

## RESEARCH SNAPSHOT

# *The Wellbeing of Children and Adolescents in South Australia*

## *Background*

Reducing the burden of mental illness on children and adolescents continues to be a priority for families, educators, and governments alike. In recent years, it has become increasingly recognised that mental health is not simply the absence of mental illness, but the flourishing of positive mental traits, often referred to as social and emotional wellbeing. For a holistic understanding of mental health, it is important to measure indicators of both positive wellbeing (e.g., optimism, happiness) and negative wellbeing (e.g., sadness and worries).

Previous research has recognised that poor psychological wellbeing and mental health during childhood and adolescence is associated with a wide range of adverse educational and life outcomes. It is also well known that some children are at a higher risk of experiencing poor wellbeing than others, based on their demographic characteristics (e.g. age, gender), family characteristics (e.g. parental education) or the communities in which they grow up. However, most of the previous research has one of more of the following limitations.

- Focused solely on negative dimensions of wellbeing (e.g., depression and anxiety)
- Used adult-reports (teacher, parents) of children's wellbeing rather than asking children and adolescents themselves
- Relied on a limited number of wellbeing dimensions (e.g., life satisfaction)
- Assessed wellbeing over a narrow age range

The South Australian Wellbeing and Engagement Collection (WEC) provides a valuable data source to help overcome these limitations by tracking a wide range of positive and negative wellbeing dimensions using self-report measures that are suited for children and adolescents from Grade 4 to 12.



## Aims

The aim of the current research project was to understand the wellbeing of South Australian children and adolescents and identify those students who are at the highest risk of low wellbeing during their schooling years. Specifically, this research aimed to explore:

1. The prevalence of low, medium and high wellbeing across five wellbeing dimensions (life satisfaction, optimism, happiness, sadness and worries; see Figure 1) for children and adolescents from Grades 4 to 12 (ages 8-18);
2. How wellbeing dimensions differed across age, grade, gender, parental education, language background, socio-economic status and geographic remoteness.

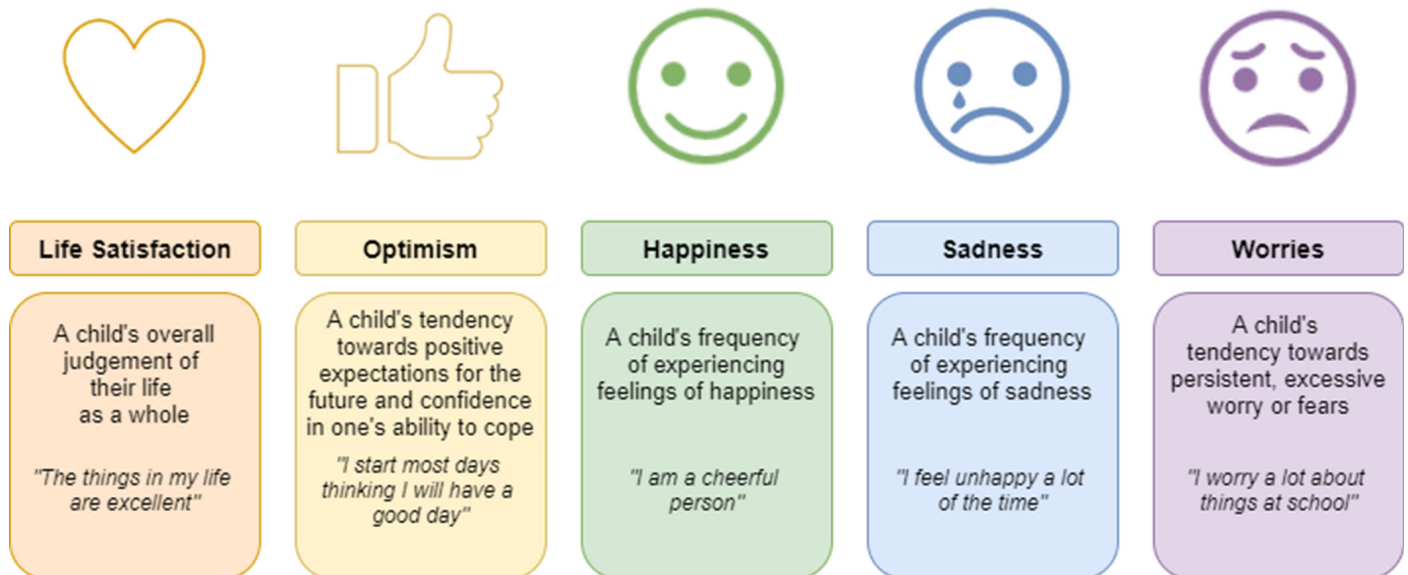


Figure 1 – Definitions and item examples of the five dimensions of wellbeing (WEC)

