



Health & Wellbeing

Early Years & Youth Profile

April 2021

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Key insights

Moreland performs **at or above** the regional average for the following health & wellbeing areas:

- **Self-reported Health:** 86.7% of children were reported to be in excellent or very good health in 2019. This is higher than the average of 83% for Greater Melbourne.
- **Disability:** According to the 2016 Census, there were 886 people aged 0 to 24 requiring assistance with core activities in Moreland, or 2.1%. This is lower than the averages for Greater Melbourne (2.3%) and Victoria (2.5%). However, modelling suggests that an estimated 2,200 young people are living with disability in Moreland, or 4.8% of the population of young people.
- **Social, emotional, & communication developmental vulnerability:** The level of developmental vulnerability for children on school entry in Moreland is lower than the Victorian average for the social, emotional, and communication domains.
- **Health check-ups:** In 2019, 13.3% of children beginning primary school who live in Moreland had visited a paediatrician in the past year. This was slightly higher than the average for Greater Melbourne of 12.2%.
- **Oral check-ups:** In 2019, over half (53.4%) of children beginning primary school who live in Moreland had seen a dentist in the past year. This was slightly higher than the average for Greater Melbourne of 50.4%.
- **Teen-aged birth rate:** Teenage births (births for women aged 13-19 years) in Moreland were in decline between 2013 (12.1) and 2016 (7.8) and remains below the State average but slightly higher than the Metro North Area average.
- **Bullying:** A slightly lower proportion of children in Moreland report being bullied (15%) in comparison to Victoria (15.9%) at the Year 5 to 6 levels. This difference is more apparent among children in Years 7 to 9, where 14.7% of Moreland children report bullying in comparison to the Victorian proportion (17.5%).
- **Alcohol & drug use:** In 2019, 2% of parents in Moreland reported that there was a drug or alcohol problem in their family. This was slightly lower than Greater Melbourne (2.8%).
- **Gambling:** In 2019 in Moreland there were fewer reports of a gambling problem in the family (0.3%) compared to that in Greater Melbourne (0.6%) and Victoria (0.7%).
- **Access to playgrounds:** In 2018, the average distance to a playground was 460 meters in Moreland. This is a shorter distance than neighbouring Darebin (521m) and Moonee Valley (499m).
- **Travel to work:** Over half (53%) of young people aged 15-24 years travel to work using private transport, the majority of whom drive a car. This is much lower than the Greater Melbourne average of 71%. A further 38% take public transport to get to work, with the majority of public transport users taking the train. Public transport usage as a method of travel to work is much higher in Moreland than the Greater Melbourne average.
- **Family violence:** Just under a quarter (24%) of family violence incidents recorded a child or children being present in 2019. This is lower than neighbouring local government areas of Darebin (26%), Moonee Valley (26%), and Hume (33%).

Moreland performs **below** the regional average for the following physical and mental health areas:

- **Physical & language developmental vulnerability:** The level of developmental vulnerability for children on school entry in Moreland is higher than the Victorian average for the physical and language domains.
- **Hospital Admissions:** Between 2019-2020, Moreland had a higher ratio of hospital admissions for children and young people (1.10) than the Victoria average (1.0), and nearby Councils: Moonee Valley (0.97), Darebin (0.94) and Maribyrnong (0.89).
- **Maternal & child health centre visits:** In 2019, 68.4% of children beginning primary school who live in Moreland reported to have attended a Maternal & Child Health Centre for the 3.5-year-old check. This was slightly lower than the average for Greater Melbourne of 70.0%.
- **History of mental illness of parents:** According to the School Entrant Health Questionnaire 2019, history of mental illness of parents is higher in Moreland (8.1%) than in Greater Melbourne (6.6%).
- **Behavioural & developmental concerns:** In 2019, over half of children in Moreland have a high (23.6%) or moderate (31.4%) risk of developmental and behavioural problems. This is slightly higher than the average for Greater Melbourne (High: 22.3%, Moderate: 28%).

Physical health

Physical health refers to the condition of an individual's body and the extent to which it is affected by disability, illness and disease. Many people live with chronic conditions, which are the leading cause of illness, disability and death in Australia. For children in Australia, the most common illnesses include asthma, hay fever and allergic rhinitis, anxiety-related problems, psychological development problems, and food allergy.

Health reflects the complex interactions of a person's genetics, lifestyle and environment and is fundamental to overall wellbeing. For children and young people, the habits they develop and spaces they access support long-term health and wellbeing¹. The health of children and young people impacts on weight, diet, physical activity, and likelihood of developing chronic diseases later in life.

Health status

Self-reported health status

The School Entrant Health Questionnaire (SEHQ) is completed by a child's parent or carer and reflects parental responses and concerns. The report is based on the child's residential postcode, and therefore refers to children living in Moreland rather than children studying in Moreland.

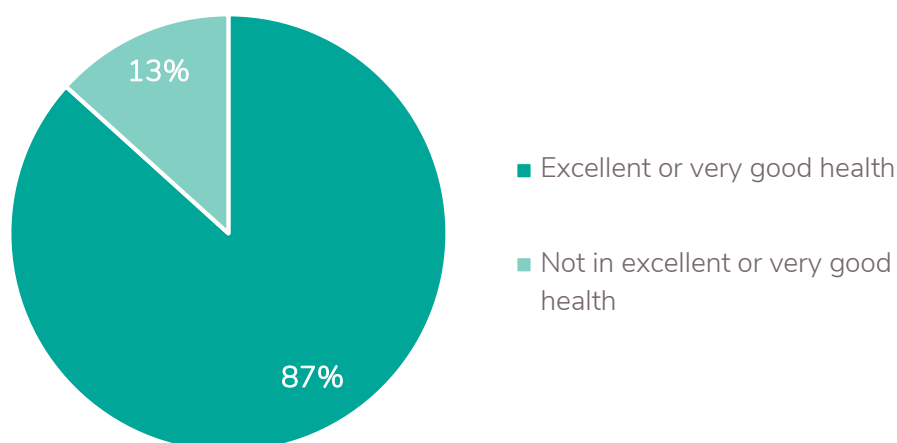
87% of children were reported to be in excellent or very good health in 2019. This is slightly higher than the average of 83% for Greater Melbourne. A much higher percentage of children reported to be in excellent or very good health (87%) compared with the overall population of Moreland (38%).

Table. Children reported to be in excellent or very good health

Health status	Moreland	Greater Melbourne
Children reported to be in excellent or very good health	86.7%	83.0%
Children not reported to be in excellent or very good health	13.3%	17.0%

Source: School Entrant Health Questionnaire 2019

Self-reported health status of children entering school 2019



¹ Gasser, C, Evans-Whipp, T & Terhaag, S 2019, 'The physical health of Australian children', LSAC Annual Statistical Report 2018 chapter – December 2019, Growing up in Australia, pp. 9-28.

Developmental vulnerability

The Australian Early Development Census (AEDC) measures the development of children in Australia in their first year of full-time school. Data is collected across five domains: Physical, Social, Emotional, Language, and Communication. For each of these five domains, children receive a score between zero and ten, where zero is most developmentally vulnerable.

20% of children in Moreland reported being developmentally vulnerable in one or more domains, which is consistent with the Victorian average (19.9%). A slightly higher percentage of children in Moreland reported being developmentally vulnerable on two or more domains (10.6%) than the Victorian average (10.1%).

