888	117	718	74.2%	80.9%	86.0%
May	1381	468	913	82	831	76	708	77.5%	85.2%	90.3%
June	1381	461	920	65	855	63	711	77.3%	83.2%	91.9%
Total	16479	5675	10804	965	9839	980	8096	74.9%	82.3%	89.2%

- (a) Non-operational, business or dedicated fax numbers and people who are out of scope, e.g. real estate agent or house sitter. All other numbers were considered to be part of the eligible sample, which forms the denominator for the Raw Response Rate.
- (b) If the telephone is answered, the number is part of the eligible contacts. This forms the denominator of the Adjusted Response Rate.
- (c) The Participation Rate is the number of people interviewed divided by the number of people interviewed plus the number of refusals.

A full explanation of the methodology can be found in the paper titled *Design and Methodology, Technical Paper No 1. May 2005*. An update of the weighting can be found in the paper titled *Details on the Weighting of Data from the Health and Wellbeing Surveillance*

System, Technical Paper No. 3 August 2007. These documents are available both on the Epidemiology Website:

intranet.health.wa.gov.au/corpdocs/hic/Epidemiology/New_Epi

and on the DoH Public Health Internet:

http://www.public.health.wa.gov.au/2/121/1/publications_and_resources__reports.pm

1.3 What This Report Contains

1.3.1 Percentage and Prevalence

The information in this report is presented either as a percentage of the child population who have a particular risk factor/demographic characteristic or as prevalence of the child population who have a particular health condition. Prevalence is the description of the number or proportion of children in a community with a given condition and is usually expressed as a percentage. Prevalence is distinct from incidence, which is a measure of the number of *new* cases of a condition.

In this report, most of the prevalence estimates presented are period prevalence estimates. With some conditions, such as asthma, both lifetime and point prevalence are reported. This is because a child can have had a health condition at some point in their life but not now have it. An example of such a condition is asthma.

A copy of the questionnaire is available on
health.wa.gov.au/publications/pop_surveys.cfm.

1.3.2 Confidence Intervals

Each table presents the estimate of the prevalence of a condition or the estimate of the proportion of the population with a particular characteristic along with the 95% confidence interval around that estimate.

The 95 per cent confidence interval is the range between which the true estimate would lie 95 out of 100 times. Overlapping confidence intervals indicate that there is probably no difference in the estimates being compared. If the confidence intervals do not overlap, then the estimates are considered to be significantly different.^c

^c The way to determine whether or not a difference is statistically significant can be found on health.wa.gov.au/publications/pop_surveys.cfm.

Confidence intervals are considered to be a conservative measure of difference and where the upper and lower limits of the confidence interval are very close between two estimates, a Chi Square test was performed to confirm whether or not the difference was statistically significant. The Chi Square statistic is a more powerful statistic than the confidence interval and less likely to miss significant differences where they exist. Chi square statistics have been shown in brackets where they have been used.

2 DEMOGRAPHICS

The demographic characteristics and weighted percentage of the child population represented by those who participated in the HWSS are shown below in Table 2.

Table 2: Demographic characteristics of the child, HWSS 2006/07

Characteristic	Unweighted Sample (n)	Estimated Prevalence (%)
Age		
0 to 4 years	299	29.7
5 to 9 years	327	31.0
10 to 15 years	453	39.3
Gender		
Boys	533	51.7
Girls	546	48.3
Australian born		
Yes	1,026	93.5
No	53	6.5
Aboriginal or Torres Strait Islander		
Yes	41	2.0
No	1,038	98.0
Relationship of respondent to child		
Mother	892	84.7
Father	168	14.3
Other	19	1.0

The characteristics of the household and the weighted estimated percent of the population are shown in Table 3.

Table 3: Characteristics of the household where the child is resident, HWSS 2007/08

	Unweighted Sample (n)	Estimated Prevalence (%)
Current living arrangement		
Family with a child or children living with biological or adoptive parents	884	82.5
Step or blended family	52	4.9
Sole parent family	124	11.3
Other family structure	18	1.3
Household income		
Under \$20,000	28	3.2
\$20,000 to \$40,000	113	11.2
\$40,000 to \$60,000	154	16.5
\$60,000 to \$80,000	211	23.1
\$80,000 to \$100,000	183	18.4
More than \$100,000	331	27.5
Household spending		
Spend more money than earn/get	28	3.3
Have just enough money to get by	161	18.9
Spend left over money	72	7.1
Save a bit every now and then	300	30.1
Save some regularly	398	33.2
Save a lot	115	7.4
Area of residence		
Metropolitan	342	74.4
Rural	382	17.9
Remote	355	7.7
SEIFA classification of social disadvantage		
SEIFA Quintile 1 (Most disadvantaged)	172	13.5
SEIFA Quintile 2	245	20.7
SEIFA Quintile 3	261	21.6
SEIFA Quintile 4	268	19.0
SEIFA Quintile 5 (Most advantaged)	133	25.3
Have private health insurance		
Yes	651	63.6
No	424	36.4

2.1 Respondents Answering Survey

The demographic characteristics with unweighted percentage of the respondents for the children and the weighted estimate for the WA population as a whole are shown in Table 4.

Table 4: Demographic characteristics of respondent for child, HWSS 2007/08

Characteristic	Unweighted Sample (n)	Unweighted Prevalence (%)	Weighted Prevalence for WA Population (%)
Australian born			
Yes	820	76.0	73.1
No	259	24.0	26.9
Aboriginal or Torres Strait Islander			
Yes	28	2.6	1.0
No	1,051	97.4	99.0
Highest level of education			
Less than Year 10	17	1.6	1.4
Year 10 or Year 11	173	16.0	13.2
Year 12	128	11.9	13.6
TAFE/Trade qualification	486	45.0	42.0
Tertiary degree or equivalent	275	25.5	29.8
Employment status			
Employed	745	69.8	65.3
Unemployed	7	0.7	0.9
Home duties	289	27.1	31.2
Retired	2	0.2	0.0
Unable to work	4	0.4	0.2
Student	11	1.0	1.7
Other	9	0.8	0.7
Possess a government health care card			
Yes	168	15.7	16.0
No	899	84.3	84.0
Share home with a partner			
Yes	936	86.8	87.9
No	142	13.2	12.1

3 GENERAL HEALTH

3.1 Self-reported General Health

Self-ratings of health are used internationally, with poor health ratings associated with increased mortality and psychological distress, and lower physical functioning compared with excellent or very good ratings.⁵ Parents/carers were asked to rate their child's general health (Table 5).

Table 5: The health status of children 15 years and under, HWSS 2007/08

	Excellent		Very Good		Good		Fair		Poor	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
0 to 4 yrs	57.9	(49.0 - 66.3)	29.5	(22.1 - 38.1)	12.2	(7.3 - 19.5)	0.4	(0.1 - 1.1)	0.1	(0.0 - 0.6)
5 to 9 yrs	61.0	(52.9 - 68.5)	27.0	(20.6 - 34.5)	11.0	(6.8 - 17.4)	0.9	(0.2 - 4.7)	0.1	(0.0 - 0.6)
10 to 15 yrs	56.6	(49.8 - 63.2)	31.5	(25.6 - 38.2)	10.1	(7.0 - 14.6)	1.4	(0.5 - 4.0)	0.3	(0.1 - 1.9)
Gender										
Boys	55.7	(49.6 - 61.7)	30.2	(24.8 - 36.1)	12.3	(8.9 - 16.9)	1.5	(0.6 - 3.9)	0.3	(0.1 - 1.4)
Girls	61.1	(54.6 - 67.3)	28.8	(23.3 - 35.0)	9.6	(6.3 - 14.4)	0.3	(0.1 - 1.0)	0.1	(0.0 - 0.4)
Children	58.3	(53.8 - 62.7)	29.5	(25.6 - 33.7)	11.0	(8.5 - 14.2)	0.9	(0.4 - 2.1)	0.2	(0.1 - 0.7)

The annual prevalence estimates of health status are shown in Table 6.

Table 6: The health status of children 15 years and under, by financial year, HWSS

	Excellent		Very Good		Good		Fair		Poor	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	57.5	(52.8 - 62.1)	30.1	(25.9 - 34.7)	10.0	(7.7 - 13.0)	1.4	(0.7 - 2.6)	1.0	(0.3 - 2.7)
2005-2006	56.5	(52.9 - 60.1)	32.8	(29.5 - 36.3)	8.2	(6.4 - 10.4)	1.9	(1.2 - 3.0)	0.6	(0.2 - 1.5)
2006-2007	60.2	(56.1 - 64.1)	27.5	(24.1 - 31.2)	9.9	(7.7 - 12.7)	2.3	(1.3 - 4.0)	0.1	(0.0 - 0.5)
2007-2008	58.3	(53.9 - 62.7)	29.5	(25.6 - 33.7)	11.0	(8.5 - 14.2)	0.9	(0.4 - 2.1)	0.2	(0.1 - 0.7)
Average	58.1	(56.0 - 60.2)	30.0	(28.1 - 32.0)	9.8	(8.6 - 11.1)	1.6	(1.2 - 2.2)	0.5	(0.2 - 0.9)

3.2 Disability

Disability may be experienced in terms of impairments of body functions and structures, activity limitations or participation restrictions.⁶ Parents/carers were asked whether their child has a disability, long-term illness or pain that put a burden on the family, as shown in Table 7.

Table 7: Child with disability, long-term illness or pain that puts a burden on the family, HWSS 2007/08

	%	95% CI
Age Group		
0 to 4 yrs	2.0	(0.8 - 5.0)
5 to 9 yrs	8.1	(4.9 - 13.2)
10 to 15 yrs	8.5	(5.5 - 13.0)
Gender		
Boys	6.4	(4.3 - 9.6)
Girls	6.5	(4.0 - 10.3)
Children	6.5	(4.7 - 8.8)

- Children aged 5 years over were more than four times as likely to have a disability compared with children aged 4 years and under.

The annual prevalence estimates of disability are shown in Table 8.

Table 8: Child with disability, long-term illness or pain that puts a burden on the family, by financial year, HWSS

	%	95% CI
2004-2005	9.0	(6.9 - 11.8)
2005-2006	9.3	(7.3 - 11.9)
2006-2007	9.3	(7.2 - 12.0)
2007-2008	6.5	(4.7 - 8.8)
Average	8.5	(7.5 - 9.8)

There was a significantly lower proportion of children reported as having a disability, long-term illness or pain that puts a burden on the family in 2007-08 compared with 2006-07 (6.5% compared with 9.3%, $\chi^2=6.087$, $df=1$, $p=0.014$).

Parents/carers were asked who was the principal carer of the child with the disability, long-term illness or pain. In almost all cases in 2007-08 (96.3%), the carer was the mother, who was also the respondent for the child. The father was the carer in 1.7% of the cases and some other person was the carer in 2.0% of the cases. Only five children who had a disability, long-term illness or pain in 2007-08 did not need any carer.

Parents/carers who reported their child had a disability, long-term illness or pain that put a burden on the family were asked to rate the extent of the burden, as shown in Table 9.

Table 9: Burden due to a child with a disability, long-term illness or pain, HWSS 2007/08

	Not much		A little		Fairly big		Big		Very big	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
0 to 4 yrs	3.0	(0.6 - 14.4)	26.1	(5.1 - 69.7)	34.5	(7.3 - 77.7)	36.4	(5.8 - 84.3)	0.0	(0.0 - 0.0)
5 to 9 yrs	18.2	(4.4 - 51.9)	29.6	(11.9 - 56.6)	35.0	(14.9 - 62.3)	12.3	(2.6 - 42.2)	5.0	(1.1 - 20.2)
10 to 15 yrs	28.1	(12.6 - 51.3)	22.1	(9.3 - 43.7)	23.0	(8.1 - 50.3)	20.0	(6.9 - 46.0)	6.9	(2.2 - 19.4)
Gender										
Boys	7.6	(2.5 - 21.0)	38.5	(20.4 - 60.4)	27.7	(12.0 - 51.8)	18.2	(7.0 - 39.4)	8.0	(2.8 - 21.0)
Girls	37.0	(16.9 - 62.9)	11.4	(4.2 - 27.3)	29.8	(12.2 - 56.4)	18.9	(5.2 - 49.8)	2.9	(0.5 - 14.5)
Children	21.9	(11.1 - 38.8)	25.3	(14.3 - 40.8)	28.7	(15.9 - 46.2)	18.5	(8.5 - 35.9)	5.5	(2.3 - 12.5)

Note: This table is based on small numbers (46 males and 33 females).

There was a significantly lower proportion of girls whose disability, long-term illness or pain was reported as putting not much of a burden on the family compared with boys (37.0% compared with 7.6%, $\chi^2=9.107$, $df=1$, $p=0.003$).

The annual prevalence estimates of the burden are shown in Table 10.

Table 10: Burden due to a child with a disability, long-term illness or pain, by financial year, HWSS

	Not much		A little		Fairly big		Big		Very big	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	22.2	(12.9 - 35.5)	28.3	(18.0 - 41.6)	20.2	(11.3 - 33.5)	21.4	(11.9 - 35.3)	7.9	(2.3 - 24.2)
2005-2006	18.0	(9.9 - 30.4)	34.3	(23.8 - 46.6)	18.5	(11.2 - 29.2)	17.3	(8.2 - 32.7)	11.9	(5.6 - 23.6)
2006-2007	18.9	(10.6 - 31.3)	30.0	(19.3 - 43.4)	30.9	(19.4 - 45.4)	14.9	(6.7 - 30.1)	5.2	(2.1 - 12.6)
2007-2008	21.9	(11.1 - 38.8)	25.3	(14.3 - 40.8)	28.7	(15.9 - 46.2)	18.5	(8.5 - 35.9)	5.5	(2.3 - 12.5)
Average	20.1	(15.1 - 26.2)	29.9	(24.2 - 36.2)	24.3	(18.7 - 30.8)	18.0	(12.7 - 24.7)	7.8	(4.7 - 12.7)

4 CHRONIC HEALTH CONDITIONS

Chronic health conditions refer to long-term conditions (lasting more than six months) that can have a significant impact on a person's life. The chronic conditions collected by the HWSS are National Health Priority Areas due to their health impact and the potential to reduce their burden.⁷ In the HWSS chronic conditions were determined by asking parents/carers whether or not a doctor had ever diagnosed their child with a number of common health conditions.

4.1 Attention Deficit Hyperactivity Disorder

Attention Deficit Hyperactivity Disorder (ADHD) is a behavioural disorder that affects young children. Children with ADHD have three main problems: inattention, impulsivity and overactivity.⁸ The prevalence of ADHD is shown in Table 11.

Table 11: Prevalence of ADHD, 2 years and over, HWSS 2007/08

	%	95% CI
Age Group		
2 to 4 yrs	0.0	(0.0- 0.0)
5 to 9 yrs	1.9	(0.7- 5.1)
10 to 15 yrs	3.2	(1.9- 5.3)
Gender		
Boys	3.3	(2.0- 5.6)
Girls	0.8	(0.3- 2.1)
Children	2.1	(1.3- 3.3)

Boys were significantly more likely to be reported as having been diagnosed with ADHD than girls (3.3% compared with 0.8%, $\chi^2=7.276$, $df=1$, $p=0.007$).

The annual prevalence estimates of ADHD are shown in Table 12.

Table 12: Prevalence of ADHD, 2 years and over, by financial years, HWSS

	%	95% CI
2004-2005	4.5	(2.9- 6.8)
2005-2006	3.3	(2.2- 5.0)
2006-2007	3.3	(2.0- 5.2)
2007-2008	2.1	(1.3- 3.3)
Average	3.3	(2.6- 4.1)

4.2 Developmental Problems

Parents/carers were asked whether or not a doctor had ever diagnosed their child with a problem with coordination, clumsiness, deformity, stiffness or developmental delay.

The prevalence of developmental problems is shown in Table 13.

Table 13: Prevalence of developmental problems, HWSS 2007/08

	%	95% CI
Age Group		
0 to 4 yrs	3.7	(1.5 - 9.0)
5 to 9 yrs	8.7	(4.9 - 14.9)
10 to 15 yrs	7.4	(4.6 - 11.6)
Gender		
Boys	8.2	(5.4 - 12.3)
Girls	5.1	(2.9 - 9.0)
Children	6.7	(4.8 - 9.3)

The annual prevalence estimates of developmental problems are shown in Table 14.

