



Australian Social Trends June 2012

Children with a disability

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Children with a disability

There is a broad range of disabilities that affect some Australian children. Disabilities that impact upon a child's health, communication, movement or learning can have profound effects on the child's social engagement and education. For parents and families, raising a child with a disability can be demanding physically, emotionally and financially, and can affect many aspects of family functioning.¹

Ensuring that parents have access to necessary support services is an ongoing issue for government and disability advocacy groups. A number of recent initiatives aim to advance the rights and social inclusion of people with a disability, as well as revolutionise the existing disability services system which has been described as inadequate, fragmented and difficult to navigate.²

These initiatives include the Council of Australian Governments' (COAG's) endorsement of the National Disability Strategy³, as well as programs such as the Commonwealth Government's 'Better Start for Children with a disability'.⁴

This article investigates the prevalence of disability among children aged 0–14 years, and the types of disability most common among children. It also examines the need for, and the accessibility of, assistance for children with a disability, both at home and at school.

Data sources and definitions

This article is based on data from the ABS 2003 and 2009 Survey of Disability, Ageing and Carers (SDAC).

In this article, *children* refers to people aged 0–14 years.

Disability is defined as any limitation, restriction or impairment which restricts everyday activities and has lasted or is likely to last for at least six months.

Four levels of **core activity** (communication, mobility or self-care) limitation are determined based on whether a person needed help, had difficulty, or used aids or equipment with any of the core activities. A person's overall level of core activity limitation is determined by their highest level of limitation in these activities. The four levels of limitation are:

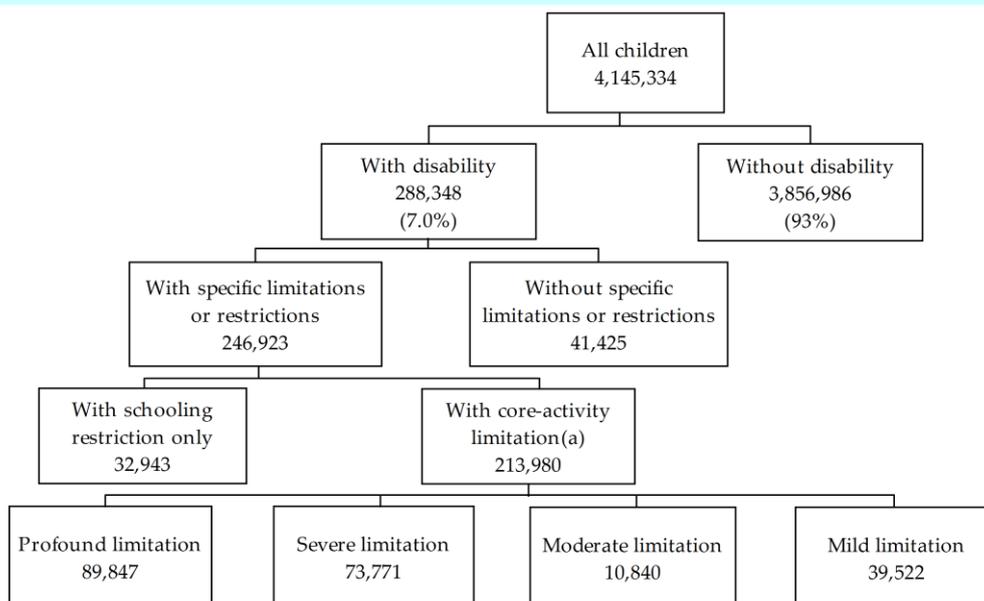
Profound The person is unable to do, or always needs help with, a core activity task.

Severe The person sometimes needs help with a core activity task; has difficulty understanding or being understood by family or friends; can communicate more easily using sign language or other non-spoken forms of communication.

Moderate The person needs no help, but has difficulty with a core activity task.

