

Chapter 4: Queensland children and young people

Profile of Queensland children and young people

Each year the Commission for Children and Young People and Child Guardian collects and analyses aggregate data on children and young people and brings this data together in a publication titled, *Children and Young People in Queensland: a snapshot*⁹⁰. The Snapshot brings together data on child protection, families, health, education and social issues from a variety of sources and helps to build a picture of the lives of Queensland children and young people.

The following is a summary of some of the data presented in the most recent Snapshot about Queensland's population of children and young people⁹¹.

Population

- Children and young people aged from birth to 17 years made up 24.7% of the total population in Queensland in 2004.
- Children aged from birth to 9 years accounted for 517,769 (13.3%) of the population and young people aged 10 to 17 years comprised 442,653 (11.4%).

Indigenous children

- Indigenous youth made up a much larger proportion of the Indigenous population than non-Indigenous youth, with 46.5% of the Indigenous population aged under 18 years (in 2001), compared to 24.7% of the total Queensland population aged under 18 (in 2004).
- Indigenous children made up 5.7% of all under 17-year-olds.

Children born overseas

- Six per cent of children and young people aged from birth to 14 years were born overseas.

Family

- The majority of Queensland children aged from birth to 17 years lived with two parents, with 69% of children in 2003 living with both parents in intact couple families, 10% in step or blended families, 19% with single mothers and 2% with single fathers.
- The proportion of children living with single parents has been increasing. In 1987, 12.7% of Australian children aged from birth to 14 were living in one parent families, this increased to 19.9% in 2002.

Birth and family size

- Birth numbers increased slightly with 24,454 males and 23,317 females born in Queensland in 2002 up to 24,847 male births and 23,495 female births in 2003.

Age of parents

- The majority of babies born in 2003 were born to mothers aged 25 to 34 years (61%). This was also the most common age group for fathers of new babies (54%).
- Parents of Indigenous babies tended to be younger, with 55% of babies born to mothers aged 20 to 29 years and 43% had fathers aged 20 to 29.
- Twenty percent of Indigenous babies were born to a teenage mother, compared with 6% in the general Queensland population.

Family income

- Single parent families tended to have much lower incomes than other families. Whereas only 14% of couple families had a weekly income less than \$600 (gross), 63% of single parent families earned less than \$600 per week.
- Indigenous families also had lower incomes than other families, with 44% of Indigenous families earning less than \$600 per week compared to 31% of non-Indigenous families. Further, as Indigenous families were larger, with on average

90 The Snapshot is compiled by the Commission's Research Unit and is separate to the Child Death Review Team.

91 For more detailed information it recommended that readers refer to Commission for Children and Young People and Child Guardian (2005). *Children and Young People in Queensland: a snapshot 2005*. Brisbane. A copy of the Snapshot is accessible through the Commission's website www.ccypcg.qld.gov.au

3.6 people per Indigenous family compared to 2.9 per non-Indigenous family, the disparity in lower incomes would be more marked on a per person basis.

Remote births

- In Queensland 20% of Indigenous babies are born in remote or very remote areas compared to only 4% of non-Indigenous babies.

Premature births

- In 2003, 6.9% of babies had a low birth weight and 8.5% were born before 37 weeks gestation.
- The proportion of babies born with low birth weight has increased slightly.
- Indigenous babies were more likely to have a low birth weight and/or shorter gestation than non-Indigenous babies.

Breastfeeding

- In 2004, approximately half of all Australian infants were breastfed for at least six months.

Long term health conditions

- In 2001, the most common long term health conditions experienced by children and young people aged from birth to 17 years in Queensland were asthma (14%) and hay fever and allergic rhinitis (8%).
- Mental health and behavioural problems were experienced by 7% of children aged under 18 years.

Disability

- In 2003, 12% percent of males and 8% of females aged five to 14 years had a disability which may have restricted communication, mobility, self-care or schooling.

Injury

- In 2003–04, injuries associated with the hospitalisation of children aged from birth to four years, in order of frequency, were falls, poisoning and burns and scalds.
- Children aged five to nine were most likely to be hospitalised as a result of injuries caused by falls and by transport accidents.

- Adolescents aged 15 to 19 were mainly admitted to hospital for injuries caused by transport accidents, falls, intentional self-harm and assault.