Table 14: Prevalence of developmental problems, by financial year, HWSS

	%	95% CI
2004-2005	6.8	(4.8 - 9.5)
2005-2006	6.1	(4.5 - 8.2)
2006-2007	6.8	(5.0 - 9.1)
2007-2008	6.7	(4.8 - 9.3)
Average	6.6	(5.6 - 7.7)

4.3 Diabetes

Diabetes is a condition where the body is unable to maintain normal blood glucose levels. Diabetes contributes significantly to ill health, disability and premature death in Australia and is a National Health Priority Area.⁹ The prevalence of diabetes is shown in Table 15.

Table 15: Prevalence of diabetes, HWSS 2007/08

	%	95% CI
Age Group		
0 to 4 yrs	0.0	(0.0 - 0.0)
5 to 9 yrs	0.3	(0.0 - 1.9)
10 to 15 yrs	0.4	(0.1 - 1.9)
Gender		
Boys	0.4	(0.1 - 1.6)
Girls	0.0	(0.0 - 0.0)
Children	0.2	(0.1 - 0.8)

The annual prevalence estimates of diabetes are shown in Table 16.

Table 16: Prevalence of diabetes, by financial year, HWSS

	%	95% CI
2004-2005	0.3	(0.1 - 1.3)
2005-2006	0.1	(0.0 - 0.5)
2006-2007	0.2	(0.0 - 0.7)
2007-2008	0.2	(0.1 - 0.8)
Average	0.2	(0.1 - 0.4)

4.4 Asthma

Asthma is a common chronic condition and one of the seven National Health Priority Areas. It is a reversible narrowing of the airways in the lungs, with symptoms which include wheezing, coughing, tightness of the chest, breathing difficulty and shortness of breath.⁵ Parents/carers were asked whether a doctor had ever told them their child had asthma and whether their child had symptoms or had taken treatment for asthma during the past 12 months. The prevalence of asthma is shown in Table 17.

- Children aged 10 to 15 years of age were more than twice as likely to be reported as having ever had asthma compared with currently having asthma (18.6% compared with 8.6%).

Table 17: Prevalence of asthma, HWSS 2007/08

	Lifetime (ever)		Period (current)	
	%	95% CI	%	95% CI
Age Group				
0 to 4 yrs	3.4	(1.7 - 6.8)	3.4	(1.7 - 6.8)
5 to 9 yrs	14.5	(9.5 - 21.4)	11.1	(6.6 - 18.2)
10 to 15 yrs	18.6	(13.6 - 24.8)	8.6	(5.3 - 13.7)
Gender				
Boys	14.7	(10.9 - 19.7)	8.2	(5.4 - 12.2)
Girls	11.0	(7.4 - 16.1)	7.5	(4.5 - 12.4)
Children	12.9	(10.1 - 16.2)	7.9	(5.7 - 10.8)

The annual prevalence estimates of asthma are shown in Table 18.

Table 18: Prevalence of asthma, by financial year, HWSS

	Lifetime (ever)		Period (current)	
	%	95% CI	%	95% CI
2004-2005	16.7	(13.6 - 20.3)	11.9	(9.3 - 15.2)
2005-2006	15.9	(13.4 - 18.8)	9.9	(7.9 - 12.4)
2006-2007	18.8	(15.8 - 22.2)	11.6	(9.3 - 14.4)
2007-2008	12.9	(10.1 - 16.2)	7.9	(5.7 - 10.8)
Average	16.1	(14.6 - 17.7)	10.3	(9.1 - 11.7)

The prevalence of ever having had asthma was significantly lower in 2007-08 compared with 2006-07 (12.9% compared with 18.9%, $\chi^2=14.651$, $df=1$, $p=0.000$).

4.5 Respiratory Problem Other Than Asthma

Parents/carers were asked whether a doctor had told them their child had a respiratory problem other than asthma, such as chronic bronchitis, that lasted six months or more. The prevalence of respiratory problems is shown in Table 19.

Table 19: Prevalence of respiratory related conditions, HWSS 2007/08

	Lifetime (ever)		Period (current)	
	%	95% CI	%	95% CI
Age Group				
0 to 4 yrs	0.4	(0.1 - 1.1)	0.1	(0.0 - 0.5)
5 to 9 yrs	0.3	(0.0 - 2.0)	0.0	(0.0 - 0.0)
10 to 15 yrs	0.9	(0.3 - 2.9)	0.8	(0.2 - 2.9)
Gender				
Boys	0.5	(0.2 - 1.2)	0.1	(0.0 - 0.5)
Girls	0.6	(0.2 - 2.4)	0.6	(0.1 - 2.4)
Children	0.5	(0.2 - 1.3)	0.4	(0.1 - 1.2)

The annual prevalence estimates of respiratory problems are shown in Table 20. Due to changes in the wording of the questions the data is only comparable from 2006 onwards.

Table 20: Prevalence of respiratory related conditions, by financial year, HWSS

	Lifetime (ever)		Period (current)	
	%	95% CI	%	95% CI
2004-2005	na	(-)	na	(-)
2005-2006	na	(-)	na	(-)
2006-2007	1.0	(0.5 - 2.3)	0.9	(0.3 - 2.2)
2007-2008	0.5	(0.2 - 1.3)	0.4	(0.1 - 1.2)
Average	0.9	(0.6 - 1.3)	0.5	(0.3 - 1.0)

4.6 Injuries

Injury is a leading cause of hospitalisation and death in Australia and is one of the seven National Health Priority Areas.⁷ Parents/carers were asked whether their child had injuries in the past 12 months that required treatment from a health professional, shown in Figure 1.

- Boys were significantly more likely to have had an injury requiring treatment from a health professional in the last year compared with girls (23.6% compared with 13.2%).

The annual prevalence estimates of injuries are shown in Figure 2.

Figure 1: Prevalence of injuries in the past 12 months requiring treatment from a health professional, HWSS 2007/08

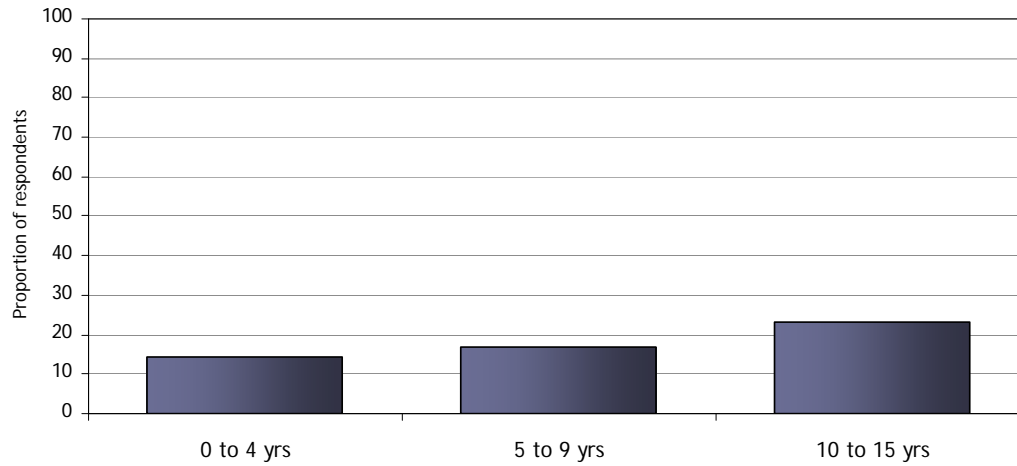
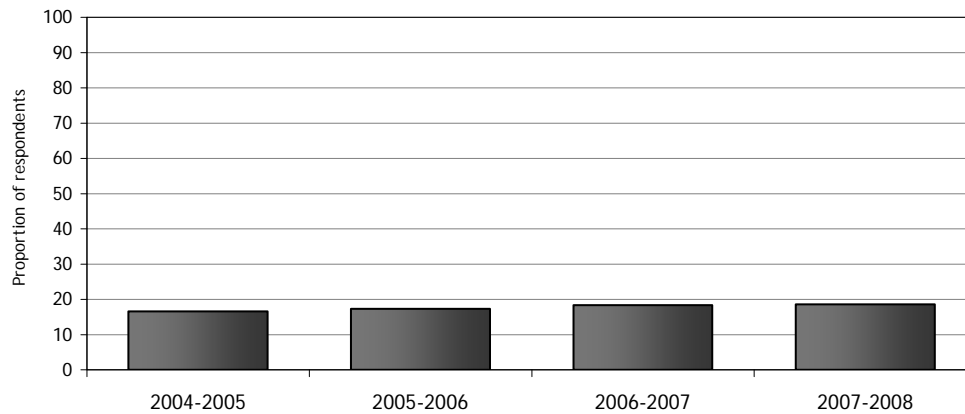


Figure 2: Prevalence of injuries in the past 12 months requiring treatment from a health professional, by financial year



The mean number of injuries that required treatment from a health professional in the past 12 months is shown in Table 21.

Table 21: Mean number of injuries, HWSS 2007/08

	\bar{x}	95% CI
Age Group		
0 to 4 yrs	0.2	(0.1 - 0.3)
5 to 9 yrs	0.2	(0.1 - 0.3)
10 to 15 yrs	0.4	(0.3 - 0.4)
Gender		
Boys	0.3	(0.3 - 0.4)
Girls	0.2	(0.1 - 0.2)
Children	0.3	(0.2 - 0.3)

- Children aged 9 years and under reported a significantly lower mean number of injuries compared with older respondents (0.2 compared with 0.4).

The annual mean number of injuries past 12 months is shown in Table 22.

Table 22: Mean number of injuries, by financial year, HWSS

	\bar{x}	95% CI
2004-2005	na	(na - na)
2005-2006	0.3	(0.2 - 0.3)
2006-2007	0.3	(0.2 - 0.5)
2007-2008	0.3	(0.2 - 0.3)
Average	0.3	(0.2 - 0.4)

5 HEALTH SERVICE UTILISATION

Health services are the way in which health care is provided to patients and the general population and consist of many different forms, including GP, dental, mental and alternative services.⁶ Parents/carers were asked whether their child had used a number of common health services within the past 12 months, shown in Table 23.

Table 23: Health service utilisation, HWSS 2007/08

	Primary (a)		Allied (b)		Dental		Mental (c)		Alternative (d)	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
0 to 4 yrs	92.1	(84.7 - 96.1)	18.6	(12.6 - 26.8)	7.4	(4.1 - 12.9)	0.5	(0.1 - 3.3)	5.5	(2.8 - 10.5)
5 to 9 yrs	85.5	(79.7 - 89.9)	25.0	(18.6 - 32.6)	77.9	(71.0 - 83.6)	4.4	(2.5 - 7.7)	6.4	(3.4 - 11.8)
10 to 15 yrs	72.1	(65.9 - 77.7)	31.8	(25.7 - 38.7)	83.6	(77.4 - 88.3)	5.0	(2.7 - 9.1)	2.5	(1.4 - 4.6)
Gender										
Boys	81.1	(76.1 - 85.3)	25.9	(20.9 - 31.6)	59.3	(53.2 - 65.2)	4.2	(2.6 - 6.8)	5.5	(3.3 - 8.9)
Girls	83.3	(78.1 - 87.5)	25.6	(20.1 - 32.0)	58.9	(52.1 - 65.5)	2.7	(1.3 - 5.8)	3.7	(2.0 - 6.7)
Children	82.2	(78.7 - 85.2)	25.8	(22.0 - 29.9)	59.1	(54.6 - 63.6)	3.5	(2.3 - 5.3)	4.6	(3.1 - 6.7)

(a) e.g. medical specialist, general practitioner, community health centre, community or district nurses.

(b) e.g. overnight stay, accident and emergency department or outpatients.

(c) e.g. optician, physiotherapist, chiropractor, podiatrist, dietician, nutritionist, occupational therapist, diabetes/other health educator.

(d) e.g. psychiatrist, psychologist or counsellor.

(e) e.g. acupuncturist, naturopath, homeopath or any other alternative health service.

The annual prevalence estimates of health service use are shown in Table 24.

Table 24: Health service utilisation, by financial year, HWSS

	Primary (a)		Allied (b)		Dental		Mental (c)		Alternative (d)	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	82.8	(78.7 - 86.2)	20.9	(17.4 - 24.8)	60.2	(55.6 - 64.7)	3.6	(2.2 - 5.8)	3.2	(1.9 - 5.4)
2005-2006	81.3	(77.9 - 84.2)	23.6	(20.2 - 27.4)	62.1	(57.9 - 66.2)	3.4	(2.3 - 5.0)	3.0	(2.0 - 4.5)
2006-2007	80.7	(77.1 - 83.8)	26.6	(23.2 - 30.3)	58.0	(53.8 - 62.0)	3.2	(2.1 - 4.8)	3.5	(2.3 - 5.2)
2007-2008	82.2	(78.7 - 85.2)	25.8	(22.0 - 29.9)	59.1	(54.6 - 63.6)	3.5	(2.3 - 5.3)	4.6	(3.1 - 6.7)
Average	81.8	(80.0 - 83.4)	24.3	(22.4 - 26.2)	59.7	(57.5 - 61.9)	3.4	(2.8 - 4.2)	3.7	(3.0 - 4.5)

(a) e.g. medical specialist, general practitioner, community health centre, community or district nurses.

(b) e.g. overnight stay, accident and emergency department or outpatients.

(c) e.g. optician, physiotherapist, chiropractor, podiatrist, dietician, nutritionist, occupational therapist, diabetes/other health educator.

(d) e.g. psychiatrist, psychologist or counsellor.

(e) e.g. acupuncturist, naturopath, homeopath or any other alternative health service.

The mean number of visits to each health service is shown in Table 25.

Table 25: Mean number of visits to health services in the past 12 months, HWSS 2007/08

	Primary (a)		Allied (c)		Dental		Mental (d)		Alternative (e)	
	\bar{x}	95% CI	\bar{x}	95% CI	\bar{x}	95% CI	\bar{x}	95% CI	\bar{x}	95% CI
Age Group										
0 to 4 yrs	4.7	(3.8 - 5.5)	0.9	(0.3 - 1.6)	0.1	(0.0 - 0.1)	0.0	(0.0 - 0.1)	0.2	(0.0 - 0.4)
5 to 9 yrs	3.1	(2.5 - 3.6)	1.3	(0.2 - 2.4)	1.1	(1.0 - 1.2)	0.2	(0.1 - 0.3)	0.6	(-0.2 - 1.5)
10 to 15 yrs	2.1	(1.7 - 2.5)	1.5	(1.0 - 2.1)	1.7	(1.4 - 1.9)	0.5	(0.1 - 0.9)	0.1	(0.0 - 0.2)
Gender										
Boys	3.1	(2.7 - 3.6)	1.2	(0.7 - 1.7)	0.9	(0.8 - 1.1)	0.4	(0.1 - 0.7)	0.4	(-0.1 - 0.9)
Girls	3.2	(2.7 - 3.7)	1.4	(0.6 - 2.2)	1.1	(0.9 - 1.3)	0.1	(0.0 - 0.2)	0.2	(0.0 - 0.3)
Children	3.2	(2.8 - 3.5)	1.3	(0.8 - 1.7)	1.0	(0.9 - 1.1)	0.3	(0.1 - 0.4)	0.3	(0.0 - 0.6)

(a) e.g. medical specialist, general practitioner, community health centre, community or district nurses.

(b) e.g. overnight stay, accident and emergency department or outpatients.

(c) e.g. optician, physiotherapist, chiropractor, podiatrist, dietician, nutritionist, occupational therapist, diabetes/other health educator.

(d) e.g. psychiatrist, psychologist or counsellor.

(e) e.g. acupuncturist, naturopath, homeopath or any other alternative health service.

The annual mean numbers of visits to each health service use are shown in Table 26.

Table 26: Mean number of visits to health services in the past 12 months, HWSS, 2007/08

	Primary (a)		Allied (b)		Dental		Mental (c)		Alternative (d)	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	3.0	(2.6 - 3.3)	1.1	(0.7 - 1.4)	1.3	(1.1 - 1.5)	0.2	(0.0 - 0.3)	0.1	(0.0 - 0.1)
2005-2006	3.2	(2.9 - 3.5)	1.0	(0.7 - 1.3)	1.2	(1.1 - 1.4)	0.2	(0.1 - 0.3)	0.1	(0.0 - 0.1)
2006-2007	3.2	(2.9 - 3.6)	1.6	(1.1 - 2.2)	1.1	(1.0 - 1.3)	0.2	(0.0 - 0.4)	0.1	(0.0 - 0.2)
2007-2008	3.2	(2.8 - 3.5)	1.3	(0.8 - 1.7)	1.0	(0.9 - 1.1)	0.3	(0.1 - 0.4)	0.3	(0.0 - 0.6)
Average	3.1	(2.9 - 3.3)	1.3	(1.0 - 1.5)	1.2	(1.1 - 1.2)	0.2	(0.1 - 0.3)	0.2	(0.1 - 0.2)

(a) e.g. medical specialist, general practitioner, community health centre, community or district nurses.

