



Commissioner for Children and Young People
Western Australia

Speaking Out Survey 2025

The views of WA children
and young people on
their wellbeing



Summary report

ccyp.wa.gov.au



Commissioner for Children and Young People
Western Australia

Acknowledgement of Country

I proudly acknowledge and pay respects to the Traditional Custodians of the lands across Western Australia and acknowledge the Whadjuk people of the Noongar nation upon whose lands my office is located. I recognise the continuing connection to culture, lands, skies and waters, families and communities of all Aboriginal peoples. Together, my team and I also pay our respects to Elders past and present and emerging young leaders. We recognise the knowledge, insights and capabilities of Aboriginal peoples and pay respect to Aboriginal ways of knowing, being and doing.

Language

For the purposes of this report, the term Aboriginal encompasses Western Australia's diverse language groups and also recognises Torres Strait Islanders who live in Western Australia. The use of Aboriginal in this way is not intended to imply equivalence between Aboriginal and Torres Strait Islander cultures, though similarities do exist.

Suggested citation

Commissioner for Children and Young People. (2026). *Speaking Out Survey 2025: The views of WA children and young people on their wellbeing – a summary report*. Commissioner for Children and Young People WA.

Alternative formats

On request, large print or alternative formats can be obtained from:

Commissioner for Children and Young People

Level 1, Albert Facey House
469 Wellington Street
Perth 6000

Telephone: (08) 6213 2297

Free call: 1800 072 444

Email: info@ccyp.wa.gov.au

Web: ccyp.wa.gov.au

ISBN: 978-1-7636912-7-8



Images

The images of Western Australian children and young people featured in this report comprise a combination of professional photographs commissioned for our publications and photographs taken by staff during the fieldwork period for the Speaking Out Survey 2025. To protect the privacy and confidentiality of survey participants, the fieldwork photographs do not identify individual students or schools.

Message from the Commissioner

Through the 2025 Speaking Out Survey (SOS25) my team and I were able to reach a record number of children and young people, 17,000, across all regions of Western Australia.

Article 3 of the United Nations Convention on the Rights of the Child is clear that, in all actions concerning children, the best interests of the child shall be a primary consideration. Article 4 states that the Government has a responsibility to ensure the protection of children's rights, and Article 12 highlights the need to allow children to form their own views, express those views freely and the views of the child being given due weight in accordance with the age and maturity of the child. The Speaking Out Survey is the practical application of Article 12. I urge government and non-government services to hear these voices, and make the necessary changes, to ensure the needs of children are addressed, and their rights are upheld, valued and respected.

At a time when political instability, rising living costs, and a worsening housing crisis are shaping daily life, it is more important than ever to gather children and young people's perspectives on physical health, mental health, education, safety, community life and hopes for the future. Their responses provide us with insight into how Western Australian children and young people are faring and highlight priority areas requiring deeper understanding and meaningful action.

More than 656,000 children and young people under the age of 18 live in WA. The onus is on adults to do what they can to ensure that children and young people are safe, supported, healthy and learning, so that they can reach their full potential.



Most children and young people in WA say they enjoy good physical and mental health, have their essential needs met, and feel cared for and supported. These are encouraging results, yet the findings also reinforce several ongoing issues first highlighted in previous surveys.

Despite WA's strong economy and overall prosperity, a significant number of young people continue to report barriers to accessing critical services such as education, health and mental health. They also expressed concerns about their personal safety, and low levels of life satisfaction.

Message from the Commissioner

Aboriginal children and young people remain disproportionately affected, experiencing greater challenges than non-Aboriginal peers when it comes to material resources, family stability and expectations around future education.

While recent increases in funding for mental health initiatives in both the health and education sectors are positive steps, the survey underscores the continued need for early intervention services that are accessible to children and young people throughout the state. This earlier intervention should be focused on keeping children safe in their family and community and ensuring they have the services and supports required to live happy, healthy and productive lives now and into the future.

I would like to personally acknowledge the leadership and staff of the three education sectors – the Department of Education, Association of Independent Schools WA and Catholic Education WA – for recognising the value of this survey and for supporting its administration through their schools.

While my term as Commissioner ends this year, the value of this survey is clear in building an ongoing body of evidence to track changes over time in the outlook and wellbeing of children and young people. As such, it warrants continued government support.

Together my team and I participated directly in school visits to introduce the survey and provide a safe, supported environment for every participant. Delivering this work in full demonstrates the exceptional commitment and professionalism of our team and their dedication to amplifying the voices of WA's children and young people.

I extend my sincere thanks to every young person who contributed their views. Your time, your willingness to speak out, and the trust you placed in this process are deeply appreciated. Your insights provide invaluable guidance for the decision makers of this state to improve the wellbeing of all children and young people. We must honour this and take action to meet your needs.

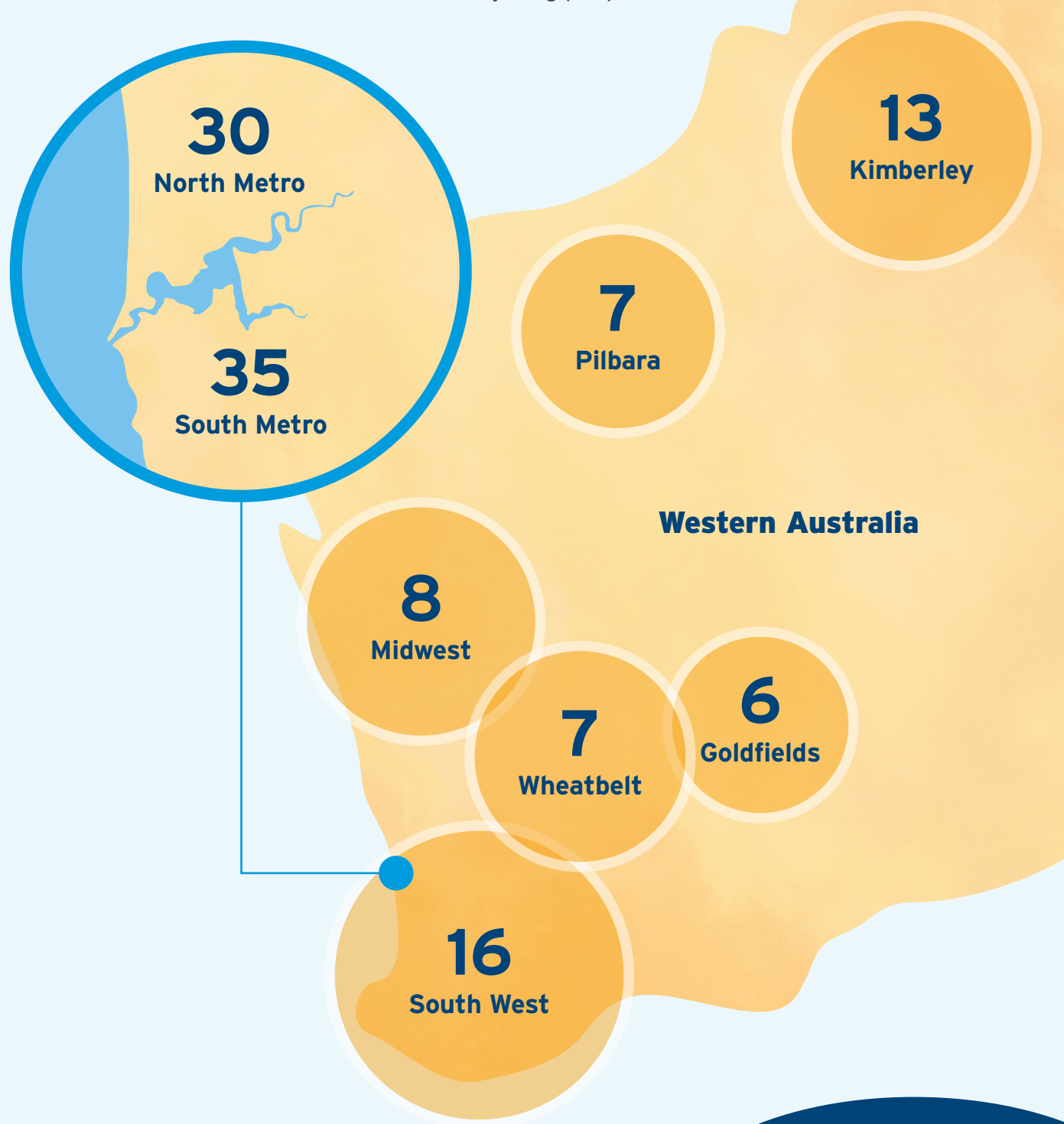


Dr Jacqueline McGowan-Jones
Commissioner for Children and
Young People



SOS locations

The Commissioner and her team travelled approximately 35,000km across Western Australia to deliver the Speaking Out Survey face-to-face with students from Years 4–12. They visited 122 schools in 92 suburbs and towns across 10 regional areas. They spent 142 days on the road and a total of 13 weeks travelling regionally during Terms 2 and 3 of 2025 to hear the voices of children and young people.



Executive summary

The Commissioner for Children and Young People undertook the third Speaking Out Survey in 2025 as a follow up to the surveys carried out in 2019 (SOS19), and in 2021 (SOS21). Designed as a triennial survey series, the aim of the Speaking Out Survey is to capture the views of a representative sample of children and young people in Western Australia (WA) to develop a robust data source relating to the wellbeing of children and young people in our state.

SOS25 was funded and facilitated by the Commissioner for Children and Young People WA. The inaugural survey tool and methodology were developed in collaboration with (then) Telethon Kids Institute (now The Kids Research Institute – KRI).

In SOS25, a total of 16,169 students in Years 4 to 12 from 122 schools across all regions of WA consented to participate. After removing responses from students in the additional sample and incomplete responses, the main sample included 5,611 Year 4 to 6 and 7,905 Year 7 to 12 students, across all three sectors (a total of 13,516 students). It is noted, with some disappointment, many schools chose the opt-out option or did not respond to requests for their participation.

Aboriginal students are represented in the main sample proportionate to their population in WA. In total, 1,077 or 8.0 per cent of participating students identified as Aboriginal or Torres Strait Islander.

Student responses were weighted so that survey results are representative of the population of students enrolled in Years 4 to 12 within WA's government, independent and Catholic schools. Weighting was also calculated to be representative of the distribution of students by remote location and culturally and linguistically diverse status (CaLD).

SOS25 is thus fully representative and has a similar sample size to SOS21, allowing for reliable disaggregation and comparison of data.

The inaugural SOS19 established a baseline of data on WA children and young people's wellbeing, while SOS21 provided insight into how children and young people's wellbeing was impacted by the COVID-19 pandemic. SOS25 will enable the Commissioner for Children and Young People to build on this foundation through future projects that compare data over time and develop a longitudinal perspective, helping to identify emerging trends and track changes in the wellbeing of children and young people.



**Keep doing more of
these surveys, they
were helpful and teach
important things.
It's also nice to talk
with someone!"**

Boy aged 9, metropolitan

Executive summary

A unique strength of this survey is its independent administration by the Commissioner and her staff, which prevented any potential external influence on student responses.

The successful completion of SOS25, SOS21 and SOS19 has demonstrated the value of current and robust data in monitoring wellbeing. It provides much needed trend data and information on the wellbeing of children and young people and allows for the tracking of progress and changes over time. The Commissioner will continue to advocate for the commitment of future funding on a triennial basis for this comprehensive survey.

This report summarises SOS25 results for most survey questions disaggregated by year group, gender, and remoteness. Additionally, this report includes separate chapters with information and key findings for students in regional areas, Aboriginal and non-Aboriginal students, and CaLD students. Further in-depth analysis and exploration of the findings of SOS25 (and previous iterations) will be carried out in 2026 and beyond.



I think enforcement of children's rights is very important and kids everywhere should get the same things. They should all have a voice and be able to do things like this survey to have a voice. I think the survey was good because I love having a say in things. Thank you!"

Girl aged 10, metropolitan

"Honestly this survey has been eye opening for me because I can see how incredibly privileged I am by having a stable home and supportive parents and living in a good area. Thanks for making this survey in an attempt to help others who are not as privileged as me. Hope you are going to actually put action into helping people push through systemic barriers and monetary barriers." Girl aged 17, metropolitan

Contents

Message from the Commissioner	1
--	----------

Executive summary	4
--------------------------------	----------

1 Summary of findings and recommendations	8
--	----------

1.1. Main findings	9
1.2. Year group differences	13
1.3. Gender differences	13
1.4. Aboriginal children and young people	14
1.5. CaLD children and young people	14
1.6. Children and young people in regional and remote areas	14
1.7. Recommendations	15

2 Introduction	17
-----------------------	-----------

3 Methodology	20
----------------------	-----------

3.1. Sampling strategy	21
3.2. Survey design and development	22
3.3. Data collection and fieldwork	23
3.4. Data analysis	24
3.5. Strengths and limitations	26

4 Participants	27
-----------------------	-----------

4.1. Schools	28
4.2. Students	28

5 Speaking Out Survey 2025 findings	31
--	-----------

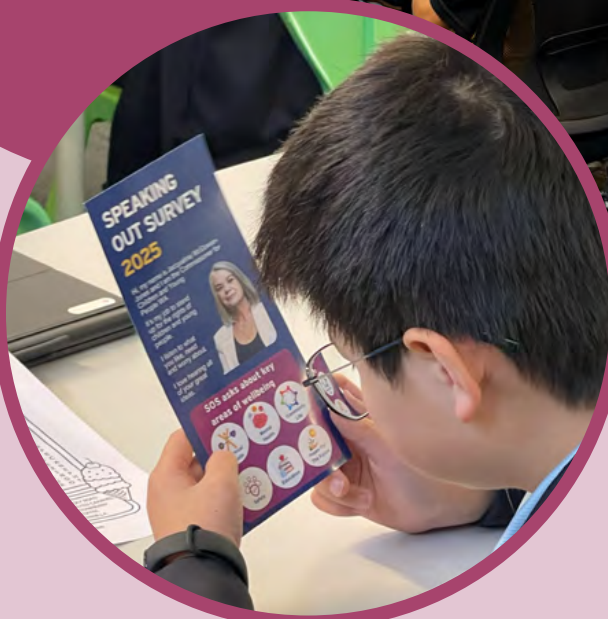
6 Healthy and connected	33
--------------------------------	-----------

6.1. Physical health	34
6.2. Mental health	51
6.3. Healthy behaviours	74
6.4. Knowledge of alcohol and drugs	77
6.5. Knowledge of sexual health	87
6.6. Problematic phone use	93
6.7. Connection to community and culture	95
6.8. Summary of key statistics – Healthy and connected	111
6.9. Healthy and connected summary	113

7 Safe and supported	114
7.1. Supportive relationships	115
7.2. Material basics	123
7.3. Safe in the home	129
7.4. Safe in the community	135
7.5. Experiences of violence	141
7.6. Caring at home	144
7.7. Summary of key statistics – Safe and supported	147
7.8. Safe and supported summary	149
8 Learning and participating	150
8.1. Attendance	152
8.2. Liking school and sense of belonging	155
8.3. Bullying	169
8.4. Achievement	172
8.5. Transition from school	176
8.6. Summary of key findings – Learning and participating	185
8.7. Learning and participating summary	187
9 Key findings regarding Aboriginal children and young people	188
9.1. Connection to culture	189
9.2. Healthy and connected	192
9.3. Safe and supported	200
9.4. Learning and participating	206
10 Key findings regarding culturally and linguistically diverse children and young people	212
10.1. Healthy and connected	214
10.2. Safe and supported	219
10.3. Learning and participating	224
11 Next steps	228
Glossary	230
References	231

Summary of findings and recommendations

1



1. Summary of findings and recommendations

1.1 Main findings

Most children and young people reported having positive physical and mental health, resilience, and feeling knowledgeable about alcohol, other drugs, and sexual health. Most said they had their basic needs met, felt safe in their homes and communities, and enjoyed attending school. Many children and young people also reported having supportive relationships with family, friends, and teachers.

However, responses to questions exploring these subjects identified a notable proportion of children who did not report positive outcomes across a range of wellbeing domains. This pattern was especially noticeable among older students and girls, who tended to report lower levels of wellbeing across several key areas.

Physical and mental health

Perceptions of health declined with age, with 57.1 per cent of Years 4 to 6 rating their health positively (combined 'excellent' and 'very good') compared to 46.8 per cent of Years 7 to 12. Around sixty per cent of Years 4 to 6 (65.4%) and Years 7 to 12 (57.6%) identified sport as an important part of their life. Daily participation in sport decreased with age (Years 4 to 6 participation was 30.3% vs Years 7 to 12 participation of 21.0%). Boys were more likely to identify sport as important, and more likely to participate in daily sport or physical activity in both primary and secondary school. Concerns about body weight increased with age, as 42.6 per cent of students in Years 4 to 6 held concerns compared to 54.0 per cent of students in Years 7 to 12. Half of young people (52.4%) considered themselves to be 'about the right weight'.

A small proportion of students in Years 4 to 6 (4.7%) and Years 7 to 12 (3.8%) reported they do not brush their teeth daily. Almost one in two children (55.4%) and young people (50.7%) reported having had at least one dental filling. Of the students at primary school level, one in three (35.3%) did not eat breakfast daily, one in four (26.0%) did not eat lunch daily, and nearly one in 10 (9.0%) did not eat dinner daily. The proportion of students who missed meals increased in secondary school. Girls were more likely to miss meals. Almost one in five (19.0%) young people said they had a long-term health condition. Almost one in 10 young people (7.9%) reported having a long-term disability.

Across all Year 4 to 6 students the average life satisfaction score was 7, but this dropped to a 6 for students in Years 7 to 12. Girls in both primary and secondary school were less likely to rate themselves as having a high life satisfaction, when compared to boys. Nearly two in three young people (61.7%) reported 'feeling sad, anxious or depressed for more than two weeks in a row'. More than one in three young people (35.7%) reported mental health concerns. Young people who had tried to access help for their health or mental health identified lack of affordability and accessibility as some of the barriers preventing them from obtaining help. Feeling like a burden was one of the most frequently listed reasons, as well as being too afraid to speak to their parents.

1. Summary of findings and recommendations

Healthy behaviours

One in four (25.2%) young people reported needing to see someone about their health but being unable to. When young people were asked if they felt they knew enough about the health impacts of alcohol and drugs, nine in 10 felt they knew enough about alcohol, cigarettes/smoking, and vapes. Four in five young people (87.6%) thought that it was unacceptable for someone their age to use alcohol, while 12.4 per cent found it acceptable. Nearly three in 10 (29.2%) young people had tried alcohol. While more than four in five (83.1%) young people have not tried smoking a cigarette, 13.6 per cent of all young people have. More than one in four (26.7%) young people in Years 7 to 12 have tried vapes. Seven in 10 (69.7%) young people said they knew where to go if they needed help about alcohol and drugs; leaving three in 10 who either do not know or are unsure where to go for help. Young people were confident in their knowledge of respectful relationships and consent, with 95.8 per cent and 96.2 per cent selecting 'yes', respectively. One in three young people (36.4%) had been sent unwanted sexual content, including images, videos, or messages. Girls were notably more likely to have received this content (girls 41.7% vs boys 31.2%). Across all questions relating to not being able to use their phone or be online, young girls were more likely to give negative responses. The proportion of young people who felt anxious when they could not use their phone, or who went without eating or sleeping because they were online, increased with age.

Feeling connected to culture and community

More than three in four students in Years 4 to 6 (81.5%) and Years 7 to 12 (75.3%) reported that they have friends who live near them. In Years 4 to 6, 90.9 per cent of students thought their neighbours were friendly, whereas only 64.1 per cent of Years 7 to 12 students thought the same. Most children felt they belonged in the community (92.9%), liked where they lived (94.9%), and thought there were fun things to do (87.6%) or outdoor places to visit in their local area (95.0%). Young people were less likely to agree with these statements. Two in five children (40.1%) spent time with their friends almost daily. Three in four (76.0%) children spent time with their family daily, and 65.1% of young people spent time with their family daily. Nearly one in two children (45.7%) and young people (45.2%) participated in sports or exercise almost daily. More than two in five (44.5%) Year 4 to 6 students read almost daily, which reduced to 23.0 per cent for young people in Years 7 to 12. Concurrently, the amount of time spent being online or on their phone daily increased with age (Years 4 to 6, 53.8% vs Years 7 to 12, 90.9%).

Safe and healthy relationships

Ninety per cent of children (93.1%) and young people (90.0%) reported having a supportive adult in their life who believed they would achieve good things. Most children (85.1%) and young people (78.9%) agreed they had a supportive adult who listened to them when they had something to say. Most children and young people also reported having someone they could talk to about their worries, but this sentiment decreased with age.

1. Summary of findings and recommendations

More than eighty per cent of children (89.1%) and young people (83.9%) felt their mother or maternal figure cared about them 'a lot'. Similarly, around eighty per cent of children (82.9%) and young people (75.4%) felt their father or other paternal figure cared about them 'a lot'. More than eighty per cent of children (84.6%) and young people (86.7%) felt they had enough friends. Most children (94.8%) and young people (84.8%) identified having an adult they could talk to about a serious problem.

Material needs

Overall, approximately seventy per cent of children and young people reported 'always' having enough food to eat at home when they are hungry (children 71.4% vs young people 71.1%), with a further twenty per cent reporting 'often' (children 21.0% vs young people 22.0%). More than eighty per cent of children (80.9%) and young people (87.7%) reported having access to their own tablet, laptop or computer. Access to a personal mobile phone steadily increased with age, rising from 37.8 per cent of children to 90.1 per cent of young people. Around one in five children (18.5%) and young people (18.4%) live across secondary households. Most children (82.6%) and young people (92.7%) reported having their own bedroom. When asked about moving houses in the past 12 months, around one in 10 reported moving houses twice during this period, indicating some level of residential instability.

Feeling safe

Overall, most children reported their families got along either 'very well' (43.3%) or 'well' (39.1%), as did most young people ('very well' 35.5% or 'well' 43.0%). When asked if they had concerns about their family members fighting, approximately half of all children (45.7%) and young people (53.2%) reported not worrying. Concerns regarding self-harm, hurting others, or arrests decreased with age. A quarter of all young people (25.4%) had spent a night away from home because of a family problem. Girls (30.4%) were more likely to report having spent at least one night away from home than boys (20.6%).

Most children and young people reported feeling safe in their local area and community. Boys in Years 7 to 12 were more likely to report feeling safe 'all of the time' (35.9%) compared with girls (20.3%). Around one in two young people (44.6%) reported feeling safe 'all of the time' on public transport. Qualitative responses showed young people wanted to see more protection and security in their local areas to help improve feelings of safety. Young people reiterated that they wanted to be heard and taken seriously by adults, not only in the home, but also in the community.

Almost one in two young people said they had been hit or physically harmed by someone on purpose. Boys (46.6%) were more likely than girls (36.0%) to report being physically harmed. Girls were considerably more likely to experience violence at home (76.7%) compared to boys (42.7%). Approximately half of the young people who reported having been physically harmed said it was perpetrated by either an adult (52.5%) or another child or young person (51.4%). Girls were twice as likely to report being physically harmed by an adult.

1. Summary of findings and recommendations

Caring at home

More than one in two (56.3%) primary students and one in three (35.8%) secondary students reported taking care of someone at home, with the proportion decreasing with each school year. The most common activities children and young people helped with included entertaining (children 47.6% vs young people 51.7%) and preparing meals (children 47.2% vs young people 61.6%). When provided with the definition of a young carer, 8.1% of secondary students identified with this definition. Personal hygiene and emotional support were the most likely types of care provided, followed by changing dressings and translating.

Engaged and supported in education

Students' perceptions of the importance of attending school daily appeared to decline between primary and secondary school. Around half of primary school students reported liking school either 'a lot' (32.4%) or 'a bit' (24.7%); whereas around half of secondary school students reported liking school 'a bit' (25.9%) or felt it was 'OK' (32.0%). Around half of all children and young people agreed school was a place they belonged. More than eighty percent (84.2%) of primary school students agreed they were happy at school, whereas only 64.8% of secondary students agreed. Girls were consistently less positive when asked about liking and sense of belonging at school.

Around two thirds of primary and secondary students got along with their classmates most of the time. Most children and young people felt their teachers believed they would achieve good things, and reported their teachers listened to them. One in three felt safe at school 'all the time'. Most children thought they performed 'well or very well'

(44.5%) or 'ok' (46.6%), with less than 10 per cent (8.8%) reporting 'not so well'. One in two children and young people reported their parents or someone in their family enquired about their schoolwork and homework 'often'. Nine in 10 young people felt pressured by their schoolwork, consistently describing feeling overwhelmed by the volume and demands of schoolwork, as well as concern over potential punishment or disappointment from parents and teachers. Overall, 91.4 per cent of children and 81.3 per cent of young people reported having never been suspended. However, 8.6 per cent of children and 18.7 per cent of young people reported having been suspended at least once. Of the young people who were suspended, more than half (55.8%) reported being suspended for 10 days or more.

Bullying

Girls in Years 7 to 12 were twice as likely as boys to identify as having experienced both bullying and cyberbullying (girls 14.2% vs boys 7.2%). One in four (24.5%) young people had experienced bullying due to their cultural background, colour of their skin, or religion. Most experiences of bullying occurred in and around school with 87.5% of children and 91.5% of young people experiencing bullying one or more times while at school. Concerningly, 14.0% of children, and 16.9% of young people identified they had missed school due to concerns of bullying.

Racism was experienced at high rates for children and young people from culturally and linguistically diverse (CaLD) communities, as well as for Aboriginal children and young people. Racism was experienced both in schools and the broader community. Aboriginal children and young people experienced bullying of this type at almost twice the rate of non-Aboriginal

1. Summary of findings and recommendations

children (23.3% compared to 44.6%) and this increased to 48.8% for CaLD children and young people.

Having an active voice and being listened to

Almost one in two (46.5%) young people held a paying job, including a regular part-time job (24.4%), casual work during the term (10.6%), or during the school holidays (12.1%). Across all questions relating to independence, boys reported notably more independence than girls. More than eight in 10 young people 'agree' or 'strongly agree' they are given information to make decisions in their life, are allowed to weigh up pros and cons related to decisions and are involved in decisions affecting their life.

1.2 Year group differences

Year group differences identified in SOS19 and SOS21, have continued in SOS25. Overall, older students report fewer positive outcomes compared to younger students across all three domains. In relation to physical and mental health, older students continued to report lower life satisfaction, less physical activity, fewer meals, and mental health issues.

Older students were less likely to report positive engagement and belonging at school, with clear downward trends across school years when asked if they thought attending school was important, or if they liked school, were happy at school, and felt like they belonged.

However, older students were more likely to identify family cohesion and be less concerned about their family wellbeing. Older students were also more likely to report having material basics, have more stability in relation to housing and schooling, and reported similarly to younger students when asked about having supportive adults around them.

1.3 Gender differences

Notable differences were found between genders among secondary students, although some small differences were noted among primary students as well. Consistent with SOS21 findings girls tended to report less positive outcomes compared to boys.

Key differential findings include:

- Girls were less likely to rate their health as 'excellent' and instead more likely to rate it as 'good'.
- Girls were more likely to miss main meals.
- Girls reported lower ratings of life satisfaction compared to boys. Fewer girls reported a life satisfaction score of 7 to 10 (girls 45.8% vs boys 65.5%). Consequently, girls in Years 7 to 12 were more likely to rate their life satisfaction a 5 or 6 (girls 32.0% vs boys 22.6%) or between 0 and 4 (girls 22.3% vs boys 11.9%).
- Girls were less likely to report having a supportive adult who will listen to them, or who they can talk to about their problems.
- Girls were more likely to have stayed away from home due to a family problem.
- While boys were more likely to have experienced physical harm, girls were more likely to have been harmed at home and by an adult.
- Despite boys being more likely to be suspended, girls were more likely to report being suspended for 10 days or more.
- Only one in five girls in secondary school felt safe all the time.
- Girls were less likely to be able to travel independently and were less likely to have autonomy over decisions that affect their life.