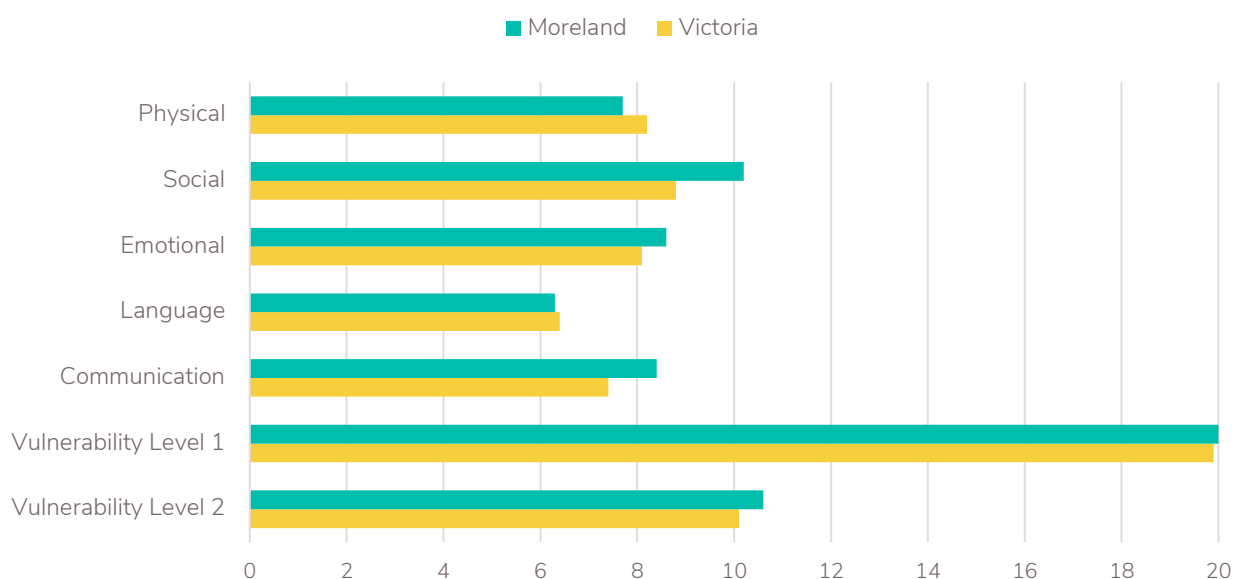
The level of developmental vulnerability in Moreland is higher than the Victorian average for the physical and language domains and is lower than the Victorian average for the social, emotional, and communication domains.

Table. Developmental vulnerability in Moreland (5-6 years)

Developmental vulnerability domain	Moreland	Victoria
Physical Child is ready each day, healthy & independent, and has excellent gross & fine motor skills	7.7	8.2
Social Child gets along with others and shares, is self-confident	10.2	8.8
Emotional Child is able to concentrate, help others, is patient, not aggressive or angry	8.6	8.1
Language Child is interested in reading or writing, can count and recognize numbers and shapes	6.3	6.4
Communication Child can tell a story, communicate with adults and children, articulate themselves	8.4	7.4
Vulnerability Level 1 Developmentally vulnerable on one or more domains	20.0%	19.9%
Vulnerability Level 2 Developmentally vulnerable on two or more domains	10.6%	10.1%

Source: Australian Early Development Census 2018

Developmental vulnerability domains in Moreland and Victoria



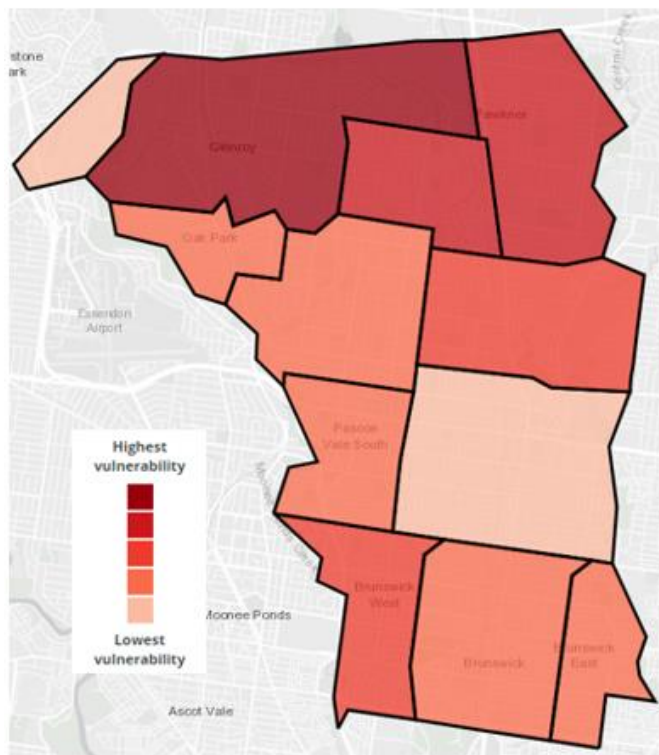
Glenroy (32.3) and Fawkner (25.5) have the highest rate of developmental vulnerability level 1 in Moreland, meaning children who are developmentally vulnerable in one or more domains. Coburg (12.4) and Brunswick East (12.8) have the lowest rates of developmental vulnerability level 1.

Table. Developmental vulnerability by suburb (5-6 years)

Suburb	Vulnerability Level 1 Developmentally vulnerable on one or more domains	Vulnerability Level 2 Developmentally vulnerable on two or more domains
Brunswick	13.6	5.6
Brunswick East	12.8	6.4
Brunswick West	21.9	8.8
Coburg	12.4	6.7
Coburg North	21.1	9.5
Fawkner	25.5	12.8
Glenroy	32.3	18.3
Gowanbrae	3.7	0.0
Hadfield	23.4	13.0
Oak Park	16.9	9.9
Pascoe Vale	17.5	9.2
Pascoe Vale South	14.8	11.5

Source: Australian Early Development Census 2018

Map: Vulnerability Level 1 by suburb



Disability

Disability & Severe disability

This profile draws on two types of disability data to provide an overall view of disability in Moreland. For more information on disability in Moreland see the [Moreland City Council Disability Brief](#).

1. The Australian Bureau of Statistics Population Census defines severe disability based on the concept of 'needing assistance with core activities'. More specifically, it counts the number of people who need assistance in their day to day lives with any or all of the following activities – self-care, mobility or communication because of a disability, long-term health condition or old age.

2. The Australian Bureau of Statistics Survey of Disability, Ageing and Carers (SDAC) is a national survey that includes data on disability by age and type but does not produce municipal-level population statistics. Using the relationship between age and disability identified in the SDAC, modelling was conducted by ID consulting on behalf of Moreland City Council to estimate the total number of people living with a disability in Moreland by age group.

According to the ABS Population Census, there were 886 young people aged 0 to 24 requiring assistance with core activities in Moreland, of 2.1% of this population. However, modelling suggests that an estimated 2,200 young people are living with disability in Moreland, or 4.8% of the population of young people. According to the ABS Population Census, the proportion of young people living with severe disability in Moreland (2.1%) was lower than the averages for Greater Melbourne (2.3%) and Victoria (2.5%) in 2016.

Table. Disability and severe disability by age group

Age (years)	Persons living with severe disability (ABS Census estimate)*		Persons living with disability (modelled estimate)^	
	Persons	%	Persons	%
0-4 years	90	1.0%	200	2.0%
5-9 years	238	2.9%	600	6.8%
10-14 years	202	3.0%	400	5.9%
15-19 years	160	2.4%	400	4.9%
20-24 years	197	1.6%	600	4.5%
Total	886	2.1%	2,200	4.8%

Source: *Australian Bureau of Statistics Population Census 2016; ^Propensity for disability based on Census core activity need for assistance and Survey of Disability, Ageing and Carers (SDAC). The SDAC propensity modelling was undertaken by ID community on behalf of Moreland City Council in 2019.

Severe disability and estimated disability for young people in Moreland

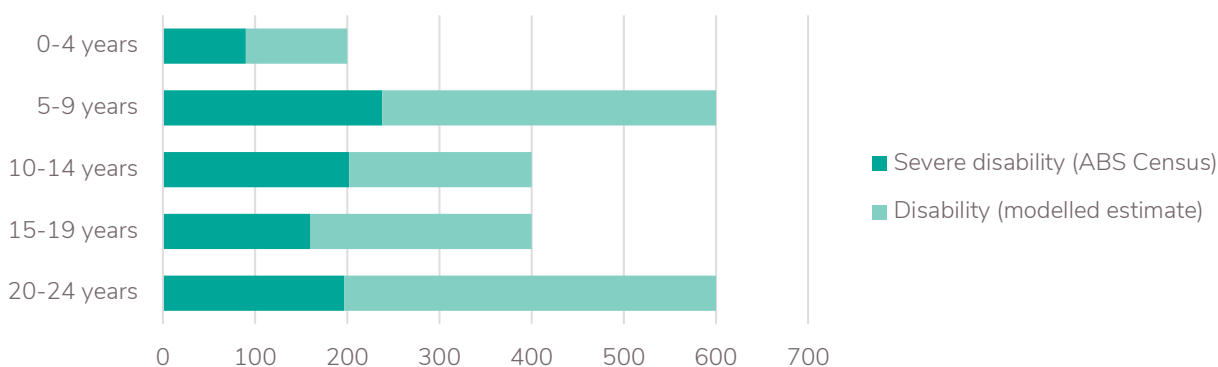


Table. Need for assistance with core activities in Moreland, Greater Melbourne, and Victoria

Age (years)	Moreland (%)	Greater Melbourne (%)	Victoria (%)
0-4 years	1.0%	1.2%	1.2%
5-14 years	3.0%	3.2%	3.4%
15-24 years	1.9%	2.0%	2.3%
Total	2.1%	2.3%	2.5%

Source: Australian Bureau of Statistics Population Census 2016

Types of assistance needed

The most common type of assistance needed among young people in Moreland is oral communication or cognitive tasks (approximately 1,900 young people), self care or health care (approximately 1,000 young people), and mobility (approximately 1,000 young people).