(b) e.g. overnight stay, accident and emergency department or outpatients.

(c) e.g. optician, physiotherapist, chiropractor, podiatrist, dietician, nutritionist, occupational therapist, diabetes/other health educator.

(d) e.g. psychiatrist, psychologist or counsellor.

(e) e.g. acupuncturist, naturopath, homeopath or any other alternative health service.

6 CHILD DEVELOPMENT

The early years are very important for laying the foundations for children's physical wellbeing and later competence. There are many important influences on children during this period of rapid change, including biological, social, community and family.⁹

6.1 Birth Weight

Birth weight is a key indicator of infant health, with low birth weight defined by the World Health Organization (WHO) as less than 2,500 grams. Babies born with a low birth weight have a greater risk of poor health and dying and are more likely to develop significant disabilities.¹⁰ The mean birth weight is shown in Table 27.

Table 27: Mean birth weight (grams), HWSS 2007/08

	\bar{x}	95% CI
Age Group		
0 to 4 yrs	3338.9	(3232.7 - 3445.1)
5 to 9 yrs	3366.1	(3265.6 - 3466.7)
10 to 15 yrs	3317.3	(3232.8 - 3401.7)
Gender		
Boys	3386.6	(3309.2 - 3464.1)
Girls	3288.4	(3209.2 - 3367.6)
Children	3339.0	(3283.5 - 3394.5)

The annual mean birth weights are shown in Table 28.

Table 28: Mean birth weight (grams), by financial year, HWSS

	\bar{x}	95% CI
2004-2005	3344.8	(3285.8 - 3403.8)
2005-2006	3377.7	(3331.3 - 3424.2)
2006-2007	3372.3	(3317.9 - 3426.8)
2007-2008	3339.0	(3283.5 - 3394.5)
Average	3358.7	(3331.8 - 3385.7)

The proportion of children born with a low birth weight is shown in Table 29.

Table 29: Proportion of children born with a low birth weight, HWSS 2007/08

	%	95% CI
Age Group		
0 to 4 yrs	8.5	(4.6 - 15.2)
5 to 9 yrs	8.9	(5.0 - 15.5)
10 to 15 yrs	8.5	(5.2 - 13.7)
Gender		
Boys	8.7	(5.6 - 13.1)
Girls	8.7	(5.4 - 13.6)
Children	8.7	(6.3 - 11.8)

The annual proportion of children born with a low birth weight are shown in Table 30.

Table 30: Proportion of children born with a low birth weight, by financial year, HWSS

	%	95% CI
2004-2005	6.9	(5.0 - 9.3)
2005-2006	7.5	(5.8 - 9.6)
2006-2007	6.9	(5.0 - 9.3)
2007-2008	8.7	(6.3 - 11.8)
Average	7.4	(6.4 - 8.6)

6.2 Breastfeeding

Breastfeeding is an important contributor to infant health as it promotes the survival, growth, development and health of infants and young children.⁹ It helps protect against many conditions, including diarrhoea, respiratory infections, middle ear infections, diabetes, and allergic diseases. Hence, Australia's national dietary guidelines strongly recommend exclusive breastfeeding for infants up to about six months.¹¹ The prevalence of breastfeeding is shown in Table 31 and the annual prevalence estimates are shown in Table 32.

Table 31: Prevalence of breastfeeding, HWSS 2007/08

	Breastfed less than 6 months		Breastfed 6 months or more with water only		Breastfed 6 months or more with other liquid or solid		Breastfed exclusively for 6 months or more		Unable to determine how long breastfed exclusively		Didn't breastfeed	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group												
0 to 4 yrs	25.1	(18.1 - 33.8)	7.5	(4.2 - 12.9)	19.9	(13.7 - 28.0)	26.0	(19.1 - 34.3)	12.5	(4.2 - 14.8)	9.0	(5.4 - 14.8)
5 to 9 yrs	24.4	(18.0 - 32.0)	8.5	(5.1 - 13.8)	31.7	(24.6 - 39.8)	17.1	(12.0 - 23.9)	4.0	(2.1 - 7.7)	14.3	(9.0 - 22.0)
10 to 15 yrs	33.1	(26.9 - 39.9)	10.1	(6.3 - 15.6)	29.6	(23.4 - 36.6)	10.6	(7.1 - 15.5)	5.2	(3.3 - 16.2)	11.5	(8.1 - 16.2)
Gender												
Boys	28.5	(23.2 - 34.5)	7.4	(4.9 - 10.9)	25.7	(20.6 - 31.4)	16.9	(12.8 - 22.0)	10.0	(6.7 - 14.7)	11.5	(8.1 - 16.0)
Girls	27.4	(21.8 - 33.8)	10.3	(6.8 - 15.3)	29.1	(23.2 - 35.7)	17.6	(13.1 - 23.2)	3.8	(2.3 - 6.3)	11.8	(8.1 - 16.9)
Children	28.0	(24.1 - 32.3)	8.8	(6.6 - 11.7)	27.3	(23.4 - 31.6)	17.2	(14.1 - 20.9)	7.0	(5.1 - 9.6)	11.7	(9.0 - 14.9)

Table 32: Prevalence of breastfeeding, by financial year, HWSS

	Breastfed less than 6 months		Breastfed 6 months or more with water only		Breastfed 6 months or more with other liquid or solid		Breastfed exclusively for 6 months or more		Unable to determine how long breastfed exclusively		Didn't breastfeed	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	28.5	(24.5 - 32.8)	8.9	(6.7 - 11.7)	32.7	(28.4 - 37.3)	9.5	(7.1 - 12.4)	12.0	(6.7 - 11.5)	8.6	(6.3 - 11.5)
2005-2006	30.1	(26.9 - 33.5)	8.5	(6.8 - 10.6)	30.5	(27.2 - 34.0)	14.0	(11.6 - 16.8)	8.4	(6.6 - 10.6)	8.5	(6.6 - 10.9)
2006-2007	28.3	(24.8 - 31.9)	12.8	(10.2 - 16.0)	28.9	(25.2 - 32.9)	10.9	(8.6 - 13.8)	10.2	(7.9 - 11.7)	9.0	(6.9 - 11.7)
2007-2008	28.0	(24.1 - 32.3)	8.8	(6.6 - 11.7)	27.3	(23.4 - 31.6)	17.2	(14.1 - 20.9)	7.0	(5.1 - 9.6)	11.7	(9.0 - 14.9)
Average	28.7	(26.8 - 30.6)	9.7	(8.6 - 11.1)	29.9	(27.9 - 31.9)	12.9	(11.5 - 14.4)	9.4	(8.1 - 10.8)	9.4	(8.2 - 10.8)

6.3 Speech

From a very young age children begin to develop language. There are two distinctions in difficulties developing speech: 1) speech delay, which is when speech follows the usual pattern of speech development, but is slower than normal and 2) speech disorder, which is when speech does not follow the usual pattern of development.¹² The proportion of children who were perceived to be late in starting to talk and the proportion of children perceived to need professional help with their speech are shown in Table 33.

Table 33: Proportion of children late talking and needing professional help with speech, 2 year olds and over, HWSS 2007/08

	Late talking		Needs professional help with speech	
	%	95% CI	%	95% CI
Age Group				
2 to 4 yrs	18.7	(11.9 - 28.2)	10.0	(5.3 - 18.2)
5 to 9 yrs	12.5	(8.0 - 19.1)	15.4	(10.4 - 22.2)
10 to 15 yrs	11.6	(7.6 - 17.3)	8.3	(5.0 - 13.5)
Gender				
Boys	18.8	(14.2 - 24.5)	14.1	(10.1 - 19.5)
Girls	7.5	(4.4 - 12.5)	8.0	(4.9 - 12.8)
Children	13.4	(10.4 - 17.0)	11.2	(8.5 - 14.6)

- Boys were more than twice as likely to be regarded as late talking compared with girls (18.8% compared with 7.5).

The annual proportion of children born late talking and needing professional help are shown in Table 34.

Table 34: Proportion of children late talking and needing professional help with speech, 2 year olds and over, by financial year, HWSS

	Late talking		Needs professional help with speech	
	%	95% CI	%	95% CI
2004-2005	14.3	(11.3 - 18.0)	9.9	(7.3 - 13.1)
2005-2006	14.2	(10.9 - 18.4)	7.7	(5.1 - 11.5)
2006-2007	16.4	(13.4 - 19.9)	9.8	(7.5 - 12.8)
2007-2008	13.4	(10.4 - 17.0)	11.2	(8.5 - 14.6)
Average	14.6	(13.0 - 16.4)	9.9	(8.5 - 11.5)

7 LIFESTYLE FACTORS

There are many factors that influence a person's health, including genetics, lifestyle and environmental (including social) factors. These factors may have a positive effect on health, such as a high consumption of fruit and vegetables, or a negative effect, such as smoking and physical inactivity.⁶ These modifiable lifestyle behaviours are also associated with the onset of some physiological risk factors, such as high cholesterol, high blood pressure and obesity.

7.1 Physical Activity

Physical inactivity is a behavioural risk factor associated with several chronic health conditions, including coronary heart disease, stroke and diabetes. Being physically active reduces the risk of developing such conditions, while also improving general wellbeing.¹³ Parents/carers were asked to rate their child's physical activity level, as shown in Table 35.

Table 35: Parent-rated physical activity for children aged 5 to 15 years, HWSS 2007/08

	Very active		Active		Moderately active		Not very active		Not at all active	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
5 to 9 yrs	64.0	(56.1 - 71.2)	23.9	(17.9 - 31.1)	11.2	(7.1 - 17.0)	0.9	(0.2 - 4.9)	0.1	(0.0 - 0.5)
10 to 15 yrs	49.4	(42.6 - 56.2)	26.2	(20.8 - 32.4)	19.0	(14.3 - 24.7)	5.4	(3.4 - 8.6)	0.0	(0.0 - 0.2)
Gender										
Boys	60.4	(53.4 - 67.0)	22.6	(17.1 - 29.1)	13.3	(9.5 - 18.1)	3.7	(2.0 - 7.0)	0.1	(0.0 - 0.4)
Girls	51.0	(43.3 - 58.6)	28.0	(22.0 - 34.8)	18.0	(12.8 - 24.6)	3.1	(1.6 - 6.0)	0.0	(0.0 - 0.0)
Children	55.8	(50.6 - 60.9)	25.2	(21.1 - 29.8)	15.5	(12.2 - 19.5)	3.4	(2.1 - 5.4)	0.0	(0.0 - 0.2)

- Children aged 5 to 9 years were significantly more likely to be rated as very active compared with 10 to 15 year olds (64.0% compared with 49.4%).

The annual prevalence estimates of physical activity ratings are shown in Table 36.

Table 36: Parent-rated physical activity for children aged 5 to 15 years, HWSS 2007/08

	Very active		Active		Moderately active		Not very active		Not at all active	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	47.7	(40.9 - 54.6)	28.3	(22.9 - 34.6)	17.7	(12.7 - 24.0)	5.9	(3.2 - 10.6)	0.4	(0.1 - 2.6)
2005-2006	49.9	(45.6 - 54.2)	28.9	(25.3 - 32.9)	17.5	(14.6 - 20.8)	3.6	(2.5 - 5.3)	0.1	(0.0 - 0.3)
2006-2007	51.0	(46.1 - 55.8)	28.5	(24.4 - 33.0)	18.2	(14.8 - 22.1)	2.0	(1.2 - 3.4)	0.4	(0.1 - 2.5)
2007-2008	55.8	(50.6 - 60.9)	25.2	(21.1 - 29.8)	15.5	(12.2 - 19.5)	3.4	(2.1 - 5.4)	0.0	(0.0 - 0.2)
Average	51.4	(48.8 - 54.0)	27.7	(25.5 - 30.0)	17.2	(15.3 - 19.2)	3.5	(2.7 - 4.6)	0.2	(0.1 - 0.7)

In 2006, based on the 2004 publication *Australia's Physical Activity Recommendations for Children*, questions were put in the survey to enable reporting against these. The recommendations for children aged between 5 and 18 years are to participate in at least 60 minutes of moderate to vigorous physical activity each day and to spend no more than two hours a day watching TV, videos or using the computer.^{14,15} The results for children aged 5 to 15 years are shown in Table 37.

Table 37: Weekly physical activity for children aged 5 to 15 years, HWSS 2007/08

	No sessions of physical activity		Not physically active at least 7 sessions		Physically active 7 or more sessions but less than 60 mins a session		Physically active 7 or more sessions and more than 60 mins a session	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group								
5 to 9 yrs	1.2	(0.4 - 3.6)	19.6	(14.1 - 26.6)	18.5	(12.8 - 26.2)	60.7	(52.4 - 68.4)
10 to 15 yrs	4.1	(2.2 - 7.7)	31.9	(25.4 - 39.1)	13.6	(9.5 - 19.1)	50.4	(43.3 - 57.5)
Gender								
Boys	1.8	(0.8 - 4.2)	20.7	(15.5 - 27.1)	14.4	(9.9 - 20.6)	63.1	(55.7 - 69.8)
Girls	4.0	(1.9 - 7.9)	32.5	(25.4 - 40.6)	17.3	(12.1 - 24.1)	46.2	(38.4 - 54.2)
Children	2.8	(1.6 - 4.9)	26.4	(21.9 - 31.5)	15.8	(12.2 - 20.2)	55.0	(49.5 - 60.3)

- Boys were significantly more likely to complete the recommended amount of physical activity compared with girls (63.1% compared with 46.2%).

Girls were significantly more likely to do less than seven sessions of physical activity each week compared with boys (32.5% compared with 20.7%, $\chi^2=12.668$, $df=1$, $p<0.05$).

The annual prevalence estimates of weekly physical activity are shown in Table 38.

Table 38: Weekly physical activity for children aged 5 to 15 years, by financial year, HWSS

	Did no sessions of physical activity last week		Wasn't physically active at least 7 sessions		Was physically active for 7 or more sessions but did less than 60 minutes a session		Was physically active for 7 or more sessions and did 60 minutes or more a session	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2006-2007	2.7	(1.6 - 4.6)	31.7	(27.2 - 36.6)	18.6	(15.0 - 23.0)	46.9	(41.9 - 52.0)
2007-2008	2.8	(1.6 - 4.9)	26.4	(21.9 - 31.5)	15.8	(12.2 - 20.2)	55.0	(49.5 - 60.3)
Average	2.3	(1.4 - 3.7)	29.4	(25.7 - 33.5)	17.4	(14.4 - 21.0)	50.9	(46.6 - 55.2)

The proportion of children who watched met the guidelines of two hours or less of computer use of television is shown in Table 39.

Table 39: Proportion watching TV, videos or using the computer on average for children aged 5 to 15 years, HWSS 2007/08

	Less than 2 hrs per day		Two or more hours per day	
	%	95% CI	%	95% CI
Age Group				
5 to 9 yrs	71.3	(63.5 - 78.0)	28.7	(22.0 - 36.5)
10 to 15 yrs	43.8	(37.0 - 50.7)	56.2	(49.3 - 63.0)
Gender				
Boys	52.3	(45.1 - 59.3)	47.7	(40.7 - 54.9)
Girls	59.9	(52.2 - 67.2)	40.1	(32.8 - 47.8)
Children	56.0	(50.7 - 61.1)	44.0	(38.9 - 49.3)

- Children aged 10 to 15 years were significantly more likely to watch two or more hours per day of TV, videos or using the computer compared with children aged 5 to 9 years (56.2% compared with 28.7%).

The annual proportion of children watching tv, videos or using the computer are shown in Table 40.