1. Summary of findings and recommendations

1.4 Aboriginal children and young people

Encouragingly, Aboriginal children and young people reported more positive self-perception and feelings of safety in the community compared with their non-Aboriginal peers. They also reported comparative results in relation to life satisfaction, resilience, and mental health. Aboriginal children and young people were found to be more likely to report helping to take care of someone at home.

However, Aboriginal children and young people reported less positively in relation to physical health, material basics, concerns about family, and higher education, when compared with their non-Aboriginal peers. Specifically, Aboriginal students were less likely to identify eating each meal (breakfast, lunch, dinner) daily, and three times more likely to select not brushing their teeth daily. Despite confidence in their knowledge of alcohol and other drugs, Aboriginal young people were more likely to use alcohol, vapes and cigarettes. Aboriginal young people were more likely to identify not being able to obtain help when it was needed, more likely to have attended multiple schools, and were less likely to identify having material basics. Aboriginal young people more frequently experienced bullying, particularly online, and missed school four or more days due to this bullying. These trends continue from the findings of SOS21.

1.5 CaLD children and young people

Minimal differences were found between CaLD and non-CaLD children and young people, across all three domains. CaLD students were equally likely to report positive mental and physical health, material basics,

and autonomy, and were more likely to provide positive views of schooling. CaLD students were less likely to report knowing where to get supports for their health or help with AOD. They were also less likely to report being able to speak to their parents about their issues.

1.6 Children and young people in regional and remote areas

Children and young people in regional and remote areas reported similar outcomes across domains, however, there were some notable differences. Regarding health, those in regional and remote areas were more likely to identify not brushing their teeth daily and were less likely to eat lunch and dinner daily. Children and young people in remote areas were more likely to report being active outdoors; however, they were also more likely to identify that there was nothing to do in their area. In remote areas, children and young people were most likely to report not having a family car, and other material basics including internet access. Young people were also more likely to say their families got along 'very well' but were also more likely to share concerns about members of their family hurting someone or being arrested. Responses exploring their experiences at school were also largely similar, except when asked about higher education as those in remote areas were less likely to identify university as a pathway. Unfortunately, young people in outer regional and remote areas were most likely to report missing school due to bullying in the past month. Young people in regional and remote areas were also more likely to travel independently.

1. Summary of findings and recommendations

1.7 Recommendations

In reviewing the results from the Survey, it is clear there is a need for an holistic ‘whole of child and family’ approach to supporting children and young people to have their voices and rights both valued and respected. The recommendations are therefore focused on ‘whole of system’ approaches.

Recommendation	Findings
1. Embed the United Nations Conventions on the Rights of the Child into WA legislation	Many children and young people identified they are not having their basic needs met including, but not limited to, access to health supports, quality education, food, housing, safety, protection from harm and maltreatment
2. Develop and implement a comprehensive ‘whole of government’ Child and Family Wellbeing Strategy	Service access, availability and cost were highlighted as issues not just in terms of health and mental health, but also sport, housing, nutrition, and many other areas. In addition, while the WA Government has invested in many strategies, programs and plans – for example, strategies relating to Homelessness; Family, Domestic & Sexual Violence, Child Protection; Frameworks such as those for the prevention of racism and bullying; and programs addressing issues such as youth crime – there is no holistic approach to addressing the needs of children and young people and their families. A single focused strategy should include service navigation supports and a focus on the best interests of the child. The strategy should include all areas outlined in the Speaking Out Survey, with an urgent focus on: • A comprehensive approach to prevention, intervention, detoxification and rehabilitation supports for children and young people with alcohol and other drug challenges • Immediate investment into a continuum of age and developmentally appropriate mental health supports for children and young people.

1. Summary of findings and recommendations

Recommendation	Findings
3. Embed the National Child Safe Principles into WA legislation	Children and young people reported they often felt unsafe at school, at home and in the community. Legislating the child safe principles will assist in protecting children from harm.
4. Review the alignment of programs, services, policies and approaches to supporting children, young people and their families with the objects and principles of legislation, specifically in relation to the <i>Equal Opportunity Act 1984</i> (EO Act), the <i>School Education Act 1999</i> (the SE Act), and the <i>Children and Community Services Act 2004</i> (the CCS Act)	This is critical to ensure we are focused on children and their best interests. For example, the focus of programs and services should be on (i) the requirement under the EO Act to “promote recognition and acceptance within the community of the quality of persons of all races of all persons regardless of their sexual orientation, religious or political convictions or their impairments or ages”; (ii) the function within the CCS Act to “consider and initiate, or assist in, the provision of social services to children, other individuals, families and communities”; and (iii) the provisions in the SE Act for government schools to meet the educational needs of all children and ensures the safety and welfare of students.
5. Develop and implement a comprehensive public and prevention health campaign, with a specific component of age and developmentally appropriate messaging for children and young people, focusing on nutrition, physical health and activity, sexual health, alcohol and other drugs and mental health	Responses to relevant questions in the survey demonstrate that children and young people require additional information, and access to information, that supports their understanding of matters relevant to their physical, social and emotional, and sexual wellbeing. Preventative health campaigns would be an additional opportunity for children and young people to gain valuable information and would complement information gained throughout their education and from their families and friends.

Introduction

2



2. Introduction

The Commissioner for Children and Young People (the Commissioner) has a statutory responsibility to monitor the wellbeing of all children and young people living in Western Australia and to advocate on their behalf.

The Wellbeing Monitoring Framework (the Framework) was developed in 2012,¹ and informed by the then vision of the Commissioner:

All children and young people are heard, are healthy and safe, reach their potential, and are welcomed as valued members of the community; and in doing so, we build a brighter future for the whole community.

This ties in with the Commissioner's revised vision from our current Strategic Plan 2024-2027:

We strive for a better world for all children and young people where their voices and rights are valued and respected.

The Framework consists of three parts: the Indicators of Wellbeing (the Indicators), the Profile of Children and Young People, and Recommendations for Government to consider and include in their frameworks, strategies, policies, programs and services.

The Indicators consist of specifically chosen markers that influence various aspects of wellbeing and provide insight into how children and young people are faring, and inform the work of the Commissioner's office. The indicators are also reflected in the Profile of Children and Young People, published annually and providing a snapshot of how children and young people are progressing.

The Indicators are divided into three interlinking wellbeing domains: Healthy and Connected, Safe and Supported and Learning and Participating.

While some data points of the Indicators are informed by existing data sources, several are not regularly updated which means they cannot be monitored for progress in a consistent manner.

The Speaking Out Survey (SOS) is a research initiative led by the Commissioner for Children and Young People WA. SOS19 was a pilot study to test the feasibility of running a statewide wellbeing survey for children and young people.

Established as a 'proof-of-concept', SOS19 was a whole-of-government initiative undertaken by the Commissioner with funding contributions from the Departments of Education, Health, Justice and Communities. No such contributions were received for either SOS21 or SOS25. The Kids Research Institute (KRI) developed the survey methodology and conducted analysis of the data.

2. Introduction

The 2019 Speaking Out Survey (SOS19) was developed to establish a robust evidence base relating to the wellbeing of children and young people across Western Australia (WA).

The first of its kind, this survey was designed to capture the self-reported wellbeing data of children and young people in Years 4 to 12, involving a sample of students large enough to generate reliable estimates of wellbeing of the full student population in WA.

Both SOS19 and SOS21 received positive feedback from both schools and students alike. Additionally, the numerous reports derived from each survey were also met with a strong response from government and non-government organisations, highlighting the value and importance of this data.

SOS was initially designed as a triennial series; however, in response to the COVID-19 pandemic, the Commissioner brought forward the previous survey from 2022 to 2021. This survey was completed in 2025 in accordance with the original proposed timeframe.

The domains and questions within the SOS were informed by numerous sources, including other reputable surveys, available data, and the Monitoring Framework. The survey focused on obtaining data that highlighted key outcomes, risk and protective factors for children and young people that are not available in other data sources.

This summary report focuses on discussion and analysis of SOS25 data, differences between demographic groups and highlights some of the key differences to SOS21 findings. The SOS25 summary report also includes additional discussion surrounding

the implications of the findings in relation to literature, and recommendations that reflect the findings of our children and young people.

Key trends across SOS19, SOS21 and SOS25 data will undergo a longitudinal analysis to provide further advice and guidance on priorities for action.

SOS data is a valuable source for government when developing legislation, strategies, frameworks, policies, programs and services to meet the health and wellbeing needs of our children and young people.

Hearing directly from children and young people about their experiences is imperative to truly understand and monitor their wellbeing.

Methodology

3



3. Methodology

3.1 Sampling strategy

3.1.1 Overview

To maximise fieldwork efficiency, a two-stage stratified random sampling methodology was conducted by The Kids Research Institute (KRI). This was carried out separately for Year 4–6 schools and Year 7–12 schools. In the case of a school servicing Years 4–12, that school could be selected twice – once for its Years 4 to 6 students, and once for its Years 7 to 12 students. In the first stage, schools were randomly selected and invited to participate. Schools were stratified by sector (government, Catholic, independent), remoteness (metropolitan, inner/outer regional and remote/very remote), and CaLD status (culturally and linguistically diverse status but confined to metropolitan government schools only). Learning from SOS21, in which response rates were lower for CaLD students, government schools in the metropolitan area that had a higher proportion (greater than 50%) of students with a language background other than English were assigned higher selection rates. Government schools in the metropolitan area were chosen as they were the only schools large enough to effectively create this stratum.

The second stage included classroom sampling, which was only applicable to the Years 7 to 12 sample, specifically schools that exceeded 300 students. A subset of the classrooms was randomly selected depending on the size of the school, with all students in those classrooms invited to participate. For the Years 4 to 6 sample, all students in the eligible year levels in selected schools were invited to participate.

3.1.2 Survey frame and scope

The sampling frame was based on a school list that was created by merging publicly available information from the Western Australian Department of Education (DoE) and the Australian Curriculum and Reporting Authority (ACARA). The frame included a full list of schools in WA, along with the number of enrolled students in each year level and the number of Aboriginal or Torres Strait Islander students.

Education Support Centres and home-schooled children remained out of scope (as per the SOS19 and SOS21 surveys), because these students would require different survey instruments and methodologies. CCYP will continue to review funding opportunities to develop surveys for these cohorts in the future, as well as an inclusive survey for children aged 3 years to Year 3.

3.1.3 Student sampling

For students in Years 7 to 12, the proportion of classrooms sampled from larger schools was reduced to lessen the administrative burden and to limit the number of participating students per school to a maximum of approximately 600, corresponding to around 28 survey sessions (6–7 per year group).

3. Methodology

3.2 Survey design and development

As this was the third survey in the series, nearly all questions from SOS21 were continued, with only minor changes made to update wording or additional options added to reflect current events or issues. Following consultations the Commissioner had with children and young people across WA regarding their wellbeing, multiple questions relating to carer responsibilities were added to SOS25. Some additional qualitative questions were added to enable participants to provide insights into their responses. Some questions were adapted to include newer terminology so that it was more consistent with the language used by children and young people. Questions relating to alcohol and other drugs were adapted to include reference to vapes. The COVID-19 questions used in SOS21 were removed.

As in previous iterations, SOS25 included separate surveys for Years 4 to 6 students and Years 7 to 12 students. For Years 4 to 6 (the Child Survey), the maximum total number of questions asked of a student was 128. For Years 7 to 12 (the Young People Survey), the maximum total number was 193 questions. The survey employed standard survey response filter mechanisms.

Each educational sector was involved in reviewing the survey design, providing feedback and final approvals.

The SOS19 survey was adapted from the New Zealand Youth2000 Survey series² with input from a local Steering Group and an Expert Panel. Where it was identified that additional or more appropriate questions were needed, these were either provided by members of these steering groups or sourced from other existing surveys with similar participant ages.

All questions were mapped to the Commissioner's Monitoring Framework and grouped into one of the three domains: 'Healthy and Connected', 'Safe and Supported' and 'Learning and Participating'.

3.2.1 Ethics and research approvals

The Department of Education, Catholic Education WA, and the Association of Independent Schools WA provided support and approval for the survey to be conducted in their respective schools. All three bodies were involved in approving the survey, and any relevant research protocols were followed. Schools selected as part of the sampling process were approached by the Commissioner, stipulating that the decision to participate remained with the principal of each selected school.

The SOS25 research was supported by the Aboriginal Health Council of Western Australia (AHCWA). Ethics approval was obtained from the Western Australian Aboriginal Health Ethics Committee (HREC1356). The Committee also reviewed and approved the final report prior to publication.

3.2.2 Governance

An internal Governance Committee and Project Group were established for the planning, development and administration of SOS25. A Project Steering Group, Expert Panel and Research Working Group were established for the planning, development and administration of SOS19.³ These groups were not reconvened for regular meetings in relation to SOS25.

3. Methodology

3.3 Data collection and fieldwork

A core strength of SOS is the direct administration of the survey by the Commissioner and staff. This approach encourages students to participate independently, without school interference or 'surveillance', consistent with the survey's purpose of enabling children and young people to freely share what matters most to them in relation to their wellbeing.

All schools identified as part of the sampling process were contacted by the Commissioner's office via email and phone to invite them to participate in the survey. When schools opted in, a consent form was completed and returned to the Commissioner's office. Following opt-in confirmation, a mutually suitable time and date was set for CCYP staff to administer the survey within the school.

All classes in Years 4 to 6 of the selected school were asked to participate. Principals or school coordinators were asked to select a random sample of classrooms from each year group in Years 7 to 12, based on the number of students required for the survey. Schools were asked to distribute the participant information forms and opt-out forms to all parents/carers at least twice. The parental distribution took place a minimum of two weeks before the survey, to provide parents with enough time to decide.

The survey was implemented through the same survey platform used in SOS21. The platform allowed for survey branching, audio delivery of questions and responses, and linking each student to their school. Branching enabled students to view the main questions and any additional items were applied based on how they had responded in the questionnaire sequence (non-relevant questions were bypassed).

CCYP staff visited each school with tablets and Wi-Fi modems to administer the survey. Each student was provided their own tablet and school-specific code. Students were given headphones, enabling them to have the survey questions and answers read aloud to them by the app. While students were able to revisit their previous questions before confirming their full survey response, once the response had been submitted, the survey submission was then unable to be accessed or edited via the tablet. All data transferred between the tablet and the survey's file server was encrypted. Tablets were then returned to the office, and additional checks were performed to ensure all surveys had been correctly uploaded.

The Commissioner's survey administration and oversight was designed to ensure methodological rigour and reliability of data. The Commissioner's staff handled all introductions, supervised the sessions, and addressed any student questions. The role of a school staff member who remained in the room during sessions was confined to providing duty of care oversight. Where possible, classrooms were set up in an exam-like configuration, to ensure privacy and minimise distractions. Students were reminded the survey was optional, and their responses would remain private. All these procedures were designed to reduce the likelihood of students responding in socially desirable ways.⁴

The data collection was conducted during terms 2 and 3 of the 2025 school year.

3. Methodology

3.3.1 Consent

Consistent with the protocol of previous SOS iterations, school principals decided, via an “opt-in” approach, if their schools would participate in the 2025 survey. Once schools opted in, parents and caregivers were informed about the survey and asked to decide whether to consent for their children to participate. Consent was assumed unless a parent specifically advised otherwise. Children were also able to opt-out at any point, including before and during, the survey. The right to opt-out was an integral part of the study design to ensure that students felt safe and comfortable when participating in the survey, enabling honest responses representative of the student population.

3.4 Data analysis

3.4.1 Data processing

Collected data was reviewed each week to ensure the number of surveys submitted matched school headcounts and to review open-text responses for any issues identified under the ethics protocol. Demographic patterns were also monitored throughout the process to confirm participation levels were as expected across remoteness categories, school sectors, year levels, gender, CaLD background and Aboriginal status.

Halfway through the data collection process, an interim analysis was conducted examining school and student participation patterns, equity group representation, and data quality. This analysis made recommendations, which were implemented, regarding specific strata requiring additional focus to improve representativeness of the final sample.

Upon completion of the data collection, data was exported from the survey platform. The data was cleaned and wrangled using RStudio. The cleaned data was then uploaded into Power BI for further analysis and data visualisation.

This summary report shows how students responded to the questions, such as the percentage who ‘strongly agree’ or ‘strongly disagree’. While these figures are technically statistical ‘estimates’, they are described as ‘results’ in this report.

The findings presented in this report are weighted to reflect the broader student population. As with any survey based on a sample, the results are subject to sampling variability and may differ if a different group of students had participated. This should be considered when interpreting and generalising the weighted findings.

Qualitative follow-up questions used to clarify student responses were initially run through RStudio to be categorised. The categories and responses were reviewed by the CCYP research team to ensure that student responses had not been incorrectly categorised. Open-ended qualitative questions were analysed by the CCYP research team using thematic analysis.

3. Methodology

3.4.2 Survey weights

To ensure survey findings accurately represented WA's children and young people's views, a sampling strategy designed to select schools providing representation of the whole student population was conducted. As participation varied across schools and student groups, weighting was essential to address any potential bias of students or groups more likely to participate. Without weighting, the findings would be biased and not provide an accurate picture of the broader Years 4 to 12 population.

The weighting strategy adopted was consistent with the approach used in SOS19 and SOS21. The strategy uses probability methods to increase the influence of underrepresented students and reduce the influence of overrepresented students, enabling conclusions to be drawn about the wider student population. This ensures findings are representative and reliable for policy and research purposes.

The weighting strategy was developed and conducted by an external consultant. The weighting approach for both the Child Survey and the Young People Survey followed standard practice for large school surveys.⁵ Calculation of the weights included adjustments for non-response, trimming of extreme values, and calibration. After applying the weightings, the weighted data was compared with the unweighted data to confirm that the weights did not misleadingly alter the response patterns. The weighted results closely matched the unweighted results across all indicators.

As the population data used for weighting included only male and female categories, it was necessary to redistribute students who selected 'in another way' in proportion to the male–female ratio within each stratum. This step was essential to ensure the

weighted results accurately reflected the demographic structure of WA schools. Without this adjustment, the sample could not be aligned with the population totals, which would have affected result accuracy. Redistributing students proportionally maintained the gender balance within each stratum, while maintaining consistency with the available population data.

As CaLD was part of the sampling strategy, a definition was adopted for the purpose of weighting. CaLD identification in the SOS25 dataset was based on three variables: (i) students born outside Australia were classified as CaLD; (ii) students identifying as Aboriginal or Torres Strait Islander were not classified as CaLD; and (iii) students who reported speaking one or more languages other than English at home were classified as CaLD.

As some schools within specific strata recorded low response rates and low levels of student participation, the weighting methodology assigned higher weights to responses from students in under-represented schools and regions. (More detailed discussion of the issue appears in section 4.2.1 of this report – 'Participation rates'). The adopted approach ensures these students contributed proportionally to population estimates but also increased the influence of a relatively small number of respondents. When a small group carries disproportionately large weightings, the resulting estimates can become more sensitive to their individual characteristics, which may reduce stability and introduce potential bias. This issue is particularly relevant for children and young people in inner-regional locations, where participation was lowest. This also led to the strata for remote and very remote young people being combined.

3. Methodology

3.5 Strengths and limitations

A unique strength of the Speaking Out Survey is its independent administration by the Commissioner's office. The Commissioner and all staff visited schools to administer the survey. This approach minimises the potential of schoolteachers or staff influencing student responses. A minimum of two staff visited each school, ensuring consistency in the protocol and delivery, and ensuring CCYP staff were always available to answer any student questions.

The sampling strategy was based on the evaluation of SOS21, with some adaptations in light of experience. This strategy was found to be effective and generated a reliable sample size representative of the various subgroups identified. Weighting was applied after data collection to account for varying response rates and to more accurately reflect the underlying population of WA students within the findings.

Unfortunately, as the survey responses were all completed in person, those students not at school on the day CCYP visited could not participate. This means the survey may have been unable to fully capture the voices of more vulnerable students, particularly at schools with lower-than-average attendance rates.

A limitation of the survey methodology is the inability to report on students who selected 'in another way' as a distinct group (in relation to their gender). Because population data only includes male and female categories, we were unable to weight the 'in another way' category separately. As a result, while the redistribution ensures accurate population-level estimates, it also means the experiences of students who selected 'in another way' cannot be analysed independently.

Questions relating to gender diversity were not supported by schools for inclusion in the survey at this time. Given there is substantial research demonstrating gender and/or sexuality diverse children and young people have specific, unmet needs, it is hoped this can be resolved in future surveys.

All schools identified in the sampling strategy were contacted, but school response rates were lower than expected, particularly when compared with the response rates in SOS21. To account for low response rates in certain areas, some strata were combined.

Participants

4



4. Participants

4.1 Schools

In total, 266 schools were included within the sampling strategy – 151 primary schools and 115 secondary schools. This sample was randomly selected and calculated to appropriately represent WA schools, stratified by school sector and remoteness. The sampling strategy anticipated 65 per cent of primary schools and 50 per cent of secondary schools agreeing to participate. As identified in the Limitations discussion above, school response rates were lower than anticipated. The final sample comprised 55 participating primary schools (a 36.4% response rate) and 43 secondary schools (37.4% response rate).

The number of primary schools in the survey was representative of the proportion of schools from each of three sectors in WA (government, Catholic and independent). Catholic secondary schools are slightly underrepresented within the final sample, due to their low participation rate. In remote areas, schools located in inner regional areas were the least likely to participate.

Combined schools (those with both primary and secondary students), initially selected for only one year group, were able to participate in both surveys.

An additional 26 schools were selected non-randomly and accepted the invitation to participate in the survey. As these schools were not part of the sampling strategy, the results from these schools will be included in separate reporting and have not been included in the SOS25 summary report.

4.2 Students

After removing incomplete and invalid responses, a total of 16,169 students across Years 4 to 12 made up the final total. Prior to weighting, 2,653 students from schools that formed part of the additional sample were removed from the final survey sample used in this report. Additionally, students aged 18 years were not included in the report, as the Commissioner's remit is limited to children and young people aged 0–17 years. The final sample therefore comprised 13,516 students, consisting of 5,611 students from Years 4 to 6, and 7,905 students from Years 7 to 12.

Two-thirds of children (66.6%) and young people (64.4%) in the final sample, attended government schools. Eighteen per cent of children, and 8.1 per cent of young people attended Catholic schools. For independent schools the proportion of young people who participated (27.4%) was higher than children (15.4%).

Across both the Child Survey and the Young People Survey, more than 77 per cent of students attended schools in the metropolitan area. The proportion of students who identified as Aboriginal or Torres Strait Islander was approximately eight per cent: 9.9 per cent of respondents in the Child Survey and 6.6 per cent in the Young People Survey.

These figures represent the number and proportion of students who consented to participate and answered the first three demographic questions of the survey, whose results have been included within the summary report.

4. Participants

4.2.1 Participation rates

The expected participation rate in SOS25 was 75 per cent for the Child Survey and 65 per cent for the Young People Survey, based on the participation rates previously observed in SOS21.

Student response rates for the Child Survey exceeded expectations, totalling 78 per cent across all strata. Participation rates across all individual strata exceeded 70 per cent, which demonstrated strong engagement across all participating schools. Participation rates for young people were found to be satisfactory at 69 per cent, but several strata fell significantly below this average. Secondary schools in inner regional and outer regional areas only achieved student participation rates of 40 per cent, while those in remote and very remote areas achieved 50 per cent.

The data for regional areas may not fully reflect data for the broader regional population, due to the low school participation rates and low student participation rates, even after weighting – given that the weighted estimates rely heavily on a smaller and potentially non-representative subset of students. As a result, comparisons involving young people in inner-regional and outer-regional groups should be interpreted cautiously, acknowledging estimates may be less precise and potentially biased due to the limited sample.

4.2.2 Gender

The survey provided three gender options for students to select how they described themselves: Boy, Girl, or 'in another way'. For weighting purposes, the proportion of respondents selecting 'in another way' was too small to produce reliable estimates. These students were therefore redistributed proportionally across the male and female

categories within each stratum. This approach preserved the overall distribution of gender within strata, while maintaining consistency with available population totals.

There were minimal differences in the gender responses across the Child Survey and Young People Survey. Prior to weighting, in the Child Survey 49.0 per cent of respondents identified as female, 49.6 per cent as male, and 1.4 per cent as 'in another way'. Similarly, within the Youth Survey, 49.7 per cent identified as female, 48.4 per cent identified as male, and 1.9 per cent identified as 'in another way'. Following weighting, the Child Survey distribution was 49.7 per cent female and 50.3 per cent male, while within the Youth Survey the distribution was 50.6 per cent female and 49.4 per cent male. It should be noted that it was not possible to determine whether participants' reported gender was the same as the gender assigned at birth.

4.2.3 Aboriginal children and young people

In total, 1,373 Aboriginal children and young people participated in SOS25, including 640 Year 4 to 6 students and 733 Year 7 to 12 students. However, 296 Aboriginal students were removed from the main total used for the summary report as they were over 18 years old or attended a school from the additional sample. The remaining 1,077 students included 558 Year 4 to 6 students and 519 Year 7 to 12 students.

Prior to weighting, 0.9 per cent of Aboriginal children and 2.9 per cent of Aboriginal young people identified as 'in another way'. Following weighting, there were almost equal gender distributions among children (girls 48.8%; boys 51.2%) and young people (girls 51.4%; boys 48.6%).

4. Participants

Nearly half of the Aboriginal children who participated were from the metropolitan area (47.4%), with smaller but substantial subsets coming from outer regional areas (18.8%) and remote areas (17.7%). Similarly, most of the Aboriginal young people were from the metropolitan area (52.4%), followed by young people from remote/very remote areas (29.7%), and from outer regional areas (13.1%).

4.2.4 Culturally and linguistically diverse (CaLD) children and young people

Emphasis was placed on ensuring adequate representation of CaLD students, as this group is often underrepresented in school-based surveys due to linguistic, cultural, or engagement barriers. Ensuring their inclusion helps produce estimates that better reflect the diversity of the population, while also reducing the risk of systematic bias in outcomes that may differ across cultural and linguistic backgrounds.

In total, 4,718 CaLD children and young people participated in SOS25 – more than one-third of the included sample. When examining the number of students by year group, this equates to 2,043 Year 4 to 6 students (36.4%), and 2,675 Year 7 to 12 students (34.4%). Prior to weighting, 1.8 per cent of children and 1.9 per cent of young people identified as ‘in another way’. Following weighting, there was a relatively equal proportion of each gender across children (girls 49.3% vs boys 50.7%) and young people (girls 50.4% vs boys 49.6%).

Nearly nine in 10 CaLD children (89.2%) and young people (88.8%) were from schools in the metropolitan area.



Speaking Out Survey 2025 findings

5



5. Speaking Out Survey 2025 findings

The findings presented in this report are structured according to the Commissioner's Monitoring Framework and its three interlinking wellbeing domains of 'Healthy and Connected', 'Safe and Supported' and 'Learning and Participating'. These three domains are important indicators of wellbeing, reflecting what children and young people across Western Australia have identified as having a meaningful impact on their lives. It is important to note the indicators in each of the domains are linked and the data in one domain cannot be fully considered without considering the information in the other two domains.

The results shown in graphs represent percentages unless otherwise stated. Total percentages in graphs may not add up to 100 due to rounding, or due to certain response options not being included (e.g. 'prefer not to say').



Healthy and connected

6



6. Healthy and connected

Children and young people’s overall wellbeing is closely tied to their physical health, mental health, their sense of belonging within their community and culture. The key aims of this domain are to ensure that children and young people maintain good physical and mental health; adopt positive and healthy lifestyle habits; and feel valued, included and connected.