## Key Findings

### Prevalence of low, medium, and high wellbeing

Table 1 presents the percentage of children with low, medium and high wellbeing on each of the five wellbeing dimensions. Most children and adolescents had high levels of life satisfaction (41%), optimism (48%) and happiness (55%). However, a substantial number of students reported low levels of life satisfaction (22%), optimism (16%) and happiness (13%). Likewise, although the majority of children and adolescents reported low levels of sadness (53%) and worries (41%), there were a sizable portion of children and adolescents that reported experiencing high levels of sadness (16%) and worries (25%). Overall, many children and adolescents experienced low wellbeing, with 41% of students having low wellbeing on one or more indicators\*.

Table 1. Percentages of students (Grade 4 to 12) with low, medium, and high wellbeing (n = 75,966)

	Low	Medium	High
<i>Life satisfaction</i>	22%	37%	41%
<i>Optimism</i>	16%	36%	48%
<i>Happiness</i>	13%	32%	55%
<i>Sadness</i>	52%	31%	16%
<i>Worries</i>	41%	34%	25%

\*Low wellbeing refers to children and adolescents with low life satisfaction, optimism, and happiness, and high sadness and worries.

### Age and gender patterns in wellbeing

As seen in Figure 2, the wellbeing of children showed marked declines as they aged, and this decline was considerably steeper for girls. For example, boys and girls had similar levels of worries at 8-10 years, but by 15-18 years twice as many girls had high levels of worries than boys (22% vs. 44%).

