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Victorian surveys

The School Entrant Health Questionnaire
The School Entrant Health Questionnaire is a parent report instrument that records parents’ concerns and observations about their children’s health and wellbeing. The questionnaire was developed and piloted in 1996–97 as part of the Victorian School Nursing Redevelopment Program and has been distributed to parents and guardians of preparatory grade children in Victorian primary schools since mid-1997. The major aims of the Victorian School Nursing Program are to increase health promotion and to assist early identification of health and wellbeing issues in school children.

The data gathered by the School Entrant Health Questionnaire depends on parents’ perceptions and recollections, and does not claim to report medical diagnoses or opinions of health professionals. The questionnaire was designed to assist parents and school nurses in identifying health concerns, to encourage parents and school nurses to work together, and to aid school nurses in assessing the health and wellbeing of each Prep grade child. The questionnaire is also a rich source of information on parental concerns about child health, providing a population view of parental concerns about health issues of school-entry children. The questions cover the areas of:

- General health
- Medication
- Immunisation
- Dental health
- Speech/language
- Hearing
- Vision
- Disabilities
- General development
- Behaviour and emotional wellbeing
- Family stress.

For eight consecutive years (1997 to 2004), the School Entrant Health Questionnaire responses have been collected and archived. The resulting database of over 400,000 responses is one of the largest databases on parent information about the health and wellbeing of children in the 5—7-year age cohort available in Australia.

In 2005, the Department of Human Services commissioned a team from the University of Melbourne and RMIT University to conduct an evaluation of the School Entrant Health Questionnaire and to analyse questionnaire responses from 1998 to 2004. This report, including further technical information about the School Entrant Health Questionnaire, is available at http://www.education.vic.gov.au/oecd/earlychildhood/library/publications/primary/sehq.html
The 2006 Victorian Child Health and Wellbeing Survey

The Department of Education and Early Childhood Development is currently developing a comprehensive, across government, system to monitor and report on the safety, health, development, learning and wellbeing of children and young people against the Victorian Child and Adolescent Outcomes Framework. The system is known as the Victorian Child and Adolescent Monitoring System (VCAMS).

As part of the VCAMS, a rolling program of new data collections is underway to address data gaps. The new data collections include the Victorian Child Health and Wellbeing Survey (VCHWS). The VCHWS has been designed to support reporting on outcomes relating to child health, nutrition (including breastfeeding), oral health, child activities, reading, child behaviour, family functioning, parental health, parental mental health and health in pregnancy. The first VCHWS was completed in March 2006, the survey will be repeated during 2009.

During the 2006 survey, 5000 computer assisted telephone interviews were carried out with the parents and carers of Victorian children aged under 13 years. A sample of telephone numbers was generated using random digit dialling, stratified by Departmental region to ensure an appropriate representation across the state. All private households with a landline and where a child aged under 13 years usually lived were considered to be in-scope for the survey. Interviews were conducted in English only. The survey response rate, defined as the proportion of positively screened households where an interview was completed, was 86.6 per cent.


On Track survey

The On Track survey is an annual telephone survey of Year 12 completers and early leavers in Victoria. School leavers from the previous year are contacted between April and May and destinations data are collected on two basic dimensions: education and training; and employment and occupation.

The On Track survey is designed to provide a valuable tool for guiding program policies both at the government and school level and at a local or regional level. The program enables schools to monitor how their students fare in a context of rapid labour market change and complex educational pathways. It is thus possible for schools to see, for example, how many exiting students are working, but also undertaking training, and how many are in tertiary study, but also have a job.

On Track also collects background information on students, so that the destinations of particular subgroups can be considered such as those of Indigenous students. Transition differences between regions in Victoria are also documented in this report. This information is valuable not only for schools, but also for the Local Learning and Employment Networks (LLEN), regions, VET providers (particularly TAFE institutes) and for government agencies.

The annual On Track survey, conducted by the Australian Council for Educational Research for the Department of Education and Early Childhood Development, surveyed more than 33,000 young people who completed the Victorian Certificate of Education, the International Baccalaureate, or the Victorian Certificate of Applied Learning (Intermediate or Senior).

Victorian Population Health Survey

The Victorian Population Health Survey (VPHS) is an important component of the population health surveillance responsibilities of the Victorian Department of Human Services. During the annual survey, computer-assisted telephone interviews are carried out on the health of Victorians aged over 18 years. Within the survey, respondents are asked to indicate if they have any children aged 18 years or younger.

Telephone interviewing is undertaken between August and December each year. The survey samples are generated using random digit dialling. All private Victorian households with a land line are considered in-scope for the survey. It should be noted that some population groups, such as homeless people, the frail and aged or people with disabilities may be excluded from participating in telephone interviews.

The most recent VPHS report can be viewed at: www.health.vic.gov.au/healthstatus/vphs_current.htm
Analysis of Victorian data from the Healthy Neighbourhoods School Survey

The Healthy Neighbourhoods Project was a large study undertaken in 2006 to look at the health and wellbeing of children and teenagers across Victoria, Queensland and Western Australia. Communities stratified by socioeconomic status and urban/rural location were randomly selected to take part in the project. During 2006, over 3500 young people in Years 6 and 8 were surveyed from 10 urban and eight rural local government areas across Victoria and these data were used to produce the analysis for this report.