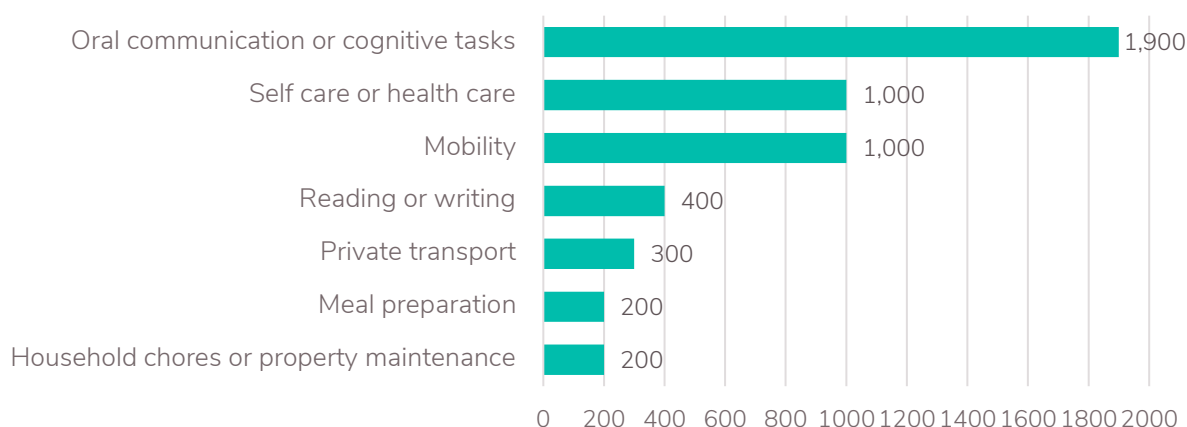
Household chores or property maintenance is the least common type of assistance needed among young people in Moreland, but it is the most common type of assistance needed among all age groups in Moreland.

Table. Types of assistance needed for young people in Moreland (modelled estimates)

Type of assistance needed	Young people living with disability	Type of assistance needed as a % of total needing assistance in one or more category
Oral communication or cognitive tasks	1,900	86%
Self care or health care	1,000	45%
Mobility	1,000	45%
Reading or writing	400	18%
Private transport	300	14%
Meal preparation	200	9%
Household chores or property maintenance	200	9%

Source: Propensity for disability based on Census core activity need for assistance and Survey of Disability, Ageing and Carers (SDAC). The SDAC propensity modelling was undertaken by ID community on behalf of Moreland City Council in 2019.

Types of assistance needed for young people aged 0-24 in Moreland (modelled estimates)



Health check-ups

Regular health check-ups are an important way to maintain health status and identify illness early for children and young people. For children, regular health checks include dental checks, regular weight and height checks, and regular eyesight and hearing checks. For young people, regular health check-ups can also include sexual and reproductive health checks and regular skin checks².

Health check-ups

In 2019, 13.3% of children beginning primary school who live in Moreland had visited a paediatrician in the past year. This was slightly higher than the average for Greater Melbourne of 12.2%.

Table. Children reported to have seen a paediatrician in the past year (Early Years)

Children reported to have seen a paediatrician in the past year	Moreland	Greater Melbourne
Visited a paediatrician	13.3%	12.2%
Did not visit a paediatrician	86.7%	87.8%

Source: School Entrant Health Questionnaire 2019

Proportion of children beginning primary school who had visited a paediatrician in the past year

■ Visited a paediatrician ■ Did not visit a paediatrician



Oral check-ups

In 2019, over half (53.4%) of children beginning primary school who live in Moreland had seen a dentist in the past year. This was slightly higher than the average for Greater Melbourne of 50.4%.

Table. Children reported to have seen a dentist in the past year (Early Years)

Children reported to have seen a dentist in the past year	Moreland	Greater Melbourne
Visited a dentist	53.4%	50.4%
Did not visit a dentist	46.7%	49.6%

Source: School Entrant Health Questionnaire 2019

Proportion of children beginning primary school who had seen a dentist in the past year

■ Visited a dentist ■ Did not visit a dentist



² KidSpot 2017, 'Health check ups: Who needs them and when?', KidSpot.

Hospital Admissions

Potentially preventable hospitalisations are instances where admission to hospital for a condition where the hospitalisation could have potentially been prevented through the provision of appropriate individualised preventative health interventions and early disease management usually delivered in primary care and community-based care settings. Examples of potentially preventable hospitalisations include vaccine-preventable conditions and certain chronic and acute conditions. High rates of potentially preventable hospital admissions may provide indirect evidence of problems with patient access to primary healthcare, inadequate skills and resources, or disconnection with specialist services.

The data presented below uses admission rate ratio data for potentially preventable hospitalisations which is compared to Victoria (Victoria = 1). For children and young people aged 0-24, Moreland has a higher ratio rate than Victoria at 1.10 and is likewise higher than nearby Councils: Moonee Valley (0.97), Darebin (0.94), and Maribyrnong (0.89). The Moreland ratio for children and young people is lower than neighbouring Hume.

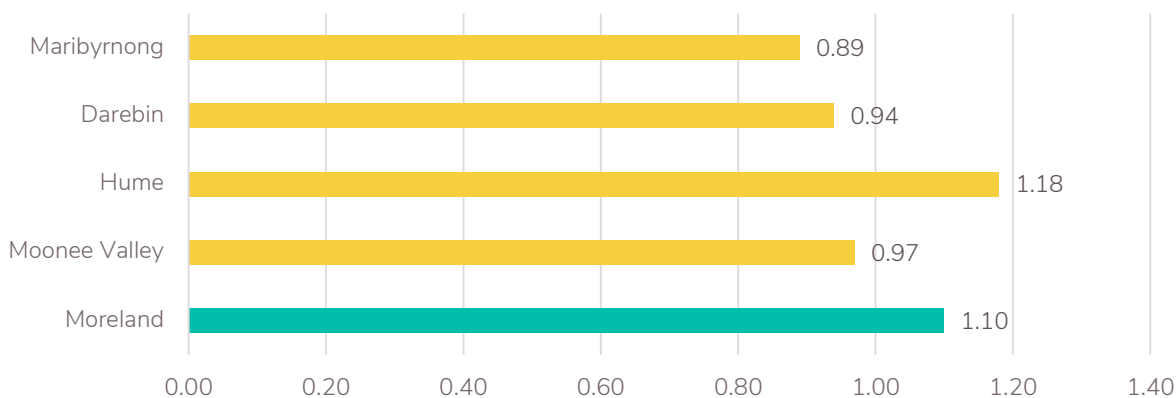
Rate Ratio: The age standardised rate for an area is the number of hospital admissions, usually expressed per 1,000, that would occur in that area if it had the same age structure as the standard population and the local age-specific rates of the area applied³.

Table. Rate ratio of hospital admissions (Total ACSC) for those between ages 0-24 by LGA between 2019-2020

LGA	Moreland	Moonee Valley	Hume	Darebin	Maribyrnong
Rate Ratio*	1.10	0.97	1.18	0.94	0.89

Source: Victorian Health Information Surveillance System 2020

Rate ratio* of hospital admissions (Total ACSC) for those between ages 0-24 by LGA between 2019-2020



Source: VHISS 2020

³ Victorian Health Information Surveillance System 2020

Maternal & child health

Maternal and Child Health Centre visits

In 2019, 68.4% of children beginning primary school who live in Moreland reported to have attended a Maternal & Child Health Centre for the 3.5-year-old check. This was slightly lower than the average for Greater Melbourne of 70.0%.