Table 40: Proportion watching TV, videos or using the computer on average for children aged 5 to 15 years, by financial year, HWSS

	Less than two hours per day		Two or more hours per day	
	%	95% CI	%	95% CI
2004-2005	48.6	(43.1 - 54.1)	51.4	(45.9 - 56.9)
2005-2006	52.6	(48.4 - 56.9)	47.4	(43.1 - 51.6)
2006-2007	56.0	(51.1 - 60.7)	44.0	(39.3 - 48.9)
2007-2008	56.0	(50.7 - 61.1)	44.0	(38.9 - 49.3)
Average	53.3	(50.8 - 55.8)	46.7	(44.2 - 49.2)

7.2 Body Mass Index

Parents/carers were asked to provide their child's height without shoes and their weight. A Body Mass Index (BMI) was derived from these figures by dividing weight in kilograms by height in metres squared. Age and sex specific BMI categories were then used to classify the children into not overweight and at risk of being overweight or obese,¹⁶ as shown in Table 41. Outliers and biologically implausible values were removed in the derivation of these categories.¹⁷

Table 41: Prevalence of body mass index categories for children aged 5 to 15 years, HWSS 2007/08

	Not overweight or obese		Overweight		Obese	
	%	95% CI	%	95% CI	%	95% CI
Age Group						
5 to 9 yrs	78.5	(68.6 - 85.9)	14.9	(8.8 - 24.2)	6.6	(3.3 - 12.9)
10 to 15 yrs	78.3	(71.2 - 84.1)	15.2	(10.4 - 21.5)	6.5	(3.5 - 11.8)
Gender						
Boys	78.8	(71.0 - 85.0)	15.0	(9.9 - 21.9)	6.2	(3.1 - 12.1)
Girls	77.9	(69.4 - 84.6)	15.2	(9.6 - 23.2)	6.9	(3.6 - 12.7)
Children	78.4	(72.8 - 83.1)	15.1	(11.1 - 20.1)	6.5	(4.1 - 10.3)

The annual prevalence of body mass index categories are shown in Table 42.

Table 42: Prevalence of body mass index categories for children aged 5 to 15 years, by financial year, HWSS

	Not overweight or obese		Overweight		Obese	
	%	95% CI	%	95% CI	%	95% CI
2004-2005	76.0	(69.5 - 81.5)	16.6	(12.1 - 22.3)	7.4	(4.4 - 12.4)
2005-2006	75.3	(70.1 - 79.8)	16.6	(12.7 - 21.4)	8.1	(5.7 - 11.4)
2006-2007	81.5	(76.4 - 85.7)	13.4	(9.8 - 17.9)	5.1	(3.0 - 8.7)
2007-2008	78.4	(72.8 - 83.1)	15.1	(11.1 - 17.9)	6.5	(4.1 - 10.3)
Average	77.8	(75.0 - 80.3)	15.4	(13.3 - 17.8)	6.8	(5.4 - 8.6)

Note: A correction factor was applied to these data based on the CDC BRFSS algorithm which corrects for unrealistic heights and weights in young people. therefore the figures will be slightly different from those published in the 2006-07 report.

7.3 Sun Protection

Almost all skin cancers could be prevented if people protect themselves in the sun. Childhood sun exposure is particularly important in determining melanoma risk.¹⁸ Table 43 shows the average times children were sunburned in the past 12 months.

Table 43: Mean times sunburned in past 12 months, HWSS 2007/08

	\bar{x}	95% CI
Age Group		
0 to 4 yrs	0.3	(0.2 - 0.4)
5 to 9 yrs	1.6	(1.3 - 1.8)
10 to 15 yrs	2.1	(1.8 - 2.4)
Gender		
Boys	1.5	(1.3 - 1.8)
Girls	1.3	(1.1 - 1.5)
Children	1.4	(1.3 - 1.6)

- There was a significant increase with age in the mean number of times children were sunburned in the past 12 months.

The annual mean times sunburned are shown in Table 44

Table 44: Mean times sunburned in past 12 months, by financial year, HWSS

	\bar{x}	95% CI
2004-2005	1.3	(1.2 - 1.5)
2005-2006	1.6	(1.3 - 1.8)
2006-2007	1.6	(1.5 - 1.8)
2007-2008	1.4	(1.3 - 1.6)
Average	1.5	(1.4 - 1.6)

Table 45 shows how often parents/carers checked to see whether their child was adequately protected before going out into the sunlight (i.e. wear a hat, use sunscreen and keep covered).

Table 45: How often check to see if child is adequately protected before going out into sunlight, HWSS 2007/08

	Always		Most of the time		Sometimes		Rarely		Never	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
0 to 4 yrs	73.3	(65.0 - 80.2)	19.3	(13.5 - 26.9)	6.8	(3.4 - 13.1)	0.5	(0.1 - 3.3)	0.1	(0.0 - 0.8)
5 to 9 yrs	58.7	(50.5 - 66.5)	32.6	(25.4 - 40.6)	7.7	(4.0 - 14.2)	1.0	(0.2 - 4.7)	0.0	(0.0 - 0.2)
10 to 15 yrs	51.2	(44.3 - 58.0)	33.7	(27.8 - 40.3)	10.8	(7.4 - 15.6)	0.7	(0.2 - 1.9)	3.6	(1.7 - 7.4)
Gender										
Boys	59.9	(53.9 - 65.7)	27.6	(22.7 - 33.2)	10.0	(6.9 - 14.4)	0.9	(0.3 - 3.0)	1.5	(0.5 - 4.0)
Girls	60.2	(53.6 - 66.5)	30.7	(25.0 - 37.0)	7.2	(4.3 - 11.7)	0.5	(0.1 - 1.5)	1.4	(0.5 - 4.0)
Children	60.1	(55.6 - 64.4)	29.1	(25.3 - 33.2)	8.7	(6.4 - 11.6)	0.7	(0.3 - 1.7)	1.5	(0.7 - 3.0)

- As children get older, parents/carers were less likely to always check to see whether or not children were adequately protected before going out into sunlight.

The annual prevalence estimates of checking to see if child is adequately protected before going out into sunlight are shown in Table 46.

Table 46: How often check to see if child is adequately protected before going out into sunlight, by financial year, HWSS

	Always		Often		Sometimes		Rarely		Never	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	64.8	(60.3 - 69.1)	28.9	(25.0 - 33.2)	5.2	(3.4 - 7.8)	0.6	(0.2 - 1.6)	0.5	(0.1 - 1.7)
2005-2006	58.1	(54.4 - 61.6)	34.7	(31.3 - 38.2)	5.5	(4.1 - 7.4)	0.5	(0.3 - 1.1)	1.2	(0.6 - 2.6)
2006-2007	53.3	(49.1 - 57.4)	39.7	(35.7 - 43.9)	5.7	(4.0 - 8.1)	0.7	(0.3 - 2.0)	0.5	(0.2 - 1.5)
2007-2008	60.1	(55.6 - 64.4)	29.1	(25.3 - 33.2)	8.7	(6.4 - 11.6)	0.7	(0.3 - 1.7)	1.5	(0.7 - 3.0)
Average	59.1	(57.0 - 61.1)	33.1	(31.2 - 35.1)	6.3	(5.3 - 7.4)	0.7	(0.4 - 1.0)	0.9	(0.6 - 1.4)

7.4 Alcohol

As alcohol abuse is known to be particularly disruptive to family functioning,¹⁹ parents/carers were asked whether or not they thought that alcohol caused problems in their household. The proportion of parents/carers reporting that alcohol causes problems in the household is shown in Table 47.

Table 47: Alcohol causing problems in the household, HWSS 2007/08

	%	95% CI
Age Group		
0 to 4 yrs	3.2	(1.0 - 9.7)
5 to 9 yrs	2.7	(1.1 - 6.2)
10 to 15 yrs	2.7	(0.9 - 7.8)
Gender		
Boys	3.0	(1.2 - 7.4)
Girls	2.7	(1.3 - 5.6)
Children	2.8	(1.5 - 5.2)

The annual proportion of parents/carers reporting that alcohol causes problems in the household is shown in Table 48.

Table 48: Alcohol causing problems in the household, by financial year, HWSS

	%	95% CI
2004-2005	1.9	(1.0 - 3.6)
2005-2006	1.7	(0.6 - 4.4)
2006-2007	1.6	(0.7 - 3.3)
2007-2008	2.8	(1.5 - 5.2)
Average	2.1	(1.5 - 3.0)

7.5 Smoking

7.5.1 Smoking in the Home

The negative health effects of passive smoking on children are well documented. Passive smoking is associated with numerous health conditions, such as respiratory infections, middle ear infections, more frequent colds and onset and severity of asthma. In addition, children in households with a smoker are more likely to smoke themselves in the future.⁹ Parents/carers were asked about their home situation in regards to whether or not people smoke in the household, shown in Table 49.

Table 49: Smoking within the home, HWSS 2007/08

	Never		Occasionally		Frequently	
	%	95% CI	%	95% CI	%	95% CI
Age Group						
0 to 4 yrs	98.6	(90.6 - 99.8)	1.4	(0.2 - 9.4)	0.0	(0.0 - 0.0)
5 to 9 yrs	94.4	(88.5 - 97.3)	2.6	(0.8 - 8.2)	3.1	(1.2 - 7.8)
10 to 15 yrs	95.2	(92.3 - 97.1)	2.2	(1.2 - 4.1)	2.6	(1.2 - 5.3)
Gender						
Boys	93.9	(89.7 - 96.4)	3.1	(1.4 - 6.9)	3.0	(1.4 - 6.1)
Girls	98.2	(96.6 - 99.0)	1.0	(0.4 - 2.3)	0.9	(0.3 - 2.1)
Children	96.0	(93.7 - 97.4)	2.1	(1.1 - 4.0)	2.0	(1.1 - 3.6)

- A significantly higher proportion of girls were reported as living in a smoke-free house compared with boys (98.2% compared with 93.9%).

The annual prevalence estimates of smoking within the home are shown in Table 50.

Table 50: Smoking within the home, by financial year, HWSS

	Never		Occasionally		Frequently	
	%	95% CI	%	95% CI	%	95% CI
2004-2005	95.3	(93.4 - 96.6)	2.6	(1.7 - 4.0)	2.1	(1.2 - 3.6)
2005-2006	94.2	(92.4 - 95.6)	3.5	(2.4 - 5.0)	2.3	(1.5 - 3.5)
2006-2007	96.1	(94.2 - 97.4)	2.0	(1.2 - 3.2)	1.9	(1.0 - 3.6)
2007-2008	96.0	(93.7 - 97.4)	2.1	(1.1 - 4.0)	2.0	(1.1 - 3.6)
Average	95.4	(94.5 - 96.1)	2.5	(2.0 - 3.2)	2.1	(1.6 - 2.7)

7.5.2 Smoking during Pregnancy

Smoking during pregnancy reduces the amount of oxygen available to the baby through the umbilical cord. Smokers have a greater risk of having a premature baby and are more likely to have a low birth weight baby.²⁰ Parents/carers were asked about their smoking status during pregnancy, shown in Table 51.

Table 51: Prevalence of smoking during pregnancy, HWSS 2007/08

	Neither		Mother only		Father only		Both parents	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group								
0 to 4 yrs	74.4	(66.4 - 81.1)	1.6	(0.6 - 4.0)	15.6	(10.7 - 22.3)	8.3	(4.3 - 15.4)
5 to 9 yrs	64.2	(56.1 - 71.5)	8.8	(4.9 - 15.2)	20.9	(15.1 - 28.3)	6.1	(3.6 - 10.3)
10 to 15 yrs	64.3	(57.7 - 70.5)	6.0	(3.7 - 9.7)	18.8	(14.2 - 24.5)	10.8	(7.3 - 15.6)
Gender								
Boys	65.5	(59.4 - 71.1)	7.8	(4.9 - 12.1)	16.8	(12.7 - 21.8)	9.9	(6.7 - 14.5)
Girls	69.2	(63.2 - 74.7)	3.2	(1.9 - 5.3)	20.4	(15.8 - 25.8)	7.2	(4.7 - 11.0)
Children	67.3	(63.0 - 71.3)	5.6	(3.9 - 7.9)	18.5	(15.4 - 22.1)	8.6	(6.4 - 11.4)

The annual prevalence estimates of smoking during pregnancy are shown in Table 52.

Table 52: Prevalence of smoking during pregnancy, by financial year, HWSS

	Neither		Mother only		Father only		Both parents	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	68.7	(64.0 - 73.1)	4.9	(3.3 - 7.0)	18.1	(14.6 - 22.2)	8.3	(6.0 - 11.4)
2005-2006	70.1	(66.8 - 73.2)	5.2	(4.0 - 6.9)	16.8	(14.4 - 19.5)	7.8	(6.1 - 9.9)
2006-2007	67.0	(63.0 - 70.8)	5.9	(4.3 - 7.9)	18.7	(15.6 - 22.3)	8.4	(6.5 - 10.8)
2007-2008	67.3	(63.0 - 71.3)	5.6	(3.9 - 7.9)	18.5	(15.4 - 22.1)	8.6	(6.4 - 11.4)
Average	68.3	(66.3 - 70.2)	5.4	(4.6 - 6.4)	18.0	(16.5 - 19.7)	8.3	(7.2 - 9.5)

7.6 Nutrition

Diet has an important effect on health and can influence the risk of various diseases, including coronary heart disease, Type II diabetes, stroke and digestive system cancers.⁶ Eating fruit and vegetables is important to improve one's health and to protect against the risk of disease.

Children aged 4 to 11 years of age are recommended to eat at least one serve of fruit each day, while 12 to 18 year olds are recommended to eat three serves.²¹ Parents/carers were asked how many serves of fruit their child usually eats each day. The proportion of children eating the recommended daily serves of fruit is shown in Table 53.

Table 53: Proportion eating recommended daily fruit serves, 4 year olds and over, HWSS 2007/08

	Less than recommended fruit		Recommended fruit	
	%	95% CI	%	95% CI
Age Group				
4 to 7 yrs	3.2	(1.3 - 7.7)	96.8	(92.3 - 98.7)
8 to 11 yrs	2.3	(1.2 - 4.1)	97.7	(95.9 - 98.8)
12 to 15 yrs	78.7	(70.5 - 85.1)	21.3	(14.9 - 29.5)
Gender				
Boys	29.9	(24.3 - 36.3)	70.1	(63.7 - 75.7)
Girls	27.9	(22.0 - 34.6)	72.1	(65.4 - 78.0)
Children	28.9	(24.8 - 33.5)	71.1	(66.5 - 75.2)

Only one in four children aged 12 to 15 years was reported as eating the recommended number of daily serves of fruit (21.3% compared with 94.2%).

The annual proportion of children eating the recommended daily serves of fruit is shown in Table 54.

Table 54: Proportion eating recommended daily fruit serves, 4 year olds and over, by financial year, HWSS

	Less than recommended fruit		Recommended fruit	
	%	95% CI	%	95% CI
2004-2005	32.7	(28.1 - 37.7)	67.3	(62.3 - 71.9)
2005-2006	31.2	(27.7 - 35.0)	68.8	(65.0 - 72.3)
2006-2007	32.4	(28.4 - 36.7)	67.6	(63.3 - 71.6)
2007-2008	28.9	(24.8 - 33.5)	71.1	(66.5 - 75.2)
Average	31.3	(29.2 - 33.5)	68.7	(66.5 - 70.8)

The mean serves of fruit eaten daily are shown in Table 55.

Table 55: Mean daily fruit serves, 4 year olds and over, HWSS 2007/08

	\bar{x}	95% CI
Age Group		
4 to 7 yrs	2.2	(0.1 - 2.0)
8 to 11 yrs	2.2	(0.1 - 2.0)
12 to 15 yrs	1.7	(0.1 - 1.5)
Gender		
Boys	1.9	(1.7 - 2.1)
Girls	2.1	(1.9 - 2.2)
Children	2.0	(1.9 - 2.1)

The annual mean serves of fruit eaten daily are shown in Table 56.

Table 56: Mean daily fruit serves, 4 year olds and over, by financial year, HWSS

	\bar{x}	95% CI
2004-2005	1.9	(1.8 - 2.1)
2005-2006	2.0	(1.9 - 2.1)
2006-2007	1.9	(1.7 - 2.0)
2007-2008	2.0	(1.9 - 2.1)
Average	1.9	(1.9 - 2.0)

Children aged 4 to 7 years of age are recommended to eat at least two serves of vegetables each day, 8 to 11 year olds are recommended to eat at least three a day and 12 to 15 years are recommended to eat at least four a day.²⁰ Parents/carers were asked

how many serves of vegetables their child usually eats each day. The proportion of children eating the recommended daily serves of vegetables is shown in Table 57.