Mild The person needs no help and has no difficulty with any of the core activity tasks, but uses aids and equipment; cannot easily walk 200 metres; cannot walk up and down stairs without a handrail; cannot easily bend to pick up an object from the floor; cannot use or has difficulty using or needs help or assistance with public transport.

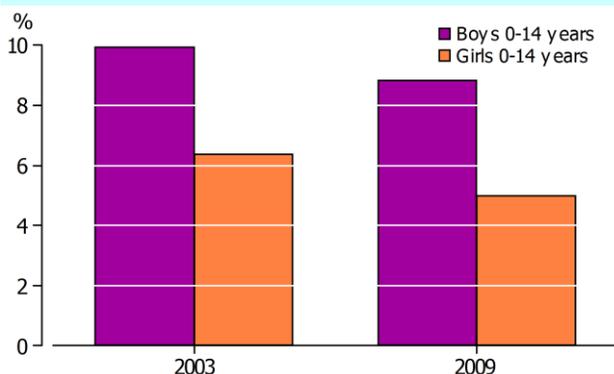
Children aged 0-14 years with a disability – 2009



(a) Includes children with both core-activity limitations and schooling restrictions.

Source: ABS 2009 Survey of Disability, Ageing and Carers

Disability rate of children by sex – 2003 and 2009



Source: ABS 2003 and 2009 Survey of Disability, Ageing and Carers

Disability rates over time

In 2009, four million people in Australia were reported as having a disability. Of all Australians with a disability in 2009, 290,000 (7.2%) were children aged 0–14 years.

In 2009, 7.2% of all Australians with disability were children aged 0–14 years.

Between 2003 and 2009 the proportion of all Australians with a disability decreased from 20% to 18%, while the proportion of children aged 0–14 years with a disability decreased from 8.2% to 7.0%.

Children with a disability

The severity of a child's disability may be determined according to their reported limitations, ranging from those without a specific limitation or restriction, those with only a schooling limitation or restriction, to those with core-activity limitations ranging from profound/severe to moderate/mild.

Of all children with a disability, over half (57%) had a profound or severe disability and one fifth (18%) had a moderate or mild disability. A further 11% of children with a disability were not limited in core activities, but restricted in schooling, with the remaining 14% neither limited in core activities or schooling.

...age and sex

Disability rates increased with age, from 3.4% of children aged 0–4 years to 8.8% of those aged 5–14 years.

The rate and severity of disability was higher among boys than girls. Boys aged 0–14 years were more likely to have a disability (8.8%) than girls (5.0%). Boys aged 5–14 years were nearly twice as likely (11.4%) to have a disability than girls aged 5–14 years (6.1%).

In 2009, boys aged 0–14 years were more likely to have disability (8.8%) than girls (5.0%).

Boys were also more limited in their core activities than girls, with 60% of boys with a disability reporting severe or profound limitations, compared with half (50%) of girls with a disability. Young boys (aged 0–4 years) with a disability were especially more likely to have severe or profound core activity limitations (74%) compared with young girls (55%).

Disability groups

The types of disability that affect children vary somewhat with age. Of young children aged 0–4 years who had a disability, almost two-thirds (63%) had a sensory (e.g. sight and

Children aged 0–14 years with a disability by core limitation by age and sex – 2009