Table. Children reported to have attended a Maternal and Child Health Centre for the 3.5-year-old check

Children reported to have attended a Maternal & Child Health Centre for the 3.5-year-old check	Moreland (%)	Greater Melbourne (%)
Attended a Maternal & Child Health Centre	68.4%	70.0%
Did not attend a Maternal & Child Health Centre	31.6%	30.0%

Source: School Entrant Health Questionnaire 2019

Proportion of children beginning primary school who reported attending a Maternal & Child Health Centre for the 3.5-year-old check.

■ Attended a Maternal & Child Health Centre ■ Did not attend a Maternal & Child Health Centre



Breastfeeding rates

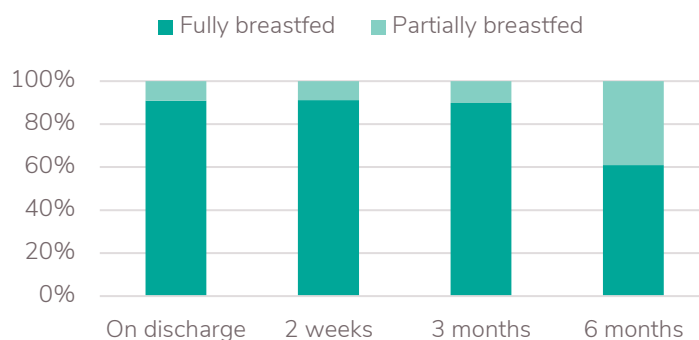
In 2018/19, there was a 90% breastfeeding rate at 3 months and a 60% breastfeeding rate at 60 months.

Table. Full and partial breastfeeding in Moreland in 2018/19 across four ages.

Age of child	Fully breastfed	Partially breastfed
On discharge	90.9%	9.1%
2 weeks	91.2%	8.8%
3 months	89.8%	10.2%
6 months	60.3%	38.7%

Source: MCC Maternal & Child Health 2019

Full and partial breastfeeding in Moreland in 2018/19



Immunisation rates

Immunisation data is available at the Statistical Area 3 (SA3) level. In Moreland, this means data is divided into Brunswick-Coburg, and Moreland-North.

At 12-15 months, Brunswick-Coburg has a slightly higher percent of children who are fully vaccinated than the North Western Melbourne Region, and Moreland North has a slightly lower percentage. At 24-27 months, both Brunswick-Coburg and Moreland-North perform slightly higher than the North Western Melbourne Region average.

Table. Percent of children who are fully vaccinated at 12-15 months and 24-27 months.

Region (SA3)	12-15 months	24-27 months
Brunswick - Coburg	95.6%	93.4%
Moreland-North	94.1%	92.4%
North Western Melbourne Region*	95%	92%

*North Western Melbourne Region includes Moreland, Melbourne, Yarra, Darebin, Moonee Valley, Maribyrnong, Hobsons Bay, Wyndham, Brimbank, Melton, Hume, Macedon Ranges, and Moorabool.

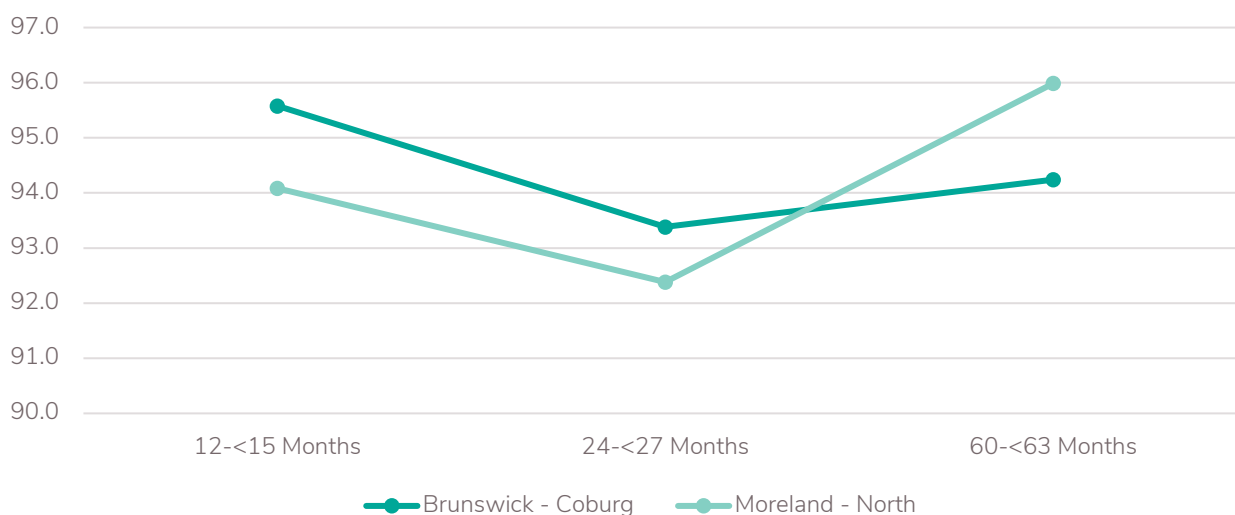
Source: Department of Health/Australian Immunisation Register 2020

Table. Breakdown of vaccination type

Region (SA3)	Age Group	% Fully Vaccinated
Brunswick - Coburg	12-<15 Months	95.6
	24-<27 Months	93.4
Moreland - North	12-<15 Months	94.1
	24-<27 Months	92.4

Source: Department of Health/Australian Immunisation Register 2020

Immunisation rates by age group at the SA3 level and immunisation types
(01 October 2019 - 30 September 2020).



Sexual and reproductive health

Birth rates in Moreland

In 2018/19 there were 2,727 births in Moreland. This was a decrease of 92 births from the previous year. Teenage births (births for women aged 13-19 years) in Moreland were in decline between 2013 (12.1) and 2016 (7.8) and remains below the State average but slightly higher than the Metro North Area average.

Table. Birth notifications in Moreland

Year	Birth notifications
2018/19	2,727
2017/18	2,819
2016/17	2,763
2015/16	2,716

Source: MCC Maternal & Child Health 2019

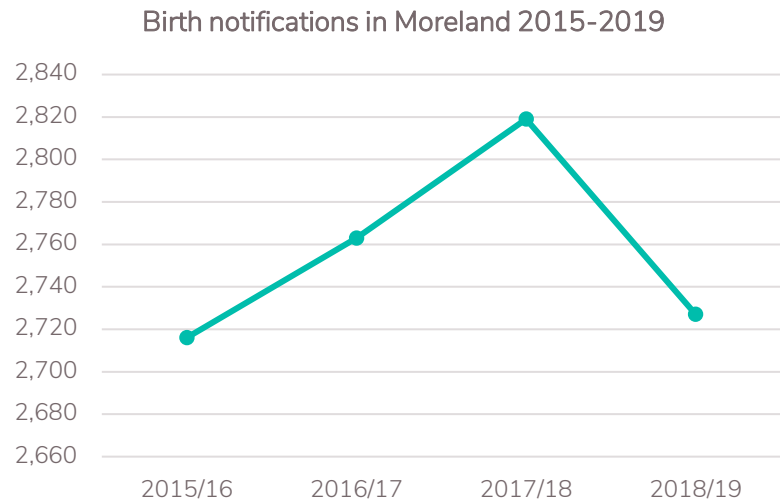
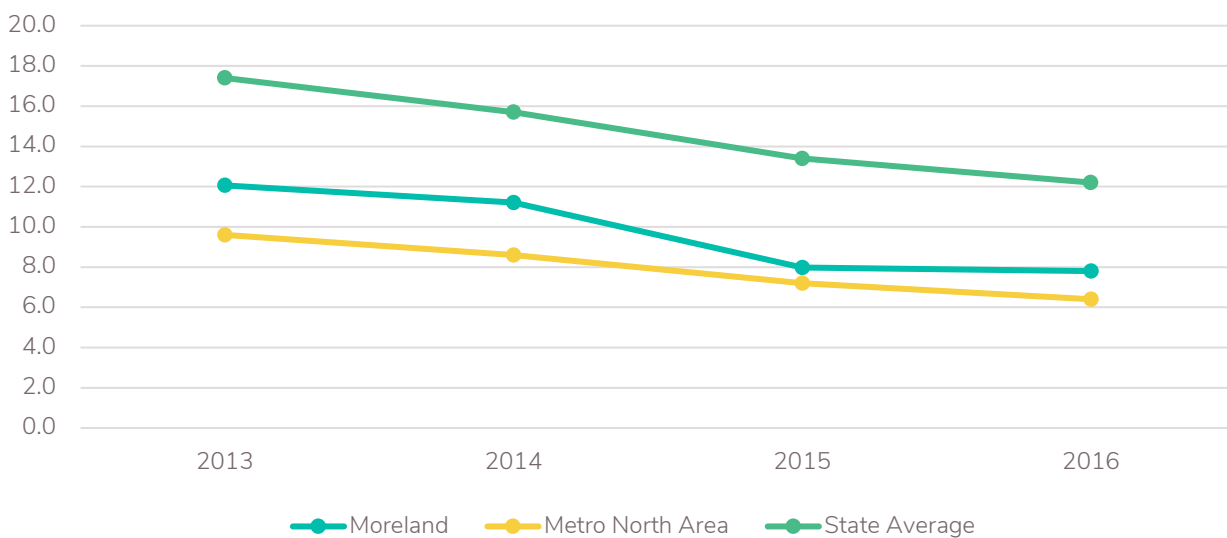