Abuse and neglect

- In recent years key measures from child protection data have shown large increases in child abuse.
- In 2001–02, eight per 1000 children and young people aged from birth to 17 years were the subject of a substantiated notification of harm or risk of harm, which increased to ten substantiations per 1000 in 2002–03 and 13 per 1000 in 2003–04.
- In 2003–04, 28% of all children who suffered substantiated child abuse were also the subject of a second substantiation within 12 months.
- Children in single parent or step/blended families were at higher risk of child abuse and neglect.

Children on protection orders

- As at 30 June 2004, 4950 children were on protection orders and 4413 were in out-of-home care (up from 4107 and 3787 respectively in 2003).
- Indigenous children and young people were over-represented in the child protection system, with rates of out-of-home care more than three times higher than the state average (Indigenous out-of-home care rate was 15.8 per 1000 children compared to the state average of 4.6 per 1000).

Participation

- In 2004, 90.8% of 15-year-olds and 81.4% of 16-year-olds were attending school compared to only 50.1% of 17-year-olds.
- The participation rate was slightly lower for 15 to 17-year-old males than females.

Retention

- Retention rates in Queensland were stable (81.5% in 2003 and 81.2% in 2004). Like participation rates, the retention rate was lower for males (77% compared to 85.7% for females).

Employment

- 41.6% of secondary students aged 15 to 19 years were engaged in part-time employment in 2003–04 and 8.2% were looking for work.

Use of tobacco, alcohol and illicit drugs

- The proportion of Australians aged 14 to 19 years who smoked daily decreased between 2001 and 2004 from 14.1% to 9.5% for males and from 16.2% to 11.9% for females.
- In the same age group, the proportion of young people drinking alcohol weekly decreased from 31.2% to 26.6% for males and from 25.4% to 22.2% for females.
- Overall, 3.3% of 12 to 15-year-olds and 21.6% of 16 to 17-year-olds were drinking weekly in 2004.
- Between 1998 and 2004 the proportion of Australian 14 to 19-year-olds who had used illicit drugs in the previous 12 months decreased from 38.3% to 20.9% for males and 37.1% to 21.8% for females.

Homelessness

- In 2001, the rate of homelessness in Queensland was estimated to be seven per 1000 people.
- Indigenous people were over-represented in the homeless population in Australia.

Kids Help Line

- In 2004, Kids Help Line responded to 73,944 calls. Forty percent were about relationships, 7% related to difficulties with emotional responses, 6% were about child abuse and neglect and 5% were about bullying.

Child deaths in Queensland 2004–05

Overview

The deaths of 693 children and young people aged from birth to 17 years were registered in the 18 months from 1 January 2004 to 30 June 2005. Of these, 409 were males (59.0%) and 284 were females (41.0%). Table 4.1 shows the age and gender of all child deaths in the period.

More than half of all child deaths (62.3%) were infants under one year, with 432 deaths. Of these, 306 (70.8%) occurred within the first 28 days of life. Toddlers aged one to four had the next highest number of deaths, with 93 fatalities (13.4%). Numbers of deaths were lowest between the ages of five and 14 years and rose between 15 and 17 years.

Table 4.1: Age and gender of child deaths

Age at death	Females		Males		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Under 28 days	127	18.3	179	25.8	306	44.2
28 days to 1 year	55	7.9	71	10.2	126	18.2
Total deaths under 1 year	182	26.3	250	36.1	432	62.3
1–4 years	45	6.5	48	6.9	93	13.4
5–9 years	17	2.4	28	4.0	45	6.5
10–14 years	15	2.2	33	4.8	48	6.9
15–17 years	25	3.6	50	7.2	75	10.8
Total deaths 1–17 years	102		159		261	
Total	284	41.0	409	59.0	693	100.0

Data source: Queensland Child Death Register (2004–05)

Note: 1. All percentages are calculated on the total number of deaths.

All causes of child death

Causes of child deaths broken down by ICD-10 chapter level classifications and gender are shown in Table 4.2.