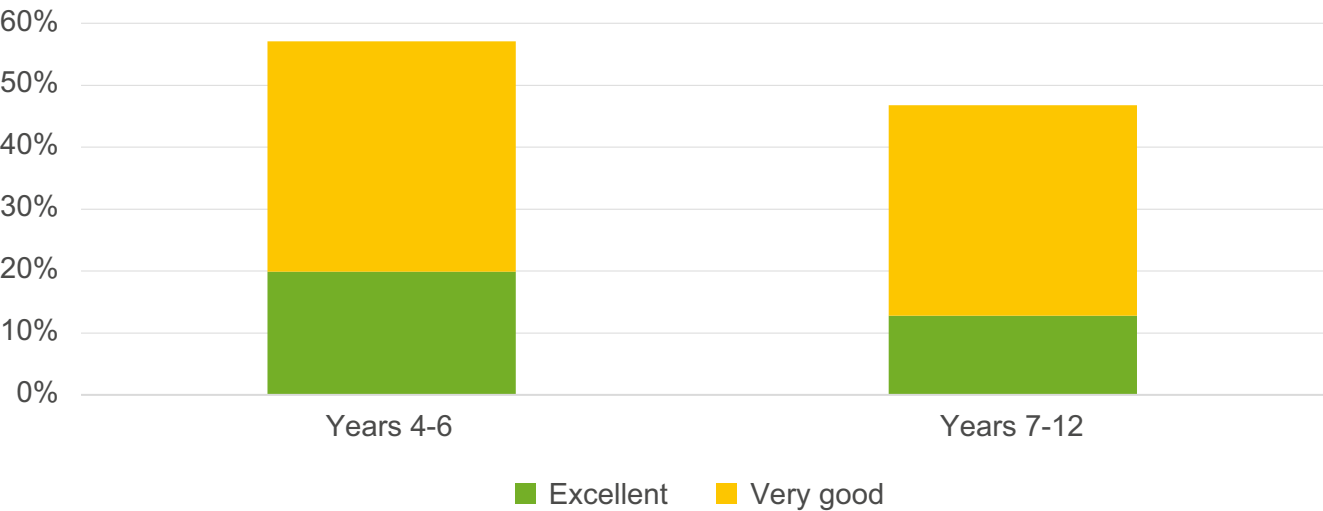
To assess if these aims are being met, students were asked a variety of questions about their physical activity and general health, their emotional wellbeing, levels of resilience and stress. Young people were also asked about their knowledge of alcohol, drugs and sexual health, as well as about their own direct experiences. The survey also asked children and young people about their community, participation in activities outside school, and their use of available supports.

6.1 Physical health

All children and young people have the right to be well, safe, healthy and thriving. In accordance with the United Nations Convention on the Rights of the Child, children and young people have the right to enjoy the highest possible standard of health, with access to high quality, accessible health services.⁶

A strong foundation for children’s holistic development, future success, learning, and overall wellbeing begins with good physical health. This includes staying active, eating a balanced diet, and maintaining a healthy weight. Students in Years 4 to 12 are at a pivotal stage for forming positive health habits that will support their wellbeing throughout life and help prevent harmful health behaviours.⁷

Graph 6.1.1 Proportion of Year 4 to 12 students rating their perception of health as excellent or very good, by year group



6. Healthy and connected

6.1.1 Perceptions and concerns of physical health

Focusing on children's perceptions of their health is essential, as the attitudes and behaviours they develop early in life tend to persist into adulthood. When children view themselves as capable, healthy and active, they are more likely to adopt and maintain health-promoting behaviours throughout their lifespan.⁸

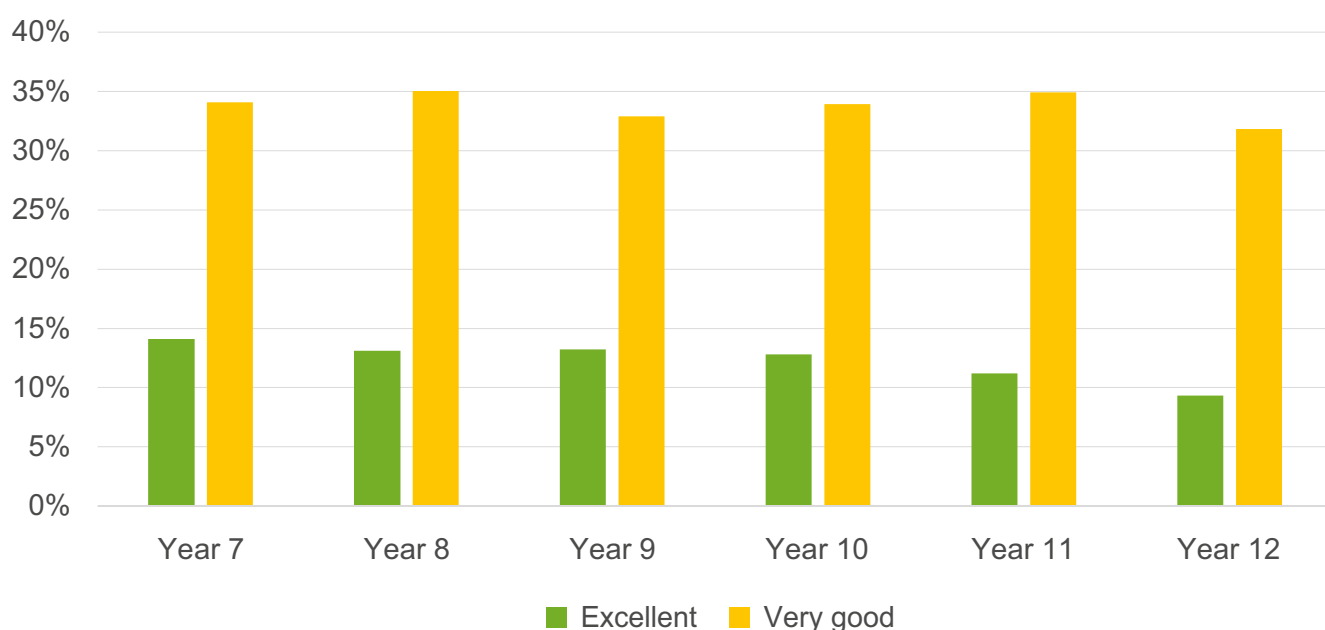
Consistent with the previous SOS21 findings, self-perceptions of physical health appeared to decline as children became older, with children in Years 4 to 6 viewing their health more positively than young people in Years 7 to 12.

Notably, Year 12 students were less likely to identify their health as 'excellent' (9.3%) or 'very good' (31.8%) compared to Year 7 students (excellent 14.1%, very good 34.1%).

The gender disparity between perceptions of physical health widens with age, notably in the transition between children in primary school and young people in secondary school.

As girls become older there is a notable decline in their self-perceived health. Almost one in five (18.4%) girls identified their health as 'excellent' in primary school, while only 8.0 per cent of girls considered their health 'excellent' in secondary school. Boys' perception of their health remains more consistent, with 21.4 per cent of primary school boys identifying their health as 'excellent', compared to 17.4 per cent of secondary school boys. Girls in Years 7 to 12 are notably less likely than boys to report their general health as 'excellent' or 'very good' (girls 38.1% vs boys 53.5%). When comparing genders across all ages, the findings are consistent with those of SOS21.

Graph 6.1.2: Proportion of Year 7 to 12 students rating their perception of health as excellent or very good, by school year

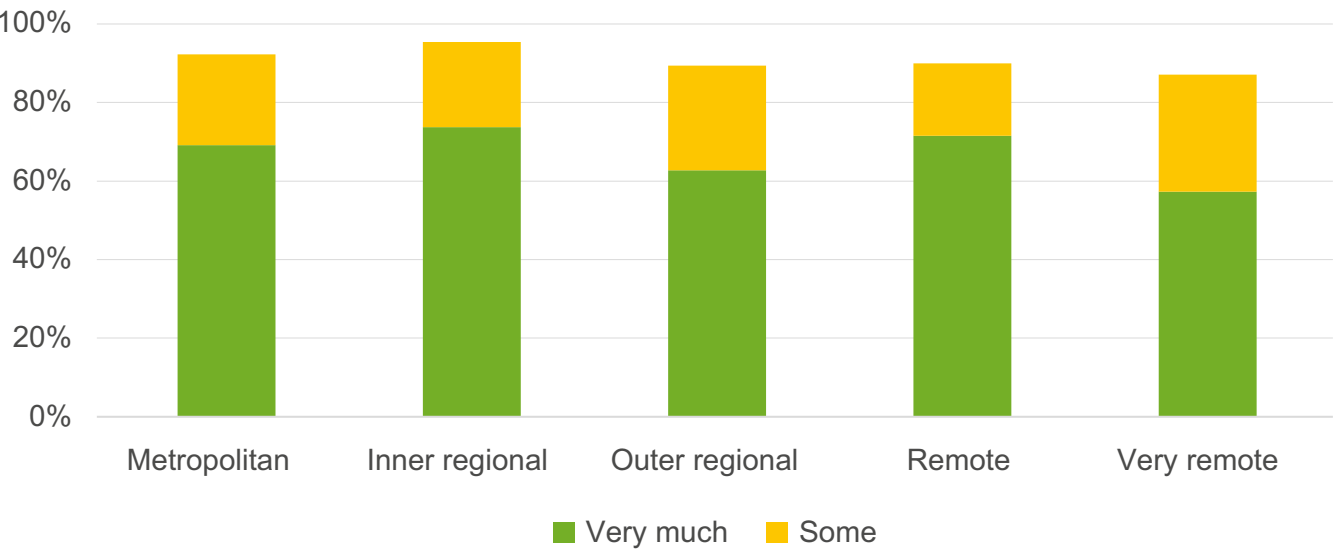


6. Healthy and connected

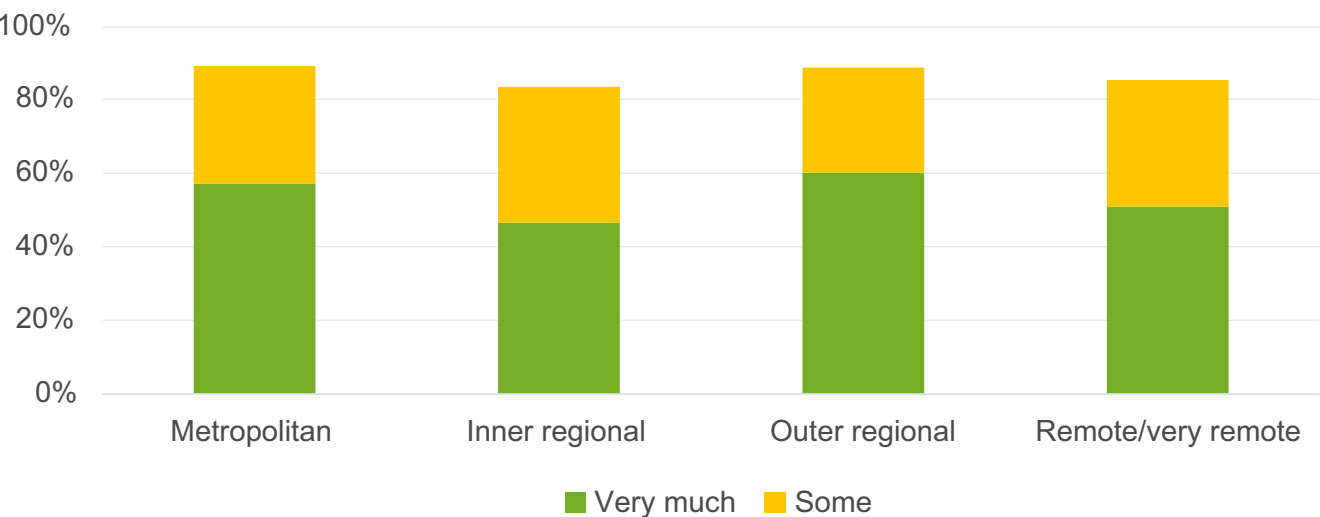
When we asked children how much they cared about eating healthy and staying fit and physically active, responses varied widely according to gender and age. For example, Years 4 to 6 girls reported caring ‘very much’ about healthy eating at a higher rate than boys (girls 51.6% vs boys 44.8%), although no large difference was reported among Years 7 to 12 boys and girls. Boys in Years 4 to 6 expressed caring

‘very much’ about staying fit and being physically active at a higher rate than girls (boys 71.4% vs girls 66.3%); however, the majority expressed the importance of staying active. Years 4 to 6 students in very remote areas and Years 7 to 12 students in inner regional and remote/very remote areas were less likely to report caring ‘very much’ about staying fit and active, compared to students located in other areas.

Graph 6.1.3: Proportion of Year 4 to 6 students rating the importance of being active as very much or some, by remoteness



Graph 6.1.4: Proportion of Year 7 to 12 students rating the importance of being active as very much or some, by remoteness



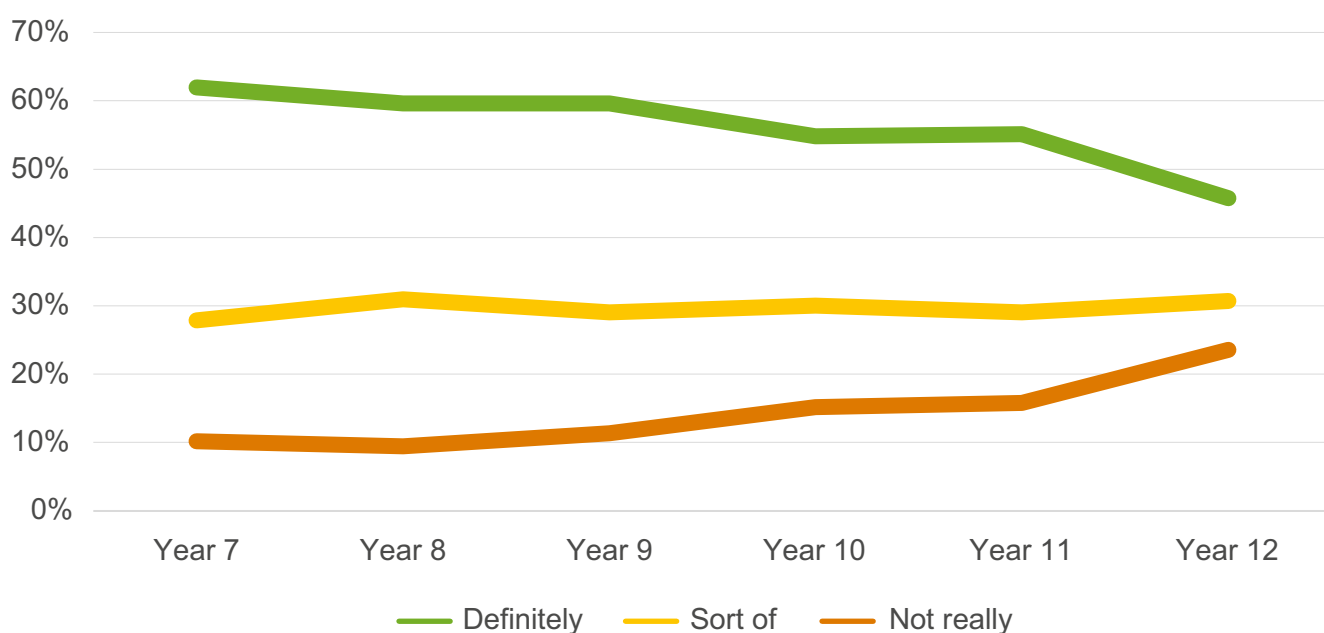
6. Healthy and connected

6.1.2 Physical activity

It is recommended that children and young people participate in at least 60 minutes of moderate to vigorous physical activity that makes the heartbeat faster each day.⁹ Regular physical activity is essential for healthy physical, mental and social development, promoting bone and muscle development, coordination, improved mental health,⁹ and developing social skills when playing with others.¹⁰

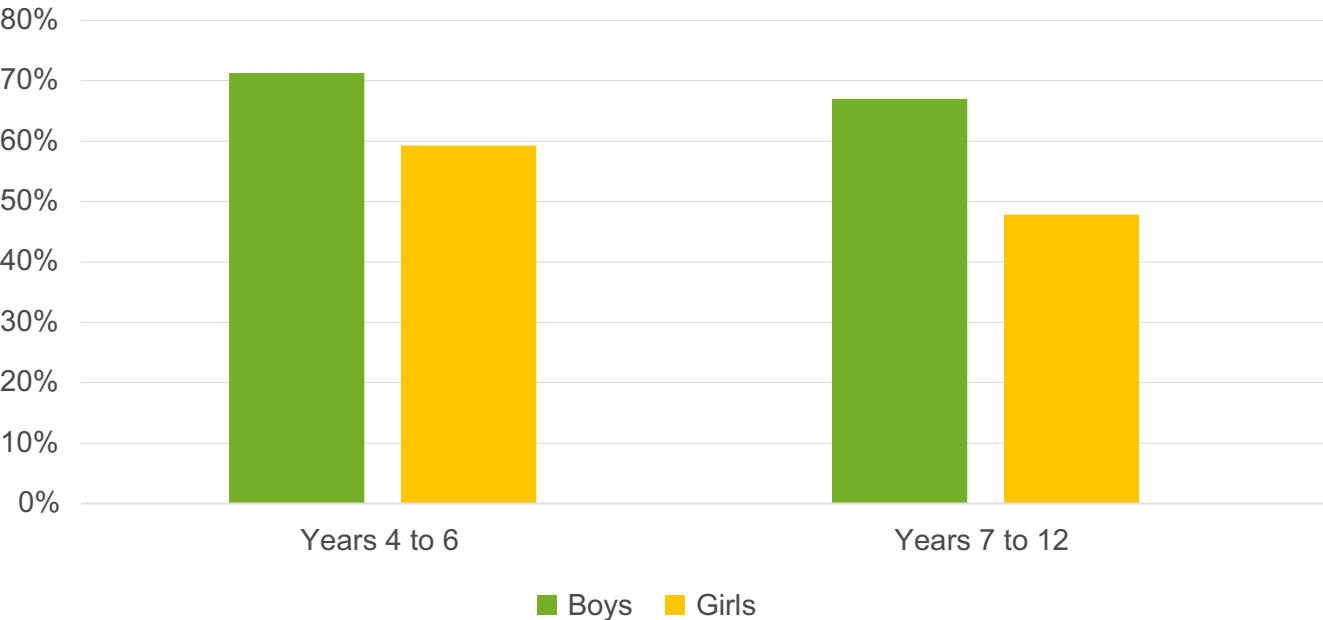
Most Years 4 to 6 and Years 7 to 12 students reported that sport was important to them, with Years 4 to 6 students (65.4%) slightly more likely to report that playing sport was 'definitely' an important part of their life when compared to Years 7 to 12 students (57.6%). The importance of sport appeared to decrease as young people aged, which would likely be related to increasing pressure of academic studies, other extra-curriculars, and prioritising spending time with friends.¹¹

Graph 6.1.5: Proportion of Year 7 to 12 students rating the importance of sport as definitely, sort of, or not really, by school year



6. Healthy and connected

Graph 6.1.6: Proportion of Year 4 to 12 students rating the importance of sport as definitely or sort of (combined total), by gender and year group



Consistent with SOS21 findings for both children and young people, boys were more likely to consider sport an important part of their life compared to girls. Girls often receive less encouragement and support from their families, schools, or broader social expectations, to take part in extracurricular sports from a young age.¹² This would naturally have an impact on how young girls view and prioritise sports in their own lives.

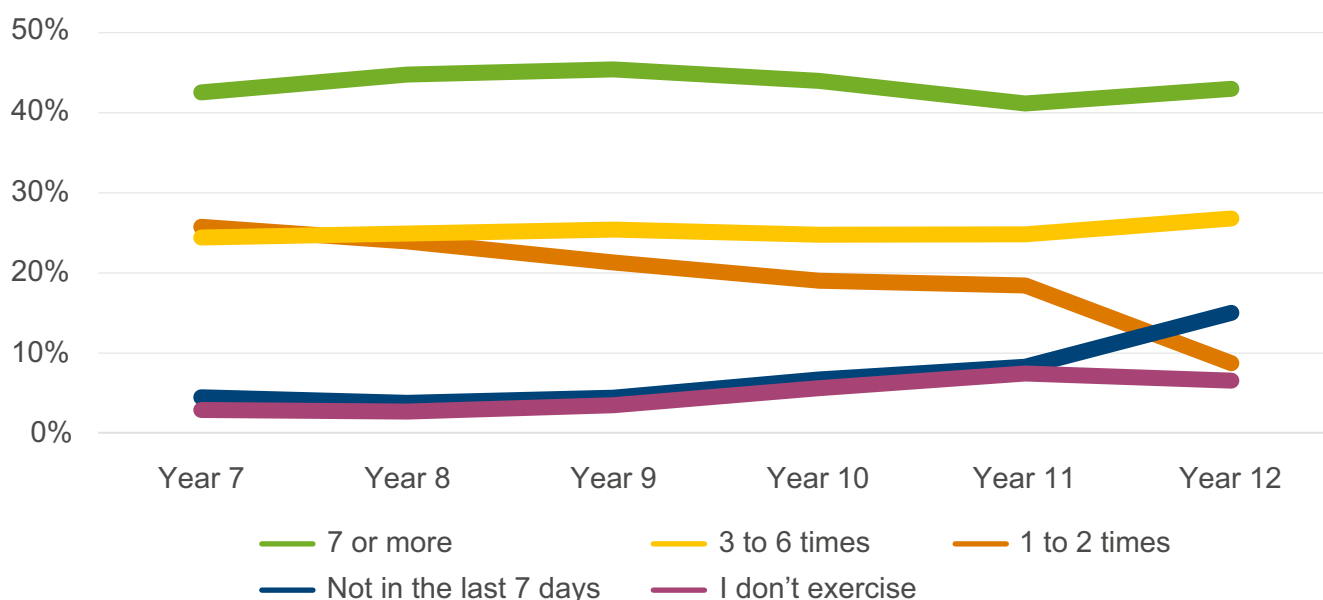
When asked how often they exercised or completed an activity that increased their heart rate in the past seven days, boys in primary school were found to more frequently engage in physical activity.

Only 37.0 per cent of boys and 23.3 per cent of girls in primary school met the recommended levels of activity suggested by the Department of Health. This further decreases in secondary school, with only 30.5 per cent of boys and 11.2 per cent of girls reporting that they engaged in physical activity ‘7 or more times’ in the past week.

The proportion of young people engaging in activity ‘7 or more times’ a week decreased notably with age but remained quite consistent for students exercising ‘3-6 times’ a week.

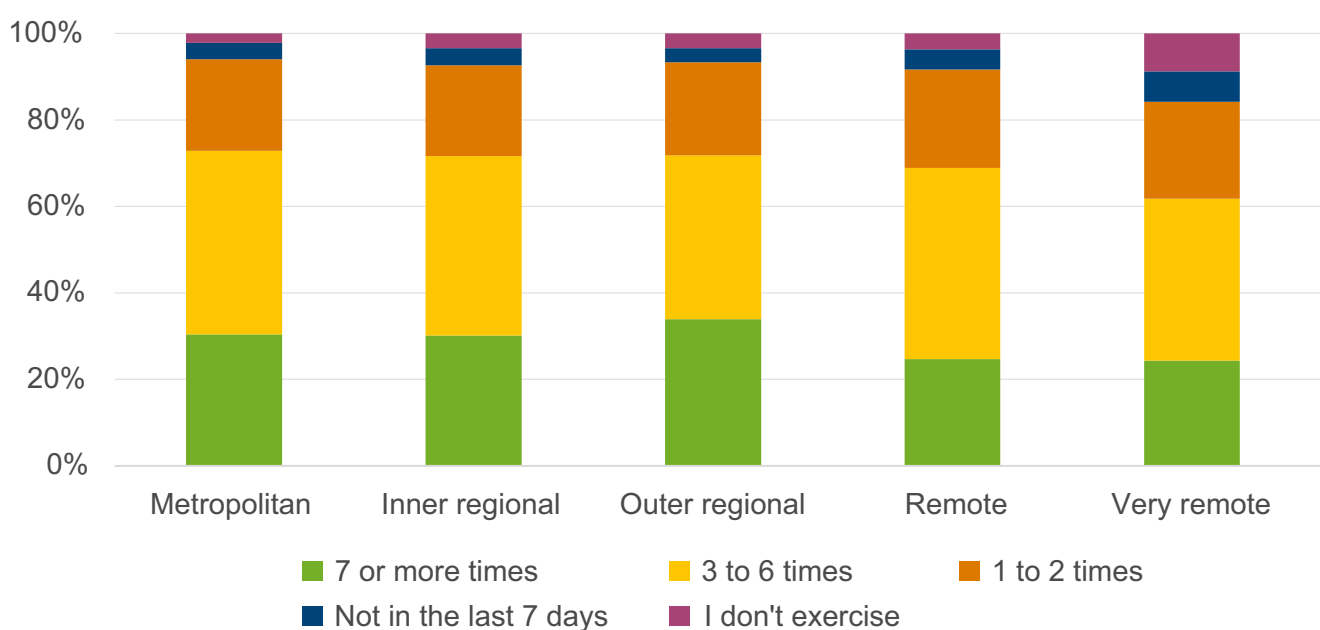
6. Healthy and connected

Graph 6.1.7: Frequency of Year 7 to 12 students engaging in physical activity in the past 7 days, by school year



Children living in very remote areas, and young people in inner regional and remote/very remote areas, were the least likely to engage in physical activity more than three times a week (combined). This is unsurprising as children in remote areas face multiple barriers to participation, including fewer resources and opportunities and longer distances to travel.¹³

Graph 6.1.8: Frequency of Year 4 to 6 students engaging in physical activity in the past 7 days, by remoteness



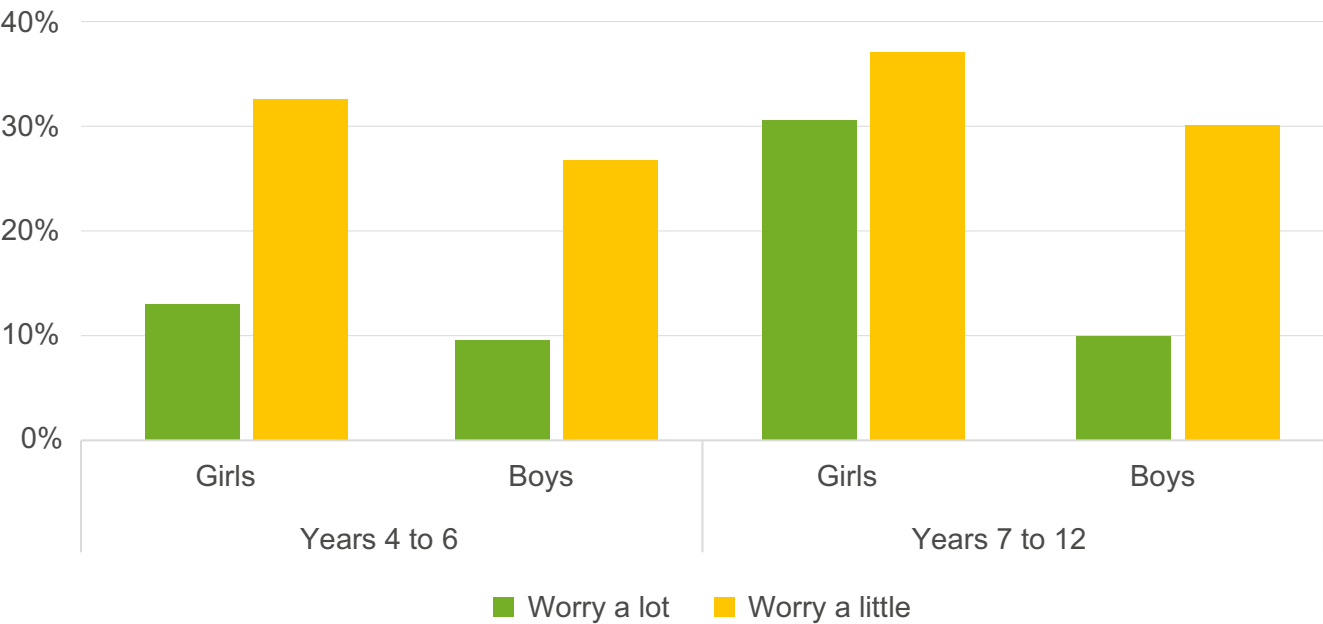
6. Healthy and connected

6.1.3 Concern about weight

Both children and young people expressed worry about weight. This worry became more prevalent among older age groups. While more than forty per cent (42.6%) of students

in Years 4 to 6 worried about their weight, more than half of students in Years 7 to 12 (54.0%) said they worried about their weight. Girls were more likely to be worried about their weight than boys.