Table. Birth rate for women aged 13-19 years in a two-year aggregate (per 1,000)

Year	Moreland	Metro North Area	State Average
2016	7.8	6.4	12.2
2015	7.97	7.2	13.4
2014	11.2	8.6	15.7
2013	12.1	9.6	17.4

Source: Women's Health Victoria 2020

Birth rate for women aged 13-19 years in a two year aggregate



Sexually-transmitted infections

The largest proportion of sexually transmitted infections in Moreland occur among 20-24 year-olds. Female young people make up the majority of Chlamydia infections and male young people make up the majority of Gonorrhoea infections.

Table. Individuals with Chlamydia and Gonorrhoea by age and gender in Moreland 2019

Age	Chlamydia			Gonorrhoea		
	Female	Male	Other	Female	Male	Other
10-14	-	-	-	-	-	-
15-19	28	15	-	6	6	-
20-24	108	97	1	11	51	1
Total by sex	136	112	1	17	57	1
Total	249			75		

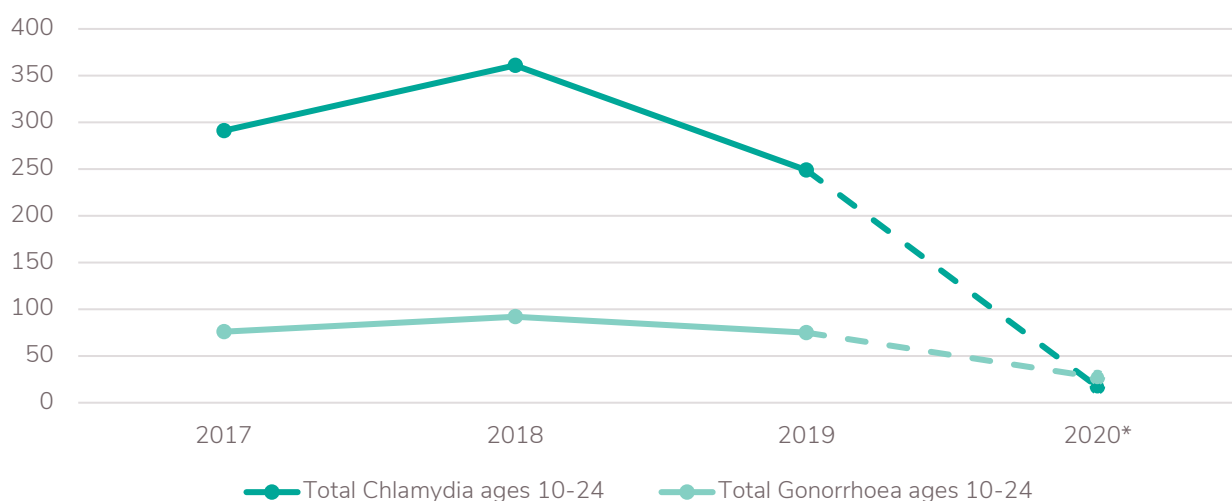
Source: DHHS/Local Government Areas Surveillance Report 2020.

Table. Trends in Chlamydia and Gonorrhoea 2017-2020

Year	Total Chlamydia ages 10-24	Total Gonorrhoea ages 10-24	*Note: Data reported in 2020 has been impacted by the Covid-19 pandemic and is likely an underrepresentation of total numbers.
2020*	17	27	
2019	249	75	
2018	361	92	
2017	291	76	

Source: Women's Health Victoria/ DHHS/Local Government Areas Surveillance Report 2020

Trends in Chlamydia and Gonorrhoea 2017-2020



Mental health

Mental illness & developmental concerns

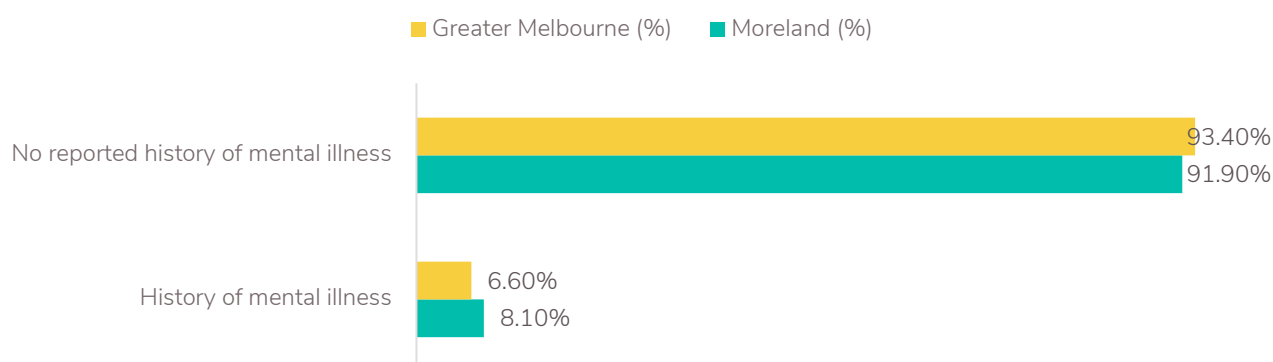
History of mental illness of parents

According to the School Entrant Health Questionnaire 2019, history of mental illness of parents is higher in Moreland (8.1%) than in Greater Melbourne (6.6%).

Table. History of mental illness of parents (Early Years)

History of mental illness of parents	Moreland (%)	Greater Melbourne (%)
History of mental illness	8.1%	6.6%
No reported history of mental illness	91.9%	93.4%

History of mental illness of parents 2019



Source: School Entrant Health Questionnaire 2019

Behavioural & developmental concerns

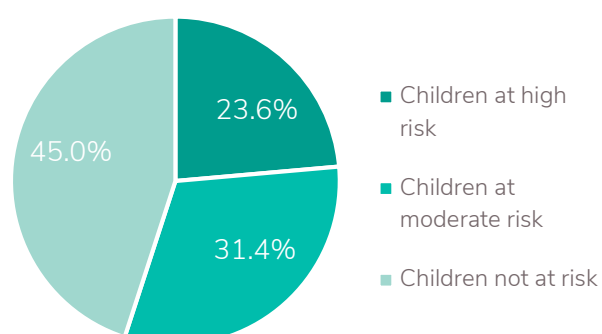
In 2019, over half of children in Moreland have a high (23.6%) or moderate (31.4%) risk of developmental and behavioural concerns. This is slightly higher than the average for Greater Melbourne (High: 22.3%, Moderate: 28%).

