Using the Australian Early Development Census to understand the mental health needs of Australian children

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Mental health difficulties are common

• In Australia, 1 in 7 children aged 4 to 17 years meets criteria for a mental health disorder
• Prevalence is even higher for children living in the most disadvantaged communities
  – 1 in 5 children compared to 1 in 10 children living in the least disadvantaged areas

Meeting the mental health needs of children

- For those that seek support, both the education and health systems provide a major resource
- Schools are often the first line of action
  - 40% of 4-17-year-olds access mental health services at school
  - 3% receive support from specialised mental health services

Schools need to address the ‘dual continuum’

Suppose we introduced an employer to a young person we worked with by saying,

‘Here’s Johnny. He’s not a drug user. He’s not in a gang. He’s not a dropout. He’s not a teen father. Please hire him.’

The employer would probably respond, ‘That’s great. But what does he know, what can he do?’

Pittman et al. 2011.
Competence

“adaptational success in the developmental tasks expected of individuals of a given age in a particular cultural and historical context. Competence by this definition is inherently multi-dimensional, because there are multiple developmental tasks salient in a given age period in a given place and time in society”

AEDC Mental Health Competence

• Multidimensional
  – Social competence
  – Responsibility and respect
  – Approaches to learning
  – Readiness to explore new things; and
  – Prosocial and helping behaviour
• A measure of child strengths
  – Not the absence of problems
• A population measure
  – Not for ‘diagnosing’ individual children
Deriving Mental Health Competence in the AEDC

• Create an average from scores on
  – overall social competence
  – responsibility and respect
  – approaches to learning
  – readiness to explore new things
  – prosocial and helping behaviour

• Children in the highest third on this average score categorised as demonstrating high competence
  – Other cut-points may be relevant to different questions
Mental health difficulties in the AEDC

• Internalising problems
  – anxious and fretful behaviour score
• Externalising problems, average score across
  – aggressive behaviour
  – hyperactivity and inattention
• Children with scores in the poorest third on each categorised as having ‘high difficulties’
• High mental health difficulties defined as those with high difficulties on either or both internalising and externalising problems
Australian Early Development Census (AEDC)

• Measures physical health and wellbeing, social competence, emotional maturity, language and cognitive skills, and communication skills and general knowledge
• Teacher completed
• Over 250,000 children in each cohort with >95% coverage
• www.aedc.gov.au
The ‘dual continuum’ can be seen in the 2015 AEDC data
Longitudinal Study of Australian Children (LSAC)

- Nationally representative sample of two cohorts of Australian children, including the Birth cohort (B-cohort) of 5,107 infants
- Very rich data from parent, teacher, child, and data linkage
Mental health competence and learning

• Competence is something that can be explicitly taught in schools
• Wide uptake of school-based initiatives that aim to enhance competence
• Promoting competence could also have follow-on benefits for improved academic achievement in the student population
Grade 3 NAPLAN scores by competence

![Bar chart showing mean NAPLAN scores by competence for Grade 3 students. The competences are Numeracy, Persuasive Writing, Reading, Spelling, and Grammar and Punctuation. The chart compares scores for high and other mental health competence groups.]
Is this a causal relationship?

- Many factors are related to both competence and academic achievement.
- This includes characteristics of the child, their family circumstances, home environment, and community socioeconomic status.
NAPLAN scores by competence after matching

Mean NAPLAN score

- Numeracy
- Persuasive Writing
- Reading
- Spelling
- Grammar and Punctuation

High mental health competence
Other mental health competence
Implications

• The AEDC has provided an opportunity to measure mental health competence in the school entrant population
  – promotes a ‘dual continuum’ approach to thinking about school based supports
• We can answer questions about what promotes competence, as well as the consequences of competence
• For example, this data helps us to quantify the likely impact of competence interventions for academic learning outcomes
For further details


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The Centre for Community Child Health is a department of The Royal Children’s Hospital and a research group of Murdoch Children’s Research Institute.