Table 4.2: All causes of child death per ICD-10 chapter classifications

ICD-10 chapter descriptions	Female	Male	Total	Total
	<i>n</i>	<i>n</i>	<i>n</i>	%
Natural Causes				
Certain infectious and parasitic diseases (A00–B99)	9	7	16	2.3
Neoplasms (C00–D48)	20	26	46	6.6
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50–D89)	0	1	1	0.1
Endocrine, nutritional and metabolic diseases (E00–E90)	5	4	9	1.3
Mental and behavioural disorders (F00–F09)	0	0	0	0
Diseases of the nervous system (G00–G99)	14	13	27	3.9
Disease of the eye and adnexa (H00–H59)	0	0	0	0
Diseases of the ear and mastoid process (H60–H95)	0	0	0	0
Diseases of the circulatory system (I00–I99)	3	6	9	1.3
Diseases of the respiratory system (J00–J99)	8	9	17	2.4
Diseases of the digestive system (K00–K93)	3	5	8	1.1
Diseases of the skin and subcutaneous tissue (L00–L99)	0	0	0	0
Diseases of the musculoskeletal system and connective tissue (M00–M99)	1	0	1	0.1
Diseases of the genitourinary system (N00–N99)	0	0	0	0
Pregnancy, childbirth and the puerperium (O00–O08)	0	0	0	0
Certain conditions originating in the perinatal period (P00–P96)	100	125	225	32.5
Congenital malformations, deformations and chromosomal abnormalities (Q00–Q99)	47	71	118	17
Total number of deaths from natural causes	210	267	477	68.8
SIDS and undetermined causes				
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00–R99)	9	20	29	4.2
External causes				
External causes of morbidity and mortality (V01–Y98)	47	99	146	21.1
Cause of death pending ⁹²	18	23	41	5.9
Grand Total	284	409	693	100

Data source: Queensland Child Death Register (2004–05)

* = numbers are too small to calculate percentages to the first decimal place.

92 Includes the following causes of death: “Autopsy Notice given - Cause of death not yet determined”, “Not yet determined pending test results” and “Not yet established, tests required”. There is a routine time lapse in coronial findings being available. As a result, the cause of death is not able to be determined in those cases unless autopsy findings are available.

Natural causes

Of the 477 children and young people who died from natural causes, the most common deaths were due to certain conditions originating in the perinatal period (225 deaths, 47.2% of all natural causes) and congenital malformations, deformations and chromosomal abnormalities (118 deaths, 24.7%). More males died as a result of natural causes (267 deaths) than females (210 deaths). Of the children who died of natural causes, 366 were under one year⁹³ (7.6 deaths per 1000 live births) and 111 were over one year of age (12.1 deaths per 100,000 population).

External causes

Table 4.3 shows that 146 children and young people died from external causes during the reporting period. Ten of these children were aged under one year (0.2 deaths per 1000 live births) and 136 were over one year of age (14.9 deaths per 100,000 population). Ninety-nine males and 47 females died from external causes.

Sudden Infant Death Syndrome (SIDS) and undetermined causes

SIDS and undetermined causes led to the death of 29 children and young people during the 18 months examined. The majority of these were males (20 deaths) compared to females (nine deaths). A number of studies have identified that males have a statistically increased risk of SIDS. Twenty-one infants died of SIDS (0.4 per 1000 live births) and five children under one year died of undetermined causes (0.1 per 1000 live births). Three children aged over one year died of undetermined causes⁹⁴.

Age

Table 4.3 provides a break down of child deaths by age at death and broad ICD-10 chapter level classifications.

Table 4.3: All causes of child death by age and broad ICD-10 chapter classifications

ICD-10 chapter descriptions	Under 28 days	28–364 days	1–4 days	5–9 days	10–14 days	15–17 days	Total	Total %
Natural Causes	290	76	40	31	23	17	477	68.8
SIDS and undetermined causes								
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00–R99)	4	22	3	0	0	0	29	4.2
External causes								
External causes of morbidity and mortality (V01–Y98)	3	7	47	10	24	55	146	21.1
Cause of death pending ⁹⁵	9	21	3	4	1	3	41	5.9
Grand Total	306	126	93	45	48	75	693	100

Data source: Queensland Child Death Register (2004–05)

93 Rates for children who died under 28 days or between 28 and 364 days age are calculated per 1000 live births as population data is not available for children aged under 28 days.

94 Rates are unable to be calculated for numbers less than four.

95 Includes the following causes of death: “Autopsy Notice given – Cause of death not yet determined”, “Not yet determined pending test results” and “Not yet established, tests required”.

External categories of child death

Table 4.4 presents all external causes of death for Queensland children by age. In total, 146 children and young people died from external causes over this period.

Table 4.4: External categories of death by age

Specific child death trends	Under 1 year	1–4 years	5–9 years	10–14 years	15–17 years	Total persons
Transport	2	20	6	8	34	70
Drowning	0	14	2	3	1	20
Suicide	0	0	0	9	10	19
Accidental	1	6	3	3	6	19
Fatal assault	4	3	0	1	5	13
Fire	0	5	0	0	0	5
Total	7	48	11	24	56	146

Data source: Queensland Child Death Register (2004–05)

Transport fatalities were the leading cause of external death for all children under 18 years, with 70 deaths during the 18 month reporting period. Drowning was the second most common cause, with 20 deaths, closely followed by suicide and accidents, with 19 deaths each.