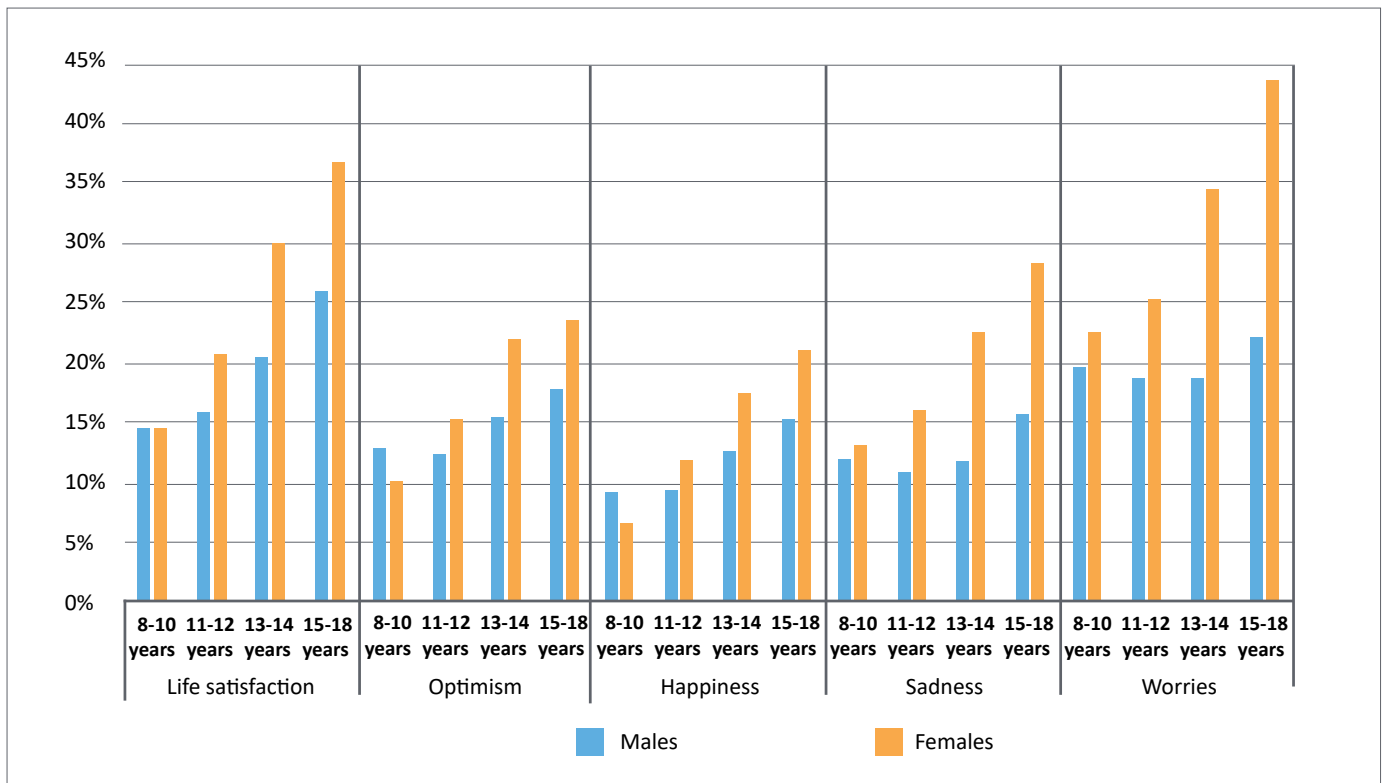


Figure 2 – Age gradient in social and emotional wellbeing in gender

Notes. Percentage of children and adolescents with *low* life satisfaction, optimism, and happiness, and *high* sadness and worries.



## Socio-economic inequality in wellbeing

Children living in more socio-economically disadvantaged communities showed poorer wellbeing across all positive and negative indicators of wellbeing. For example, 20% of children in the most disadvantaged communities had high levels of sadness compared to 13% of children in the most advantaged communities (See Figure 3).