Table. Children at high risk of developmental or behavioural concerns (Early Years)

Risk of developmental and behavioural concerns	Moreland (%)	Greater Melbourne (%)
Children at high risk	23.6%	22.3%
Children at moderate risk	31.4%	28.0%
Children not at risk	45.0%	49.7%

Source: School Entrant Health Questionnaire 2019

Risk of developmental & behavioural concerns among children in Moreland 2019



Bullying

Reports of being bullied

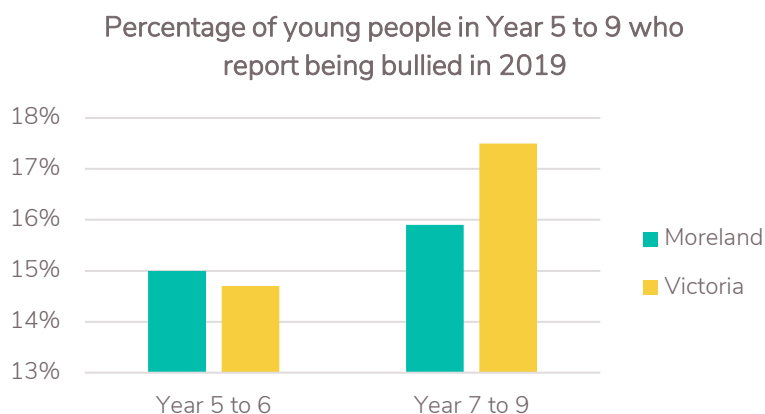
The National Centre Against Bullying defines bullying as an “ongoing and deliberate misuse of power in relationships through repeated verbal, physical and/or social behaviour that intends to cause physical, social, and/or psychological harm” (NCAB 2021). Bullying can happen face-to-face or online and is linked to negative physical and mental health outcomes for children and young people.

Bullying has many long-term effects including social and emotional impact, physical impact, academic impact, and impact on family⁴. Research also shows that many of these effects last into adulthood.

Overall, a lower proportion of children and young people in Moreland (14.9%) reported being bullied in 2019 than the Victorian average (16.7%). This is true across all ages surveyed (Years 5 to 9), but the difference is more prominent among young people in Years 7 to 9, where 14.7% of respondents reported bullying compared to 17.5% in Victoria.

Table. Proportion of young people who report being bullied (2019)

Year	Moreland	Victoria
Year 5 to 6	15.0%	15.9%
Year 7 to 9	14.7%	17.5%
Overall	14.9%	16.7%



Source: Department of Education and Early Childhood Development 2019

⁴ Gordon, S 2020, 'The Long-Lasting Effects of Bullying', Very Well Family.

Alcohol, tobacco, drugs & gambling environment

Alcohol & drug use

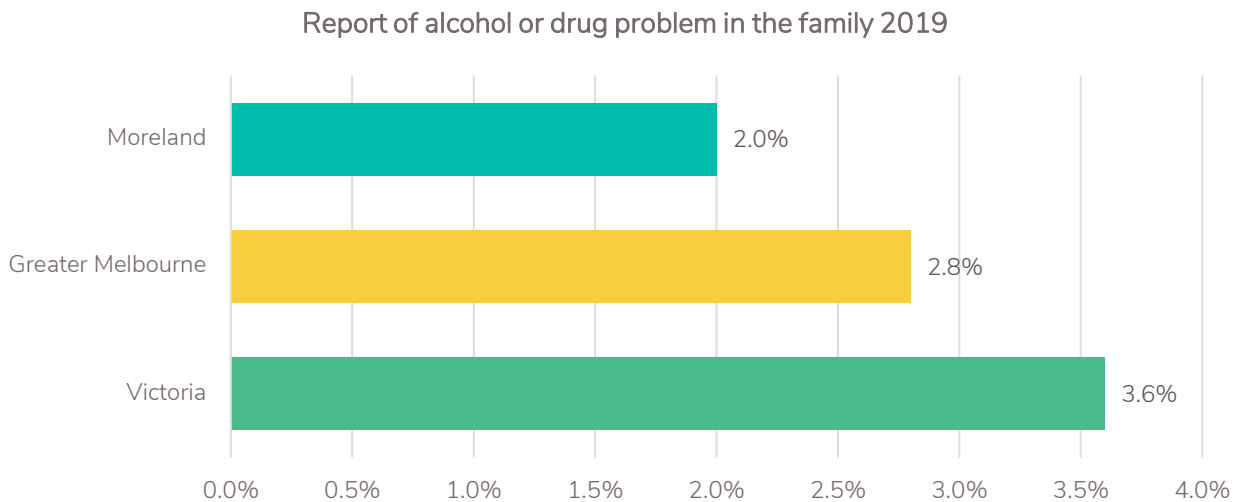
Over consumption and abuse of alcohol pose a risk to health and can also impact family relationships, exacerbate domestic violence, and create financial and social stress⁵. In 2019, 2% of parents of children on school entry in Moreland reported that there was a drug or alcohol problem in their family. This was lower than Greater Melbourne (2.8%) and Victoria (3.6%).

Note: This data was self-reported by the parents of children on school entry and may not capture all alcohol or drug related problems.

Table. Percentage of families that report an alcohol or drug related problem in the family in 2019

Alcohol or drug related problem in the family	Moreland	Greater Melbourne	Victoria
Report of alcohol or drug problem in the family	2.0%	2.8%	3.6%
No report of alcohol or drug problem in the family	98.0%	97.2%	96.4%

Source: School Entrant Health Questionnaire 2019



⁵ Department of Health 2020, What are the effects of alcohol? <https://www.health.gov.au/health-topics/alcohol/about-alcohol/what-are-the-effects-of-alcohol>

Gambling

Gambling harm is any negative consequence that comes from gambling and includes financial, relationship, health, emotional, work or cultural issues. Gambling harm can result from a person's own gambling or someone else's and leads to poorer health and wellbeing of the individual, family, community, or population⁶. In 2019 in Moreland there were fewer reports of a gambling problem in the family by parents of children on school entry (0.3%) compared to that in Greater Melbourne (0.6%) and Victoria (0.7%).

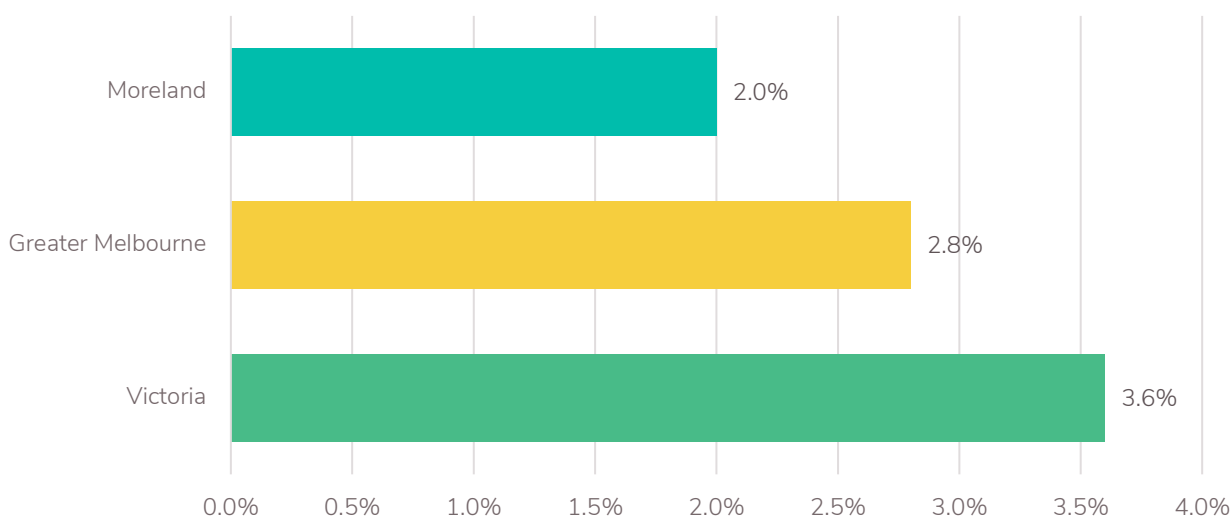
Note: This data was self-reported by the parents of children on school entry and may not capture all gambling problems.

Table. Percentage of families that report a gambling problem in the family in 2019

Gambling problem in family	Moreland	Greater Melbourne	Victoria
Report of gambling problem in family	0.3%	0.6%	0.7%
No report of gambling problem in family	99.7%	99.4%	99.3%

Source: School Entrant Health Questionnaire 2019

Report of alcohol or drug problem in the family 2019



⁶ Rockloff, M, Browne, M, Hing, N, Thorne, H, Russell, A, Greer, N, Tran, K, Brook, K & Sproston, K 2020, 'Victorian population gambling and health study 2018-2019', Victorian Responsible Gambling Foundation.