Fatal assault was the leading external cause of death for infants aged under one year. Transport accidents was the most frequent type of death for toddlers (20 deaths) followed by drowning (14 deaths); suicide was the highest external cause of death for 10 to 14-year-olds; and children aged 15 to 17 years most frequently died in transport accidents.

Most common causes/categories of death by age

Tables 4.5 to 4.10 show the five most common causes/categories of deaths during the reporting period for all children and young people in Queensland by age⁹⁶.

The ICD-10 chapter level gives an indication of the natural causes of death in each age group. External causes have been categorised into transport,

drowning, suicide, accidental, fatal assault and fire. Each external cause is analysed in detail in chapters 5 to 11 of this report⁹⁷.

Under 28 days

The leading causes of death for infants under 28 days were conditions originating in the perinatal period and congenital malformations, deformations and chromosomal abnormalities. Conditions originating in the perinatal period led to the death of 208 infants under 28-days-old (68.0% of all deaths in this age group), while 81 (26.5%) died from congenital malformations, deformations and chromosomal abnormalities. SIDS and undetermined deaths were the third leading cause of death in infants under 28 days, with four deaths (1.3%), followed by external causes, with three deaths (0.9%). Two infants died from neoplasms and two from diseases of the nervous system.

Table 4.5: Most common causes/categories of death for infants under 28 days

Cause/category of death	Number of deaths	Percentage of deaths	Per 1000 live births
Certain conditions originating in the perinatal period (P00–P96)	208	68.0	4.3
Congenital malformations, deformations and chromosomal abnormalities	81	26.5	1.7
SIDS and undetermined	4	1.3	0.1
External causes ⁹⁸	3	*	*
Neoplasms/diseases of the nervous system	2	*	*

Data source: Queensland Child Death Register (2004–05)

* Rates are unable to be calculated on numbers less than four

Note: 1. This table does not include all causes of death. Consequently, the percentage column does not add to 100%. The percentage of deaths refers to the proportion of all infants aged less than one who died.

96 In circumstances where the same number of deaths occurred in separate categories, multiple ranked causes of death will be listed.

97 The external categories of death represent the chapter in which the death is analysed in this report, (i.e. chapters 6–11) not the ICD 10 external cause code ranges.

98 Infants under 28 days dying of external causes are discussed in chapter 11 sudden unexpected deaths in infancy. One death was caused by positional asphyxiation and one by asphyxia due to overlay.

Between 28 and 364 days

The leading causes of death for infants aged between 28 and 364 days were SIDS and undetermined causes, certain conditions originating in the perinatal period and congenital malformations, deformations and chromosomal abnormalities. SIDS and undetermined causes were responsible for 22 deaths (17.5% of all deaths in this age group), 18 infants died from conditions originating in the perinatal period (P00–P96) (14.3%) and another 18 died from congenital malformations, deformations and chromosomal abnormalities (14.3%). Diseases of the nervous system were the fourth leading cause of death in children under one year, with 12 fatalities (9.5%) followed by diseases of the respiratory system, with 11 deaths (8.7%).

Table 4.6: Most common causes/categories of death for infants 28 to 364 days

Cause/category of death	Number of deaths	Percentage of deaths	Per 1000 live births
SIDS and undetermined	22	17.5	0.5
Certain conditions originating in the perinatal period (P00–P96)	18	14.3	0.4
Congenital malformations, deformations and chromosomal abnormalities	18	14.3	0.4
Diseases of the nervous system	12	9.5	0.2
Diseases of the respiratory system	11	8.7	0.2

Data source: Queensland Child Death Register (2004–05)

Note: 1. This table does not include all causes of death. Consequently, the percentage column does not add to 100%. The percentage of deaths refers to the proportion of all infants aged between 28 and 364 days who died.

One to four years

Table 4.7 shows that transport and drowning were the two leading causes of death for children aged one to four years, together accounting for 32 deaths (34.4%) of toddlers. The third most common cause of toddler mortality was attributed to neoplasms, with 12 deaths (12.9%), followed by congenital

malformations, deformations and chromosomal abnormalities, with eight deaths (8.6%) and accidents causing six deaths (6.5%).