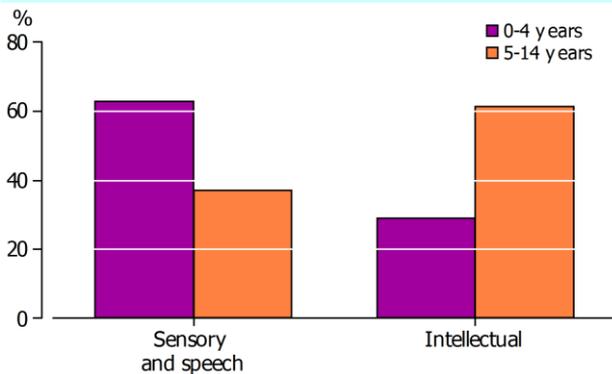
Core limitation	Boys			Girls			Total		
	0-4 yrs	5-14 yrs	Total	0-4 yrs	5-14 yrs	Total	0-4 yrs	5-14 yrs	Total
	%	%	%	%	%	%	%	%	%
Profound/severe	74.4	57.8	60.3	55.1	48.9	50.1	66.6	54.8	56.7
Moderate/mild	**4.4	17.3	15.3	**4.1	25.5	21.4	*4.3	20.1	17.5
Has disability, not limited in core activities, restricted in schooling	–	14.0	11.9	–	13.1	10.6	–	13.7	11.4
Has disability, not limited in core activities or restricted in schooling	21.2	10.9	12.5	40.7	12.5	17.9	29.1	11.5	14.4
Total children with a disability (%)	100.0								
Total children with a disability ('000)	28.1	159.5	187.5	19.2	81.6	100.8	47.3	241.0	288.3
Disability rate	3.9	11.4	8.8	2.8	6.1	5.0	3.4	8.8	7.0

* Estimate has a relative standard error of 25% to 50% and should be used with caution.

** Estimate has a relative standard error greater than 50% and should be used with caution.

Source: ABS 2009 Survey of Disability, Ageing and Carers

Children with a disability, selected disability group(a) by age – 2009



(a) Children can be classified into more than one disability group.

Source: ABS 2009 Survey of Disability, Ageing and Carers

hearing) or speech disability. In contrast, just over one third (37%) of children aged 5–14 years had sensory or speech impairments.

Older children were more likely than younger children to have an intellectual disability. In 2009, almost two thirds (61%) of children aged 5–14 years with a disability had an intellectual disability, more than twice the proportion of children aged 0–4 years with an intellectual disability (29%). This may be partly due to the lack of formal intellectual testing in very young children, who may be unable to sit and concentrate for assessment.

Physical disabilities were also commonly reported by both young (35%) and older children (27%) with a disability.

Long-term conditions of children with a disability

Children may experience a variety of long-term conditions, though only some of these conditions will have a disabling impact. For example, some children with asthma may have a disability as a result, while other children will not. Children may also have multiple conditions at any one time.

The types of conditions most commonly reported amongst children were mental or behavioural disorders, which affected over three in five (63%) children with a disability in 2009 up from 53% in 2003. Asthma was also common, with 18% of children with a disability having asthma in 2009, although this was down from 24% in 2003.

...mental or behavioural disorders

The type of long-term condition affecting children with a disability varied according to age and sex. Mental and behavioural disorders were more common amongst boys (69%) than girls (52%) aged 0–14 years with a disability in 2009.

Disability groups

Disabilities can be broadly grouped depending on whether they relate to functioning of the mind or the senses, or to anatomy or physiology. A person could be classified to one or more of the following six disability groups.

- Sensory or speech
- Intellectual
- Physical
- Psychological, including mental illness
- Head injury, stroke or brain damage
- Other

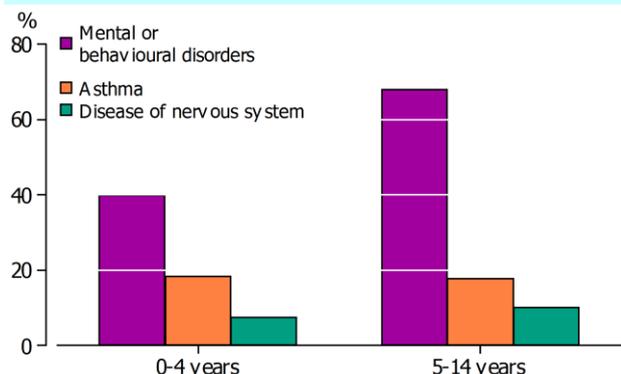
Long-term condition

A disease or disorder which has lasted or is likely to last for at least six months; or a disease, disorder or event (e.g. accident) which produces an impairment or restriction which has lasted or is likely to last for at least six months.