Graph 6.1.9: Proportion of Year 4 to 12 students reporting they are worried about weight a lot or a little, by gender and year group



6. Healthy and connected

Table 6.1.1: Young people's perceptions of their weight by remoteness (percentage)

	Very/slightly overweight (%)	About the right weight (%)	Very/slightly underweight (%)
Metropolitan	25.8	53.2	21.0
Inner regional	35.7	43.5	20.8
Outer regional	26.1	52.3	21.6
Remote/very remote	25.3	52.7	22.0

When young people were asked about their weight, 52.4 per cent thought they were 'about the right weight', however 26.6 per cent said that they were overweight. Girls were more likely to think they were overweight (girls 31.7% vs boys 21.7%) and boys were more likely to think they were underweight (boys 25.5% vs girls 16.3%). Young people in inner regional WA were most likely to identify themselves as 'very or slightly overweight', and those in remote areas were most likely to identify themselves as 'slightly or very underweight' (Table 6.1.1).

Our findings indicate that weight-related concerns are affecting a growing number of children and young people. Self-perception of physical appearance is closely linked to mental health, with positive perceptions associated with higher self-esteem, stronger emotional resilience, and more optimistic outlooks. Conversely, negative self-perception can lower self-esteem, increase vulnerability to stress, and elevate the risk of anxiety, depressive symptoms, and eating disorders.¹⁴

These concerns also differ notably according to gender, with girls more likely to worry about their weight and to perceive themselves as overweight. Given the clear links between appearance-related concerns and poorer mental health outcomes, it is essential that policy and service responses prioritise early identification and support. Critical measures for supporting healthier outcomes for all young people include strengthening school-based wellbeing initiatives; improving access to evidence-informed mental health services; and creating environments that reduce appearance-based pressures.

6. Healthy and connected

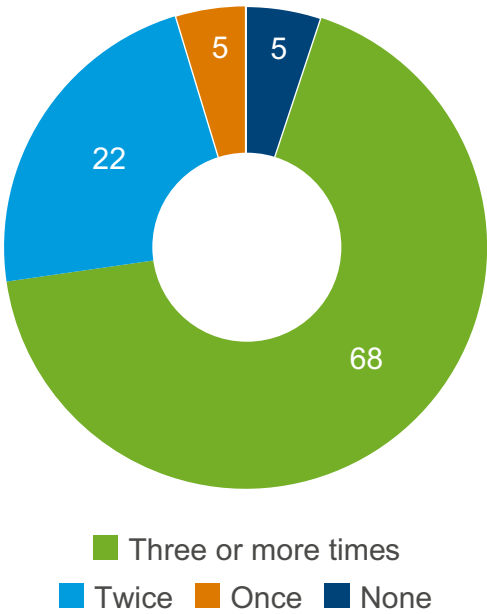
6.1.4 Oral health

Good oral health is a fundamental component of overall health and wellbeing. Poor oral health can significantly affect a person’s quality of life by limiting their ability to eat, speak and socialise, and can lead to pain, discomfort and reduced confidence.^{9,15}

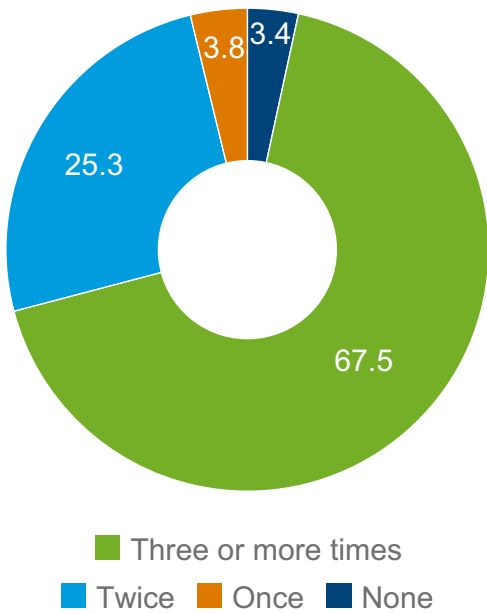
Poor oral health is associated with increased risk of chronic disease later in life, including stroke and cardiovascular disease.^{16,17} Children with poor oral health are also more likely to miss school and perform poorly in school.¹⁸

More than seven in 10 students in Years 4 to 6 (72.8%) and in Years 7 to 12 (71.0%) reported brushing their teeth twice a day or more, while nearly 4.7 per cent of Years 4 to 6 students and 3.4 per cent of Years 7 to 12 students reported that they do not brush their teeth daily. Years 7 to 12 students in remote areas were most likely to not brush their teeth daily, whereas Years 4 to 6 students in inner regional areas were the most likely to not brush their teeth daily. The proportion of Years 4 to 6 students and Years 7 to 12 students who did not brush their teeth is consistent with SOS21, indicating there has not been much improvement in this space in the past five years.

Graph 6.1.10: Proportion of Year 4 to 6 students brushing their teeth three or more times, twice, once, or none times a day (percentage)

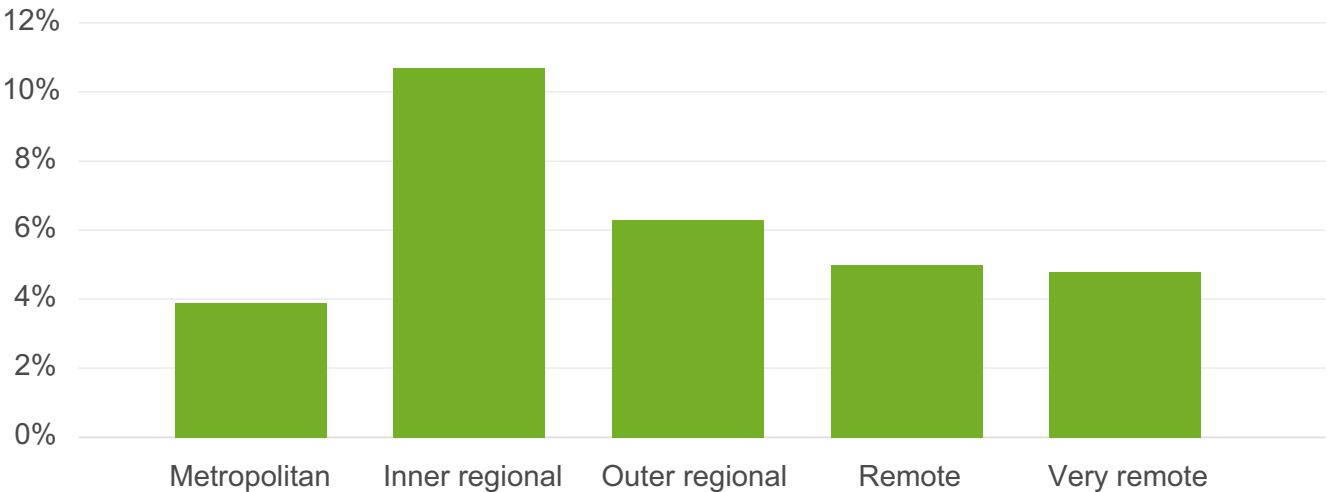


Graph 6.1.11: Proportion of Year 7 to 12 students brushing their teeth three or more times, twice, once, or none times a day (percentage)

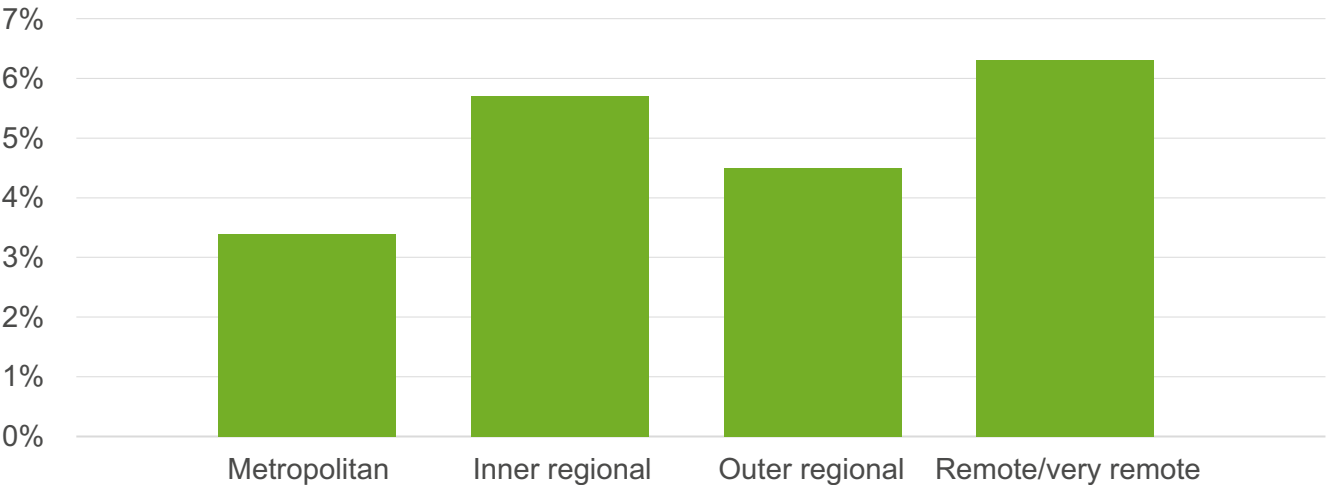


6. Healthy and connected

Graph 6.1.12: Proportion of Year 4 to 6 students who did not brush their teeth daily, by remoteness



Graph 6.1.13: Proportion of Year 7 to 12 students who did not brush their teeth daily, grouped by remoteness



In addition, almost one in two children (44.6%) and young people (50.7%) reported having had at least one dental filling, with prevalence slightly higher among those living in inner regional and very remote areas.

People living in regional and remote areas face significant barriers to accessing

timely oral health care. Limited availability of dental practitioners means families often need to travel long distances, sometimes with few or unreliable transport options. These challenges reduce their ability to receive appropriate and timely care, contributing to poorer oral health outcomes.¹⁷

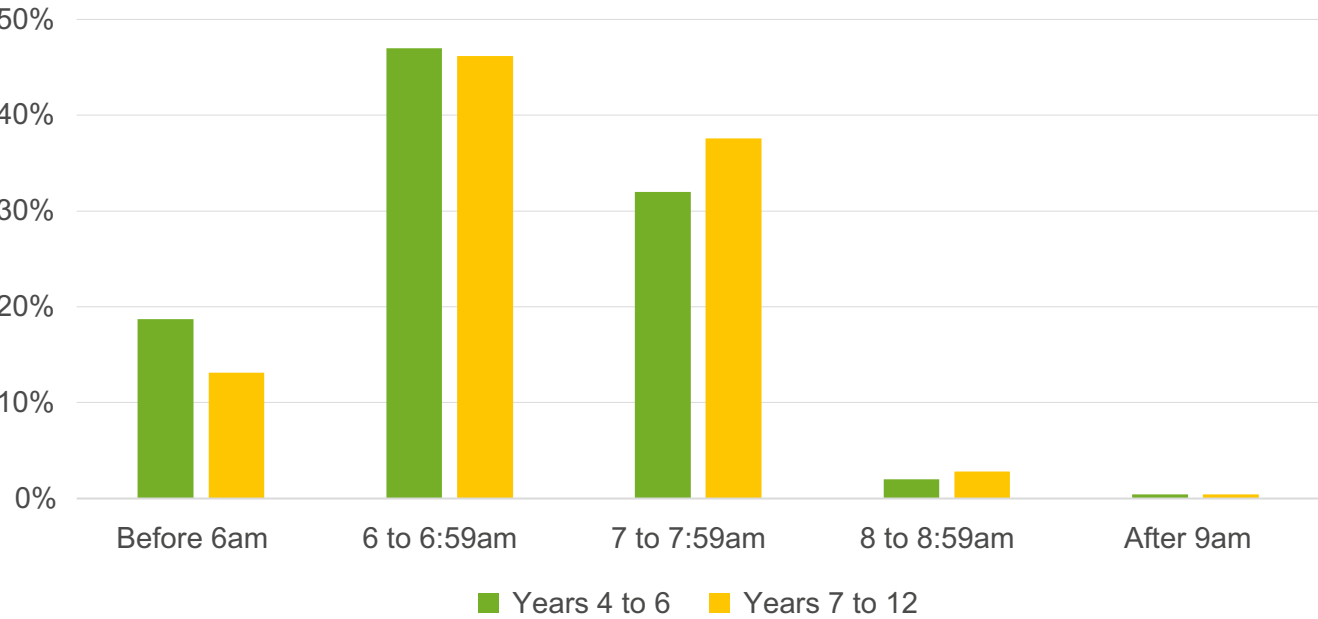
6. Healthy and connected

6.1.5 Sleep

Consistent, high-quality sleep is essential for children and young people because it supports healthy physical growth, cognitive development, and emotional regulation.^{19,20} During sleep, the brain processes new information, strengthens memory, and restores energy needed for learning and daily functioning. Insufficient sleep can affect concentration, behaviour, mood, and overall wellbeing, making strong sleep habits a key foundation for healthy development.²⁰

According to the Sleep Health Foundation, school-aged children (ages 6-13 years) should obtain nine to 11 hours of sleep per night, whereas sleeping less than seven hours is not recommended. For teenagers (aged 14-17 years), eight to 10 hours of sleep is recommended, whereas less than seven hours is considered inadvisable.²¹ While the survey did not explicitly ask the question of how long children and young people slept on average, we were able to estimate the average number of hours slept per night based on the time children and young people reported going to sleep and waking up.

Graph 6.1.14: Distribution of reported wake-up times among students in Year 4 to 12, by year group



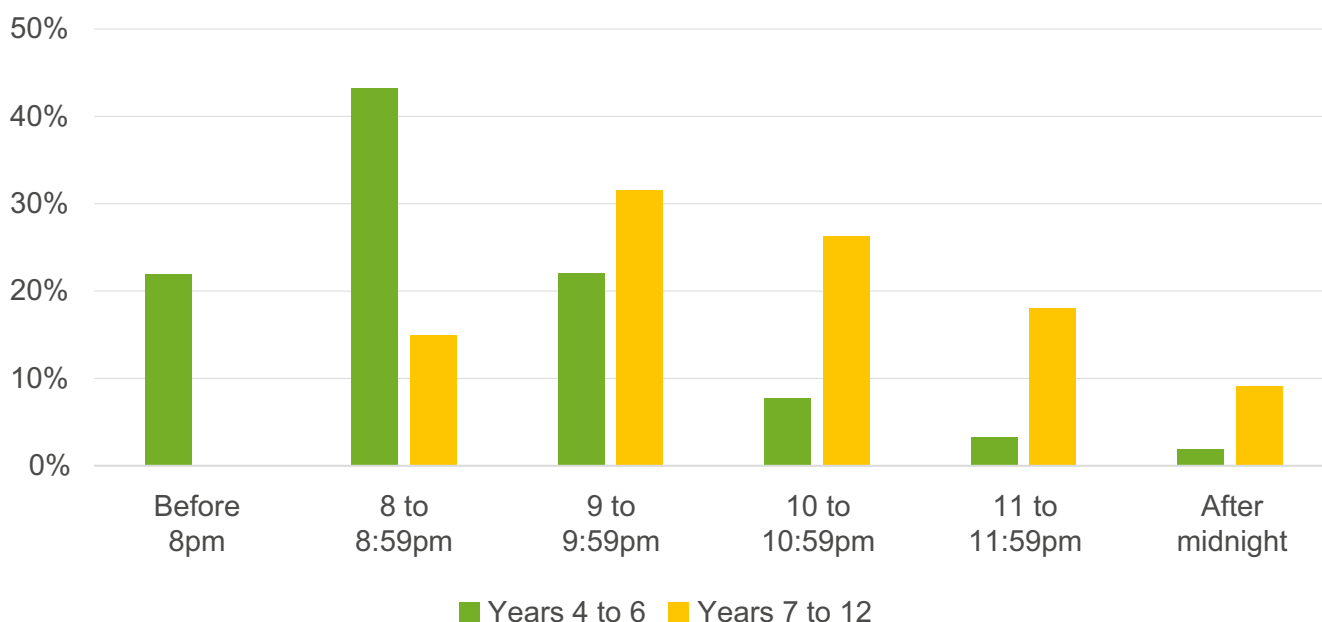
6. Healthy and connected

For children, a large proportion (65.1%) reported going to bed before 9.00pm. With increasing age, children and young people begin going to bed at a later time, particularly as they become older teens. Specifically, 26.8 per cent of those in Year 4 went to bed after 9.00pm, in comparison to 43.8 per cent of those in Year 6, and 14.0 per cent of those in Year 7 reported going to sleep after 11.00pm, in comparison to 51.2 per cent of those in Year 12. This is consistent with changes to circadian rhythms of adolescents.²² A slightly larger proportion of girls in secondary school (57.5%) reported going to bed after 10.00pm, compared to boys (49.4%).

Notably, children located in very remote areas were far more likely to wake up before 6.00am (32.3%) in comparison to children residing in the metropolitan area (17.0%).

Half of all secondary school students reported waking up before 7.00am on a school day, placing the median wake-up time in the '6.00-6.59am' range. Overall, the median bedtime for secondary school students fell between '10.00pm and 10.59pm', indicating that at least half of students go to sleep after 10.00pm on school nights. Together, the data suggests that the median secondary school student sleeps for around seven to eight hours per night on school days. As identified, the survey did not directly measure sleep duration. However, the combination of reported bedtimes and wake-up times suggests that a substantial proportion of students may be sleeping at the lower end, or below, recommended sleep durations, particularly among younger year levels.

Graph 6.1.15: Distribution of reported sleep times among students in Year 4 to 12, by year group



6. Healthy and connected

6.1.6 Meal consumption

In this survey, students were asked how often they usually ate breakfast, lunch and dinner. A nutritious, balanced diet is particularly important for children and young people, as it supports healthy growth and development and helps reduce the risk of chronic disease later in life. Evidence shows that consuming a wide variety of nutrient-rich

foods while limiting foods high in saturated fat, added sugars and salt, is critical for healthy development.²³ There is also a clear link between eating breakfast and academic achievement, with young people who never eat breakfast performing worse on NAPLAN tests than those who always do.²⁴

Graph 6.1.16: Proportion of Year 4 to 12 students who did not report having meals every day, by year group



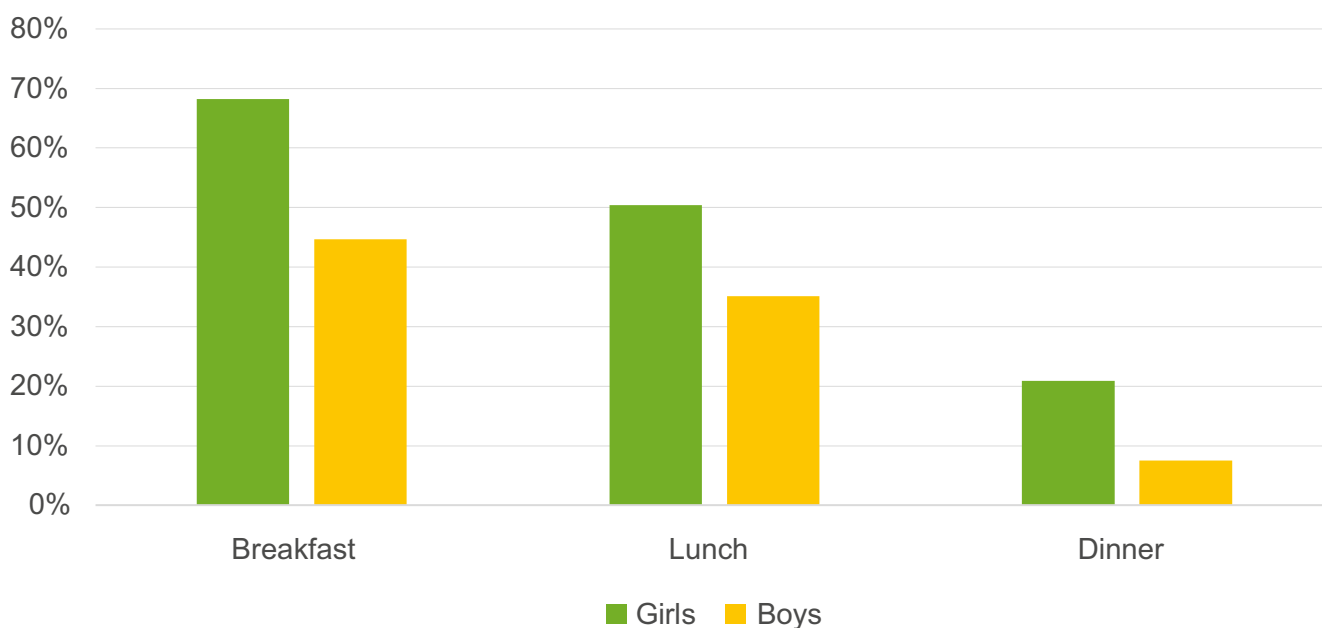
Note: The percentages show combined scores that aggregate ‘some days’, ‘hardly any days’, ‘never’.

6. Healthy and connected

For students at primary school level, one in three (35.3%) did not eat breakfast daily, one in four (26.0%) did not eat lunch daily, and nearly one in 10 (9.0%) did not eat dinner daily. Consistent with the trends identified in SOS21, young people in secondary school reported noticeably lower rates of regular meal consumption across all meals in comparison to children. Girls in secondary school were also noted to be less likely to eat each meal.

Eating regular meals is essential for maintaining overall health and wellbeing. Irregular eating patterns have been linked to poorer physical health outcomes, a higher risk of developing eating disorders,²⁵ and increased likelihood of chronic conditions such as hypertension, type 2 diabetes and obesity.²⁶

Graph 6.1.17: Proportion of Year 7 to 12 students who did not report having these meals every day, by gender

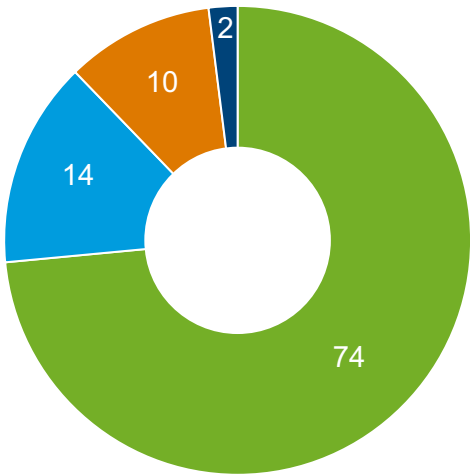


6. Healthy and connected

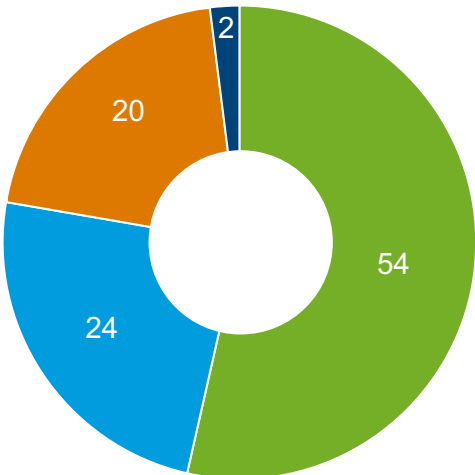
Research confirms the link between school meal programs and improved physical health, attendance, concentration and academic outcomes.²⁷ As the data demonstrates that children and young people

are less likely to eat lunch as remoteness increases, implementing meal programs to selected areas/schools suggests probable benefits.

Graph 6.1.18: Frequency of Year 4 to 6 students eating fruit two or more times daily, once daily, a few times a week, or never (percentage)



Graph 6.1.19: Frequency of Year 7 to 12 students eating fruit two or more times daily, once daily, a few times a week, or never (percentage)



2+ 1 A few times a week Never

Note: The percentages show combined scores that aggregate ‘some days’, ‘hardly any days’, ‘never’.

Table 6.1.2: Frequency of Years 4 to 12 students eating vegetables two or more times daily, once daily, a few times a week, never, by year group (percentage)

	2+ (%)	1 (%)	A few times a week (%)	Never (%)
Years 4 to 6	59.7	19.5	16.5	4.2
Years 7 to 12	53.8	28.0	15.8	2.3

Meal programs would also aid the consumption of balanced diets. The data indicates that many children and young people are not meeting recommended daily intake levels for fruit and vegetables. Approximately 34 per cent of primary aged students reported eating the recommended serving of vegetables each day (three or more), the proportion dropped to 24.8 per cent among secondary school students. Further, only 53.6 per cent of secondary students reported consuming the recommended daily serving of fruit.

6. Healthy and connected

6.1.7 Long-term health conditions and disabilities

Long-term health conditions and disability frequently intersect, as both can lead to functional impairments that affect children and young people's daily activities, participation and overall development. These impacts may be physical, cognitive or psychosocial in nature, and often require ongoing support across home, school and community settings. Recognising this overlap is essential for understanding the diverse needs of young people and for designing policies and services that respond effectively to the full spectrum of functional limitations they may experience.

It is important to note students attending Education Support Centres, students whose health conditions prevent participation in mainstream schooling, and students absent on the survey day due to illness were not included in the sample. As a result, the actual proportion of students with disability and/or long-term health conditions is likely higher than the figures reported from this survey.

When asked about their long-term health condition, asthma was the most frequently referenced. Other frequently reported problems included allergies, heart conditions and skin conditions.

Young people in Year 12 were most likely to report a long-term disability (25.5%), followed by Year 11 students (22.0%), and Year 7 students (19.6%). Girls (21.6%) were more likely to identify having a disability than boys (16.7%).

Young people in remote/very remote regions were the least likely to report a long-term health issue (17.2%), as were those in the metropolitan area (18.0%). Interestingly, young people in inner regional WA were most likely to say yes (29.3%), followed by those in outer regional WA (21.4%).



19.0%

Almost 1 in 5 young people said they had a long-term health condition, such as asthma or diabetes

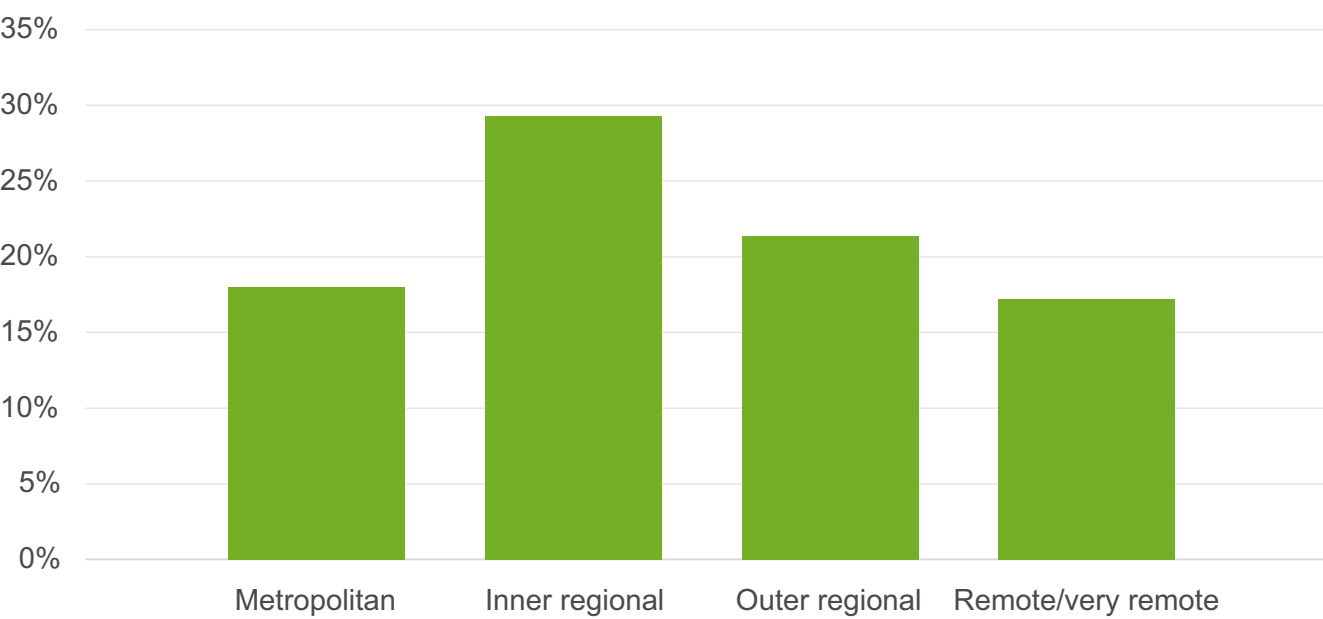
6. Healthy and connected

7.9%

Almost 1 in 10 young people reported having a long-term disability, such as hearing or visual impairment, or mobility impairment

There were no notable differences in the prevalence of disability when comparing children and young people by gender, school year or remoteness. Eye or vision impairments, including nystagmus, myopia, and astigmatism, were the most frequently identified disabilities in young people, followed by hearing loss and bone disease.