Table 57: Proportion eating recommended daily vegetable serves, 4 year olds and over, HWSS 2007/08

	Less than recommended vegetables		Recommended vegetables	
	%	95% CI	%	95% CI
Age Group				
4 to 7 yrs	33.9	(25.7 - 43.2)	66.1	(56.8 - 74.3)
8 to 11 yrs	57.5	(48.5 - 66.0)	42.5	(34.0 - 51.5)
12 to 15 yrs	74.6	(66.5 - 81.3)	25.4	(18.7 - 33.5)
Gender				
Boys	59.7	(52.6 - 66.3)	40.3	(33.7 - 47.4)
Girls	51.7	(44.3 - 59.1)	48.3	(40.9 - 55.7)
Children	55.8	(50.7 - 60.9)	44.2	(39.1 - 49.3)

- There was a significant age related decrease in the proportion of children who meet the recommended daily intake of vegetables for their age group.

The annual proportion of children eating the recommended daily serves of vegetables is shown in Table 58.

Table 58: Proportion eating recommended daily vegetable serves, 4 year olds and over, by financial year, HWSS

	Less than recommended vegetables		Recommended vegetables	
	%	95% CI	%	95% CI
2004-2005	57.0	(51.8 - 62.1)	43.0	(37.9 - 48.2)
2005-2006	59.4	(55.2 - 63.4)	40.6	(36.6 - 44.8)
2006-2007	58.1	(53.5 - 62.5)	41.9	(37.5 - 46.5)
2007-2008	55.8	(50.7 - 60.9)	44.2	(39.1 - 49.3)
Average	57.6	(55.2 - 59.9)	42.4	(40.1 - 44.8)

The mean serves of vegetables eaten daily is shown in Table 59.

Table 59: Mean daily vegetable serves, 4 year olds and over, HWSS 2007/08

	\bar{x}	95% CI
Age Group		
4 to 7 yrs	2.1	(1.9 - 2.3)
8 to 11 yrs	2.4	(2.2 - 2.6)
12 to 15 yrs	2.6	(2.4 - 2.8)
Gender		
Boys	2.3	(2.1 - 2.5)
Girls	2.3	(2.2 - 2.5)
Children	2.4	(2.2 - 2.5)

The annual mean serves of fruit eaten daily are shown in Table 60.

Table 60: Mean daily vegetable serves, 4 year olds and over, by financial year, HWSS

	\bar{x}	95% CI
2004-2005	2.4	(2.3 - 2.6)
2005-2006	2.3	(2.2 - 2.4)
2006-2007	2.3	(2.2 - 2.4)
2007-2008	2.4	(2.2 - 2.5)
Average	2.4	(2.3 - 2.4)

Milk is one of the most complete of all foods as it contains nearly all the constituents of nutritional importance to humans. As milk provides around one-third of the saturated fat in the diet of children and adolescents reduced-fat varieties are recommended for children aged 2 years and over. Reduced-fat milk is not recommended for children under 2 years of age as milk usually forms a much higher proportion of their diet and is a major source of energy.²² Parents/carers were asked what type of milk their child usually consumes, shown in Table 61.

Table 61: Type of milk usually consumed, 2 years old and over, HWSS 2007/08

	Full fat or whole milk		Low/reduced fat		Skim milk		Other		Don't use milk	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
2 to 4 yrs	80.6	(71.8 - 87.1)	14.3	(8.8 - 22.5)	0.0	(0.0 - 0.4)	4.4	(1.8 - 10.7)	0.6	(0.2 - 1.6)
5 to 9 yrs	65.9	(57.8 - 73.2)	29.0	(22.1 - 36.9)	3.5	(1.5 - 7.8)	0.5	(0.2 - 1.7)	1.1	(0.2 - 5.0)
10 to 15 yrs	55.0	(48.1 - 61.7)	40.5	(33.9 - 47.5)	3.7	(2.1 - 6.6)	0.3	(0.1 - 1.2)	0.5	(0.1 - 2.5)
Gender										
Boys	64.7	(58.4 - 70.5)	30.4	(24.8 - 36.5)	2.7	(1.3 - 5.3)	1.5	(0.6 - 3.8)	0.8	(0.2 - 3.2)
Girls	63.3	(56.5 - 69.7)	32.0	(25.8 - 38.8)	3.1	(1.6 - 6.1)	1.0	(0.3 - 2.7)	0.6	(0.2 - 2.2)
Children	64.0	(59.4 - 68.4)	31.1	(26.9 - 35.7)	2.9	(1.8 - 4.7)	1.2	(0.6 - 2.5)	0.7	(0.3 - 1.9)

The type of milk usually consumed is shown annually in Table 62. Due to changes in the way the question has been asked over time, the categories for 2007-08 have been collapsed.

Table 62: Type of milk usually consumed, 2 years old and over, by financial year, HWSS

	Whole milk or undefined fat level		Low/reduced fat		Doesn't use milk	
	%	95% CI	%	95% CI	%	95% CI
2004-2005	68.8	(64.1 - 73.1)	28.6	(24.4 - 33.2)	2.6	(1.5 - 4.4)
2005-2006	61.1	(56.6 - 65.4)	38.0	(33.8 - 42.5)	0.9	(0.5 - 1.7)
2006-2007	62.3	(58.0 - 66.4)	35.3	(31.3 - 39.5)	2.4	(1.4 - 4.1)
2007-2008	65.3	(60.7 - 69.6)	34.0	(29.7 - 38.6)	0.7	(0.3 - 1.9)
Average	64.6	(62.4 - 66.8)	33.7	(31.5 - 35.9)	1.7	(1.2 - 2.4)

Parents/carers were asked how many times a week on average their child eats fast food meals, such as burgers, pizza, chicken or chips from fast food outlets, as shown in Table 63.

Table 63: Meals from fast food outlets per week, 1 year old and over, HWSS 2007/08

	Never		Less than once a week		Once or twice a week		Three or four times a week		Five or more times a week	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
1 to 4 yrs	21.8	(15.4 - 30.0)	43.7	(34.7 - 53.2)	30.7	(22.5 - 40.3)	3.8	(1.1 - 11.7)	0.0	(0.0 - 0.0)
5 to 9 yrs	12.9	(8.4 - 19.1)	41.4	(33.6 - 49.7)	45.5	(37.6 - 53.6)	0.2	(0.0 - 1.5)	0.0	(0.0 - 0.0)
10 to 15 yrs	7.9	(5.4 - 11.5)	39.1	(32.7 - 45.9)	49.4	(42.6 - 56.2)	2.6	(1.2 - 5.3)	1.1	(0.3 - 3.9)
Gender										
Boys	13.6	(10.0 - 18.3)	39.4	(33.5 - 45.7)	44.3	(38.2 - 50.5)	2.3	(0.9 - 5.4)	0.4	(0.1 - 2.8)
Girls	12.5	(9.1 - 17.0)	42.7	(36.2 - 49.6)	42.4	(35.8 - 49.2)	1.9	(0.7 - 5.1)	0.5	(0.1 - 2.9)
Children	13.1	(10.5 - 16.2)	41.0	(36.6 - 45.6)	43.3	(38.8 - 48.0)	2.1	(1.1 - 4.0)	0.4	(0.1 - 1.6)

The number of times children eat fast food is shown annually in Table 64.

Table 64: Meals from fast food outlets per week, 1 year old and over, HWSS 2006/07

	Never		Less than once a week		Once or twice a week		Three or four times a week		Five or more times a week	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	12.3	(9.6 - 15.7)	42.6	(38.1 - 47.3)	43.0	(38.4 - 47.7)	1.9	(0.9 - 3.9)	0.1	(0.0 - 0.5)
2005-2006	11.7	(9.0 - 15.0)	45.7	(41.5 - 50.0)	40.9	(36.9 - 45.1)	1.4	(0.8 - 2.5)	0.3	(0.1 - 0.9)
2006-2007	14.5	(11.9 - 17.6)	43.4	(39.2 - 47.6)	39.7	(35.6 - 44.0)	2.1	(1.1 - 4.0)	0.3	(0.1 - 0.9)
2007-2008	13.1	(10.5 - 16.2)	41.0	(36.6 - 45.6)	43.3	(38.8 - 48.0)	2.1	(1.1 - 4.0)	0.4	(0.1 - 1.6)
Average	13.0	(11.6 - 14.5)	43.0	(40.8 - 45.3)	41.8	(39.6 - 44.0)	1.9	(1.4 - 2.7)	0.3	(0.1 - 0.6)

8 PSYCHOSOCIAL AND MENTAL HEALTH

Mental health involves the capacity to interact with people and the environment and refers to the ability to negotiate the social interactions and challenges of life without experiencing undue emotional or behavioural incapacity.²³ Mental health is also referred to as psychosocial health as it involves aspects of both social and psychological behaviour.

8.1 Emotional Problems

Emotional and behavioural problems are terms commonly used to describe changes in thinking, mood or behaviour that are associated with distress or impaired functioning in children.⁹ Parents/carers were asked whether their child has trouble with emotions, concentration, behaviour or getting on with people, as shown in Table 65.

Table 65: Overall trouble with emotions, concentration, behaviour or getting on with people, 1 year old and over, HWSS 2007/08

	No		Only a little		Quite a lot		Very much	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group								
1 to 4 yrs	83.6	(75.8 - 89.3)	14.5	(9.2 - 22.1)	1.8	(0.5 - 6.6)	0.0	(0.0 - 0.0)
5 to 9 yrs	66.8	(58.8 - 74.0)	28.2	(21.4 - 36.2)	2.4	(1.3 - 4.5)	2.6	(1.0 - 6.6)
10 to 15 yrs	64.7	(57.8 - 71.1)	27.0	(21.2 - 33.8)	7.2	(4.4 - 11.6)	1.1	(0.5 - 2.3)
Gender								
Boys	67.2	(61.2 - 72.8)	25.2	(20.2 - 31.0)	5.6	(3.4 - 9.1)	2.0	(0.9 - 4.2)
Girls	73.4	(66.9 - 79.1)	23.2	(17.8 - 29.7)	2.8	(1.5 - 5.3)	0.6	(0.1 - 2.7)
Children	70.2	(65.8 - 74.2)	24.2	(20.5 - 28.5)	4.2	(2.8 - 6.3)	1.3	(0.7 - 2.6)

- Children aged 5 years and over were significantly more likely to be reported as having trouble with emotions, concentration, behaviour or getting on with people compared with younger children (65.6% compared with 83.6%).

The annual prevalence estimates of children with trouble with emotions, concentration, behaviour or getting on with people are shown in Table 66.

Table 66: Overall trouble with emotions, concentration, behaviour or getting on with people, 1 year old and over, by financial year, HWSS

	No		Only a little		Quite a lot		Very much	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	64.5	(59.8 - 68.9)	26.5	(22.5 - 30.9)	8.0	(5.6 - 11.2)	1.1	(0.5 - 2.3)
2005-2006	68.5	(65.1 - 71.8)	25.0	(22.0 - 28.3)	5.4	(4.0 - 7.2)	1.0	(0.5 - 2.2)
2006-2007	67.1	(63.0 - 71.0)	25.2	(21.6 - 29.2)	6.9	(5.1 - 9.1)	0.8	(0.4 - 1.7)
2007-2008	70.2	(65.8 - 74.2)	24.2	(20.5 - 28.5)	4.2	(2.8 - 6.3)	1.3	(0.7 - 2.6)
Average	67.6	(65.5 - 69.6)	25.2	(23.4 - 27.2)	6.1	(5.2 - 7.2)	1.0	(0.7 - 1.5)

Parents/carers who reported their child has any trouble with emotions, concentration, behaviour or getting on with people, were then asked whether they thought their child needs special help for these troubles, shown in Table 67.

Table 67: Proportion who think child needs special help for emotional problem, 1 year old and over, HWSS 2007/08

	%	95% CI
Age Group		
1 to 4 yrs	5.5	(0.9 - 28.4)
5 to 9 yrs	21.3	(12.9 - 33.1)
10 to 15 yrs	33.9	(23.5 - 46.2)
Gender		
Boys	31.6	(22.5 - 42.3)
Girls	18.1	(10.3 - 29.7)
Children	25.5	(19.0 - 33.3)

Boys were more likely to be regarded as needing special help for an emotional problem compared with girls (31.6% compared with 18.1%, $\chi^2=7.587$, $df=1$, $p=0.006$).

The annual proportion of children regarded as needing special help for emotional problems is shown in Table 68.

Table 68: Proportion who think child needs special help for emotional problem, 1 year old and over, by financial year, HWSS

	%	95% CI
2004-2005	21.7	(15.6 - 29.4)
2005-2006	25.8	(20.4 - 32.1)
2006-2007	26.0	(20.1 - 33.0)
2007-2008	25.5	(19.0 - 33.3)
Average	24.7	(21.5 - 28.1)

All parents/carers were asked whether their child has ever been treated for an emotional or mental health problem, shown in Table 69.

Table 69: Proportion of children ever treated for an emotional or mental health problem, 1 year old and over, HWSS 2007/08

	%	95% CI
Age Group		
1 to 4 yrs	1.7	(0.4 - 6.3)
5 to 9 yrs	4.8	(2.6 - 8.7)
10 to 15 yrs	8.5	(5.6 - 12.8)
Gender		
Boys	6.5	(4.2 - 9.9)
Girls	4.5	(2.6 - 7.8)
Children	5.5	(3.9 - 7.7)

The annual proportion of children ever treated for an emotional or mental health problem is shown Table 70.

Table 70: Proportion of children ever treated for an emotional or mental health problem, 1 year old and over, by financial year, HWSS

	%	95% CI
2004-2005	4.2	(2.8 - 6.3)
2005-2006	7.5	(5.8 - 9.7)
2006-2007	5.7	(4.1 - 7.9)
2007-2008	5.5	(3.9 - 7.7)
Average	5.8	(4.9 - 6.8)

8.2 Social Support

Social support relates to the resources available within communities and is believed to have a positive influence on health status.²⁴ Measures of social support for children include the level of social integration that the individual is involved with; it usually comes from a group of people or friends; the assurance of worth from others such as positive reinforcement that inspires and boosts the self-esteem; the reliable alliance support provided from others, which means that the individual knows they can depend on receiving support from family members whenever it was needed.²⁵ The HWSS measures social support via participation within the community, including the number of groups/associations children belong to, whether or not the child has a close mate and whether or not the child has a group of friends. The number of groups a child belongs to is shown in Table 71.

Table 71: Number of groups/associations child belongs to, 5 year olds and over, HWSS 2007/08

	Zero		One		Two		Three		Four or more	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
5 to 9 yrs	15.1	(10.2 - 21.8)	24.5	(18.1 - 32.4)	28.3	(21.4 - 36.3)	20.9	(15.1 - 28.2)	11.2	(7.3 - 16.8)
10 to 15 yrs	13.4	(9.8 - 18.2)	24.8	(18.9 - 31.8)	20.5	(15.8 - 26.2)	22.3	(17.0 - 28.8)	18.9	(14.3 - 24.7)
Gender										
Boys	13.2	(9.3 - 18.5)	24.0	(18.3 - 30.8)	26.4	(20.7 - 33.1)	20.2	(14.8 - 26.9)	16.1	(11.6 - 21.9)
Girls	15.2	(10.6 - 21.2)	25.4	(18.7 - 33.4)	21.3	(15.7 - 28.3)	23.3	(17.5 - 30.3)	14.9	(10.5 - 20.6)
Children	14.2	(11.1 - 18.0)	24.7	(20.2 - 29.8)	24.0	(19.8 - 28.7)	21.7	(17.6 - 26.4)	15.5	(12.3 - 19.4)

The number of groups/associations children belong to is shown annually in Table 72.

Table 72: Number of groups/associations child belongs to, 5 year olds and over, by financial year, HWSS

	Zero		One		Two		Three		Four or more	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	17.2	(13.1 - 22.2)	22.1	(17.7 - 27.1)	27.2	(22.6 - 32.5)	18.9	(15.3 - 23.2)	14.6	(11.3 - 18.7)
2005-2006	15.9	(12.4 - 20.2)	20.0	(16.4 - 24.3)	29.1	(24.6 - 34.0)	19.9	(16.1 - 24.2)	15.1	(12.1 - 18.6)
2006-2007	12.8	(9.9 - 16.3)	25.4	(21.3 - 30.0)	27.5	(23.4 - 32.1)	17.3	(14.1 - 20.9)	17.1	(13.7 - 21.0)
2007-2008	14.2	(11.1 - 18.0)	24.7	(20.2 - 29.8)	24.0	(19.8 - 28.7)	21.7	(17.6 - 26.4)	15.5	(12.3 - 19.4)
Average	14.9	(13.1 - 17.0)	23.3	(21.1 - 25.6)	26.8	(24.5 - 29.2)	19.4	(17.5 - 21.5)	15.6	(13.9 - 17.5)

The proportion of children who have a close mate and/or a group of friends is shown in Table 73.