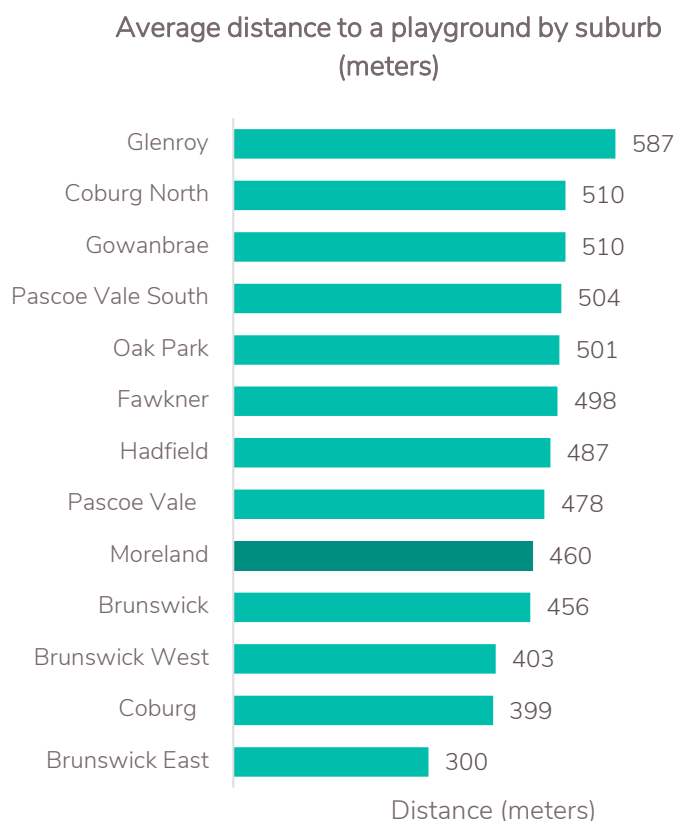
Active & green living

Access to playgrounds

In 2018, the average distance to a playground was 460 meters in Moreland. This is a shorter distance than neighbouring Darebin (521m) and Moonee Valley (499m). At the suburb level, the lowest average distance to a playground was in Brunswick East (299.5m) and Coburg (389.5m). With Glenroy (587m) and Coburg North (510.2) having the highest average distance to a playground.

Table. Average distance to a playground by Moreland suburbs.

Suburbs	Distance
Brunswick	456.4m
Brunswick East	299.5m
Brunswick West	402.8m
Coburg	398.5m
Coburg North	510.2m
Fawkner	498.4m
Glenroy	587m
Gowanbrae	509.9m
Hadfield	487.2m
Oak Park	501.4m
Pascoe Vale	478.4m
Pascoe Vale South	503.9m
Total Moreland	459.5m

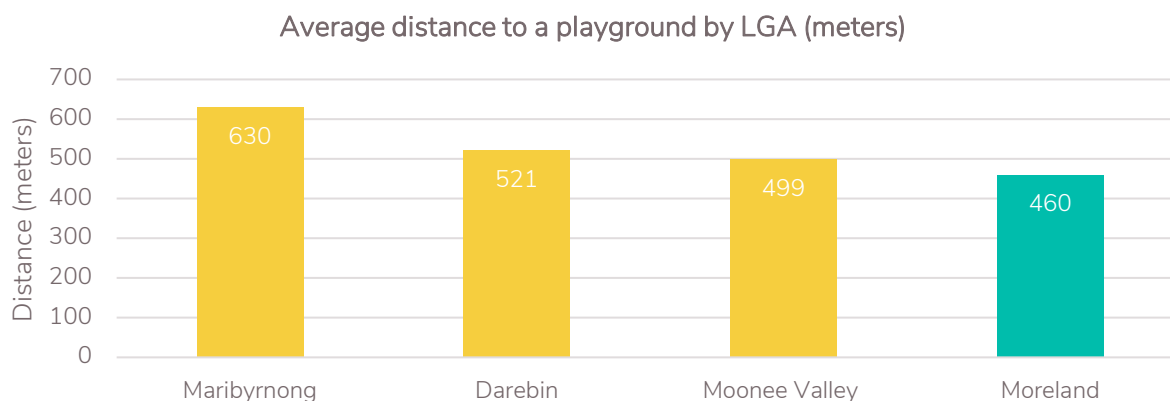


Source: Australian Urban Observatory 2018

Table. Average distance to a playground by LGA.

LGA	Moreland	Maribyrnong	Darebin	Moonee Valley
Distance	459.5	630.2	521	499.2

Source: Australian Urban Observatory 2018



Moving around

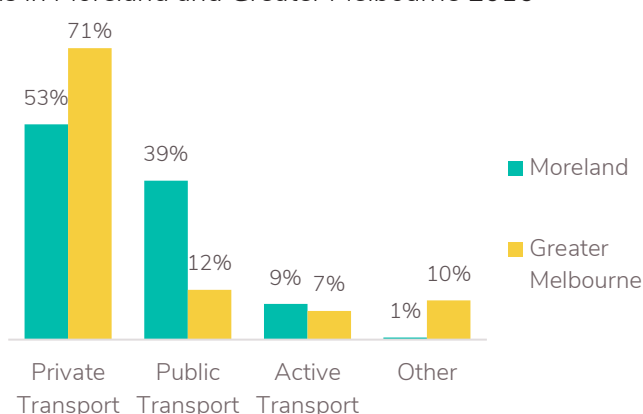
Transport within a community is important for health and wellbeing as it allows for people to lead more active lives and provides community connectedness (Australian Urban Observatory 2020). Access to public transport, environments that support active transport and a neighbourhood's level of walkability are all important factors in assessing and addressing mobility (Australian Urban Observatory 2020). Active transport, meaning the act of engaging in physical activity for transport by walking, cycling or other non-motorised transport, as well as public transport, which often results in incidental active transport when walking between stops, stations, and destinations, are proven to have positive health outcomes.

Mode for travel to work

In Moreland, just over half (53%) of young people aged 15-24 years travel to work using private transport, the majority of whom drive a car. This is much lower than the Greater Melbourne average of 71%. A much higher percentage of young people in Moreland use public transport to get to work (39%) when compared with Greater Melbourne (12%). A further 9% of young people use active transport to get to work, which is slightly higher than the Greater Melbourne average.

Table. Method of travel to work for 15-24-year-olds in Moreland and Greater Melbourne 2016

Mode	Moreland	Greater Melbourne
Public Transport	38.8%	12.2%
Private Transport	52.6%	71.2%
Active Transport	8.7%	7.0%
Other	0.5%	9.6%

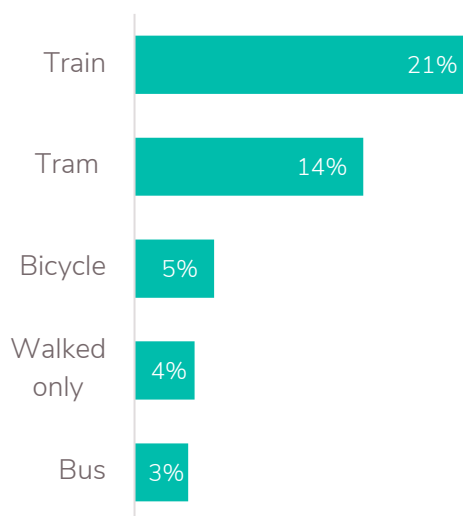


Source: Australian Bureau of Statistics Population Census 2016

Table. All methods of travel to work for 15-24-year-olds in Moreland 2016

Mode	Number	Percentage
Public Transport	3,274	38.3%
Train	1,782	20.9%
Bus	282	3.3%
Tram	1,205	14.1%
Private Transport	4,489	52.6%
Car, as driver	3,644	42.7%
Car, as passenger	796	9.3%
Motorbike/scooter	49	0.6%
Active Transport	739	8.7%
Bicycle	422	4.9%
Walked only	317	3.7%
Other Mode	40	0.5%
Total	8,552	100.0%

Breakdown of active & public transport usage as method of travel to work
Moreland 2016



Source: Australian Bureau of Statistics Population Census 2016

Safe environment

Family violence

Children and young people's exposure to family violence can take many different forms and can have a wide variety of adverse effects on children and their parents. Children who have experienced or witnessed family violence have higher levels of emotional and behavioural problems than children who have not and are at a greater risk of physical abuse or having their physical and emotional needs neglected⁷. According to Domestic Violence Australia, family violence is a predominantly gendered issue whereby it is mostly perpetrated by men against women and children within intimate partner relationships and immediate family contexts⁸.