Graph 6.1.20: Proportion of Year 7 to 12 students experiencing a long-term health condition, by remoteness



6. Healthy and connected

6.2 Mental health

Good mental health is a core part of overall wellbeing for children and young people. When mental health is strong, they are more likely to form positive relationships, adapt to challenges, and participate fully in daily life. National data shows that mental health is a key component of overall health and wellbeing, shaping how young people think, regulate emotions, and cope with stress.²⁸

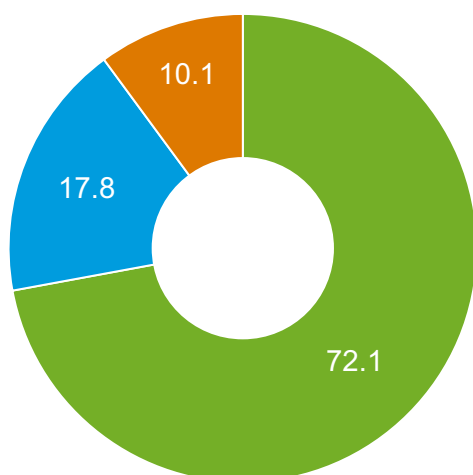
Conversely, poor mental health can contribute to behavioural difficulties, lower self-esteem, and reduced capacity to manage adversity. These challenges can negatively affect a child or young person's quality of life, emotional wellbeing, and ability to engage in learning, social activities,

and community life. Children's health, including mental health, directly influences their participation in schooling and social environments, which in turn affects long-term outcomes.²⁹

6.2.1 Emotional wellbeing

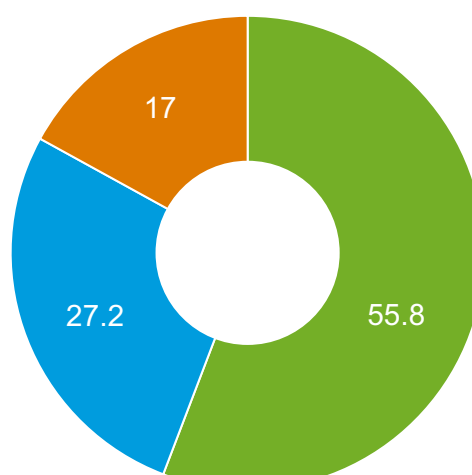
Children and young people were asked to share how satisfied they are with their life by choosing where they would rank their experience on a scale of one to 10, where one was the worst possible life they could imagine, and 10 was the best possible life. A ranking of seven or above indicates high life satisfaction, with four or below denoting a very low level of life satisfaction.

Graph 6.2.1: Proportion of Year 4 to 6 students rating their life satisfaction (percentage)



■ High ■ Medium ■ Low

Graph 6.2.2: Proportion of Year 7 to 12 students rating their life satisfaction (percentage)



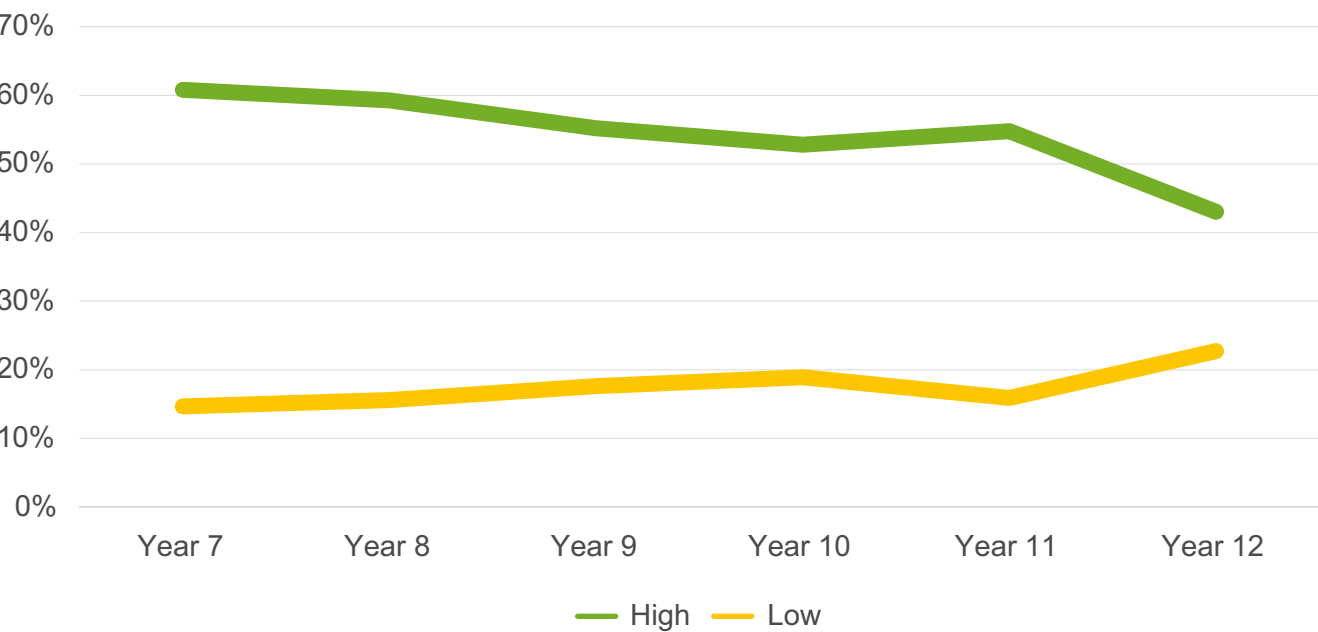
■ High ■ Medium ■ Low

6. Healthy and connected

Most children and young people described a high level of satisfaction with their life, ranking themselves as seven or above on the life satisfaction scale. Across all Years 4 to 6 students the average life satisfaction score was seven, however this dropped to a six for students in Years 7 to 12. The findings show a notable decrease in the proportion of Year 7 to 12 students who expressed high life satisfaction and an increase in the proportion of Year 7 to 12 students with low levels of life satisfaction, when comparing that cohort with Years 4 to 6 students. This decline in satisfaction

potentially relates to the transition from primary school into secondary school, where school factors such as interaction with their teacher, school success, and personal effort seem to decline.³⁰ Research has also shown that transitioning into secondary school negatively impacts wellbeing. However, it is apparent that the decline in life satisfaction continues until Year 12, indicating that it is not only during the transition from lower into upper schooling, but may instead reflect broader developmental or contextual factors that persist throughout adolescence.

Graph 6.2.3: Proportion of Year 7 to 12 students rating their life satisfaction, by school year



6. Healthy and connected

Following the findings of SOS21, girls in both primary and secondary school were less likely to report having high life satisfaction compared to boys (Table 6.2.1). Research indicates that girls experience higher levels of internalising symptoms, such as anxiety, stress, and rumination.

They also face more intense appearance-related and social pressures, particularly through social media, where frequent comparison and evaluation can negatively affect mood and self-esteem.³¹ These factors would have a large impact on girls' wellbeing and life satisfaction.

Table 6.2.1: Proportion of Year 4 to 12 students rating their life satisfaction, by year group and gender (percentage)

		Low (%)	Mid (%)	High (%)
Years 4 to 6	Girls	11.6	20.9	67.5
	Boys	8.6	14.8	76.6
Years 7 to 12	Girls	22.3	32.0	45.8
	Boys	11.9	22.6	65.5



6. Healthy and connected

6.2.2 Self-perception/identity

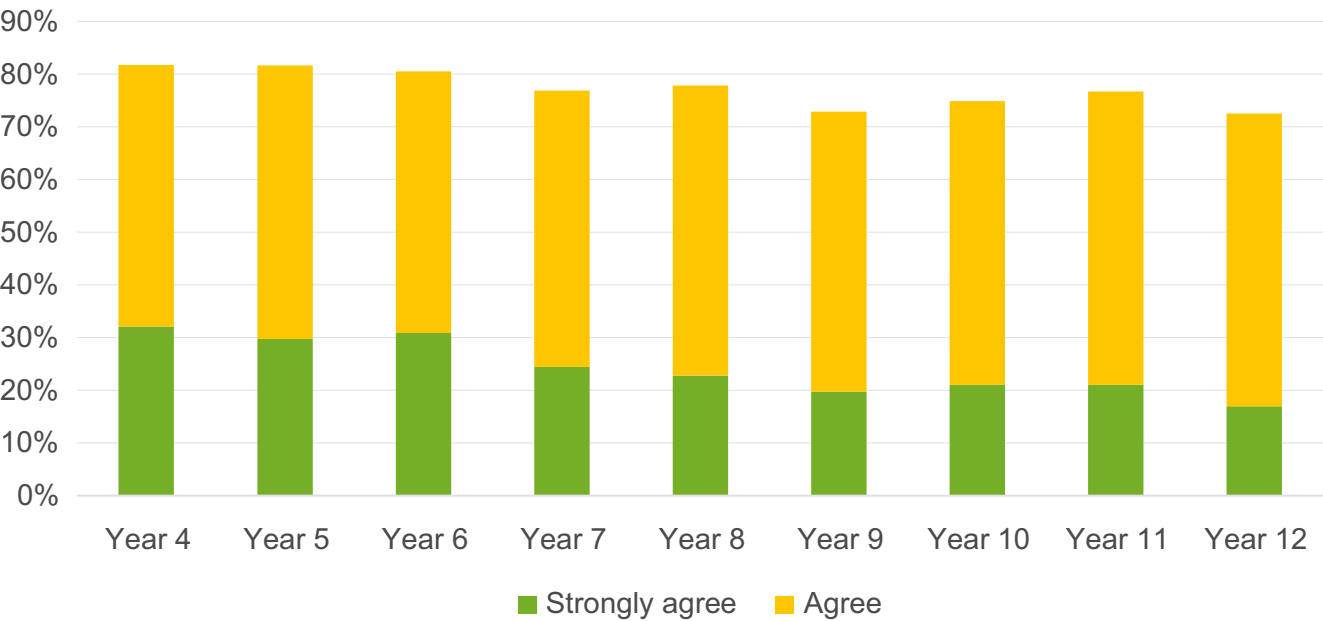
Self-perception of abilities is a crucial determinant of young people’s motivation, social engagement and mental wellbeing. Research shows that adolescents who hold positive beliefs about their competence demonstrate stronger self-efficacy, greater persistence, and more adaptive coping when faced with challenges.³² Positive self-perception supports academic engagement and emotional resilience, contributing to higher wellbeing and reduced psychological distress. Because beliefs about one’s abilities solidify during the teenage years, assessing self-perception provides valuable insight into emerging risks and helps guide interventions that strengthen confidence, competence and long-term wellbeing.

When examining the three items related to self-perception, there are two clear trends: the likelihood of agreeing with the statements declined as students grew older, and boys were more likely to respond positively than girls across both cohorts.

More than eighty per cent of Years 4 to 6 students (81.3%), and 75.6 per cent of Years 7 to 12 students ‘strongly agreed’ or ‘agreed’ that they were able to perform as well as their peers. These findings were generally consistent across ages, with a slight decrease in agreement in Year 12 students.

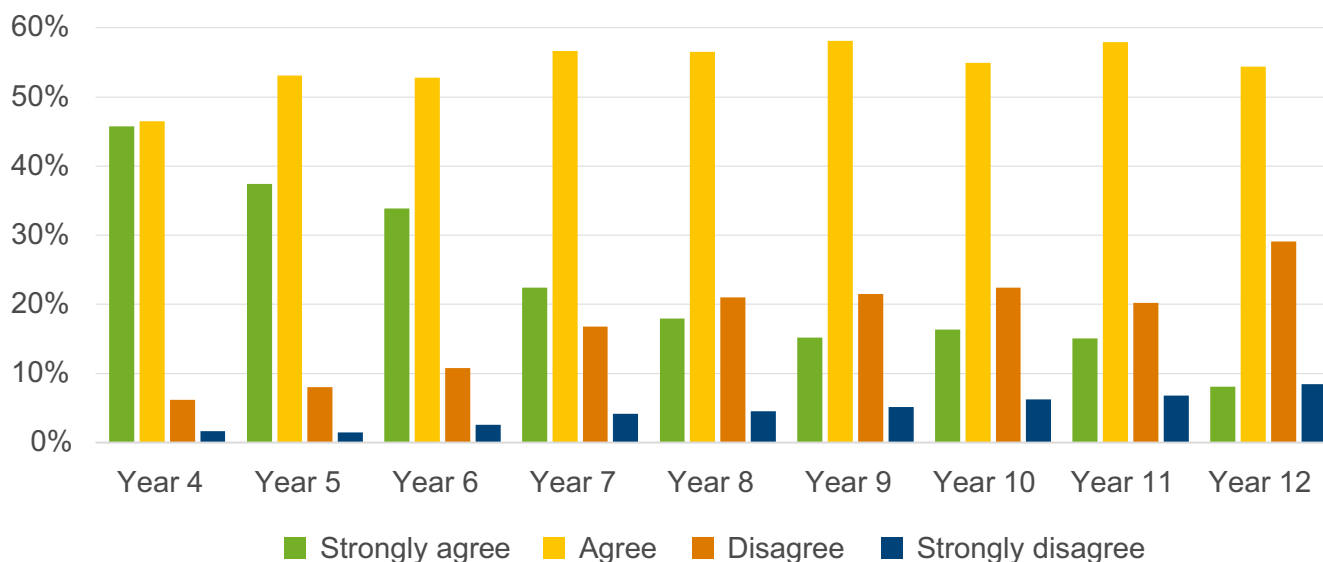
Almost ninety per cent (89.8%) of Years 4 to 6 students, and 73.5% of Years 7 to 12 students, strongly agreed or agreed that they were happy with themselves. However, the likelihood of selecting ‘strongly agree’ notably declined as students grew older, while responses for ‘strongly disagree’ increased.

Graph 6.2.4: Proportion of Year 4 to 12 students who strongly agree or agree with the statement "I am able to do things as well as others", by school year



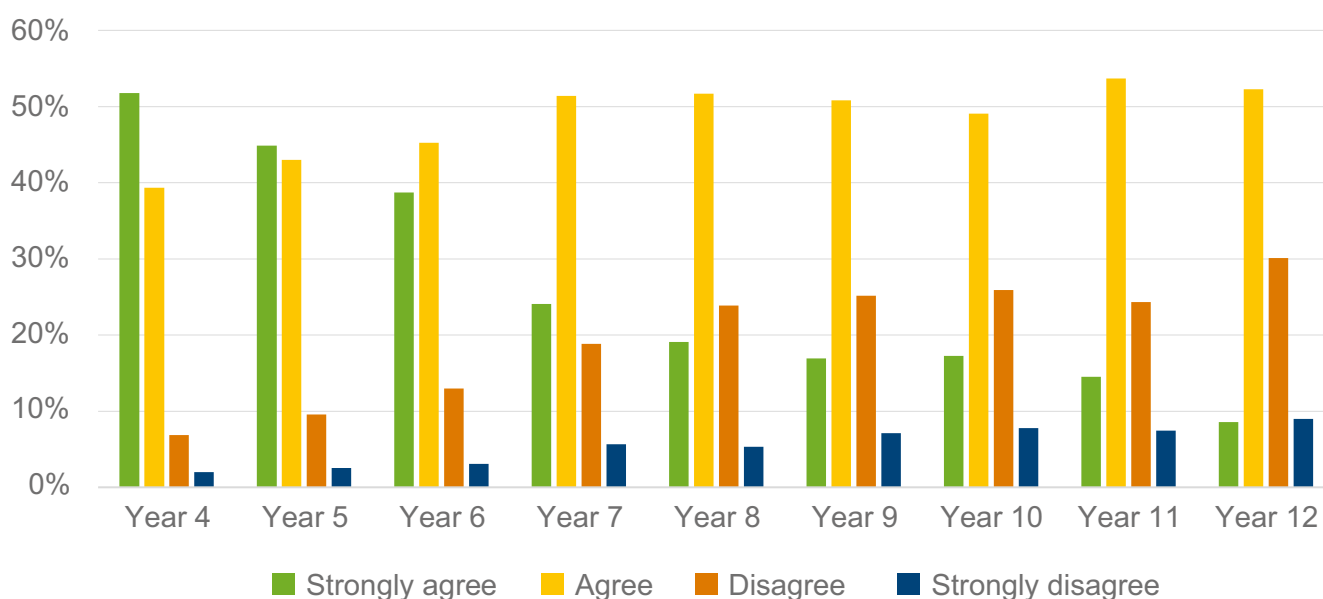
6. Healthy and connected

Graph 6.2.5: Proportion of Year 4 to 12 students agreement with the statement "I am happy with myself", by school year



Consistent with the results for 'I am happy with myself', 87.7 per cent of Years 4 to 6 students and 69.3 per cent of Years 7 to 12 students strongly agreed or agreed with the statement 'I feel good about myself'.

Graph 6.2.6: Proportion of Year 4 to 12 students agreement with the statement "I feel good about myself", by school year



6. Healthy and connected

6.2.3 Perceptions of physical appearance

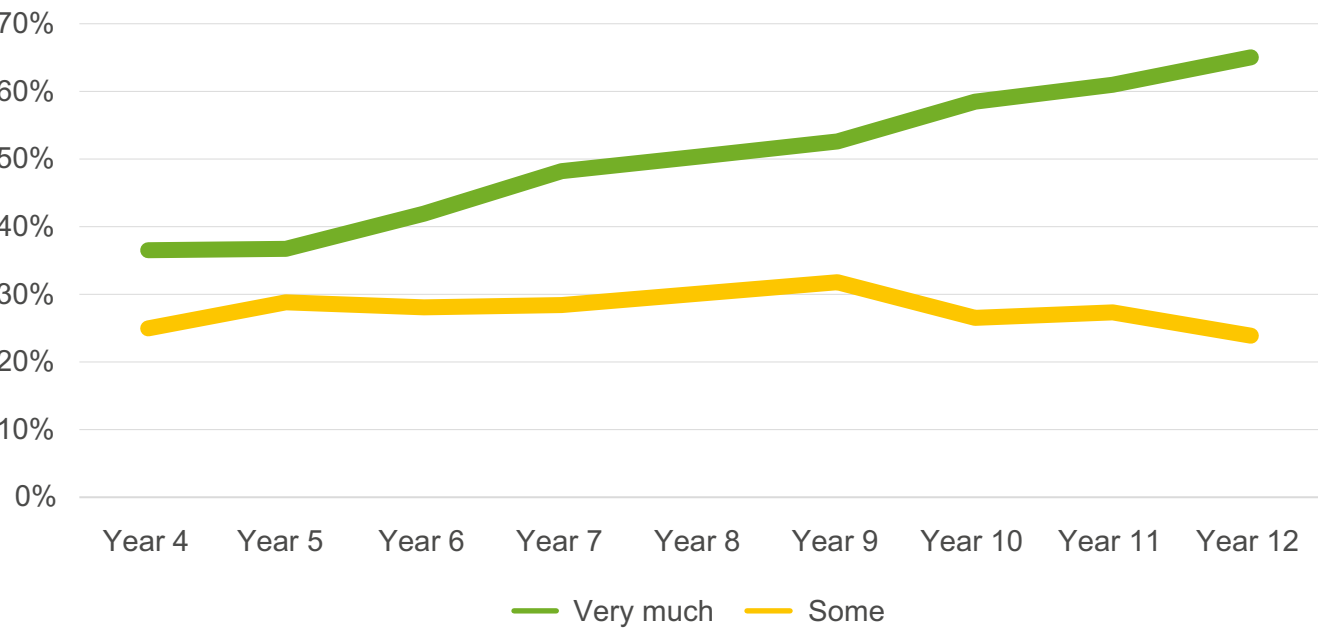
To assess whether children and young people cared about their physical appearance we asked them if they care about how they look, if they were worried about their weight, and additionally asked young people how they viewed themselves. Assessing young people’s perceptions of their physical appearance is essential for understanding their overall mental health. Adolescence is a developmental period marked by heightened self-awareness, increased social comparison, and rapid physical changes, all of which make body image particularly influential during these years.

Concern about their appearance increased with age across both primary and secondary school students. More than thirty per cent (36.5%) of Year 4 students cared ‘very much’

about how they looked, compared to 65.0 per cent of Year 12 students.

While the proportion of children and young people who cared ‘very much’ about their appearance increased with age in both groups, girls were more likely to identify that they cared ‘very much’ when compared to boys (Table 6.2.2). Interestingly, primary school children in very remote areas were the most likely to identify that they cared ‘very much’ (remote 39.2% vs very remote 41.0%). This was only slightly more than children in outer regional areas, who were the least likely to say they cared ‘very much’ (36.7%). Within secondary school students, those in remote areas (41.2%) were the least likely to identify they cared ‘very much’ about how they look, whereas young people in both inner and outer regional areas cared the most (approximately 55%).

Graph 6.2.7: Proportion of Years 4 to 12 students who responded very much or some, when asked if they were concerned about their appearance, by school year



6. Healthy and connected

Table 6.2.2: Proportion of Years 4 to 12 students who cared ‘very much’ when asked if they care about how they look, by year group and gender (percentage)

	Girls (%)	Boys (%)
Years 4 to 6	45.0	32.0
Years 7 to 12	66.5	42.6

6.2.4 Resilience

Resilience is an ability that individuals develop to enable them to respond successfully to different and sometimes difficult life experiences. Resilience is developed through development of their own personal skills (such as emotional coping mechanisms, or skills in planning and decision-making), and through connection with external supports, such as family and friends.³³

Resilience is a key factor in the mental health of children and young people as it allows them to navigate and adapt through stressful situations, while maintaining wellbeing and confidence. Resilience is also a protective factor against mental health issues such as anxiety and depression.³⁴ To better understand the resilience of young people we asked them three questions assessing their perceived ability to deal with events, achieving their goals and persevering through difficult tasks.



70.7%

7 in 10 young people felt that they were capable of dealing with events that happen in their life



63.9%

More than 6 in 10 young people felt that they could achieve their goals



67.2%

Almost 7 in 10 young people agreed they could keep doing things, even if they were hard

**Combined strongly agree and agree responses*



6. Healthy and connected

While most young people agreed with these statements, there were notable differences when comparing genders. This is consistent with the SOS21 findings in which boys were also more likely to select ‘strongly agree’ or ‘agree’ than girls, across all the relevant survey questions. However, when compared to SOS21 there has been a slight decline across most responses for both boys and girls.

Table 6.2.3: Proportion of Year 7 to 12 students who strongly agree or agree with statements exploring resilience, by gender (percentage)

	Strongly agree (%)	Agree (%)	Total (%)	Total SOS21 (%)
I can achieve my goals				
Girls	13.5	42.2	55.7	58.6
Boys	24.9	47.0	71.9	74.1
I can deal with things that happen in my life				
Girls	15.2	46.4	61.6	63.2
Boys	25.6	53.8	79.4	81.4
I can keep doing things, even if it is hard				
Girls	15.3	43.1	58.4	63.2
Boys	27.7	48.0	75.7	78.6



6. Healthy and connected

These findings align with recent research which found boys are more capable of overcoming setbacks at school in relation to assessments, or negative interactions at school.³⁵ As girls are more likely to experience academic anxiety and mental health issues than boys, this may affect their perceived resilience.³⁶

There was a steady decline in agreement with the resilience statements as students progressed through school. Year 12 students were the least likely to strongly agree with all statements. Agreement in young people across remote areas was relatively consistent.

Graph 6.2.8: Proportion of Years 7 to 12 students who strongly agree with statements exploring resilience, by school year



“Nobody actually tries to help your feelings, they just tell you what to do or say your crazy or depressed they just put a name and say things to cope like strategies but nobody actually understands or wants to help my feelings in the moment.”

Girl aged 13, outer regional

6. Healthy and connected

6.2.5 Depression

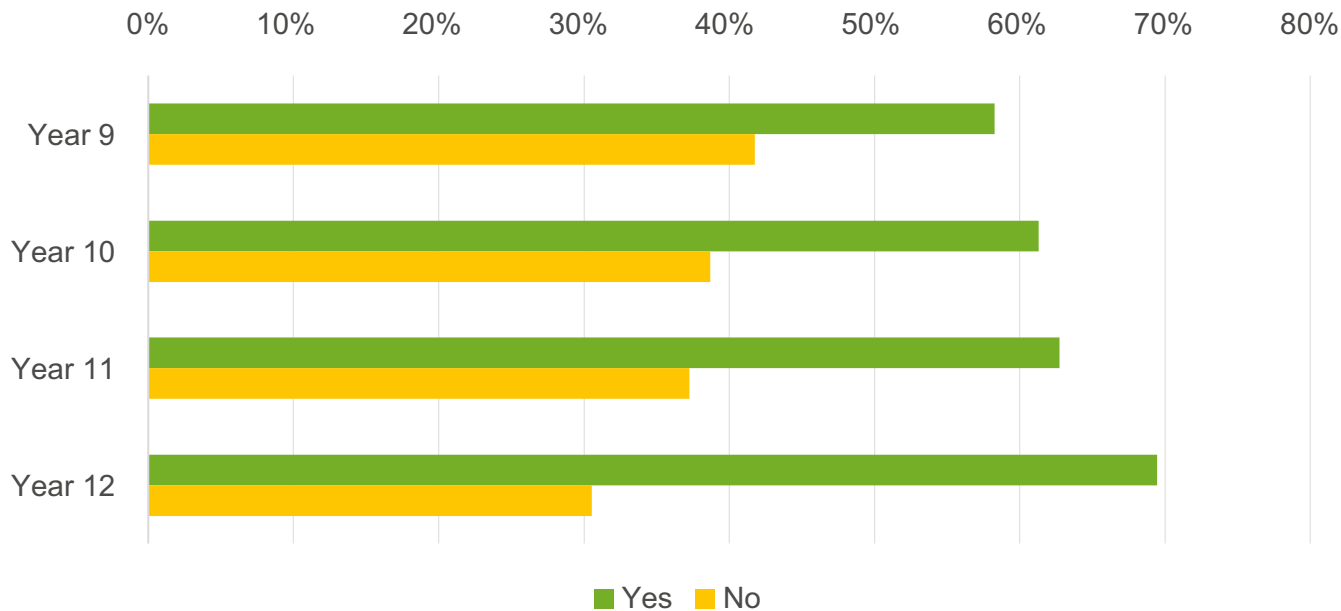
Adolescence is a period of profound psychological, physical, and social development. Managing these rapid changes, at the same time as secondary school education, can feel overwhelming, particularly when confronted with additional pressures, including increased exposure to adult content, growing concerns about environmental and socioeconomic issues, and the ongoing reality of economic instability.³⁷ Given the weight of these combined factors, it is unsurprising that many adolescents are experiencing declines in their mental health. Rates of depression and anxiety among young people continue to rise in many societies,²⁹ underscoring the importance of assessing the mental health of young people in Western Australia.