Table 73: Prevalence of friends, 5 year olds and over, HWSS 2007/08

	Special friend or really close mate		Group of friends to play with or hang around with	
	%	95% CI	%	95% CI
Age Group				
5 to 9 yrs	75.7	(67.8 - 82.2)	92.5	(87.2 - 95.7)
10 to 15 yrs	78.0	(71.8 - 83.2)	92.8	(88.7 - 95.4)
Gender				
Boys	75.0	(68.2 - 80.8)	92.8	(88.5 - 95.6)
Girls	79.2	(72.1 - 84.9)	92.4	(87.6 - 95.5)
Children	77.0	(72.2 - 81.2)	92.6	(89.6 - 94.8)

The annual prevalence of children who have a close mate and/or a group of friends is shown in Table 74.

Table 74: Prevalence of friends, 5 year olds and over, by financial year, HWSS

	Special friend or really close mate		Group of friends to play with or hang around with	
	%	95% CI	%	95% CI
2004-2005	81.8	(77.2 - 85.6)	91.5	(87.7 - 94.2)
2005-2006	79.8	(76.1 - 83.0)	93.0	(90.6 - 94.8)
2006-2007	80.6	(76.5 - 84.2)	94.4	(91.9 - 96.2)
2007-2008	77.0	(72.2 - 81.2)	92.6	(89.6 - 94.8)
Average	79.8	(77.7 - 81.7)	92.9	(91.5 - 94.1)

8.3 Bullying

Bullying can have serious consequences for both children who are repeatedly bullied and for those bullying others. Children who have been the victim of bullying can experience problems with their physical and psychological health, education and social development and may suffer from loss of self-esteem, depression or absenteeism and it may even affect the family.²⁶ In the HWSS bullying is defined as ‘when someone is picked on, hit, kicked, threatened or ignored by other children’. Parents/carers were asked whether their child has been bullied in the past 12 months and whether their child has bullied other kids in the past 12 months, shown in Table 75.

Table 75: Prevalence of bullying in past 12 months, 5 year olds and over, HWSS 2007/08

	Been bullied in past 12 months		Has bullied in past 12 months		Has both bullied and been bullied in past 12 months	
	%	95% CI	%	95% CI	%	95% CI
Age Group						
5 to 9 yrs	41.7	(33.9 - 50.0)	10.6	(6.8 - 16.0)	8.4	(5.1 - 13.5)
10 to 15 yrs	32.5	(26.5 - 39.1)	10.9	(7.6 - 15.4)	8.3	(5.5 - 12.3)
Gender						
Boys	36.4	(29.9 - 43.4)	14.0	(10.1 - 19.0)	10.7	(7.4 - 15.3)
Girls	36.6	(29.5 - 44.4)	7.4	(4.3 - 12.2)	5.8	(3.2 - 10.3)
Children	36.5	(31.6 - 41.7)	10.8	(8.2 - 14.1)	8.4	(6.1 - 11.3)

The annual prevalence of bullying is shown in Table 76.

Table 76: Prevalence of bullying in past 12 months, 5 year olds and over, by financial year, HWSS

	Been bullied in past 12 months		Has bullied in past 12 months		Has both bullied and been bullied in past 12 months	
	%	95% CI	%	95% CI	%	95% CI
2004-2005	37.7	(32.6 - 43.2)	15.3	(11.6 - 19.8)	12.3	(9.0 - 16.6)
2005-2006	36.0	(32.1 - 40.1)	11.6	(9.2 - 14.5)	9.3	(7.1 - 12.0)
2006-2007	35.8	(31.4 - 40.4)	11.8	(9.1 - 15.3)	7.9	(5.9 - 10.6)
2007-2008	36.5	(31.6 - 41.7)	10.8	(8.2 - 14.1)	8.4	(6.1 - 11.3)
Average	36.5	(34.2 - 38.9)	12.4	(10.8 - 14.1)	9.5	(8.1 - 11.0)

9 SCHOOL CONNECTEDNESS

A positive school environment can act as a protective factor that reduces the likelihood of mental health problems and can mitigate the potentially negative effects of risk factors.²⁷

9.1 School

Parents/carers were asked how many days, not counting official school holidays, their child was away from school for any reason, as shown in The days absent from school were classified into the number of weeks, as shown in Table 77.

Table 77: Weeks absent from school, 5 year olds and over, HWSS 2007/08

	Zero		Less than a week		One to two weeks		Two to three weeks		Three weeks or more	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
5 to 9 yrs	5.0	(2.7 - 9.1)	55.2	(46.8 - 63.2)	21.5	(15.4 - 29.2)	6.2	(3.1 - 12.2)	12.0	(7.6 - 18.6)
10 to 15 yrs	9.2	(5.5 - 15.1)	53.9	(46.9 - 60.7)	20.5	(15.4 - 26.8)	7.9	(4.6 - 13.3)	8.4	(5.7 - 12.3)
Gender										
Boys	8.6	(5.3 - 13.7)	55.3	(48.1 - 62.4)	22.1	(16.6 - 28.9)	5.8	(3.3 - 10.0)	8.2	(5.2 - 12.6)
Girls	6.1	(3.0 - 12.1)	53.5	(45.7 - 61.2)	19.7	(14.2 - 26.7)	8.7	(4.8 - 15.4)	11.9	(7.8 - 17.7)
Children	7.4	(4.9 - 11.0)	54.5	(49.1 - 59.7)	21.0	(16.9 - 25.7)	7.2	(4.7 - 10.9)	10.0	(7.4 - 13.4)

*Anyone who was absent for more than sixty days is not included in this table. The figure in the table captures 99.4% of the sample.

The days absent from school is shown annually in Table 78.

Table 78: Weeks absent from school, 5 year olds and over, by financial year, HWSS

	Zero		Less than a week		One to two weeks		Two to three weeks		Three weeks or more	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	9.2	(6.4 - 13.1)	54.4	(48.8 - 59.9)	24.7	(20.1 - 30.1)	5.5	(3.7 - 8.2)	6.1	(4.0 - 9.2)
2005-2006	9.3	(6.8 - 12.6)	53.8	(49.5 - 58.1)	20.4	(17.3 - 23.9)	7.6	(5.6 - 10.4)	8.8	(6.8 - 11.3)
2006-2007	6.7	(4.6 - 9.6)	51.7	(46.8 - 56.5)	24.1	(20.3 - 28.3)	10.9	(8.1 - 14.4)	6.7	(4.8 - 9.4)
2007-2008	7.4	(4.9 - 11.0)	54.5	(49.1 - 59.7)	21.0	(16.9 - 25.7)	7.2	(4.7 - 10.9)	10.0	(7.4 - 13.4)
Average	8.1	(6.8 - 9.7)	53.6	(51.1 - 56.1)	22.5	(20.5 - 24.7)	7.8	(6.6 - 9.3)	7.9	(6.7 - 9.3)

Parents/carers were asked to rate how well their child was doing in school overall, based on their school work and school reports, as shown in Table 79.

Table 79: How child is doing in school overall, 5 year olds and over, HWSS 2007/08

	Very well		Well		Average		Poorly		Very poorly	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
5 to 9 yrs	48.8	(40.7 - 57.0)	30.7	(23.6 - 39.0)	16.6	(11.3 - 23.6)	2.3	(0.8 - 6.0)	1.6	(0.5 - 5.6)
10 to 15 yrs	39.0	(32.5 - 46.0)	26.2	(20.7 - 32.6)	31.7	(25.7 - 38.5)	2.2	(1.1 - 4.4)	0.9	(0.4 - 2.0)
Gender										
Boys	42.0	(35.0 - 49.3)	24.7	(19.1 - 31.3)	27.9	(22.1 - 34.6)	3.0	(1.5 - 6.2)	2.3	(1.0 - 5.3)
Girls	44.8	(37.3 - 52.5)	31.9	(25.0 - 39.7)	22.0	(16.0 - 29.4)	1.3	(0.5 - 3.6)	0.0	(0.0 - 0.0)
Children	43.3	(38.2 - 48.6)	28.2	(23.6 - 33.2)	25.1	(20.8 - 29.9)	2.2	(1.2 - 4.0)	1.2	(0.5 - 2.7)

- Boys were more likely to be rated as doing very poorly overall in school than girls (2.3% compared with 0.0%).
- Children aged 10 to 15 years were more likely to be rated as doing overall compared with younger children (31.7% compared with 16.6%).

The annual estimates of how children were doing in school are shown in Table 80.

Table 80: How child is doing in school overall, 5 year olds and over, by financial year, HWSS

	Very well		Well		Average		Poorly		Very poorly	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	46.1	(40.6 - 51.6)	25.7	(21.3 - 30.6)	24.2	(19.8 - 29.2)	3.2	(1.5 - 6.6)	0.9	(0.3 - 2.7)
2005-2006	47.3	(43.0 - 51.6)	24.1	(20.6 - 27.9)	23.7	(20.3 - 27.6)	4.1	(2.6 - 6.3)	0.9	(0.4 - 2.0)
2006-2007	47.5	(42.7 - 52.4)	25.8	(21.9 - 30.2)	21.7	(17.9 - 26.0)	4.0	(2.6 - 6.1)	1.0	(0.5 - 2.3)
2007-2008	43.3	(38.2 - 48.6)	28.2	(23.6 - 33.2)	25.1	(20.8 - 29.9)	2.2	(1.2 - 4.0)	1.2	(0.5 - 2.7)
Average	46.0	(43.6 - 48.6)	25.9	(23.8 - 28.2)	23.7	(21.6 - 25.9)	3.4	(2.5 - 4.4)	1.0	(0.6 - 1.6)

Parents/carers were asked to rate how much their child looks forward to going to school each day, shown in Table 81.

Table 81: Child looks forward to going to school every day, 5 year olds and over, HWSS 2007/08

	Almost never		Rarely		Sometimes		Often		Almost always	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
5 to 9 yrs	1.2	(0.3 - 4.9)	2.5	(0.8 - 7.3)	6.5	(3.6 - 11.3)	14.3	(9.3 - 21.3)	75.6	(67.8 - 82.0)
10 to 15 yrs	3.8	(2.0 - 7.0)	2.2	(1.0 - 4.8)	8.0	(5.0 - 12.7)	19.0	(14.4 - 24.7)	66.9	(60.4 - 72.9)
Gender										
Boys	4.1	(2.1 - 7.8)	3.4	(1.4 - 7.7)	10.7	(7.1 - 16.0)	15.9	(11.4 - 21.8)	65.9	(58.8 - 72.3)
Girls	1.1	(0.4 - 3.5)	1.2	(0.5 - 2.8)	3.8	(1.8 - 7.7)	18.0	(12.9 - 24.5)	75.9	(69.0 - 81.7)
Children	2.6	(1.5 - 4.7)	2.3	(1.2 - 4.5)	7.4	(5.1 - 10.5)	16.9	(13.4 - 21.2)	70.8	(65.8 - 75.2)

The annual estimates of children looking forward to school are shown in Table 82.

Table 82: Child looks forward to going to school every day, 5 year olds and over, by financial year, HWSS

	Almost never		Rarely		Sometimes		Often		Almost always	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
2004-2005	1.0	(0.4 - 2.3)	2.3	(1.1 - 4.7)	10.2	(7.0 - 14.6)	16.3	(12.6 - 20.8)	70.2	(64.8 - 75.2)
2005-2006	2.4	(1.4 - 4.1)	1.9	(1.1 - 3.2)	9.1	(7.0 - 11.8)	14.8	(12.2 - 18.0)	71.8	(67.9 - 75.3)
2006-2007	2.6	(1.4 - 4.6)	2.4	(1.1 - 5.1)	7.0	(5.0 - 9.8)	16.7	(13.5 - 20.4)	71.4	(66.9 - 75.5)
2007-2008	2.6	(1.5 - 4.7)	2.3	(1.2 - 4.5)	7.4	(5.1 - 10.5)	16.9	(13.4 - 21.2)	70.8	(65.8 - 75.2)
Average	2.1	(1.6 - 2.9)	2.2	(1.6 - 3.1)	8.4	(7.1 - 10.0)	16.2	(14.5 - 18.1)	71.0	(68.7 - 73.2)

10 FAMILY FUNCTIONING

How well a family functions affects the health and wellbeing of children within the family. Family functioning affects many aspects of family life, including the degree of agreement on decisions, acceptance of individuals, the ability to solve day-to-day problems and communication.²⁸ The questions used in the HWSS are taken from the McMaster Family Functioning Scale of 12 questions.²⁹ Four questions were identified as sufficient to assess family functioning within a population^d. Each question is shown with the original wording and scoring. The first question is about the family not usually getting along, Table 83.

Table 83: Family usually don't get on well together, HWSS 2007/08

	Strongly agree		Agree		Disagree		Strongly disagree	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group								
0 to 4 yrs	0.9	(0.2 - 5.0)	0.3	(0.1 - 1.3)	25.0	(17.9 - 33.7)	73.8	(65.0 - 80.9)
5 to 9 yrs	0.5	(0.1 - 3.7)	3.0	(1.1 - 8.0)	31.1	(24.1 - 39.2)	65.3	(57.1 - 72.7)
10 to 15 yrs	1.4	(0.3 - 6.2)	3.8	(2.0 - 6.9)	37.5	(31.4 - 44.1)	57.3	(50.5 - 63.7)
Gender								
Boys	0.8	(0.2 - 3.1)	3.4	(1.8 - 6.6)	34.1	(28.6 - 40.0)	61.6	(55.6 - 67.3)
Girls	1.2	(0.3 - 5.1)	1.5	(0.7 - 3.3)	29.4	(23.7 - 35.9)	67.9	(61.3 - 73.8)
Children	1.0	(0.4 - 2.8)	2.5	(1.5 - 4.2)	31.8	(27.8 - 36.1)	64.7	(60.3 - 68.8)

The second question asked parents/carers whether planning family activities is usually difficult, Table 84.

Table 84: Planning family activities is usually difficult, HWSS 2007/08

	Strongly agree		Agree		Disagree		Strongly disagree	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group								
0 to 4 yrs	2.7	(0.8 - 9.1)	17.6	(12.2 - 24.8)	34.0	(26.1 - 42.9)	45.6	(37.0 - 54.5)
5 to 9 yrs	0.8	(0.2 - 3.0)	14.4	(9.7 - 20.8)	45.9	(37.9 - 54.1)	38.8	(31.2 - 47.1)
10 to 15 yrs	2.3	(1.1 - 4.9)	21.1	(16.0 - 27.1)	45.0	(38.3 - 51.9)	31.6	(25.6 - 38.3)
Gender								
Boys	2.8	(1.3 - 5.9)	20.4	(16.1 - 25.6)	40.5	(34.6 - 46.6)	36.3	(30.6 - 42.4)
Girls	1.1	(0.3 - 3.7)	15.3	(11.2 - 20.6)	43.6	(37.1 - 50.4)	39.9	(33.5 - 46.6)
Children	2.0	(1.0 - 3.7)	18.0	(14.9 - 21.6)	42.0	(37.6 - 46.5)	38.0	(33.7 - 42.5)

^d The analysis of the McMaster instrument was undertaken by Professor Stephen Zubrick of the Curtin University Centre for Developmental Health at the TVW Telethon Institute for Child Health Research, whom the authors gratefully acknowledge.

The third question asked parents/carers whether they usually avoid discussing their fears and concerns openly with each other, Table 85.