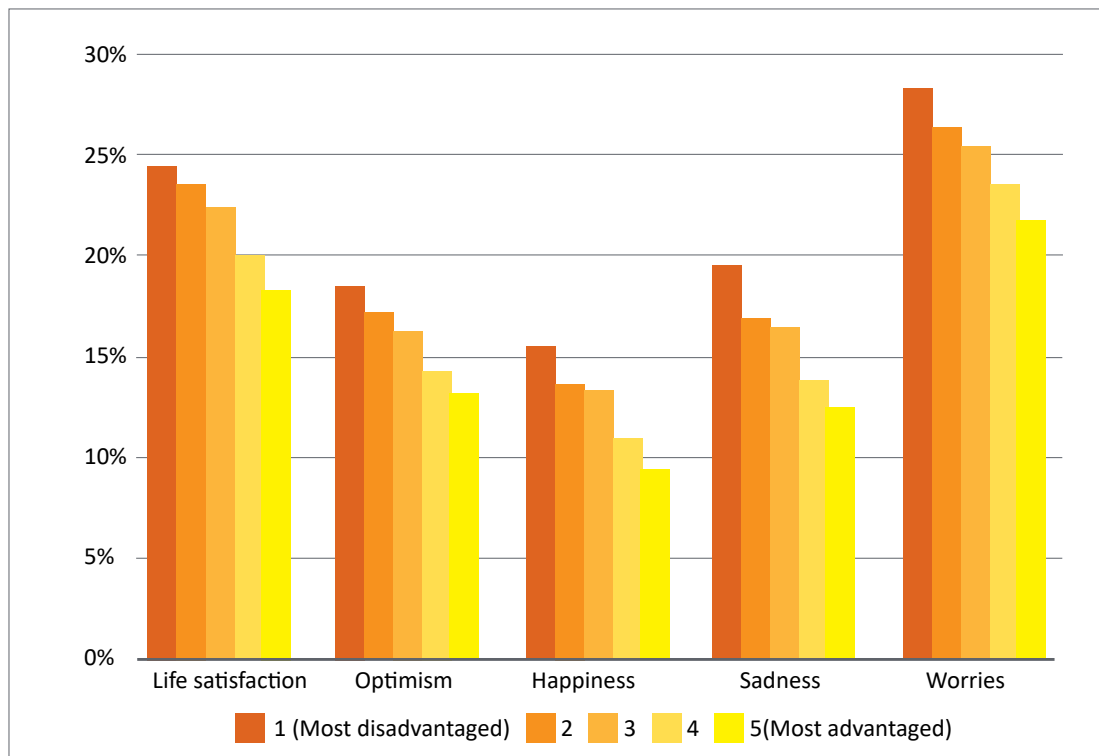


Figure 3 – Socio-economic gradient in social and emotional wellbeing

*Notes.* Percentage of children and adolescents with *low* life satisfaction, optimism, and happiness, and *high* sadness and worries. Groups (bar) represent the socio-economic position of the community where the child resides based on SEIFA IRSAD ranging from 1 = most disadvantaged communities to 5 = most advantaged communities.

## Implications

This snapshot report presents data showing the prevalence of multiple wellbeing dimensions among children and adolescents and how they differ across social and demographic characteristics. These findings are generally consistent with previous research and taken together imply that a substantial number of children and adolescents are experiencing one or more forms of poor wellbeing throughout their schooling. Additionally, this research highlights that poor wellbeing increases with age, particularly for female students, and is more likely to impact students from socio-economically disadvantaged backgrounds. The finding that over 40% of South Australian students are showing poor outcomes across one or more wellbeing dimensions indicates that mental-ill health is impacting a substantial number of South Australian children and adolescents.

Although clinical-based, individual responses to mental illness are essential, this research has shown that the development of population-level strategies are needed to tackle low psychological wellbeing in children and adolescents. Given the reported declines in wellbeing as students get older, it would be useful to develop interventions that focus on building and sustaining wellbeing before children enter adolescence. Additionally, the poorer wellbeing in children and adolescents who live in socio-economically disadvantaged communities emphasises the need to determine whether school wellbeing programs are effective at supporting the wellbeing of students from a range of different backgrounds. Addressing these issues will allow for the potential to maintain good wellbeing throughout adolescence and improve a variety of life outcomes associated with poor wellbeing.

## Study Details

The Wellbeing and Engagement survey (WEC) is an annual self-report survey of student wellbeing completed by students in Grades 4 to 12 in South Australian schools (Gregory & Brinkman, 2020; Gregory et al., 2021). The survey is designed to assist educators and policy makers to further understand the wellbeing and engagement of their students. The WEC captures a wide range of wellbeing domains, including student's social and emotional wellbeing, engagement with school, learning readiness and health and wellbeing out of school. This study used data from 75,966 government school students who had completed the WEC in 2019. Each wellbeing dimension was measured using a short (3-to-5-item) scale which students answered using a 5-point Likert scale (1 = Strongly disagree, 5 = Strongly agree). The scores from these scales were then summed and recoded into three categories: "low" (<3), "medium" ( $\geq 3$  and  $< 4$ ), or "high" ( $\geq 4$ ).

## Details of the Research Paper

For full technical details of this research see: Gregory, T., Sincovich, A., Brushe, M., Finlay-Jones, A., Collier, L. R., Grace, B., Sechague Monroy, N., & Brinkman, S. (2021). Basic epidemiology of wellbeing across children and adolescents: A cross-sectional population level study. *Social Science & Medicine – Population Health*, 15, 100907. <https://doi.org/10.1016/j.ssmph.2021.100907>

## Suggested citation for this research snapshot

Gregory, T., Brushe, M., Boulton, Z., & Brinkman, S. (2021). Research Snapshot. The Wellbeing of Children and Adolescents in South Australia. Available at: [www.education.sa.gov.au/department/research-and-data/fraser-mustard-centre](http://www.education.sa.gov.au/department/research-and-data/fraser-mustard-centre)

## ABOUT THE FRASER MUSTARD CENTRE

Working together to improve the development, education, health and wellbeing of young Australians, the

Telethon Kids Institute and the South Australian Department for Education have joined forces in a unique approach to research translation. The Fraser Mustard Centre collaboration aims to:

- Improve and promote the health and wellbeing of all children and young people in South Australia through the unique application of multidisciplinary research
- Help shift focus from the historical delineation between health and education services to an integrated approach with a focus on child development
- Build capacity amongst public sector staff and academic researchers to design, undertake and use research to improve the environments in which children live and the service systems which support families
- Attract funding for shared priorities for research that leads to improved developmental, education, health, and wellbeing outcomes for