Students in Years 9 to 12 were asked if they had felt sad, anxious, or depressed for two weeks or more.

Nearly two in three young people (61.7%) reported feeling sad, anxious or depressed for more than two weeks in a row, which is a slight increase from the 58.0 per cent who had said ‘yes’ in SOS21. Although this question on its own cannot diagnose depression, it does highlight that many young people are experiencing prolonged periods of negative feelings.

When we further explored this by gender, girls were notably more likely to report ‘yes’ (74.0%), compared to boys (49.8%). These findings also demonstrate an increase in mental health concerns compared to SOS21, in which 67.9 per cent of girls and 47.0 per cent of boys said ‘yes’.

Graph 6.2.9: Proportion of Year 9 to 12 students who experienced negative feelings for more than two weeks, by school year

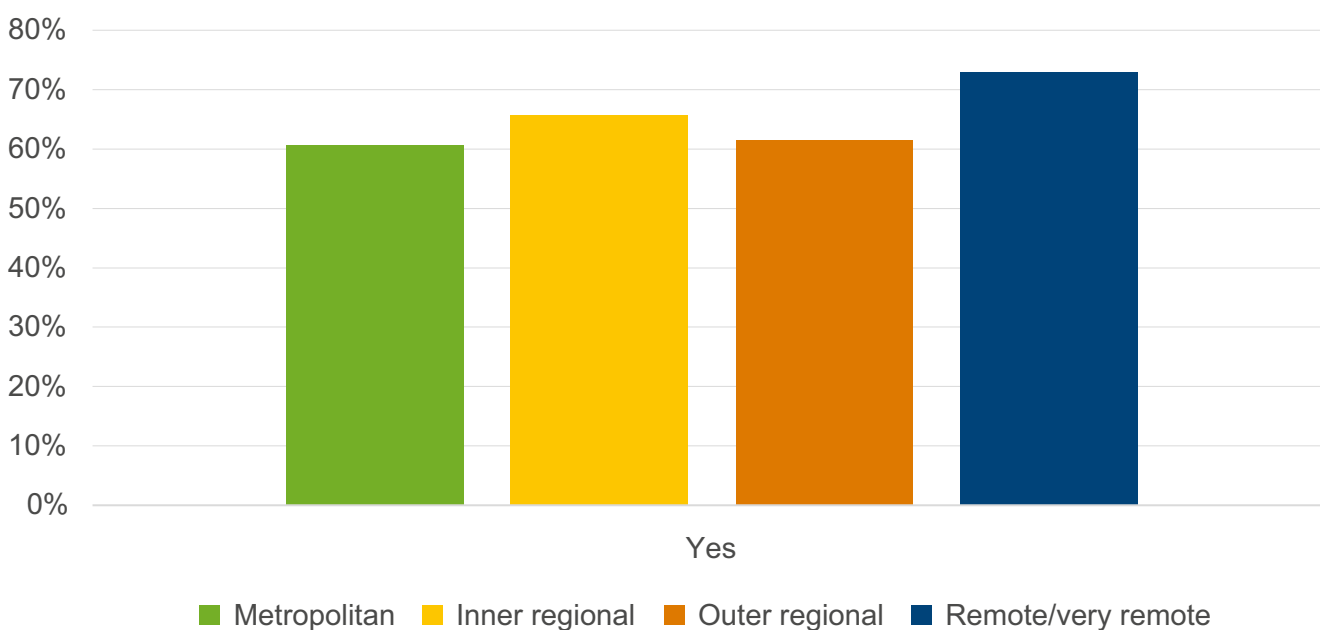


6. Healthy and connected

The proportion of young people who identified as feeling sad or depressed for more than two weeks in a row increased with age.

Young people living in remote areas were the most likely to report 'yes' (73.0%), a noticeably higher proportion compared with those residing in the metropolitan area.

Graph 6.2.10: Proportion of Year 7 to 12 students who experienced negative feelings for more than two weeks, by remoteness



My parent won't let me see a councillor or doctor about depression and anxiety and social anxiety cause they think I'm being dramatic."

Girl aged 12, outer regional

6. Healthy and connected

6.2.6 Mental health concerns

To gain an understanding of young people's perspective on their own mental health, this year we asked them to identify whether they had any mental health concerns.



35.7%

More than 1 in 3 young people identified that they had concerns about their mental health

Those young people who responded 'yes' were then asked to share their mental health concerns. Anxiety was the most frequently referenced issue. This included general anxiety, social anxiety, medical anxiety, separation anxiety, and generalised anxiety disorder. Sleep issues and depression (including seasonal depression and dysthymia) were the next most frequently discussed issues. Sleep disturbances, depression, and anxiety frequently co-occur and demonstrate a bi-directional relationship. Insufficient or disrupted sleep can heighten stress and exacerbate symptoms of both depression and anxiety, while these mental health conditions can in turn further impair sleep quality.³⁸

It is also important to note that many young people specifically identified body dysmorphia, disordered eating, and eating disorders. Unfortunately, eating disorders are most likely to develop during adolescence, and almost a third of all people with eating disorders in Australia are teenagers.³⁹ Eating disorders can have long-term impacts on mental, physical, and social health, which is why it is so important to ensure that appropriate supports are available.

Girls were more than twice as likely to say 'yes' compared with boys (girls 51.1% vs boys 22.3%). This continues a clear pattern across our findings, which show that not only are many young people struggling with their mental health, but that girls in particular are experiencing disproportionately high levels of mental distress. This highlights the need for targeted attention and investment in supports that address the unique pressures facing young girls, including appearance-related expectations, social comparison, and heightened emotional distress.

When comparing year groups, Year 12 students identified as having the most mental health concerns (43.4%), followed by Year 10 students (38.5%), and Year 9 students (35.1%). There was no clear trend across year groups.

"Took a while to gain confidence to ask, my mum never believed anything was wrong and it took almost 3 years for her to finally get me diagnosed w depression Lots of people have the same mental health issues which is horrible, we should be preventing instead of fixing them."

Girl aged 10, metropolitan

6. Healthy and connected



One in two young people (50.6%) in inner regional areas identified as having mental health concerns. This was notably higher than the next highest region – remote/very remote – in which 37.9 per cent of young people identified mental health concerns, followed by those in the metropolitan area (34.6%), and outer regional areas (31.5%).

As well as navigating the typical challenges of adolescence, young people in regional and remote areas face additional pressures, including higher levels of distress and persistent unmet mental health needs due to limited-service availability and access.⁴⁰ These structural barriers can compound existing vulnerabilities and place young people at greater risk of poor mental health outcomes.

I feel people should be made more aware about the daily struggles of having mental illnesses other than anxiety/ depression."

Girl aged 17, metropolitan

6. Healthy and connected

6.2.7 Young people were asked how their families, communities, schools and society could better help support their mental health

When young people were asked how their family, communities or schools could help support their mental health, many young people shared that they wanted understanding, kindness, and support. These responses highlight that young people feel unable to fully share what is going on in their lives with the adults around them because they feel they may not be heard or taken seriously. Others identified that when they have tried to express themselves, they don't feel heard, supported or comforted.

"I think that just being able to talk to someone and voice my troubles is a good way to get burdens or issues off my chest. Sometimes listening and saying you are there for someone is all that is necessary."

Boy aged 16, metropolitan

"Being able to listen when I want to speak up about something I might be worried about."

Girl aged 13, metropolitan

"By being empathetic and understanding that most of us are trying our best."

Girl aged 15, metropolitan

"By spending time with me, by doing check-ins but not smothering me, by letting me know that they'll stick by me and support me throughout my life."

Girl aged 12, metropolitan

"Be consistently supportive. A child won't come to you for help with a problem if you've treated them badly in the past because they don't feel that trust or safety with you anymore. If you want someone to be able to confide in you, be there all the time not just when you want."

Girl aged 11, metropolitan

"I think that the adults in our lives can help support us through checking in on us to make sure we're okay, or even a simple conversation about someone's interests or lives some days can brighten someone's mood."

Gender diverse person aged 14, metropolitan

Feeling as though you have control over aspects of your life is an important component for mental health. In their responses, many young people said they wished for more autonomy and independence in their lives and wanted to be supported by adults in their attempts to be independent.

"By letting me have more control over my life and giving me support when I need it to be able to be the best version of myself. Also by making decisions in advance so that I do not have to prepare for things last minute."

Girl aged 16, metropolitan

"Having a support group of people can bolster your confidence and be more willing to believe in yourself."

Boy aged 17, metropolitan

6. Healthy and connected

"I Just want them to be there and help me out with things."

Girl aged 13, very remote

School is a key aspect of young people's lives, and many students noted that academic pressure has a significant impact on how they feel each day. They explained that having more support with schoolwork, along with a reduction in homework demands, would make a meaningful difference to their mental health.

"Making more effective workload or allowing time in class to do some homework to reduce workload."

Boy aged 13, metropolitan

"If I am feeling stressed about work and homework at school, there should be people around me to take care of me or tutor me so that I can progress higher in education."

Girl aged 16, metropolitan

Young people also stated that they need more mental health supports overall, and that being able to access support services more easily would make a significant difference to their wellbeing.

"Make mental health a common conversation throughout schooling even in primary school."

Girl aged 14, metropolitan

"Easier access to mental health professionals like psychiatrists."

Girl aged 17, metropolitan

"Have more mental health services available in schools."

Girl aged 14, metropolitan

"MORE PLACES LIKE HEADSPACE AND MORE ACCESS TO THEM. And online."

Girl aged 14, metropolitan



Hire better and more educated teachers that actually know what to teach and how to be a nice, caring person. Stop spending money on things that no one really cares about like are you okay day."

Boy aged 13, metropolitan



6. Healthy and connected

6.2.8 Knowledge of mental health services

One of the most frequently reported barriers preventing young people from accessing mental health services is a lack of awareness about what supports are available to them.⁴¹ Without clear knowledge of where to seek help, many young people who may be experiencing anxiety, depression, or other mental health challenges are left without the guidance or intervention they need. Ensuring that young people understand how and where to access appropriate mental health services is therefore essential, as this knowledge can play a crucial role in early identification, timely support, and improved long-term outcomes.

Young people were most familiar with supports available at school (73.7%), followed by supports available online (71.4%), and lastly supports in their local area (62.6%). While most young people were aware of the mental health supports available to them, these findings show that more than 30 per cent still do not know where to seek help. This gap is significant, suggesting that a substantial proportion of young people may be unable to access support when they need it most.

"It feels too personal to ask a person and not specific enough when online... and trying to maintain online safety is to much in the forefront of my mind."

Gender diverse person aged 15, metropolitan

"it's difficult for kids under 18 to get help if they are in a position where their parents are not very helpful or involved because many places require parental consent."

Girl aged 16, outer regional

"My school could give more opportunities for me to reach out to someone to discuss my concerns about school with. People could allow me more time to articulate what my concerns are."

Boy aged 12, metropolitan

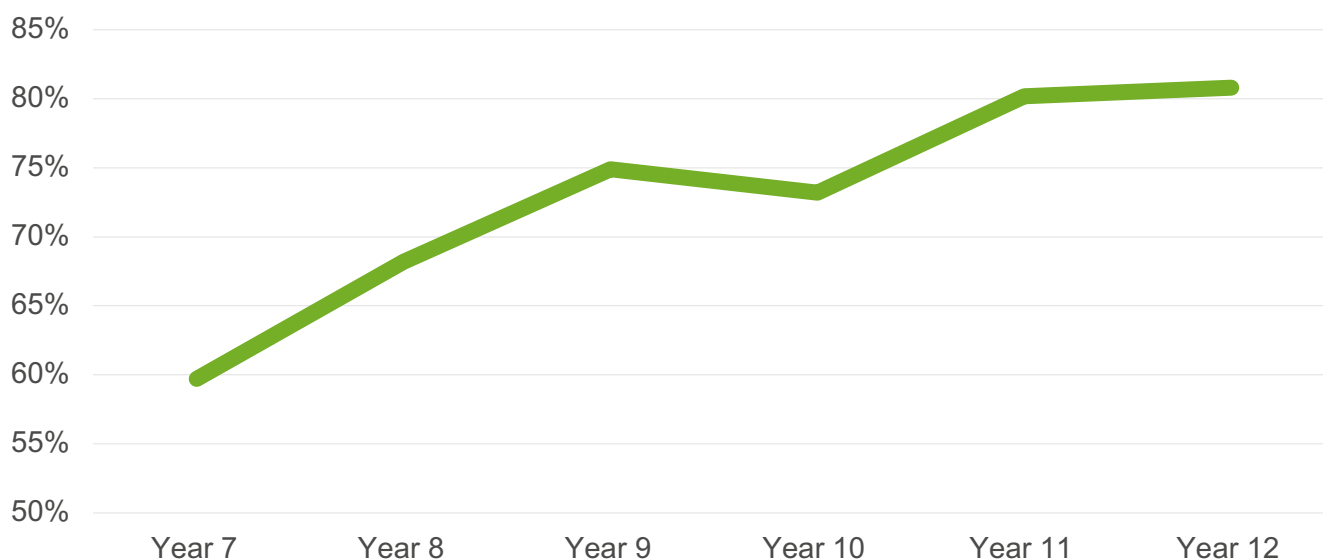
"I wish there were more ways to access mental help, and also provide students ways to assist people with mental issues."

Boy aged 14, metropolitan

While most young people (73.7%) knew where to access support at their school, nearly three in 10 did not know. This may indicate that some schools need to more clearly inform their students of the services available, or that some require additional mental health supports at their schools.

6. Healthy and connected

Graph 6.2.11: Proportion of Year 7 to 12 students who knew where to access support online, by school year



More than seven in 10 students (71.4%) knew where to access support online. Notably, knowledge of online mental health services increased with age, with an almost 20.0 per cent difference between students in Year 7 and students in Year 12. These findings suggest that young people are growing in independence as they age and are seeking out information and support autonomously compared with their younger peers. This can be seen in the fact that older young people are more knowledgeable and aware of available services and how to access them online.

6. Healthy and connected

Graph 6.2.12: Proportion of Year 7 to 12 students who knew where to access mental health support online and in their local area, by remoteness



Young people living in remote areas were found to be the least likely to know where to access online mental health support, with only 63.2 per cent reporting awareness. This disparity aligns with broader research showing that rural and remote communities often face reduced access to mental-health information and services, contributing to lower mental-health literacy among young people in these regions.⁴²

Young people in the metropolitan area were the least likely to know where to access support in their local area, with only 60.5 per cent reporting that they knew where to go.

6.2.9 Seeking support for mental health

Almost one in two (45.2%) young people had received help for problems related to their mental health. Girls were notably more likely to say they had received support than boys (girls 55.2% vs boys 35.6%), aligning with our previous findings that girls were more likely to seek help.

“They’re are some people out there that want to help you and their are some good places in my local area to go if I’m seeking support.”
Girl aged 13, metropolitan

“These people have helped me a lot with my mental health. They can listen and fix my problems.”
Boy aged 14, metropolitan

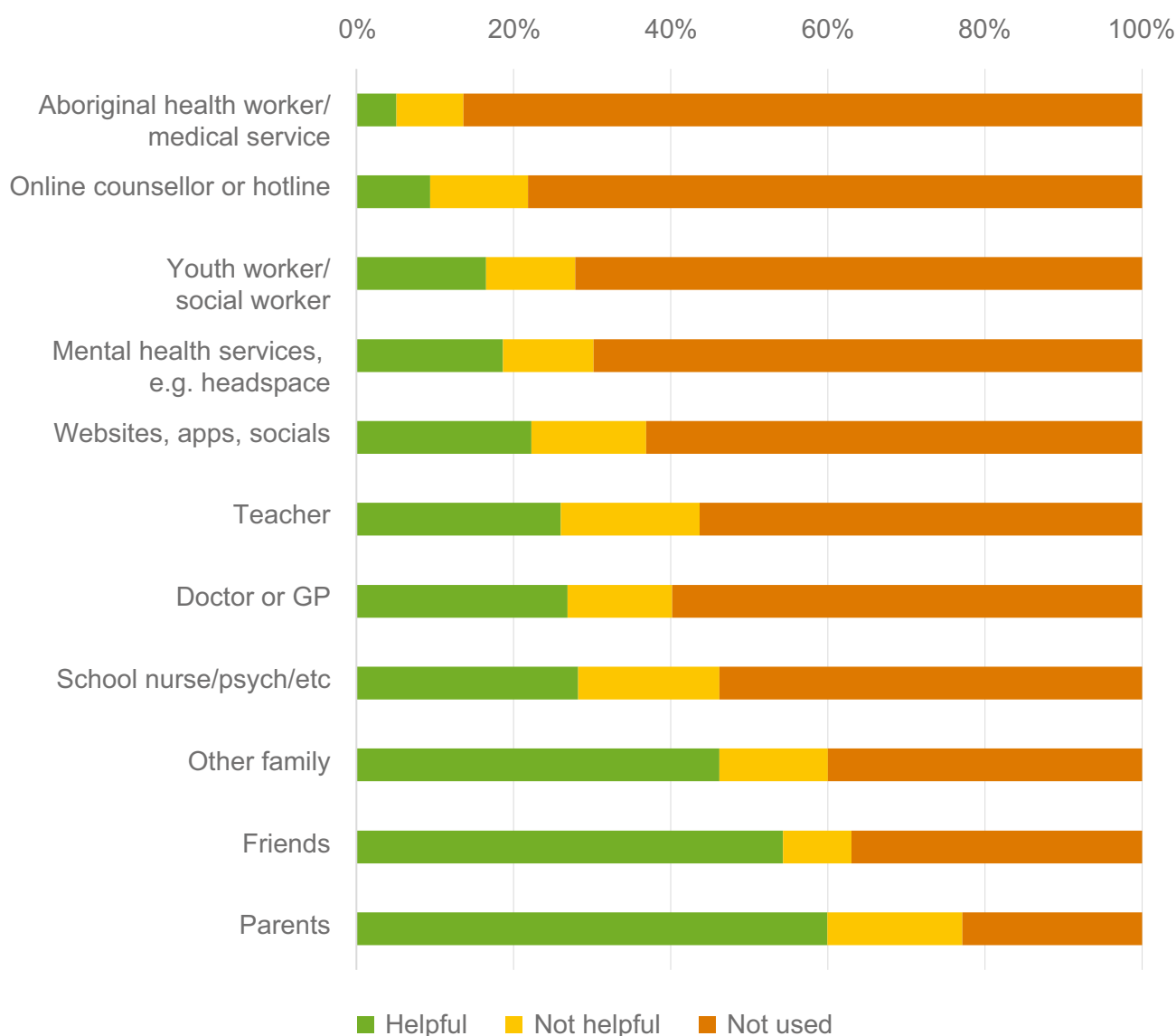
Young people in inner regional areas were the most likely to receive help for their mental health (46.1%), followed by young people in the metropolitan area (45.6%), and outer regional areas (44.1%). Young people in remote areas are the least likely to access support (38.6%).

6. Healthy and connected

6.2.10 Evaluation of mental health supports

Young people who reported that they had sought or received mental health support were then asked to evaluate how helpful they found the supports to be.

Graph 6.2.13: Proportion of Year 7 to 12 students reporting health supports as helpful, not helpful, or not used, by support



6. Healthy and connected

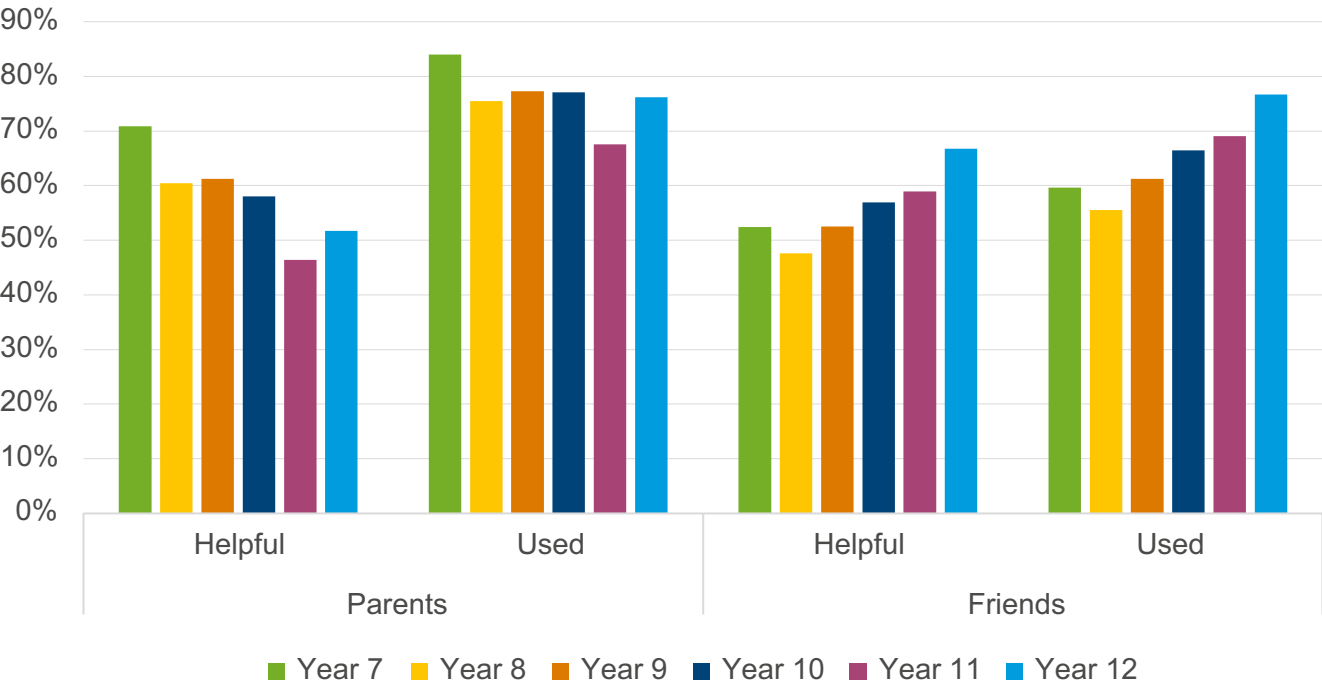
Parents provided the support most used by young people, followed by friends, and other family. With increasing age, young people showed a clear shift from seeking support from their families towards seeking support from their friends. This aligns with research which shows that during adolescence, young people are developing their own identities and independence and begin to rely less on their parents and more on their peers.³³ Having strong and supportive family and/or friends who young people can rely on is important for supporting their mental health, as it is associated with reduced anxiety and

depressive symptoms.⁴³ It is also the case that the availability of quality social support (beyond immediate family) can positively impact mental health.

"I can always talk to my parents and my teachers were a big support, they were always open to listening to me."
Girl aged 12, metropolitan

"I found it easiest to talk to one of my trusted friends over most other sources of support, even my parents."
Boy aged 17, metropolitan

Graph 6.2.14: Proportion of Year 7 to 12 students who reported using their parents and friends as support for their health (helpful and not helpful combined), and reported them as helpful, by school year



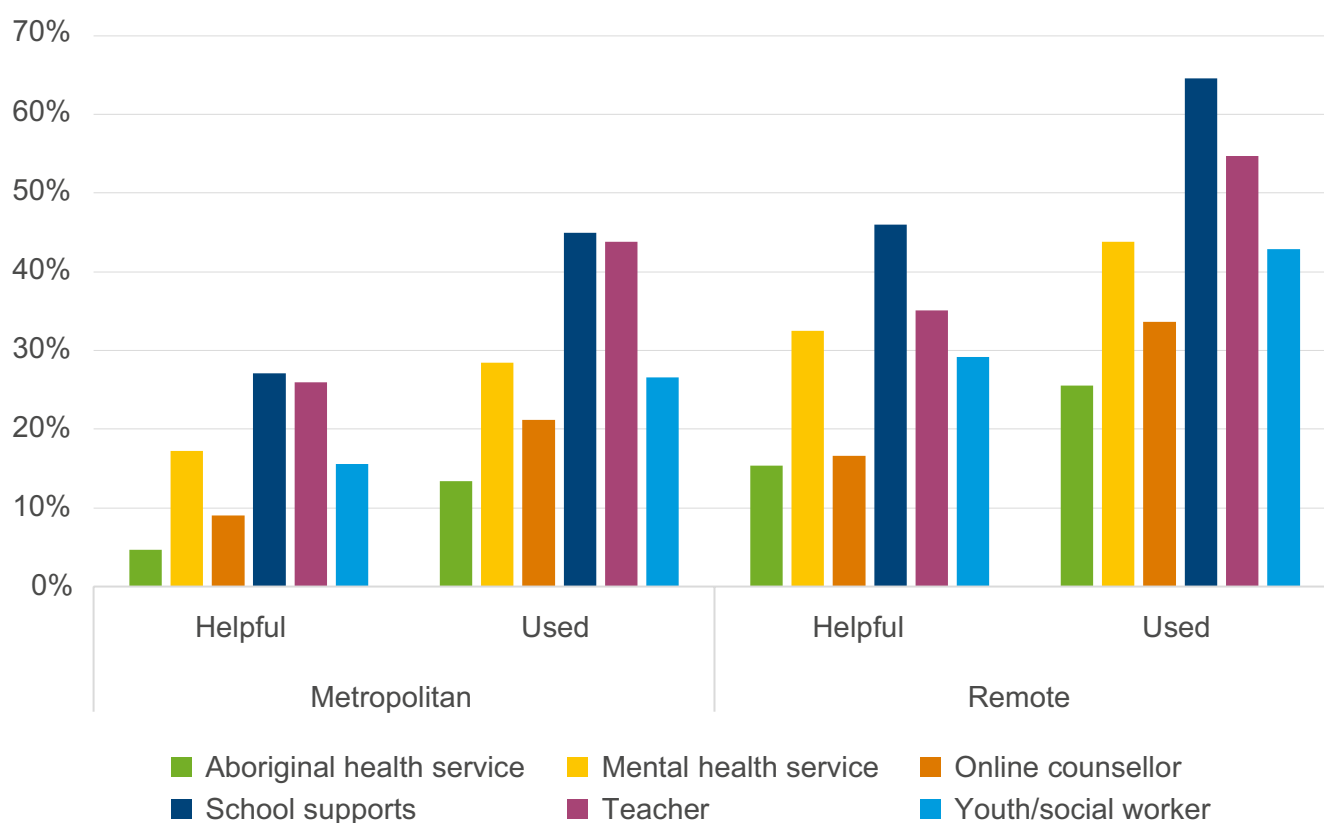
6. Healthy and connected

Remote young people were more likely to use school supports, Aboriginal health workers/medical services, mental health services, online counsellors or hotlines, and ask other teachers for support, when compared to young people in the metropolitan area. This pattern may reflect a desire among young people in remote areas to find support that is both private and independent of their everyday relationships,

which can be harder to achieve in smaller or more tightly connected communities.

When asked if they wanted to share additional supports they used for their mental health young people identified specific people in their family and friends, pets/animals, hobbies, professional supports, and online services.

Graph 6.2.15: Proportion of Year 7 to 12 students in metropolitan and remote areas who reported using additional supports for their health (helpful and not helpful combined), and reported them as helpful



6. Healthy and connected

6.2.11 Young people were asked if they wanted to share anything else about their experience seeking help for health issues

Many young people identified barriers to seeking or obtaining support. This included the increasing costs of accessing supports, identifying that it was too expensive and that their parents were unable to afford it. Other young people felt as though they did not have anyone close to them to speak to, and that accessing specific services was too difficult due to limited accessibility and lengthy wait times. Young people also identified facing internal barriers to seeking external help, sharing that they felt ashamed, embarrassed, or were concerned about burdening others with their problems.

"Under healthcare services like Medicare I received a 10 session free service which I never used but when I tried to use it, I wasn't able to even though I never actually used it. Many unfair financial problems with trying to use things which support our mental health especially people who need to pay for their own things. Though this is hard to do as it's costly, but it should be more accessible for teenagers with costs."