Table 85: Usually avoid discussing fears and concerns openly with each other, HWSS 2007/08

	Strongly agree		Agree		Disagree		Strongly disagree	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group								
0 to 4 yrs	3.2	(1.0 - 9.6)	3.1	(1.7 - 5.7)	33.5	(25.9 - 42.1)	60.1	(51.4 - 68.3)
5 to 9 yrs	1.3	(0.3 - 6.3)	7.9	(4.3 - 13.9)	42.2	(34.4 - 50.3)	48.6	(40.6 - 56.8)
10 to 15 yrs	0.2	(0.0 - 1.1)	11.1	(7.6 - 16.1)	36.2	(30.1 - 42.7)	52.5	(45.7 - 59.2)
Gender								
Boys	1.8	(0.6 - 5.5)	9.3	(6.5 - 13.1)	36.4	(30.9 - 42.3)	52.5	(46.4 - 58.5)
Girls	1.1	(0.3 - 4.0)	6.1	(3.6 - 10.2)	38.1	(31.9 - 44.7)	54.7	(48.0 - 61.2)
Children	1.5	(0.6 - 3.5)	7.7	(5.7 - 10.4)	37.3	(33.1 - 41.6)	53.6	(49.0 - 58.0)

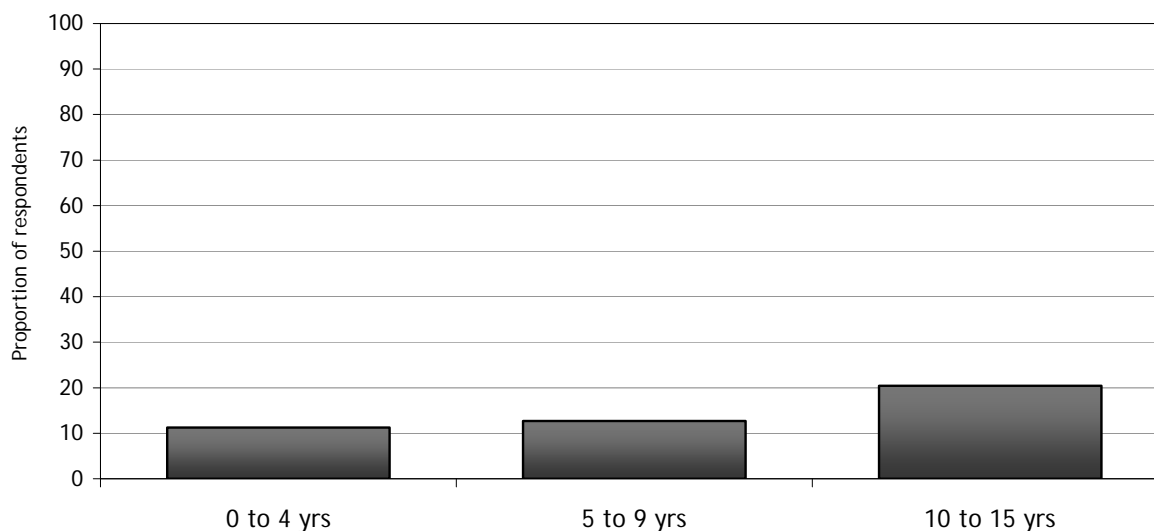
The fourth question asked parents/carers whether making decisions is usually a problem in the family because they misunderstand each other, Table 86.

Table 86: Making decisions is usually a problem because misunderstand each other, HWSS 2007/08

	Strongly agree		Agree		Disagree		Strongly disagree	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group								
0 to 4 yrs	1.6	(0.3 - 8.7)	7.4	(4.2 - 12.5)	41.4	(33.0 - 50.3)	49.6	(40.9 - 58.4)
5 to 9 yrs	0.0	(0.0 - 0.0)	12.2	(7.9 - 18.5)	46.0	(38.0 - 54.1)	41.8	(33.9 - 50.1)
10 to 15 yrs	0.1	(0.0 - 0.4)	9.9	(6.7 - 14.6)	46.8	(40.1 - 53.7)	43.1	(36.4 - 50.1)
Gender								
Boys	0.8	(0.1 - 5.5)	12.5	(9.1 - 17.0)	46.5	(40.5 - 52.7)	40.1	(34.3 - 46.3)
Girls	0.2	(0.0 - 0.7)	7.1	(4.5 - 11.0)	43.3	(36.8 - 50.0)	49.4	(42.8 - 56.1)
Children	0.5	(0.1 - 2.6)	9.9	(7.6 - 12.7)	45.0	(40.5 - 49.5)	44.6	(40.2 - 49.2)

The four questions were reverse scored and added together to get an indication of the level of functioning within families. A total score of 2.25^d or less is defined as poor family functioning. The results are shown in Figure 3.

Figure 3: Poor family functioning, HWSS 2007/08



The annual prevalence estimate of poor family functioning is shown in Table 87.

Table 87: Poor family functioning, by financial year, HWSS

	%	95% CI
2004-2005	13.7	(10.9 - 17.0)
2005-2006	14.6	(12.3 - 17.2)
2006-2007	14.4	(11.8 - 17.4)
2007-2008	15.3	(12.5 - 18.6)
Average	14.5	(13.1 - 16.0)

11 PARENTING DISCIPLINE STYLE

Both a child's temperament and the parenting style in which he/she is raised are important in the development of behavioural problems. There are three key aspects of parenting that are relevant to child behavioural problems: punishment, warmth and inductive reasoning.³⁰ Parents/carers were asked how often they use a series of discipline styles when their child breaks the rules or does things that he/she is not supposed to do. The proportion of

^d This cut off score was provided by by Professor Stephen Zubrick of the Curtin University Centre for Developmental Health at the TWV Telethon Institute for Child Health Research, as part of his work on reducing the McMaster Family Functioning Scale for use in a population based child health survey.

parents/carers who tell their child to 'stop it' as a form of discipline by frequency of using this form of discipline is shown in Table 88.

Table 88: Tell him/her to stop it, HWSS 2007/08

	Always		Often		Sometimes		Rarely		Never	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
0 to 4 yrs	40.5	(31.9 - 49.7)	27.1	(19.9 - 35.8)	22.4	(15.7 - 31.0)	3.7	(1.4 - 9.4)	6.2	(2.6 - 14.1)
5 to 9 yrs	54.0	(45.9 - 61.9)	27.2	(20.5 - 35.2)	16.4	(11.6 - 22.7)	2.3	(1.2 - 4.3)	0.1	(0.0 - 0.4)
10 to 15 yrs	42.1	(35.6 - 49.0)	28.0	(22.0 - 34.8)	19.8	(15.0 - 25.7)	9.5	(6.0 - 14.6)	0.6	(0.1 - 3.3)
Gender										
Boys	48.4	(42.3 - 54.6)	29.0	(23.7 - 35.0)	15.0	(11.2 - 19.7)	4.7	(2.7 - 8.1)	2.8	(1.1 - 7.4)
Girls	42.3	(35.8 - 49.1)	25.8	(20.2 - 32.3)	24.3	(19.1 - 30.4)	6.6	(4.0 - 10.7)	1.0	(0.3 - 2.8)
Children	45.5	(41.0 - 50.1)	27.5	(23.6 - 31.8)	19.4	(16.2 - 23.2)	5.6	(3.9 - 8.1)	2.0	(0.9 - 4.3)

The frequency at which parents/carers ignore their child or do nothing is shown in Table 89.

Table 89: Ignore it, do nothing, HWSS 2007/08

	Always		Often		Sometimes		Rarely		Never	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
0 to 4 yrs	1.1	(0.2 - 7.3)	3.9	(1.6 - 8.9)	27.0	(20.1 - 35.3)	29.0	(21.3 - 38.3)	39.0	(30.4 - 48.3)
5 to 9 yrs	0.0	(0.0 - 0.0)	2.0	(0.6 - 6.9)	31.8	(24.6 - 39.9)	34.1	(26.8 - 42.3)	32.1	(25.2 - 40.0)
10 to 15 yrs	0.3	(0.1 - 1.3)	2.8	(1.5 - 5.3)	29.5	(23.3 - 36.7)	30.2	(24.5 - 36.6)	37.0	(30.8 - 43.8)
Gender										
Boys	0.7	(0.1 - 3.5)	2.1	(0.8 - 5.2)	31.5	(25.9 - 37.6)	29.8	(24.7 - 35.5)	35.9	(30.1 - 42.2)
Girls	0.1	(0.0 - 0.5)	3.7	(2.1 - 6.4)	27.5	(21.8 - 34.0)	32.6	(26.5 - 39.5)	36.1	(30.1 - 42.5)
Children	0.4	(0.1 - 1.7)	2.8	(1.7 - 4.7)	29.6	(25.5 - 34.0)	31.2	(27.1 - 35.5)	36.0	(31.8 - 40.4)

The frequency at which parents/carers raise their voice, scold or yell at their child is shown in Table 90.

Table 90: Raise your voice, scold or yell at him/her, HWSS 2007/08

	Always		Often		Sometimes		Rarely		Never	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
0 to 4 yrs	0.9	(0.3 - 3.3)	20.4	(13.6 - 29.4)	35.6	(27.3 - 44.9)	30.2	(22.8 - 38.9)	12.8	(7.8 - 20.5)
5 to 9 yrs	3.6	(1.6 - 7.9)	24.2	(17.8 - 31.9)	51.5	(43.3 - 59.5)	20.0	(14.2 - 27.4)	0.8	(0.3 - 2.0)
10 to 15 yrs	4.9	(2.8 - 8.4)	12.0	(8.8 - 16.2)	49.9	(43.1 - 56.7)	28.3	(22.6 - 34.8)	4.8	(2.8 - 8.2)
Gender										
Boys	4.5	(2.6 - 7.7)	19.5	(15.0 - 24.9)	47.0	(40.9 - 53.3)	23.2	(18.4 - 28.9)	5.7	(3.3 - 9.8)
Girls	2.1	(1.1 - 4.2)	16.8	(12.4 - 22.5)	46.0	(39.3 - 52.8)	29.4	(23.8 - 35.7)	5.7	(3.5 - 9.1)
Children	3.4	(2.2 - 5.2)	18.2	(14.9 - 22.0)	46.5	(42.0 - 51.1)	26.2	(22.4 - 30.3)	5.7	(4.0 - 8.2)

The frequency at which parents/carers calmly discuss the problem with their child is shown in Table 91.

Table 91: Calmly discuss the problem, HWSS 2007/08

	Always		Often		Sometimes		Rarely		Never	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
0 to 4 yrs	21.8	(15.2 - 30.2)	30.9	(23.6 - 39.3)	21.1	(14.7 - 29.2)	6.4	(2.9 - 13.5)	19.8	(12.7 - 29.7)
5 to 9 yrs	23.6	(17.5 - 30.9)	45.4	(37.4 - 53.5)	27.9	(21.1 - 35.9)	3.0	(1.1 - 8.0)	0.2	(0.1 - 0.7)
10 to 15 yrs	24.6	(19.5 - 30.5)	45.1	(38.3 - 52.0)	27.7	(22.0 - 34.2)	2.6	(1.1 - 6.1)	0.1	(0.0 - 0.2)
Gender										
Boys	4.5	(2.6 - 7.7)	19.5	(15.0 - 24.9)	47.0	(40.9 - 53.3)	23.2	(18.4 - 28.9)	5.7	(3.3 - 9.8)
Girls	2.1	(1.1 - 4.2)	16.8	(12.4 - 22.5)	46.0	(39.3 - 52.8)	29.4	(23.8 - 35.7)	5.7	(3.5 - 9.1)
Children	23.5	(20.0 - 27.4)	41.3	(36.9 - 45.9)	25.9	(22.1 - 30.1)	3.8	(2.3 - 6.2)	5.5	(3.4 - 8.7)

The frequency at which parents/carers use physical punishment with their child is shown in Table 92.

Table 92: Use physical punishment, HWSS 2007/08

	Always		Often		Sometimes		Rarely		Never	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
0 to 4 yrs	0.0	(0.0 - 0.0)	2.0	(0.5 - 7.0)	6.1	(3.1 - 11.5)	36.4	(28.4 - 45.2)	55.5	(46.5 - 64.2)
5 to 9 yrs	0.0	(0.0 - 0.0)	0.2	(0.0 - 1.4)	8.4	(5.1 - 13.6)	38.4	(30.8 - 46.6)	52.9	(44.8 - 60.9)
10 to 15 yrs	0.3	(0.0 - 2.2)	0.0	(0.0 - 0.0)	3.7	(1.9 - 7.1)	21.2	(16.1 - 27.4)	74.7	(68.3 - 80.2)
Gender										
Boys	0.2	(0.0 - 1.7)	0.1	(0.0 - 0.4)	9.0	(6.0 - 13.1)	32.8	(27.2 - 38.9)	57.9	(51.7 - 63.9)
Girls	0.0	(0.0 - 0.0)	1.1	(0.3 - 4.1)	2.0	(1.0 - 4.0)	29.0	(23.3 - 35.4)	67.8	(61.4 - 73.7)
Children	0.1	(0.0 - 0.9)	0.6	(0.2 - 1.9)	5.9	(4.2 - 8.2)	30.9	(26.8 - 35.2)	62.5	(58.0 - 66.8)

The frequency at which parents/carers describe alternative ways of behaving that are acceptable to their child is shown in Table 93.

Table 93: Describe alternative ways of behaving that are acceptable, HWSS 2007/08

	Always		Often		Sometimes		Rarely		Never	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
0 to 4 yrs	28.9	(21.2 - 38.2)	28.6	(21.4 - 37.1)	17.3	(11.5 - 25.2)	1.8	(0.6 - 5.6)	23.3	(16.1 - 32.4)
5 to 9 yrs	30.0	(23.2 - 37.9)	44.6	(36.7 - 52.8)	21.2	(15.3 - 28.5)	2.6	(1.1 - 5.9)	1.6	(0.4 - 6.1)
10 to 15 yrs	32.0	(26.1 - 38.5)	43.0	(36.3 - 50.0)	19.2	(14.6 - 24.9)	4.5	(2.5 - 7.9)	1.4	(0.5 - 3.5)
Gender										
Boys	31.0	(25.6 - 36.9)	37.6	(31.8 - 43.8)	20.1	(15.7 - 25.3)	2.7	(1.4 - 5.3)	8.7	(5.4 - 13.6)
Girls	30.0	(24.2 - 36.5)	41.8	(35.3 - 48.6)	18.5	(13.9 - 24.2)	3.6	(2.0 - 6.5)	6.0	(3.5 - 10.3)
Children	30.5	(26.5 - 34.8)	39.6	(35.2 - 44.2)	19.3	(16.1 - 23.1)	3.2	(2.0 - 4.9)	7.4	(5.2 - 10.5)

The frequency at which parents/carers take away privileges or put their child in their room is shown in Table 94.

Table 94: Take away privileges or put in room, HWSS 2007/08

	Always		Often		Sometimes		Rarely		Never	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age Group										
0 to 4 yrs	6.2	(3.3 - 11.5)	15.9	(10.3 - 23.7)	28.2	(21.0 - 36.6)	16.8	(11.2 - 24.4)	32.9	(24.4 - 42.7)
5 to 9 yrs	5.8	(3.2 - 10.3)	32.8	(25.6 - 41.0)	41.0	(33.3 - 49.2)	17.5	(12.0 - 24.8)	2.9	(1.2 - 6.8)
10 to 15 yrs	10.1	(6.9 - 14.5)	21.0	(16.0 - 27.0)	32.5	(26.3 - 39.4)	23.9	(18.4 - 30.3)	12.6	(8.9 - 17.5)
Gender										
Boys	7.9	(5.3 - 11.5)	29.0	(23.7 - 35.0)	30.5	(25.2 - 36.3)	17.7	(13.4 - 23.0)	15.0	(10.8 - 20.4)
Girls	7.4	(4.8 - 11.1)	17.2	(12.7 - 22.9)	38.0	(31.7 - 44.8)	22.4	(17.3 - 28.4)	15.0	(10.7 - 20.7)
Children	7.6	(5.7 - 10.1)	23.4	(19.7 - 27.5)	34.1	(29.9 - 38.5)	19.9	(16.5 - 23.8)	15.0	(11.9 - 18.8)

The frequency at which parents/carers always or often use different discipline styles, indicating preferred style of discipline by age group is shown in Figure 4 and by sex in Figure 5.