Older children with a disability were more likely than younger children to be affected by mental or behavioural disorders. Almost three quarters (74%) of boys and over half (56%) of girls aged 5–14 years with a disability reportedly had a mental or behavioural disorder. In contrast, less than half (42%) of boys and just over one third (36%) of girls aged 0–4 years with a disability had a mental or behavioural disorder, though this was still the most commonly reported condition among this age group.

The diagnosis of mental disorders in younger children is very complex. Often children do not receive formal diagnosis until they reach school age. This is in recognition of individual differences and transient circumstances during a child's life, which may affect their behaviour or development.⁵

Proportion of children with a disability(a) by selected long-term conditions and age – 2009



(a) Conditions which have lasted, or are expected to last, six months or more.

Source: ABS 2009 Survey of Disability, Ageing and Carers

...autism

In 2009, autism and related disorders were the most commonly reported mental or behavioural disorder among children with a disability. One in eight (13%) children aged 0–14 years with a disability were reported as having autism or related disorders, a twofold increase since 2003 (6.2%). Boys with a disability were more likely than girls to experience autism and related disorders. In 2009, 17% of boys aged 0–14 years with a disability had autism and related disorders, compared with 6.9% of girls.

In 2009, 17% of boys aged 0-14 years with a disability had autism and related disorders, compared with 6.9% of girls.

...asthma

The proportion of children with a disability who had asthma was the same in both the younger and older age groups (18%). This was consistent with the similar (but higher) rates for these age groups in 2003 (23% and 24% respectively). The reduction in the number of children with a disability having asthma between 2003 and 2009 may help to explain the decrease in the overall rate of disability among children aged 0–14 years between 2003 and 2009. Over this time, improved evidence-based care has increased the understanding of this condition and its treatment in children.⁶

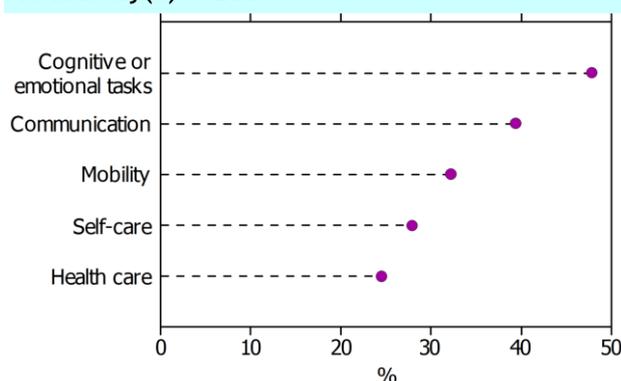
Need for assistance

In 2009, around two thirds (67%) of children with a disability required assistance with day to day activities. Around half (48%) of all children with a disability required assistance with cognitive or emotional activities such as decision making or thinking through problems, coping with feelings or emotions, and making friendships, maintaining relationships or interacting with others. Other activities that children with a disability might have required assistance with included communication (39%), mobility (32%), self-care (28%) and health care (25%).

...assistance received

In 2009, the vast majority (95%) of the 192,500 children aged 0–14 with a disability with a need for assistance were receiving some form of assistance. Nine in ten (91%) were receiving informal assistance, such as from family or friends, while nearly seven in ten (67%) were receiving formal paid assistance. Many children (63%) with a disability who required assistance received a combination of formal and informal care.

Proportion of children aged 0-14 years with a disability who had a need for assistance by type of activity(a) – 2009



(a) Proportions may add up to more than 100% as respondents could report needing assistance for more than one activity.