Girl aged 17, metropolitan

"It may sound weird but I'm afraid to tell my mum and dad things about my mental health because I feel like they would get mad at me or they wouldn't be able to help me and tell me to 'figure it out yourself'."

Girl aged 15, metropolitan

Participants shared both positive and negative experiences which they'd had in seeking support from people close to them, or from professional service providers. Those who had a negative experience reported that it had not been helpful; that they had felt unheard and unsupported; or that they did not trust the confidentiality of what they had shared. Contrastingly, others who shared their positive experiences felt heard, were provided useful advice or exercises, and felt supported with their issues.

"I Don't think Adults really remember what it feels like to be a teenager. A lot of the self help hotlines aren't helpful and often will go unused because of this."

Girl aged 16, metropolitan

"It was a good place to just talk about and not expect anything."

Girl aged 14, metropolitan

Young people shared the reasons they accessed supports, as well as who they went to for support. Lastly, some young people provided recommendations including identifying the need for additional services, highlighting the importance of going to someone you trust, and urging people to talk about their problems.

"Definitely going to see someone you trust and is willing to see what's going on."

Boy aged 16, metropolitan

6. Healthy and connected

6.2.12 Neurodiversity

Neurodevelopmental disorders often emerge early in childhood and can affect a young person's social, academic, and personal functioning.⁴⁴ These impacts can shape how they learn, communicate, manage emotions, and build relationships, influencing their confidence and long-term wellbeing.

Young people who identified themselves as neurodiverse were then asked to share their condition. It is important to note that they were not specifically asked if they had a diagnosis. Attention deficit hyperactivity disorder (ADHD) was the most frequently identified term, however a number of young people also identified as having attention deficit disorder (ADD). It is unclear why young people were using the term ADD as this term has not been officially used since 1987.⁴⁵ The next most frequently identified neurodivergent conditions were autism and dyslexia.

Despite being asked specifically about neurodiversity, many young people responded by sharing mental health issues such as anxiety, depression, among others. This may indicate that young people require further education distinguishing between mental health and neurodevelopmental disorders. Alternatively, as neurodevelopmental conditions are often comorbid with mental health concerns⁴⁶



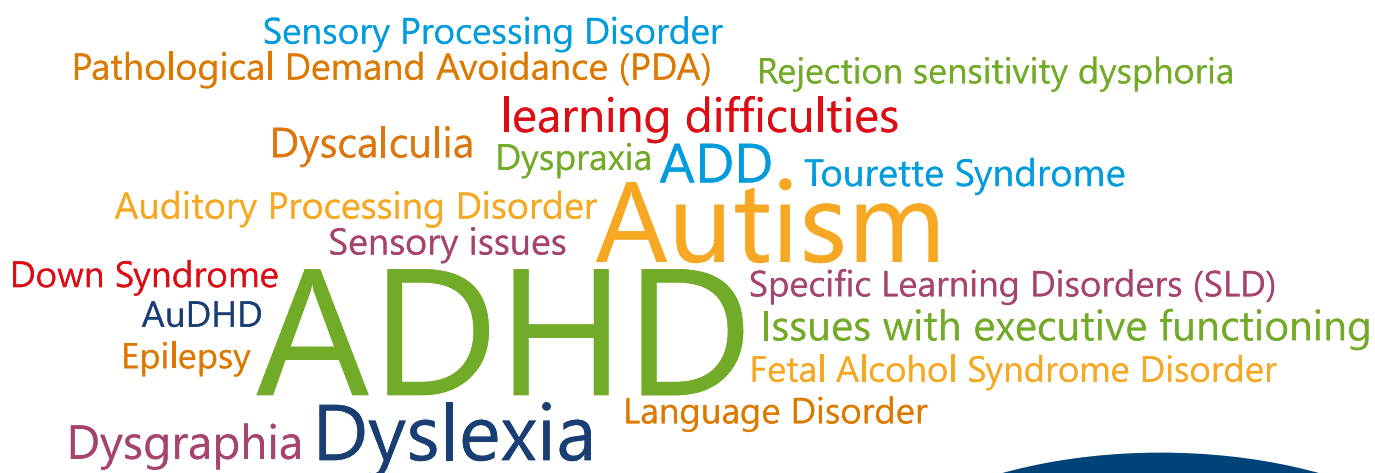
31.1%

More than 3 in 10 young people considered themselves neurodiverse

young people may have listed them together if they were diagnosed simultaneously.

Boys were more likely to consider themselves as neurodiverse (boys 34.5% vs girls 27.0%). This is unsurprising, as diagnostic symptoms are often based on male representation, which often means that girls are underdiagnosed as they do not fit the expected symptoms, or are able to 'mask' and conform to match their peers behaviours.^{36,47} However, with the different presentations of neurodiversity between genders being better understood, hopefully this will mean more effective early intervention for all young people.

Young people in inner (41.7%) and outer regional (36.6%) areas were the most likely to consider themselves as neurodiverse, followed by young people in the metropolitan area (29.9%), and lastly those in remote/very remote areas (25.7%). This contrast between regional and remote areas may be related to the limited specialised supports available in remote areas to facilitate the sometimes-long process of diagnosis, and limited access to treatments.⁴⁸



6. Healthy and connected

6.3 Healthy behaviours

Healthy behaviours and knowledge of healthy behaviours are vitally important in supporting the development of young people's wellbeing. In contrast, risk-taking behaviours, including alcohol or drug use and unsafe sexual activity, can negatively affect their health and overall quality of life.

Drug and alcohol education is included in the school curriculum to equip students with knowledge, encourage open communication, and reduce substance use and related harm. Similarly, sexual education programs in both primary and secondary schools aim to build student knowledge, skills and attitudes so they can make responsible, safe decisions and move toward a sexually healthy adulthood.

It is therefore essential that young people receive accurate information and strong support to help them make positive, healthy choices. Parents, schools and communities each contribute to teaching children and young people about the importance of healthy behaviours.

6.3.1 Seeking health professionals

There was a notable difference in the proportion of girls who said 'yes' compared to boys (girls 34.7% vs boys 16.4%). This indicates that one in three young girls have needed or wanted help but have not received it.

Those who had said 'yes' were further asked why they were unable to see someone about their health. Young people were able to select multiple options. The most frequently selected options were 'feeling embarrassed or ashamed', 'being unsure where to go for help', or 'being unable to afford the fee/financial reasons'.



25.2%

When young people were asked if they had wanted or needed to see someone about their health within the past 12 months but were unable to, 1 in 4 said 'yes'

The proportion of young people who selected 'feeling embarrassed or ashamed' or 'being unsure of who to see/where to go' did not differ notably across year groups. However, as young people aged, they were more likely to select 'financial reasons' or 'unable to get to the appointment due to lack of transport'. Girls were also more likely to select 'feeling embarrassed or ashamed' when compared to boys (girls 67.0% vs boys 55.5%).

Unfortunately, young people, particularly girls, may be concerned about stigma from their peers or family, fearing they may feel abnormal or judged for their health issues.⁴⁹ This acts as a barrier for young people to discuss their issues and seek help. Furthermore, as young people are growing in independence, they may want to speak to health professionals privately to discuss issues they may be too embarrassed to discuss in front of their parents. However, due to difficulties accessing appropriate professional health care, this may mean many young people are going without appropriate help.

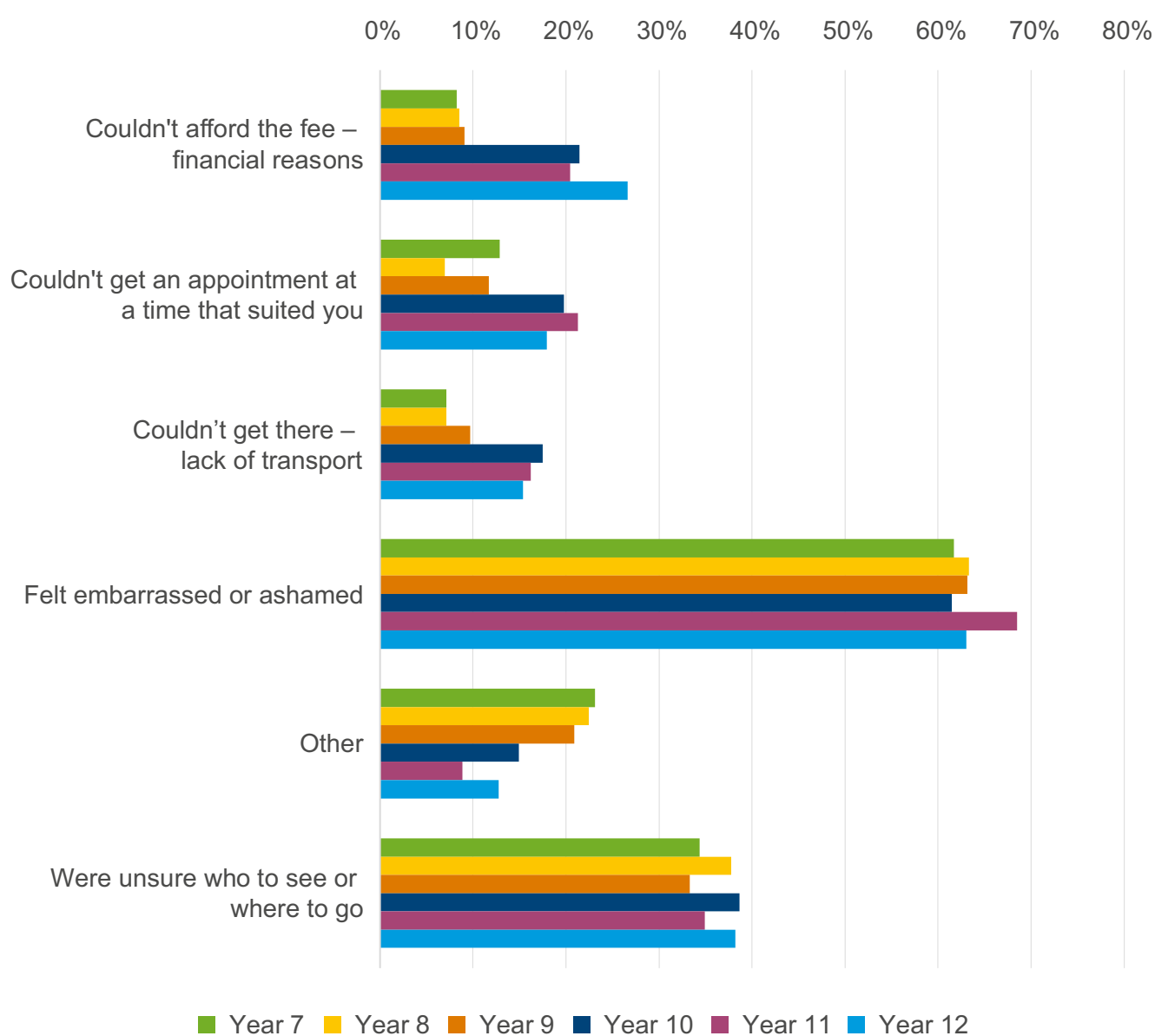
6. Healthy and connected

"Felt there was no one to go to that I could trust or would give me the support I needed."

Girl aged 13, metropolitan

It is vital that young people feel sufficiently comfortable and confident to discuss their health issues. It is important that young people develop these skills to ensure they can advocate for their own health in the future.⁵⁰

Graph 6.3.1: Proportion of Year 7 to 12 students identifying reasons they were unable to see a health professional, by school year



6. Healthy and connected

When young people were asked if they had anything else they wanted to add about their experience seeking support for their health, several barriers relating to fear, family, inaccessibility, lack of knowledge, lack of support or indifference emerged.

Young people were scared and did not want their parents or friends to worry or were concerned they would be viewed differently.

"I didn't want them to see me different."

Girl aged 13, metropolitan

Family, especially parents, were a notable barrier for young people accessing health professionals. Some young people did not want to tell their parents because they did not feel they would be supported, or did not want them to know about their issue/s. Others identified that their parents did not allow them to attend, did not believe it was necessary, or would not take them to their appointment.

"I am not supported by family, so I am not able to get the help I need."

Girl aged 14, metropolitan

Inaccessibility to health-professional support was primarily linked to lengthy waiting lists, limited availability of qualified professionals, and challenges attending appointments, particularly when transport was unavailable.

"Seeking specialist appointments and having to be on a 6+ month waiting list for an appointment when very sick."

Girl aged 16, metropolitan

Some young people wanted to resolve their issues themselves and so did not seek professional help. They also identified not wanting to feel like a burden or felt that their issue was not urgent.

"Didn't want to bother anyone and I wanted to stay out of people's way."

Girl aged 14, metropolitan

"I didn't think they'd care or understand."

Boy aged 13, metropolitan

Many young people were deterred from seeking help by uncertainty about whether they needed help, where to obtain help, or whether they would receive appropriate help. A number of young people also felt uncomfortable discussing their mental health issues, or felt they were unable to clearly explain the problems they were facing, which led them to avoid seeking help altogether.

"Didn't know how to bring it up to try getting help."

Girl 15, inner regional

"Didn't know how to word it."

Girl aged 13, metropolitan

It is important to note that many of these responses are consistent with the previous findings relating to issues accessing mental health supports. It is evident that young people in Western Australia are facing a number of barriers that prevent them from seeking or accessing professional help for their health. Lack of understanding of where to obtain help or how to express health problems needs to be addressed through further education. Integrating health education and awareness into the school curriculum may help young people better understand how to access the help they need, as well as how to advocate for themselves.

6. Healthy and connected

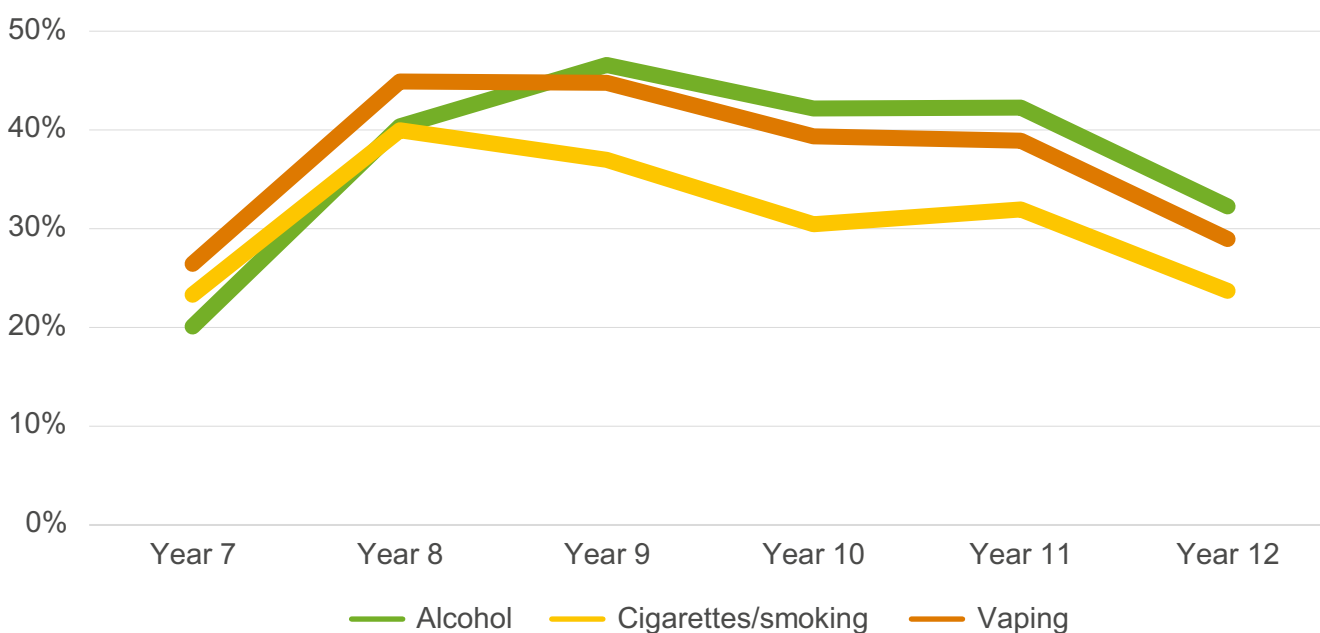
6.4 Knowledge of alcohol and drugs

Attitudes and behaviours toward alcohol and other drugs (AOD) develop through a complex interplay of individual, family, social, and cultural factors.⁵¹ For young people, these influences begin early and continue to evolve throughout childhood and adolescence. Given that brain development continues until around age 25, young people are particularly vulnerable to the effects of AOD use, and early exposure

can have long-lasting consequences for decision-making, impulse control, and overall wellbeing.⁵² Strengthening young people's knowledge, skills and supports is critical in helping them to navigate AOD influences and to make safer, more informed choices.

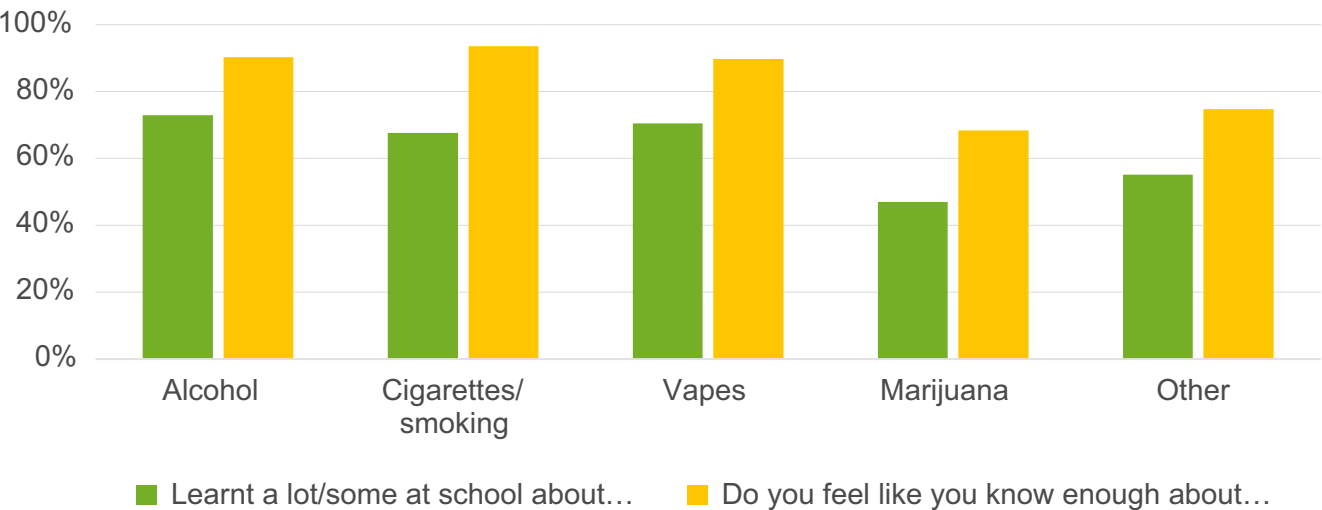
When asked how much they had learnt about AOD in school, 37.4 per cent said they learnt 'a lot' about alcohol, 32.0 per cent had learnt 'a lot' about cigarettes/smoking, and 38.1 per cent had learnt 'a lot' about vapes.

Graph 6.4.1: Proportion of Year 7 to 12 students who learnt a lot at school about alcohol, cigarettes and vapes, by school year



6. Healthy and connected

Graph 6.4.2: Proportion of Year 7 to 12 students who learnt a lot or some about AOD at school compared to the proportion who reported knowing enough about AOD, by question and AOD substance



Across all AOD substances, participants stating they knew ‘a lot’ from school increased notably in Years 7 and 8, reduced slightly between Year 9 and Year 11, and then decreased again in Year 12. This trend is likely due to learning attrition, and it suggests that continuous AOD education may be important for young people to ensure they have the most recent and accurate information. The imperative becomes greater as young people increase in age and become more likely to engage in AOD.

Interestingly, when young people were asked if they felt they knew enough about the health impacts of AOD, nine in 10 felt they knew enough about alcohol, cigarettes/smoking and vapes. These findings are notably lower than the proportion of students who identified they learnt ‘a lot’ about AOD in school. Findings relating to both knowledge from school and how much students knew about AOD were consistent with findings from SOS21.

These findings may indicate that young people are learning about AOD through a range of influences beyond the school environment. Parents and carers are thought to be the most influential role models, particularly during middle adolescence.⁵³ However, exposure to AOD-related content through social media and traditional media can further shape young people’s perceptions and behaviours.⁵⁴

Young people in remote areas were consistently around five per cent less likely to say ‘yes’ when asked if they knew enough about health impacts of AOD, except for marijuana, when compared to young people located in other areas. This might signify that AOD education in remote areas requires a more tailored approach that addresses regional challenges, and ensures programs are culturally relevant, accessible, and responsive to local community contexts.

6. Healthy and connected

6.4.1 Acceptance and use of AOD

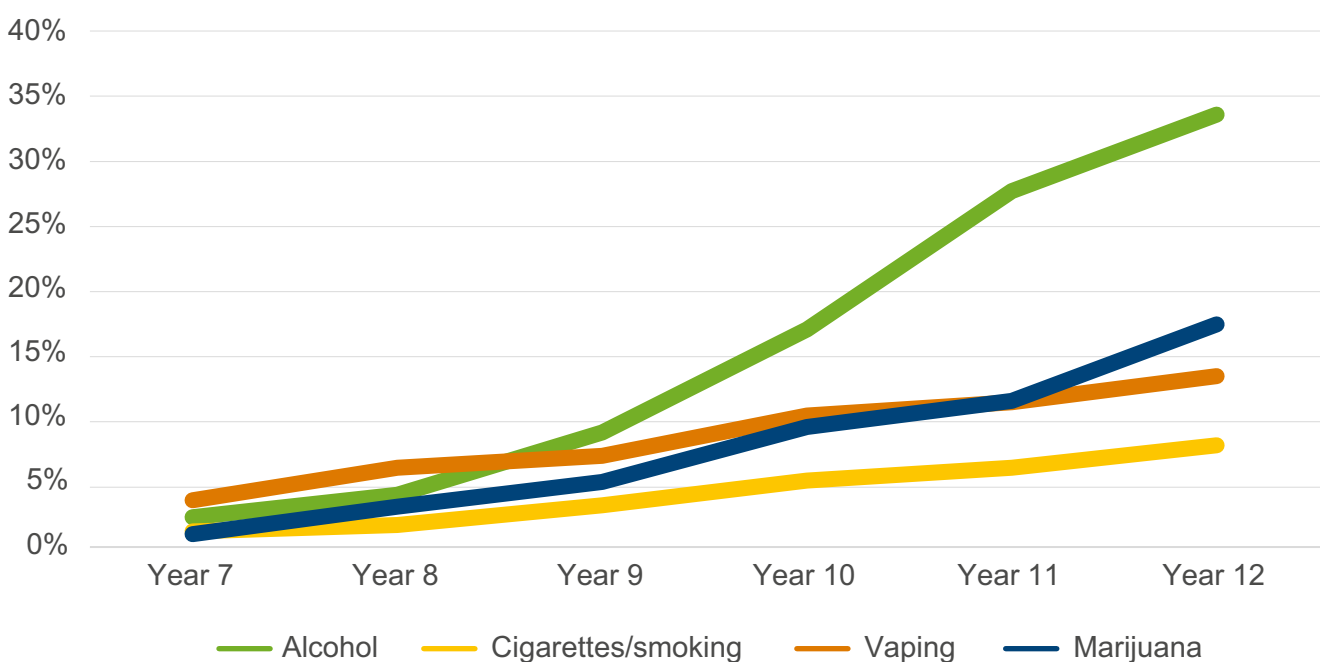
Four in five young people (80.2%) thought that it was unacceptable for someone their age to use alcohol. However, 12.4 per cent of young people found it acceptable.

Consistent with SOS21, acceptance surrounding AOD notably increased with age. While less than 10 per cent of young people across Years 7 to 9 thought it was

acceptable to use alcohol, this increased to 33.6 per cent of Year 12 students.

Interestingly, the proportion of older young people who thought it was acceptable to use marijuana decreased compared to SOS21 (SOS25 17.5% vs SOS21 25.5%), as did the proportion who believed smoking cigarettes was acceptable (SOS25 8.2% vs SOS21 13.5%).

Graph 6.4.3: Proportion of Year 7 to 12 students who found it acceptable for someone their age to use AOD, by school year



6. Healthy and connected

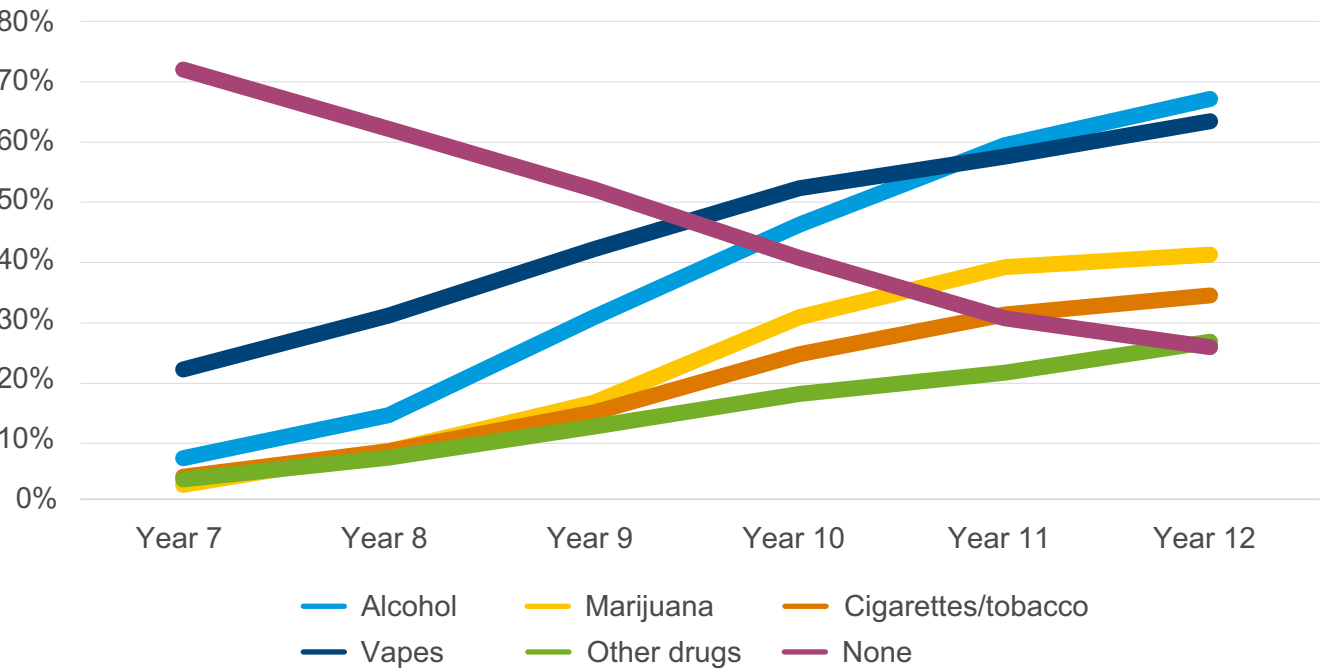
Young people in inner regional areas were the most likely to say that it was okay for someone their age to use alcohol (22.5%) or marijuana (11.5%), while young people in remote areas were most likely to identify vapes (11.1%) or cigarettes/tobacco (6.3%).

Despite most young people stating that it is not acceptable for someone their age to use alcohol, far more reported their friends had engaged in AOD use.

When asked if their friends had used alcohol, two in three Year 12 students said 'yes' (67.2%). The proportion of young people who identified that their friends had used other drugs also notably increased with age, with vapes identified as the next most frequently used drug (63.5%).

Young people in inner regional areas were the most likely to report their friends using all AOD substances, while those in the metropolitan area (53.6%) and remote/very remote (49.1%) areas were the most likely to say 'none'.