Table 4.7: Most common causes/categories of death for toddlers one to four years

Cause/category of death	Number of deaths	Percentage of deaths	Rate (per 100,000)
Transport	20	20.4	9.3
Drowning	13	14.0	6.4
Neoplasms	12	12.9	5.9
Congenital malformations, deformations and chromosomal abnormalities	8	8.6	3.9
Accidental	6	6.5	2.9

Data source: Queensland Child Death Register (2004–05)

Note: 1. This table does not include all causes of death. Consequently, the percentage column does not add to 100%. The percentage of deaths refers to the proportion of all toddlers one to four years who died.

Five to nine years

For children aged between five and nine years, neoplasms was the leading cause of fatalities, with 14 deaths (31.1%), followed by transport accidents with six death (13.3%) and diseases of the nervous system, with five deaths (11.1%).

Table 4.8: Most common causes/categories of death for children five to nine years

Cause/category of death	Number of deaths	Percentage of deaths	Rate (per 100,000)
Neoplasms	14	31.1	5.2
Transport	6	13.3	2.2
Diseases of the nervous system	5	11.1	1.9
Congenital malformations, deformations and chromosomal abnormalities	4	8.8	1.48
Endocrine, nutritional and metabolic diseases	3	6.6	*

Data source: Queensland Child Death Register (2004–05)

*Rates are unable to be calculated on numbers less than four

Note: 1. This table does not include all causes of death. Consequently, the percentage column does not add to 100%. The percentage of deaths refers to the proportion of all children five to nine years who died.

10 to 14 years

Suicide was the leading cause of death for young people aged between 10 and 14 years, with nine deaths (18.8%) during the 18 month period examined. This was followed by five fatalities resulting from neoplasms (10.4%) and five from congenital malformations, deformations and chromosomal abnormalities (10.4%).

Table 4.9: Most common cause/categories of death for young people 10 to 14 years

Cause/category of death	Number of deaths	Percentage of deaths	Rate (per 100,000)
Suicide	9	18.8	3.2
Neoplasms	5	10.4	1.8
Congenital malformations, deformations and chromosomal abnormalities	5	10.4	1.8
Endocrine, nutritional and metabolic diseases	4	8.3	1.43
Diseases of the nervous system	3	6.6	*

Data source: Queensland Child Death Register (2004–05)

*Rates are unable to be calculated on numbers less than four

Note: 1. This table does not include all causes of death. Consequently, the percentage column does not add to 100%. The percentage of deaths refers to the proportion of all young people 10 to 14 years who died.

15 to 17 years

The leading causes of death for 15 to 17-year-olds were transport accidents, with 34 deaths (45.3%), followed by suicide and neoplasms, with 10 deaths each (13.3% each).

Table 4.10: Most common causes/categories of death for young people 15 to 17 years

Cause/category of death	Number of deaths	Percentage of deaths	Rate (per 100,000)
Transport	34	45.3	21.0
Suicide	10	13.3	6.2
Neoplasms	10	13.3	6.2
Accidental	6	8.0	4.9
Fatal Assault	4	5.3	2.5

Data source: Queensland Child Death Register (2004–05)

Note: 1. This table does not include all causes of death. Consequently, the percentage column does not add to 100%. The percentage of deaths refers to the proportion of all young people 15 to 17 years who died.

Aboriginal and Torres Strait Islander deaths

In the reportable period, 85 of the children and young people who died were identified as Aboriginal, eight as Torres Strait Islander and five as both. Of all child deaths during this period, 14.1% were Aboriginal and Torres Strait Islander.

Table 4.11 presents the age of death for all children and young people identified as Aboriginal and/or Torres Strait Islander. Of all Indigenous children who died, 68.4%, were under one year of age (67 deaths). In comparison, 61.3% of non-Indigenous children who died were under one year (364 children). The second highest number of Indigenous child deaths was in the one to four year age category (16 deaths, 16.3% of Indigenous deaths).