The Healthy Neighbourhoods School Survey (HNSS) consisted of a computer-based questionnaire and the measurement of height, weight, blood pressure and pulse rate. The questionnaire was designed to provide information on rates of health and social problems experienced by young people and, in addition, provide information on the risk and protective (influencing) factors that predict these problems. The aim of the project was to examine whether the causes of common adolescent health and behaviour problems (including mental illness, substance abuse, unhealthy weight, school and conduct problems) vary across different socioeconomic strata.

The commissioned analysis of HNSS Victorian data provides important information for this report about the health and wellbeing of young people (aged 11–13 years) as a whole, and by subgroup (age, gender, ATSI status, language spoken at home, urban/rural location and socioeconomic status). The sample was weighted according to its location and socioeconomic status so that the data estimated a representative sample of young people from the Victorian population.

Healthy Neighbourhoods was funded by a three-year grant from the National Health and Medical Research Council (NHMRC). The researchers are based at the Murdoch Children’s Research Institute at the Royal Children’s Hospital (Vic), Griffith University (Qld), the Telethon Institute for Child Health Research (WA) and Curtin University of Technology (WA).

Participation rates of Victorian young people and sample sizes for all subgroups are provided below.

### Participation rates

<table>
<thead>
<tr>
<th>Year level</th>
<th>Number</th>
<th>Consent forms returned N (%)</th>
<th>Parent consent N (%)</th>
<th>Survey complete N (%)</th>
<th>Measurements complete N (%)</th>
</tr>
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<tbody>
<tr>
<td>6</td>
<td>3468</td>
<td>2437 (70)</td>
<td>2211 (64)</td>
<td>2057 (59)</td>
<td>1963 (57)</td>
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<tr>
<td>8</td>
<td>4162</td>
<td>2222 (53)</td>
<td>1950 (47)</td>
<td>1751 (42)</td>
<td>1648 (40)</td>
</tr>
<tr>
<td>Total</td>
<td>7630</td>
<td>4659 (61)</td>
<td>4161 (55)</td>
<td>3808 (50)</td>
<td>3611 (47)</td>
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### Sample sizes

#### Age

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<th>12</th>
<th>13</th>
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<tr>
<td>N (%)</td>
<td>20 (0.5)</td>
<td>1049 (27.9)</td>
<td>1782 (47.4)</td>
<td>884 (23.5)</td>
<td>22 (0.6)</td>
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#### Gender

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<th>Gender</th>
<th>Male</th>
<th>Female</th>
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<tr>
<td>N (%)</td>
<td>1852 (48.8)</td>
<td>1941 (51.2)</td>
<td>3793</td>
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#### Status

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<th>ATSI</th>
<th>Non-ATSI</th>
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<tr>
<td>N (%)</td>
<td>75 (2.0)</td>
<td>3625 (98.0)</td>
<td>3700</td>
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#### Language

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<th>Language</th>
<th>English</th>
<th>Other</th>
<th>Total</th>
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<tr>
<td>N (%)</td>
<td>3197 (85.9)</td>
<td>526 (14.1)</td>
<td>3723</td>
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#### Location

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<th>Location</th>
<th>Urban</th>
<th>Regional</th>
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<tr>
<td>N (%)</td>
<td>1939 (51.1)</td>
<td>1854 (48.9)</td>
<td>3793</td>
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#### SES level

<table>
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<th>SES level</th>
<th>Lowest</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Highest</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>N (%)</td>
<td>766 (20.2)</td>
<td>703 (18.5)</td>
<td>825 (21.8)</td>
<td>917 (24.2)</td>
<td>582 (15.3)</td>
<td>3793</td>
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178 The main reasons for non-participation were (a) failure to return consent form, (b) absence from school on the day of the survey and (c) parental non-consent.
179 It should be noted that some students did not answer every question or participate in both parts of the survey.
180 Due to the small number of students who were 10 and 14 years of age, the results of the analysis by age are limited to those aged 11–13 years.
Key data reports

Child Protection Australia
This report is prepared annually by the AIHW and provides comprehensive information on state and territory child protection and support services. The 2006-07 report includes data for 2006-07 together with trend data relating to child protection notifications, investigations and substantiations, children on care and protection orders and children in out-of-home care. Information on the age, sex and Indigenous status of children in the child protection system is included, and for child protection substantiations the report also includes data on the family type and source of notification. Information is presented on the types of order and living arrangements for children on care and protection orders, and for children in out-of-home care there are data on types of placement and length of time in out-of-home care.

Juvenile Justice in Australia
This report is prepared annually by the AIHW and provides information about young people in juvenile justice in Australia. The 2006-07 report was the fourth report. It presents information about the characteristics of young people in community-based supervision and detention in 2006-07, together with patterns of supervision over time and analyses of trends. The report data derive from the Juvenile Justice National Minimum Data Set, which is based on the experience of the young person within supervision rather than on legal orders and contains data from 2000-01.
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