In Moreland, approximately one quarter (24%) of family violence incidents recorded a child or children being present in 2018-19. This is nearly 500 instances of family violence where a child was present. The proportion is lower than neighbouring local government areas of Darebin (26%), Moonee Valley (26%), and Hume (33%), however it accounts for overall more instance of family violence where a child was present than Darebin or Moonee Valley.

Moreland recorded 331 family violence incidents of family violence where children and young people are involved as other parties in 2020. The majority (70%) of these incidents were involving young people aged 18-24; However, there were 88 incidents involving children under 18.

Note: There are significant challenges collecting data concerning family violence; In order for a record to be made in the recording systems of the various agencies, a referral, report or call must first be made to the responding agency. As a result, statistics held in the Crime Statistics Agency Family Violence Database will not include all incidences of family violence that may be experienced within the community but will only include those that are reported and recorded

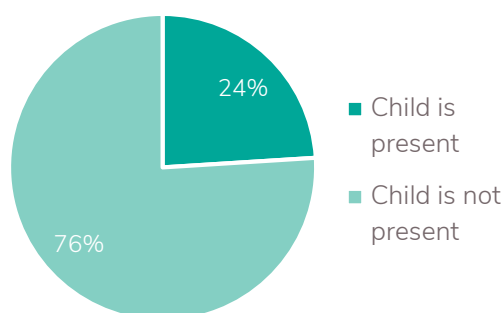
For more information on family violence in Moreland, see the [Family Violence in Moreland Brief](#).

Table. A child or children were recorded as present at a percentage of family violence incidents between 1 July 2018 to 30 June 2019 by LGA.

LGA	Number	Percentage
Moreland	496	24%
Darebin	468	26%
Hume	1,241	33%
Moonee Valley	299	26%

Source: Crime Statistics Agency; Family Violence Database 2018-19

Family violence incidents where a child is present in Moreland 2019



⁷ Family Court Australia 2021, *Family Violence*, <http://www.familycourt.gov.au/wps/wcm/connect/fcoaweb/family-law-matters/family-violence/>

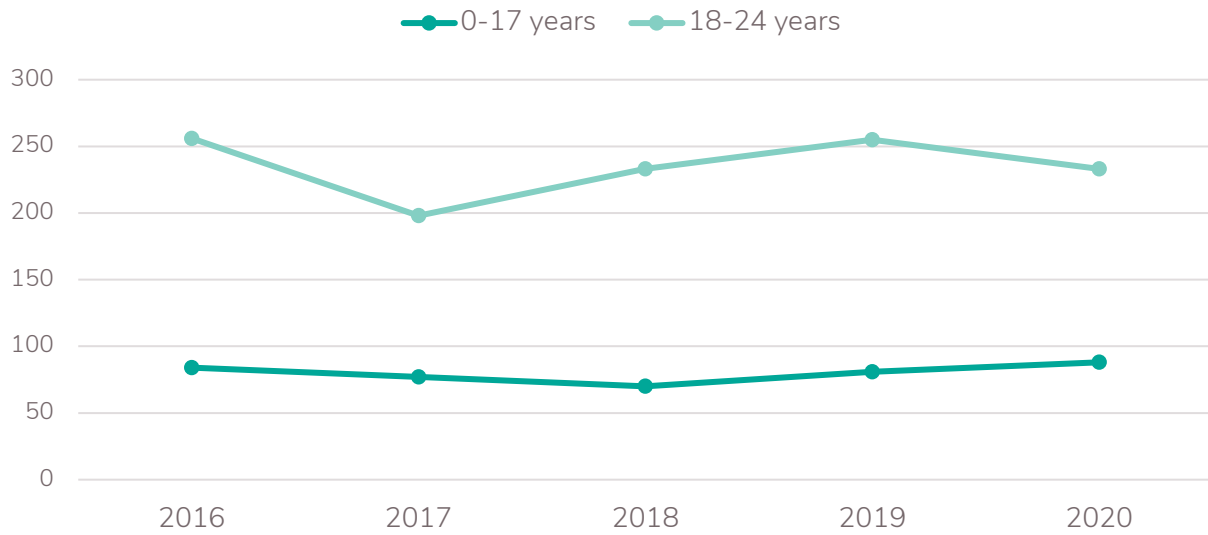
⁸ Domestic Violence Australia 2019, *Who does family violence affect?* <https://dvvic.org.au/understand/about-family-violence/>

Table. Family violence incidents where children and young people are involved as other parties 2016-2020

Year	0-17 years	18-24 years	Total
2020	88	233	331
2019	81	255	336
2018	70	233	303
2017	77	198	275
2016	84	256	340

Source: Crime Statistics Agency: Family Violence Database 2020

Family violence incidents where children & young people are involved as other parties



Data sources

Source Name	Description	Vintage
Australian Bureau of Statistics (ABS) Population Census 2016	The Census of Population and Housing (Census) is Australia's largest statistical collection undertaken by the Australian Bureau of Statistics (ABS).	2016
Australian Bureau of Statistics of Disability, Ageing and Carers (SDAC) 2015 and propensity modelling for Moreland	The SDAC is a national survey that includes data collection on disability by age and type. However, the SDAC does produce municipal-level population statistics. The survey is conducted every three years. The most up-to-date data at the time of propensity modelling was 2015. Using the relationship between age and disability identified in the SDAC, modelling was conducted to estimate the total number of people living with a disability in Moreland by age group. These estimates have also been adjusted based on the age and disability relationship identified through the ABS population census question (above). The SDAC propensity modelling was undertaken by ID community on behalf of Moreland City Council in 2019.	2015 2019
Australian Early Development Census	The AEDC measures the development of children in Australia in their first year of full-time school. The Australian version of the Early Development Instrument consists of approximately 100 questions across five key domains, which are closely linked to child health, education and social outcomes.	2018
Australian Urban Observatory	The Observatory maps key liveability indicators found to be associated with health and wellbeing and provides a clear understanding of the liveability of cities.	2018
Crime Statistics Agency: Family Violence Database	The Crime Statistics Agency (CSA) is responsible for processing, analysing and publishing Victorian crime statistics, independent of Victoria Police. The CSA aims to provide an efficient and transparent information service to assist and inform policy makers, researchers and the Victorian public.	2018-19
Department of Education	Department of Education and Training provides data on children and young people through the VCAMS portal.	2018
Department of Health/Australian Immunisation Register	The Australian Immunisation Register (AIR) is a national register that records all vaccines given to all people in Australia.	2019-20
DHHS Local Government Areas Surveillance Report	Presents data on infectious diseases and other conditions notifiable to the department in Victoria under Public Health and Wellbeing legislation. Data are related to notifications received from medical practitioners and laboratories and does not necessarily reflect the true incidence of disease.	2020

School Entrant Health Questionnaire	The SEHQ is an integral part of the Primary School Nursing Program and provides information about outcomes for children at state and local levels. It is completed by the child's parent or carer and therefore reflects parental responses and concerns.	2019
VicHealth Indicators Report	The report is a compendium of selected findings and details state-wide demographic analysis including gender, age, education, current main activity, main language spoken at home, country of birth, self-reported disability, Aboriginal and/or Torres Strait Islander status, sexuality, income, household structure, location, SEIFA score and Internet access.	2015
Victorian Health Information Surveillance System (VHISS)	The Victorian Health Information Surveillance System (VHISS) is an interactive website displaying selected public health indicators. Three interactive components are available on VHISS: Burden of Disease, Avoidable Mortality and Ambulatory Care Sensitive Conditions. The data are standardised to monitor trends over time.	-
Women's Health Victoria	The data is from the Women's Health Atlas (Sexual and Reproductive Health) by Women's Health in the North. Sexual and reproductive health covers a range of issues for women such as safe sex and contraception, unplanned pregnancy and sexually transmitted infections. Although some of these factors impact men's and women's sexual and reproductive health.	2020

Further information

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<https://www.moreland.vic.gov.au/community-health/children-and-families/>