Source: ABS 2009 Survey of Disability, Ageing and Carers

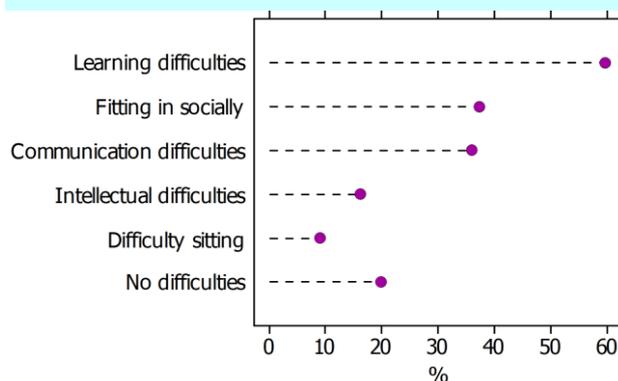
However, around half (52%) of children with a disability who had a need for assistance reported having their needs only partly met, while a small group (2.0%) reported not having their needs met at all.

Schooling

Regardless of where their education is received, children with a disability have the right to the same educational opportunities as all Australian children.⁷

Nearly all (98%) school aged (5–14 years) children with a disability in 2009 attended school. Two in five (40%) had a severe schooling restriction and another two in five (36%) had a moderate schooling restriction. Over one in five (22%) school aged children with a disability had no schooling restrictions.

Children with a disability attending school(a) by selected difficulties experienced at school(b) – 2009

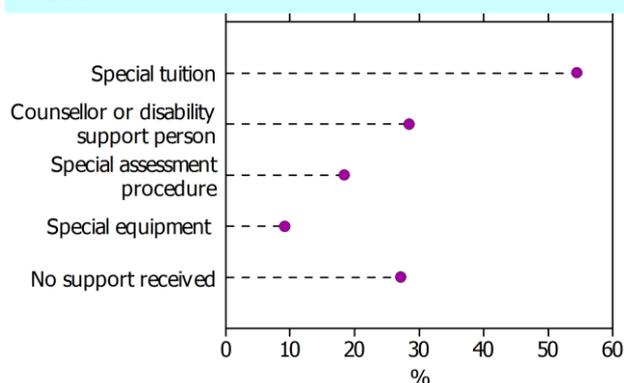


(a) With a schooling restriction.

(b) Can be in more than one category.

Source: ABS 2009 Survey of Disability, Ageing and Carers

Children with a disability attending school(a) by selected type of support received at school(b) – 2009



(a) With a schooling restriction.

(b) Can be in more than one category.

Source: ABS 2009 Survey of Disability, Ageing and Carers

...type of difficulty experienced at school

Of school aged children with a disability who reported having a schooling restriction, three in five (60%) reported having learning difficulties, while over a third were reported as having difficulties fitting in socially (37%) or communication difficulties (36%). One in five (20%) school aged children with a disability who had a schooling restriction had no difficulties.

...type of school support

There are a range of different support and assistance options available for school children with a disability. In 2009, over half (54%) of school children (5–14 years) with a disability who had a schooling restriction accessed special tuition, with over one quarter (28%) accessing the assistance of a counsellor or disability support person.

Impact of caring on parents

As much of the assistance or care provided to children with a disability comes through informal channels, the costs or impacts of this care are important to consider. The person who provides the most ongoing informal assistance to a person with a disability, in terms of help or supervision with the core activities of communication, mobility and self-care, is referred to as their 'primary carer'. This role is often taken on by parents if their child needs assistance.

In 2009, there were 96,000 primary carers whose main recipient of care was their own child aged 0–14 years. Over half (57%) of these primary carers reported that they needed an improvement or more support to assist them in their caring role. Almost two thirds (64%)

Disability support payments for children

There are a number of support payments available to parents and carers of children with a disability through the Department of Human Services (Centrelink).

The **Carer Payment** is a means tested financial support payment for those who are unable to work in substantial paid employment because they are providing full-time care to a child with a severe disability or medical condition.⁸

The **Carer Allowance** is a supplementary payment for parents or carers who provide additional daily care to a child with disability or medical condition.⁹

reported that the main financial impact of their caring role was a decreased income or an increase in their expenses. However financial costs were not the only impact experienced by parents caring for their children with a disability.