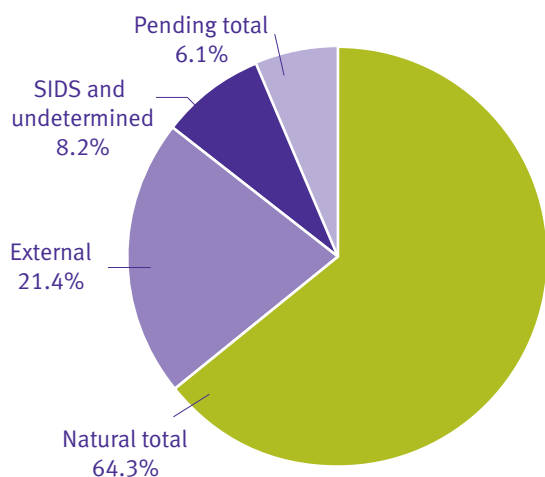
Table 4.12: Aboriginal and Torres Strait Islander child deaths by age and gender

Age at death	Females <i>n</i>	Males <i>n</i>	Total <i>n</i>	Total %
Under 28 days	12	32	44	44.9
28 days to 1 year	10	13	23	23.5
Total deaths under 1 year	22	45	67	68.4
1–4 years	9	7	16	16.3
5–9 years	1	2	3	3.1
10–14 years	2	5	7	7.1
15–17 years	2	3	5	5.1
Total	36	62	98	100

Data source: Queensland Child Death Register (2004–05)

Figure 4.1 illustrates the percentages of broad categories of causes of death for all identified Aboriginal and Torres Strait Islander children and young people in Queensland.

Figure 4.1: Percentages of broad categories of causes of Indigenous child death



Data source: Queensland Child Death Register (2004–05)

Natural causes

Natural causes were responsible for most Indigenous child deaths, with 63 deaths during this period (64.3% of Indigenous child deaths). Natural causes were also responsible for the largest number of non-Indigenous child deaths, with 413 deaths (69.5% of non-Indigenous deaths). Most Aboriginal and Torres Strait Islander natural cause fatalities (like most non-Indigenous natural child deaths), were due to conditions originating in the perinatal period, with 35 deaths. The next most common natural cause was congenital malformations, with 10 deaths.

External causes

During this period, 21 Aboriginal and Torres Strait Islander children died from external causes (21.4% of Indigenous child deaths). This compares to 124 external cause deaths of non-Indigenous children and young people (20.8% of non-Indigenous child deaths).

SIDS and undetermined causes

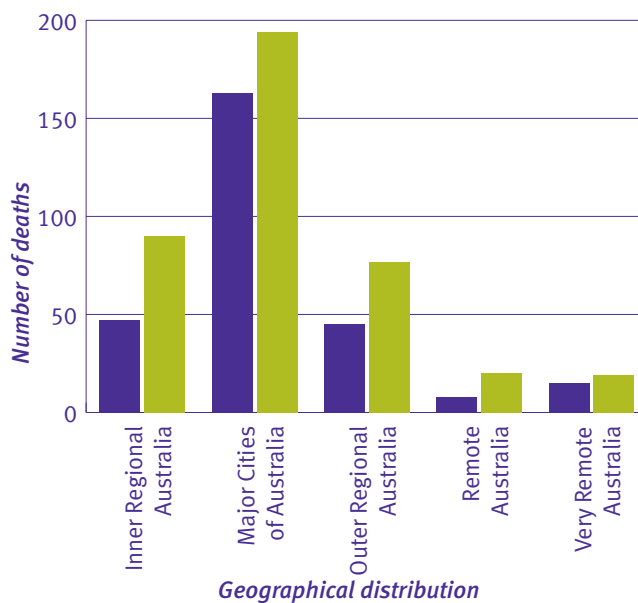
Eight Aboriginal and Torres Strait Islanders died from undetermined causes.

Geographical distribution (ARIA)

Children and young people were more likely to die in metropolitan areas, with 85.9 deaths per 100,000 children (357 deaths) than regional areas, with 73.5 per 100,000 (259 deaths) and remote areas with 58.9 per 100,000 (62 deaths).

Figure 4.2 illustrates the breakdown for each region by gender.

Figure 4.2: Region of child deaths by gender



Data source: Queensland Child Death Register (2004–05)

Notes: 1. Fifteen children were not classified as their usual residence was outside Queensland.
2. Represents the actual number of child deaths not rates.

Socioeconomic status (SEIFA)

Table 4.13 presents the socioeconomic status of all children and young people who died between January 2004 and June 2005. Children from disadvantaged socioeconomic regions have the highest number of deaths (43.9%).

Table 4.13: Socioeconomic status of child deaths by gender

Level of socioeconomic status	Females <i>n</i>	Males <i>n</i>	Total <i>n</i>	Total %
Low to very low	112	192	304	43.9
Moderate	40	68	108	15.6
High to very high	126	140	266	38.5
Total	278	401	678	97.8

Data source: Queensland Child Death Register (2004–05)

Note: 1. Fifteen children were not classified as their usual residence was outside Queensland.