Figure 4: Always or often use discipline style by age group, HWSS 2007/08

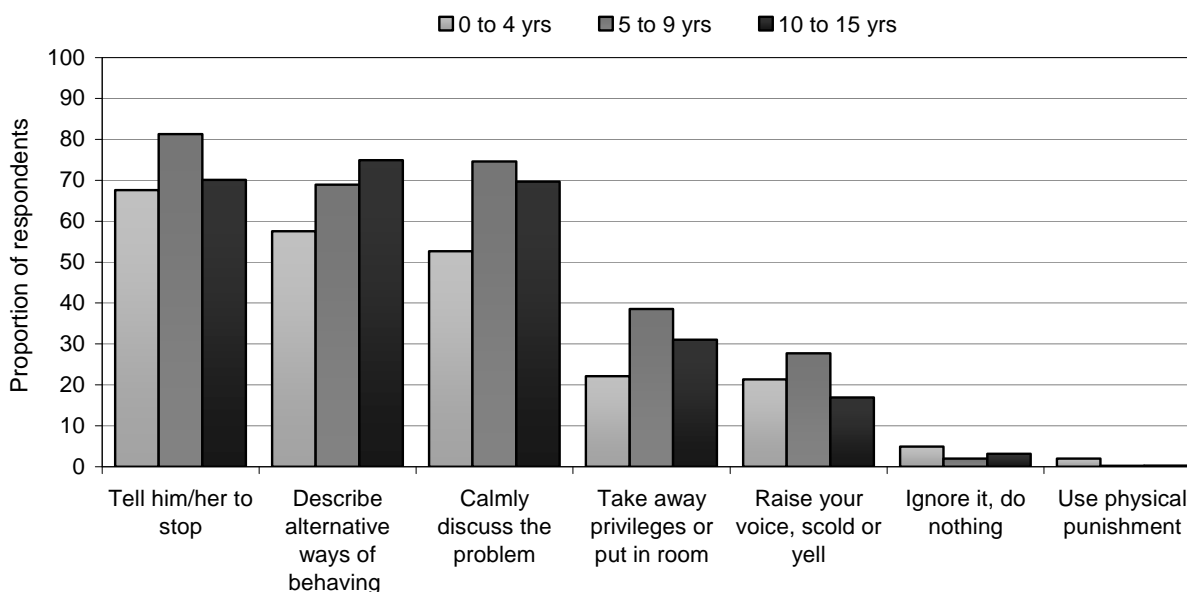


Figure 5: Always or often use discipline style by sex, HWSS 2007/08

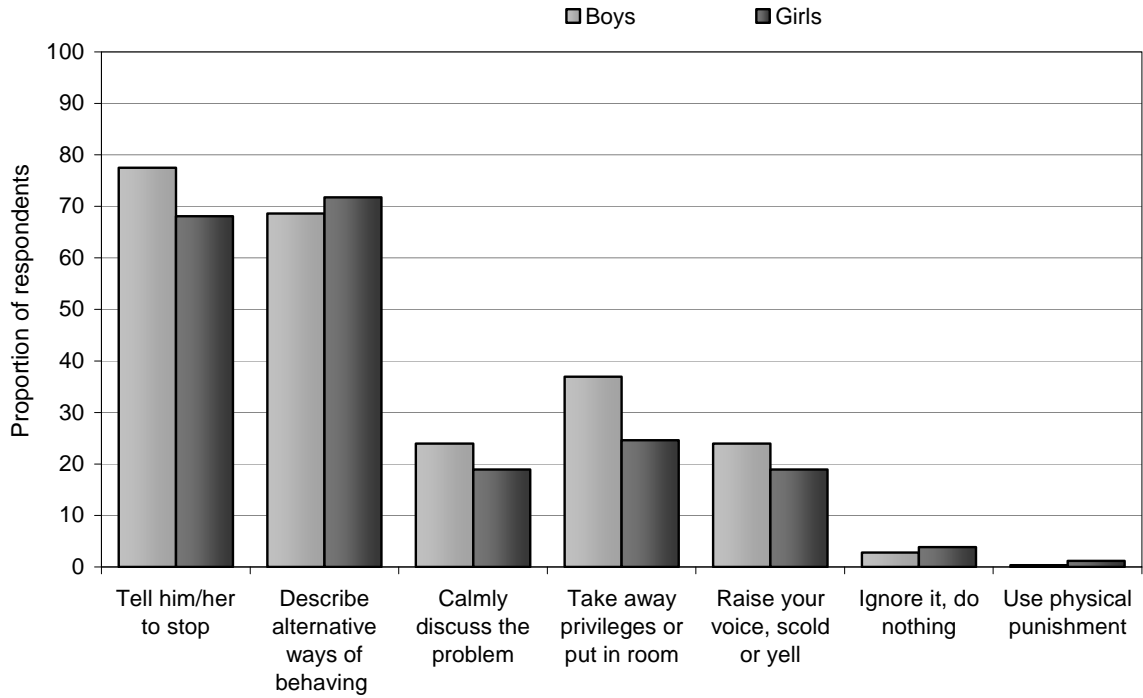
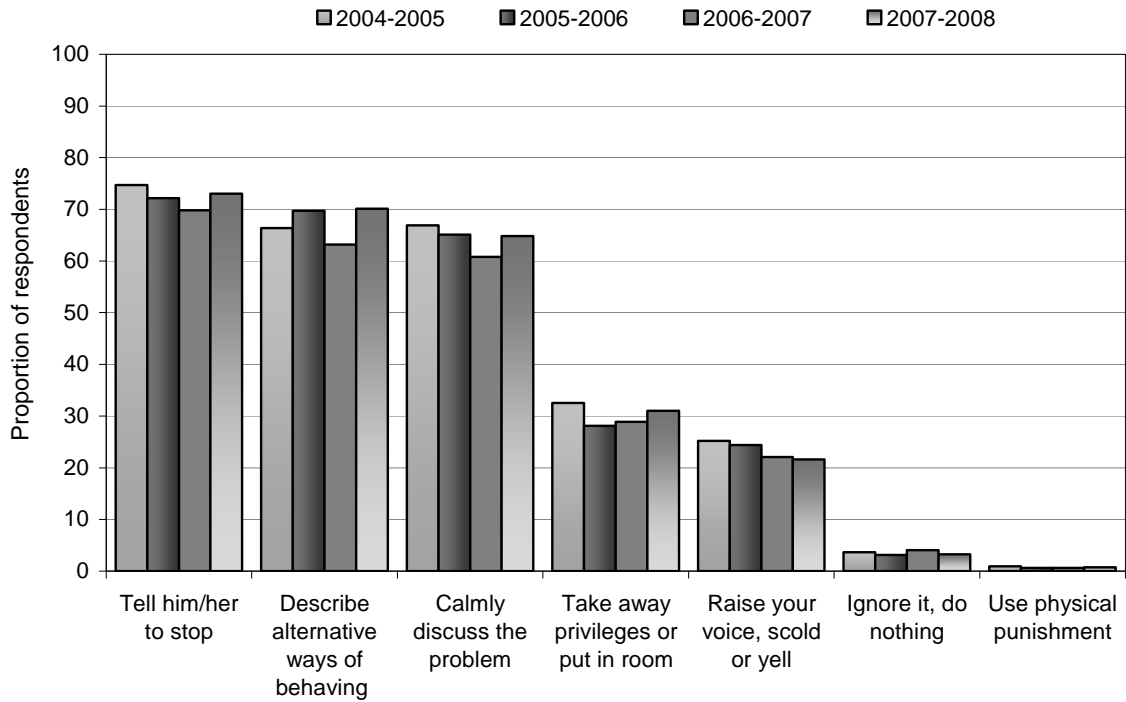


Figure 6: Always or often use discipline style, by financial year, HWSS



12 CHILD RESPONDENT

As well as information regarding the child, demographic, social and psychosocial information was collected from the parent/guardian responding about the child. The information relating to the children has been weighted to the age by sex distribution of Australia's child population and so the information regarding the parent/guardian respondent to the survey has not been weighted. The demographic characteristics of the respondent compared to the general population have been presented in Section 2.1.

12.1 General Health

Self-ratings of health are used internationally, with poor health ratings associated with increased mortality and psychological distress, and lower physical functioning compared with excellent or very good ratings.⁵

Table 95 shows the child respondents' self-reported general health status.

Table 95: General health status of child respondent, HWSS 2007/08

	Excellent		Very good		Good		Fair		Poor	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Child's age group										
0 to 4 yrs	38.7	(33.2 - 44.3)	38.7	(33.2 - 44.3)	19.2	(14.7 - 23.7)	2.0	(0.4 - 3.6)	1.3	(0.0 - 2.7)
5 to 9 yrs	24.6	(19.9 - 29.3)	42.2	(36.8 - 47.5)	25.5	(20.8 - 30.3)	6.8	(4.0 - 9.5)	0.9	(-0.1 - 2.0)
10 to 15 yrs	22.7	(18.8 - 26.6)	38.3	(33.8 - 42.8)	29.3	(25.0 - 33.5)	7.2	(4.8 - 9.6)	2.5	(1.0 - 3.9)
Child's sex										
Boy	26.5	(22.7 - 30.3)	38.0	(33.8 - 42.1)	27.1	(23.3 - 30.9)	6.3	(4.2 - 8.4)	2.1	(0.9 - 3.3)
Girl	29.0	(25.1 - 32.8)	41.1	(37.0 - 45.3)	23.6	(20.0 - 27.2)	5.0	(3.1 - 6.8)	1.3	(0.3 - 2.2)
Persons	27.8	(25.1 - 30.5)	39.6	(36.7 - 42.5)	25.3	(22.7 - 27.9)	5.6	(4.2 - 7.0)	1.7	(0.9 - 2.5)

12.2 Mental Health

Mental health problems include both short-term problems, such as depression and anxiety and long-term conditions, such as chronic depression and schizophrenia. As mental health problems are associated with higher rates of death, poorer physical health and increased exposure to health risk factors they are a National Health Priority Area.

Respondents were asked whether or not a doctor had diagnosed them with a depression, anxiety, stress or any other mental health problem during the past 12 months and whether they were currently receiving treatment for such a problem. The prevalence of mental health problems is shown in Table 96.

Table 96: Mental health of child respondent, HWSS 2007/08

	Mental health problem in last 12 months (a)		Currently receiving treatment (b)	
	%	95% CI	%	95% CI
Child's age group				
0 to 4 yrs	16.3	(11.9 - 20.7)	60.9	(46.8 - 75.0)
5 to 9 yrs	16.8	(12.6 - 21.0)	66.7	(53.7 - 79.6)
10 to 15 yrs	19.7	(15.8 - 23.5)	53.1	(42.2 - 64.0)
Child's sex				
Boy	19.5	(16.0 - 23.0)	60.4	(50.6 - 70.2)
Girl	16.2	(13.0 - 19.4)	57.3	(46.6 - 68.0)
Persons	17.8	(15.5 - 20.2)	59.0	(51.8 - 66.2)

- (a) In the last 12 months told by a doctor had depression, anxiety, stress or any other mental health problem.
- (b) Currently receiving treatment for a mental health problem diagnosed in the last 12 months.

12.3 Lack of control

Perceptions of control relate to an individual's belief as to whether outcomes are determined by external events outside their control or by their own actions.³¹ Feelings of lack of control have been found to have adverse effects on health and to increase the risk of mortality.^{32,33}

Respondents were asked to rate how often during the past four weeks they felt a lack of control over their life in general, their personal life and their health. People who often or always report feeling a lack of control over aspects of life are also those who report poorer

mental and physical health. Table 97 shows the child's respondent reported lack of control over life in general.

Table 97: Lack of control over life in general during past four weeks, child respondent, HWSS 2007/08

	Never		Rarely		Sometimes		Often		Always	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Child's age group										
0 to 4 yrs	46.1	(40.5 - 51.8)	28.3	(23.2 - 33.4)	20.9	(16.3 - 25.5)	4.0	(1.8 - 6.3)	0.7	(-0.3 - 1.6)
5 to 9 yrs	44.9	(39.5 - 50.3)	24.9	(20.2 - 29.6)	22.2	(17.6 - 26.7)	6.8	(4.0 - 9.5)	1.2	(0.0 - 2.4)
10 to 15 yrs	49.1	(44.4 - 53.7)	24.5	(20.5 - 28.6)	21.4	(17.6 - 25.2)	4.1	(2.2 - 5.9)	0.9	(0.0 - 1.8)
Child's sex										
Boy	43.1	(38.9 - 47.4)	26.5	(22.7 - 30.3)	23.5	(19.8 - 27.1)	5.5	(3.6 - 7.5)	1.3	(0.4 - 2.3)
Girl	50.7	(46.5 - 54.9)	24.9	(21.3 - 28.5)	19.6	(16.2 - 22.9)	4.2	(2.5 - 5.9)	0.6	(-0.1 - 1.2)
Persons	47.0	(44.0 - 50.0)	25.7	(23.1 - 28.3)	21.5	(19.0 - 23.9)	4.9	(3.6 - 6.2)	0.9	(0.4 - 1.5)

Lack of control reported by the child's respondent over personal life is shown in Table 98.

Table 98: Lack of control over personal life during past four weeks, child respondent, HWSS 2007/08

	Never		Rarely		Sometimes		Often		Always	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Child's age group										
0 to 4 yrs	59.6	(54.0 - 65.2)	20.9	(16.3 - 25.5)	15.5	(11.4 - 19.6)	2.7	(0.9 - 4.5)	1.3	(0.0 - 2.7)
5 to 9 yrs	52.9	(47.5 - 58.4)	22.6	(18.0 - 27.2)	18.9	(14.6 - 23.2)	4.6	(2.3 - 6.9)	0.9	(-0.1 - 2.0)
10 to 15 yrs	56.7	(52.0 - 61.3)	21.7	(17.8 - 25.5)	16.5	(13.0 - 19.9)	4.1	(2.2 - 5.9)	1.1	(0.1 - 2.1)
Child's sex										
Boy	51.4	(47.1 - 55.7)	24.6	(20.9 - 28.3)	18.4	(15.1 - 21.8)	4.4	(2.7 - 6.2)	1.2	(0.2 - 2.1)
Girl	61.1	(57.0 - 65.2)	19.0	(15.7 - 22.3)	15.5	(12.5 - 18.5)	3.3	(1.8 - 4.8)	1.1	(0.2 - 2.0)
Persons	56.3	(53.4 - 59.3)	21.7	(19.3 - 24.2)	16.9	(14.7 - 19.2)	3.9	(2.7 - 5.0)	1.1	(0.5 - 1.8)

Table 99 shows the child's respondent self-reported lack of control over health.

Table 99: Lack of control over health during past four weeks, child respondent,**HWSS 2007/08**

	Never		Rarely		Sometimes		Often		Always	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Child's age group										
0 to 4 yrs	63.0	(57.5 - 68.5)	17.5	(13.2 - 21.8)	14.5	(10.5 - 18.5)	3.7	(1.6 - 5.9)	1.3	(0.0 - 2.7)
5 to 9 yrs	55.7	(50.3 - 61.1)	21.2	(16.8 - 25.7)	17.2	(13.1 - 21.3)	4.3	(2.1 - 6.5)	1.5	(0.2 - 2.9)
10 to 15 yrs	58.1	(53.5 - 62.7)	18.5	(14.9 - 22.1)	17.3	(13.8 - 20.9)	4.3	(2.4 - 6.2)	1.8	(0.6 - 3.0)
Child's sex										
Boy	57.3	(53.0 - 61.5)	18.7	(15.4 - 22.0)	16.8	(13.6 - 20.0)	5.2	(3.3 - 7.0)	2.1	(0.9 - 3.3)
Girl	60.1	(56.0 - 64.3)	19.4	(16.0 - 22.7)	16.2	(13.1 - 19.3)	3.1	(1.7 - 4.6)	1.1	(0.2 - 2.0)
Persons	58.7	(55.8 - 61.7)	19.0	(16.7 - 21.4)	16.5	(14.3 - 18.7)	4.1	(2.9 - 5.3)	1.6	(0.8 - 2.3)

13 CHILD RESPONDENT'S PARTNER

The demographic characteristics of the child respondent's partner and unweighted proportions are shown below in Table 100.

Table 100: Demographics of child respondent's partner, HWSS 2007/08

Characteristic	Unweighted Sample (n)	Unweighted Prevalence (%)
Australian born		
Yes	696	75.2
No	229	24.8
Aboriginal or Torres Strait Islander		
Yes	24	2.2
No	902	84.5
Highest level of education		
Less than Year 10	20	1.9
Year 10 or Year 11	120	11.2
Year 12	107	10.0
TAFE/Trade qualification	472	44.2
Tertiary degree or equivalent	202	18.9
Employment status		
Employed	857	80.3
Unemployed	9	0.8
Home duties	49	4.6
Retired	4	0.4
Unable to work	4	0.4
Student	2	0.2
Other	1	0.1

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