The physical, emotional and time costs of caring can also impact upon a carer's relationships and physical or emotional wellbeing. Half (50%) of parents who were primary carers for their child with a disability reported that their physical or emotional wellbeing had changed due to the caring role. Over one third (38%) of those primary carers with a spouse or partner stated that their relationship had become strained or that they lacked time together due to the caring role. However, a similar proportion (39%) reported that their caring role had brought them closer together.

Schooling restrictions

A schooling restriction is determined for children aged 5–14 years who have one or more disabilities if, because of their disability they: are unable to attend school; attend a special school; attend special classes at an ordinary school; need at least one day a week off school on average; have difficulty at school.

There are four levels of schooling restrictions, with a child's overall level of schooling restriction determined by their highest level of limitation in these activities:

- *Profound* – the child's condition prevents them from attending school;
- *Severe* – the child attends a special school or special classes; receives personal assistance; has a signing interpreter; receives special tuition; or receives assistance from a counsellor/disability support person;
- *Moderate* – the child often needs time off from school; has difficulty at school because of their condition(s); or has special assessment procedures;
- *Mild* – the child needs a special computer or other special equipment; special transport arrangements; special access arrangements; or other special arrangements or support services.

Looking ahead

Numerous measures have recently been introduced to address the needs of children with disabilities, their families and carers, as well as those in the wider community with a disability.

Significant evidence into the effectiveness of early childhood intervention for children with a developmental disability has prompted the introduction of the Commonwealth Government's 'Better Start for Children with a disability' program, which provides funding to assist families with the cost of early intervention therapies and treatments. A recent government commissioned report¹⁰ has suggested that this program be expanded to cover a broader range of developmental disorders, increasing the number of children and families able to access evidence-based early childhood intervention supports.

In addition to this report, a recent review of funding for schooling includes recommendations which would increase funding to schools for the additional costs of supporting students with a disability.¹¹

Finally, the introduction of the National Disability Insurance Scheme¹² aims to ensure that all children with significant and permanent disability are able to access the services and assistance they need.

Endnotes

- 1 Reichman N.E., Corman H., Noonan K., 2008, *Impact of child disability on the family*, Maternal and Child Health Journal, 12(6):679-683.
- 2 Productivity Commission, 2011, *Disability care and support: Productivity Commission Inquiry Report Overview and Recommendations*, No. 54, 31 July 2011, viewed 24 January 2012, <www.pc.gov.au>.
- 3 Council of Australian Governments, *2010-2020 National Disability Strategy*, 2011, viewed 18 March 2012, <www.coag.gov.au>.
- 4 Commonwealth Government, *Better Start for Children with a disability initiative*, viewed 18 May 2012, <www.fahcsia.gov.au>.
- 5 Egger H.L. and Angold A., 2006, *Common emotional and behavioural disorders in preschool children: presentation, nosology, and epidemiology*, Journal of child psychology and psychiatry 47:3/4, pp. 313-337.
- 6 Van Asperen P.P., Mellis C.M., Sly P.D. and Robertson C.F., 2011, *Evidence-based asthma management in children – what's new?*, Medical Journal of Australia 194(8), pp. 383-384, <www.mja.com.au>.
- 7 United Nations Children's Fund, 2007, *Promoting the rights of children with disabilities*, viewed 29 May 2012, <www.un.org>.
- 8 Department of Human Services, *Carer Payment*, viewed 31 January 2012, <<http://www.humanservices.gov.au>>.
- 9 Department of Human Services, *Carer Allowance*, viewed 31 January 2012, <<http://www.humanservices.gov.au>>.
- 10 KPMG Report to the Department of Families, Housing, Community Services and Indigenous Affairs, 30 September 2011, *Reviewing the evidence on the effectiveness of early childhood intervention*, viewed 3 January 2012, <www.fahcsia.gov.au>.
- 11 Australian Government, December 2011, *Review of funding for schooling - final report*, viewed 8 March 2012, <www.deewr.gov.au>.
- 12 Commonwealth Government, *National Disability Insurance Scheme*, viewed 18 May 2012, <www.ndis.gov.au>.

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