Graph 6.4.4: Proportion of Year 7 to 12 students who reported their friends had tried AOD, by school year



6. Healthy and connected

6.4.2 Alcohol

Despite alcohol consumption being strongly immersed in Australian culture,⁵⁵ broader research shows that there has been a gradual decrease in the consumption of alcohol by young people in Australia.⁵⁶ Since alcohol is one of the leading causes of preventable disease, illness and death in Australia, it continues to be as important as ever to explore how young people view and use alcohol.

Young people were asked if they had ever had more than a few sips of alcohol, such as a full can or a glass. Nearly three in 10 (29.2%) young people said 'yes' and 4.2% 'preferred to not say'. Consistent with the previous questions, the proportion of young people who said 'yes' notably increased with age.

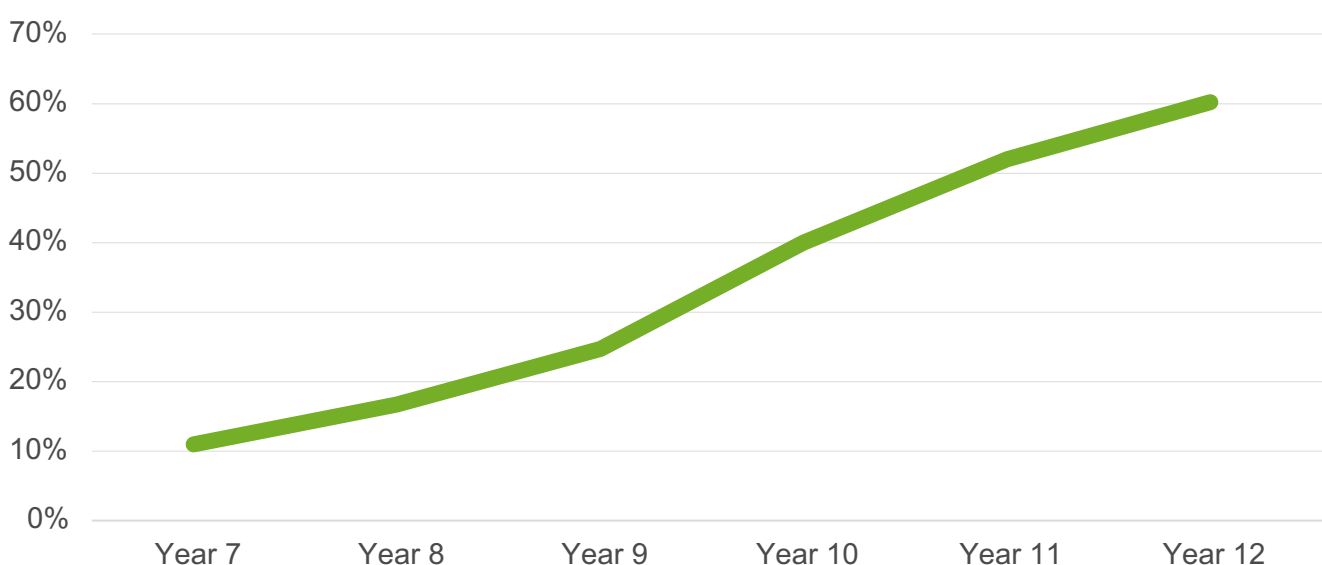
More than two in five (42.3%) of the young people who had tried alcohol, reported that they had consumed alcohol in the past four weeks.

Year 11 students were the most likely to have consumed alcohol in the past four weeks (63.3%), followed by Year 12 students (54.7%). Given that Year 12 students are typically focused on exam preparation, this may explain the decrease in their drinking frequency when compared to Year 11.

These young people were further asked about how frequently they had consumed alcohol in the past four weeks. More than two in five (44.9%) young people had consumed alcohol once in the past few weeks, 29.5 per cent had consumed alcohol two or three times in the past four weeks, and 17.2 per cent selected once a week. Concerningly, 4.8 per cent identified drinking most days.

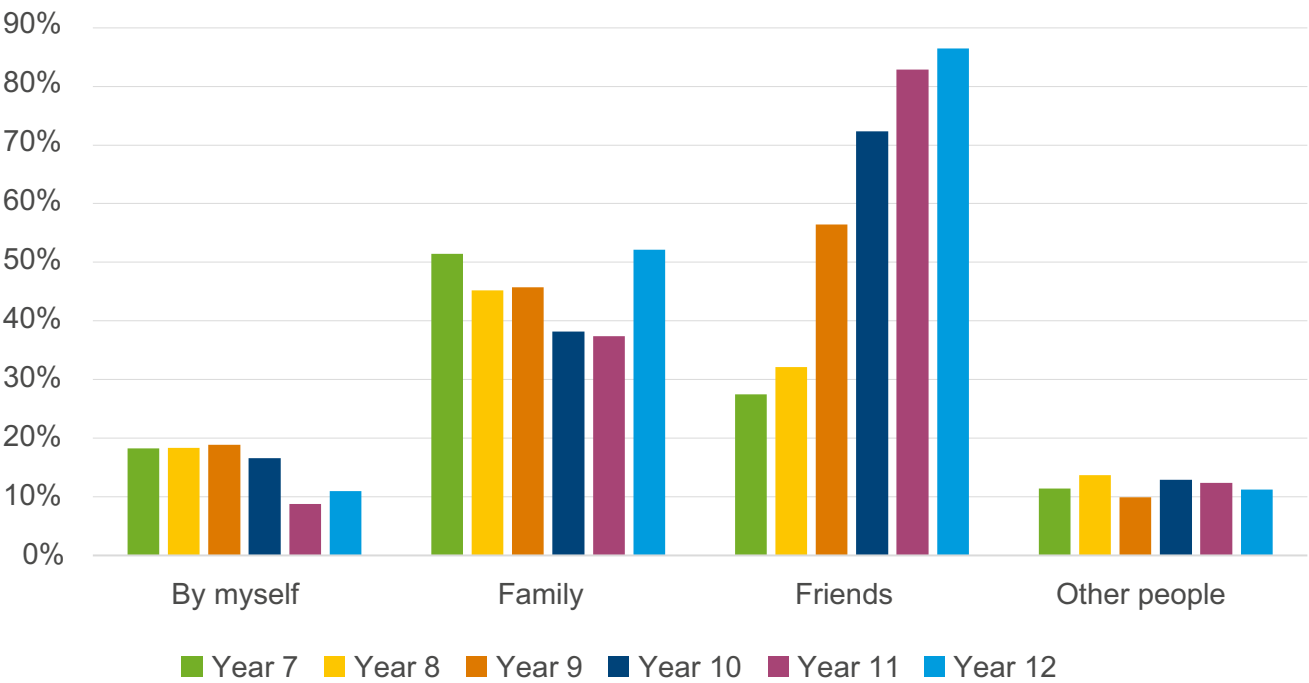
While only a small proportion of Year 7 and Year 9 students reported having tried alcohol, around 14 per cent reported that they were drinking alcohol most days.

Graph 6.4.5: Proportion of Year 7 to 12 students who had tried alcohol, by school year



6. Healthy and connected

Graph 6.4.6: Proportion of Year 7 to 12 students reporting who they drink alcohol with, by school year



The companions that young people were most likely to drink with differed depending on age. Younger students (Years 7 to 9) were more likely to drink alone (approximately 18%), or with their family (45–51%). As they aged, young people became more likely to drink with friends and less likely to drink by themselves. This finding is consistent with the findings of SOS21. The likelihood of young people drinking with their family declined gradually with age, before increasing in Year 12 to the same level seen in Year 7.

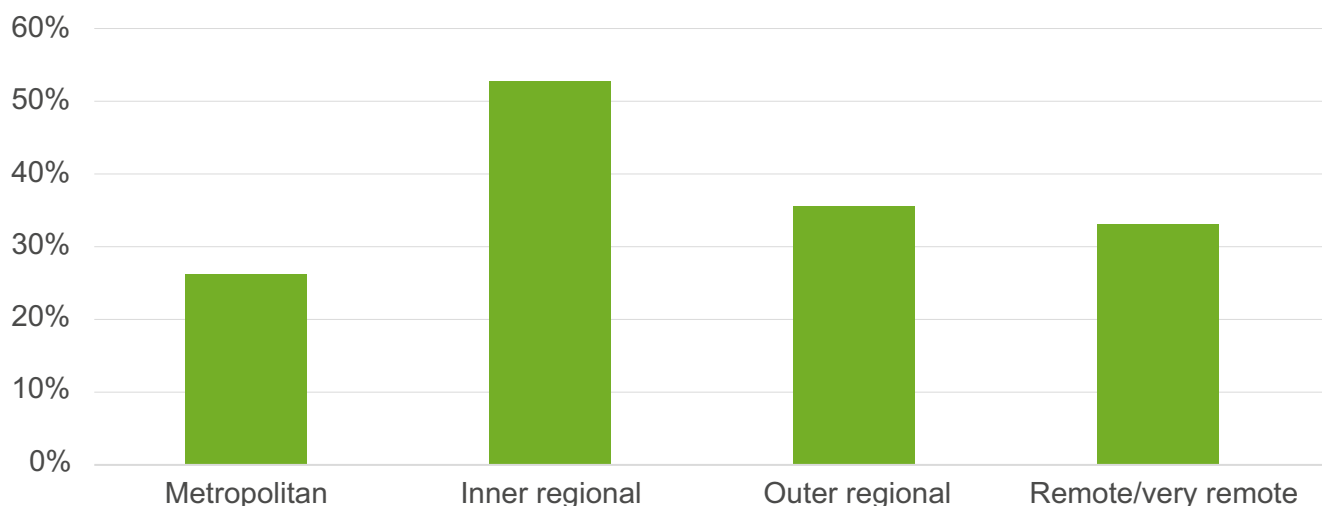
Some parents believe that providing alcohol to their children in a safe environment, such as the family home or the home of family friends, will protect their children from engaging in risky drinking behaviours in the future.⁵⁷ Unfortunately, this practice may be having the opposite effect. Young people

who start drinking in early adolescence (regardless of the setting) are more likely to engage in heavy drinking episodes in early adulthood and experience more alcohol related harms, when compared to those who started drinking alcohol closer to the legal age.⁵⁸

Young people in inner regional areas were the most likely to say ‘yes’ to having tried alcohol, followed by young people in outer regional areas, remote/very remote, and lastly those in the metropolitan area.

6. Healthy and connected

Graph 6.4.7: Proportion of Year 7 to 12 students who had tried alcohol, by remoteness



When asked if they had drunk alcohol in the past four weeks, the results followed a similar trend to the previous question: 52.3 per cent of young people in inner regional areas said 'yes', followed by 45.6 per cent in outer regional areas, 40.8 per cent in the metropolitan area, and 29.6 per cent in remote/very remote areas.

Questions regarding the frequency of alcohol consumption revealed a notable proportion of young people engaged in drinking 'most days'. Specifically, within the cohort who had drunk alcohol in the past four weeks, 9.4 per cent of young people in remote/very remote areas, 7.9 per cent in inner regional areas and 7.2 per cent in outer regional areas, said they drank alcohol 'most days'. This is almost two to three times the proportion of young people in the metropolitan area (3.6%) who reported drinking 'most days'.

Among young people living in inner regional and remote/very remote areas who reported drinking alcohol, almost one in five young people did so on their own.

Young people in regional and remote areas face unique challenges. Isolation and limited opportunities for social or recreational activities can lead to boredom, and in some communities, this creates an environment where alcohol becomes a common way to pass time.⁵⁹ Over time, this can contribute to a strong drinking culture among young people.

6.4.3 Smoking

Thanks to decades of prevention efforts, overall smoking use has been on the decline. However, due to the increased popularity of vaping, research has shown that young people who vape are nearly five times more likely to start smoking.⁶⁰ As nicotine is an incredibly addictive substance, people who smoke often start in adolescence, highlighting the continued need for early prevention and education.⁶¹

While more than four in five (83.1%) young people have not tried smoking a cigarette, 13.6 per cent of all young people have tried a cigarette and 3.4 per cent preferred not to say. Unsurprisingly, the proportion of young

6. Healthy and connected

people who had tried cigarettes increased with age. Those who said 'yes' were asked whether they had smoked a whole cigarette. 42.7 per cent said they had smoked a whole cigarette, while 3.0 per cent preferred not to say. Once again, the likelihood of smoking a whole cigarette increased with school age.

Young people were further asked how frequently they smoked. Seven in 10 (70.0%) young people no longer smoked and 16.4 per cent smoked 'occasionally'. Concerningly, 4.5 per cent smoked 'daily' or 'most days' and 3.5 per cent smoked 'once or twice a week'. Those in older years were most likely to smoke 'occasionally', whereas Year 7 and Year 9 students who smoked were the most likely to select 'daily' or 'most days' (Year 7, 7.9%, Year 9, 10.0%, Year 12, 3.2%, combined responses).

One in four (23.1%) young people living in remote areas said they had tried a cigarette, which is almost twice the proportion reported by young people in the metropolitan area (12.1%). Furthermore, almost three in five (57.0%) young people living in remote areas who had tried smoking had smoked a whole cigarette. This is notably more than the approximate 42 per cent of young people living in other areas who smoked a whole cigarette.

Lastly, when asked about their frequency of smoking, 6.0 per cent of young people in outer regional areas smoked 'daily' or 'most days', followed by 5.5 per cent in remote areas and 4.9 per cent in the metropolitan area. Young people in inner regional areas did not select smoking daily or most days but were the most likely to select 'once or twice a week' (9.0%).

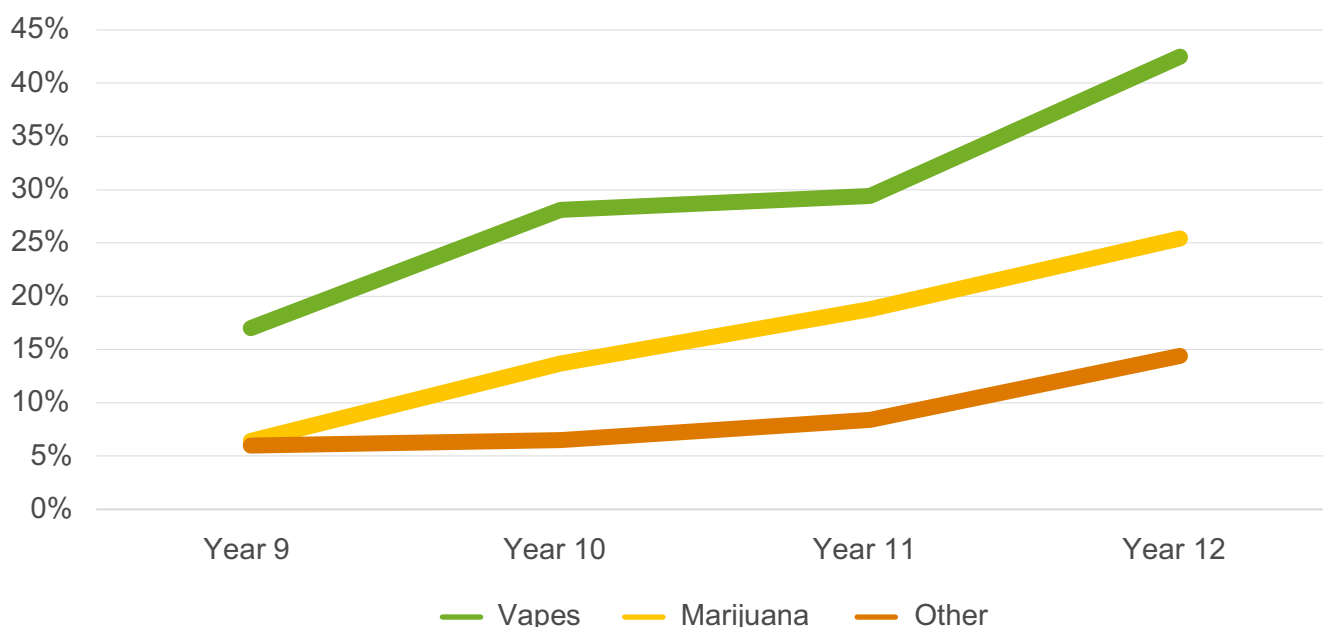
6.4.4 Other drugs

Vaping among young Australians has emerged as a significant public-health concern, with the use of vapes significantly increasing over the past decade,⁶² and being found to act as a gateway drug to other drugs such as alcohol, cannabis, and illicit substances.⁶³ Vaping laws were amended in July 2024 to restrict the purchasing of vaping products exclusively to pharmacies, so as to support people intending to quit smoking.⁶⁴ Previously, vapes were more accessible and popular among young people due to their appealing flavours and discreet designs. Since vape products contain high concentrations of nicotine and other hazardous substances, they put young people at risk of addiction and long-term health effects.

More than one in four (26.7%) young people in Years 9 to 12 have tried vapes. Unsurprisingly, the proportion of young people who tried vapes, marijuana and other drugs was found to increase with age.

6. Healthy and connected

Graph 6.4.9: Proportion of Year 9 to 12 students who reported they had tried vapes, marijuana, or other drugs, by school year



While it remains the case that most young Australians do not use alcohol or drugs, drug use by young Australians is becoming increasingly visible, influenced by shifting social attitudes and easier access to substances like marijuana and synthetics. Despite perceptions of low risk, these drugs can disrupt cognitive development⁶⁵ and elevate the likelihood of long-term mental-health issues.⁶⁶

When asked about other drugs, 13.9 per cent of young people reported having tried marijuana and 7.7 per cent had tried other drugs (drugs not already asked about). It is important to note that the proportion of all young people who had tried marijuana and other drugs was found to have decreased notably since 2021. SOS21 found that 23.6 per cent of Years 7 to 12 students reported they had tried marijuana and 14.3 per cent had tried other drugs. The SOS21 findings

are comparable to the SOS25 Year 12 findings, in which one in four (25.4%) Year 12 students had tried marijuana, and more than one in eight (14.4%) had tried other drugs.

Use of drugs also differed between remote areas. Young people in inner regional (41.7%) areas were the most likely to have used vapes, followed by those in remote/very remote areas (32.9%). This was notably more than those in the metropolitan area where 24.1 per cent had tried vapes. Use of marijuana followed a similar trend where those in inner regional (23.0%) areas were most likely to say 'yes', followed by those in remote/very remote (20.4%) and in the metropolitan area (12.3%).

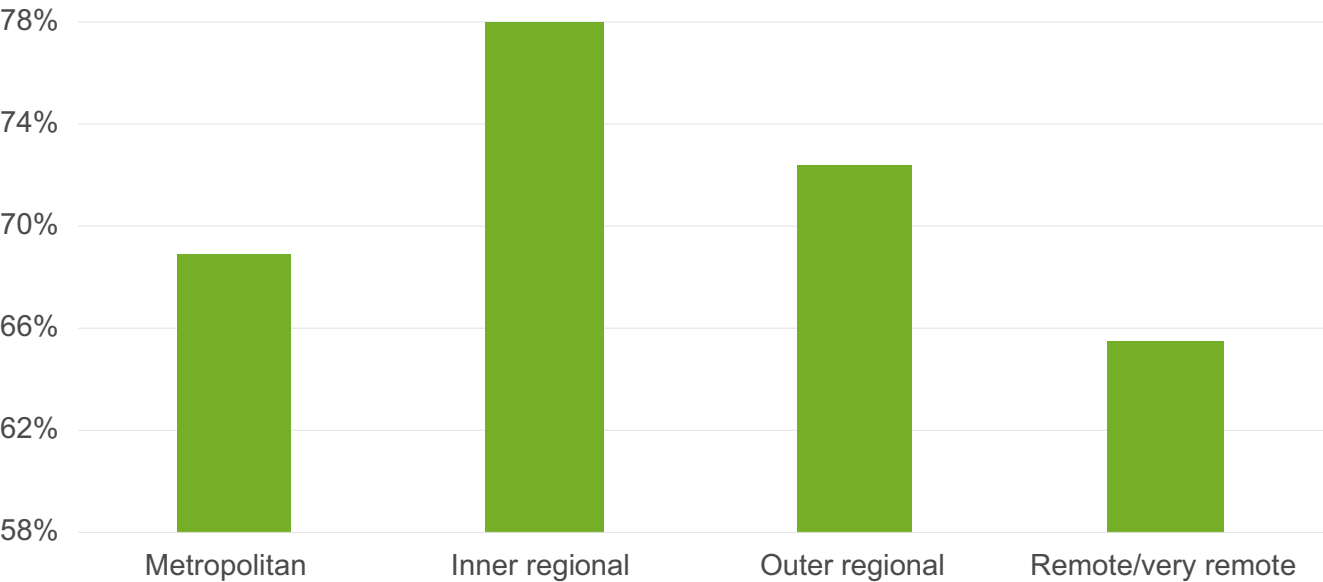
6. Healthy and connected

6.4.5 Knowledge of where to get help with smoking, drinking, vaping and other drugs

Seven in 10 (69.7%) young people said they knew where to go if they needed help about AOD; however, this means that three in 10 either do not know or are unsure where to

go for help. These findings are consistent with SOS21, indicating no change in this space. Knowledge of AOD supports did slightly increase with age (Year 7, 63.0% vs Year 12, 73.0%) and differed notably between remote areas.

Graph 6.4.10: Proportion of Year 7 to 12 students who knew where to seek support for AOD, by remoteness



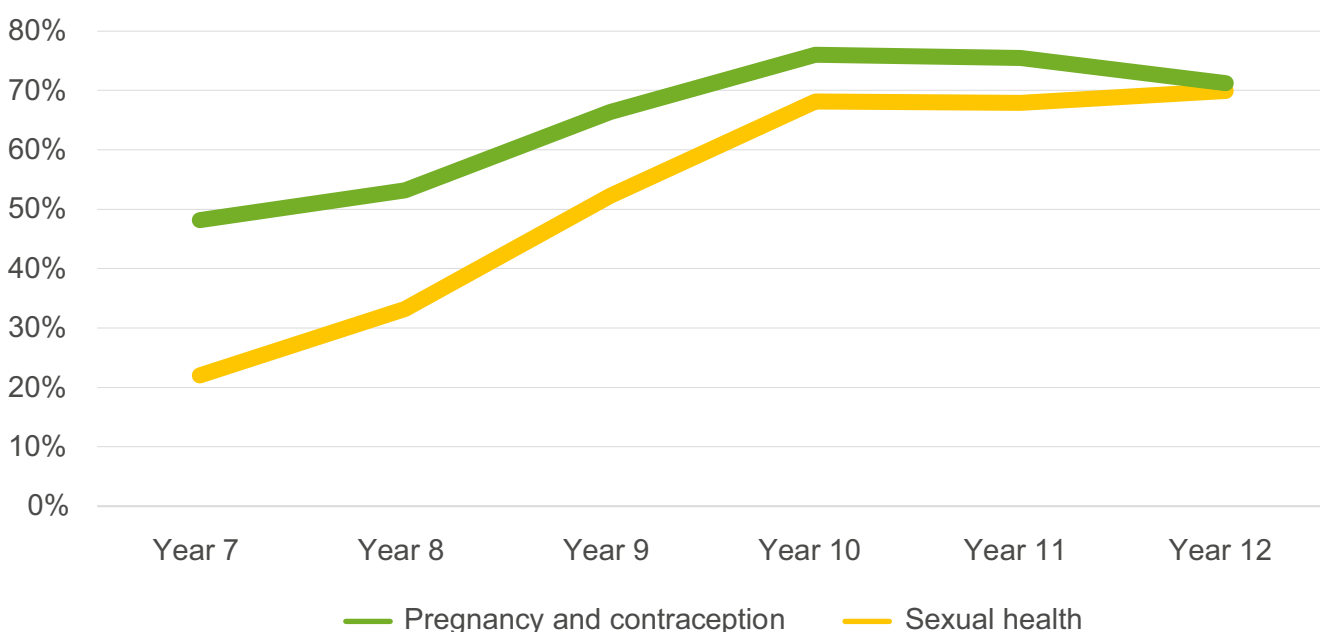
6. Healthy and connected

6.5 Knowledge of sexual health

Almost one in two (48.5%) young people said they learnt 'a lot' or 'some' about pregnancy and contraception in school, while nearly two in three (63.3%) felt they had learnt 'a lot' or 'some' about their sexual health in school. These proportions increased with age for both questions, however, there was a slight decrease in self-perception of sexual health knowledge between Year 11 and Year 12 students.

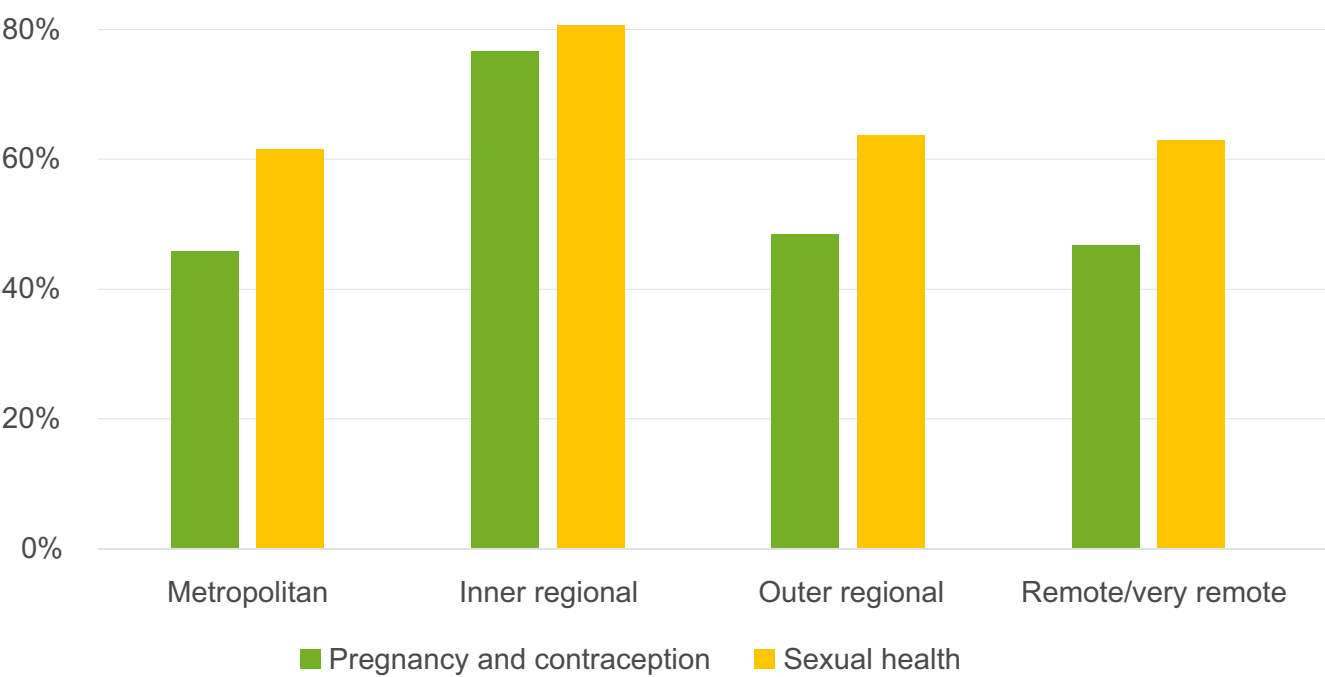
When we compare these findings to those of SOS21, there has been an increase in the proportion of young people who felt that at school they learnt 'a lot' or 'some' in relation to both pregnancy and contraception (SOS21 43.7%) and sexual health (SOS21 53.5%).

Graph 6.5.1: Proportion of Year 7 to 12 students who learnt a lot or some about sexual health, and pregnancy and contraception at school, by school year



6. Healthy and connected

Graph 6.5.2: Proportion of Year 7 to 12 students who learnt a lot or some about sexual health, and pregnancy and contraception at school, by remoteness



There was a small difference between boys and girls in relation to knowledge of sexual health, with boys identifying they felt they had learnt more (boys 66.3% vs girls 60.1%). Interestingly, young people in inner regional areas were most likely to say they felt they had learnt ‘a lot’ or ‘some’ about both topics.

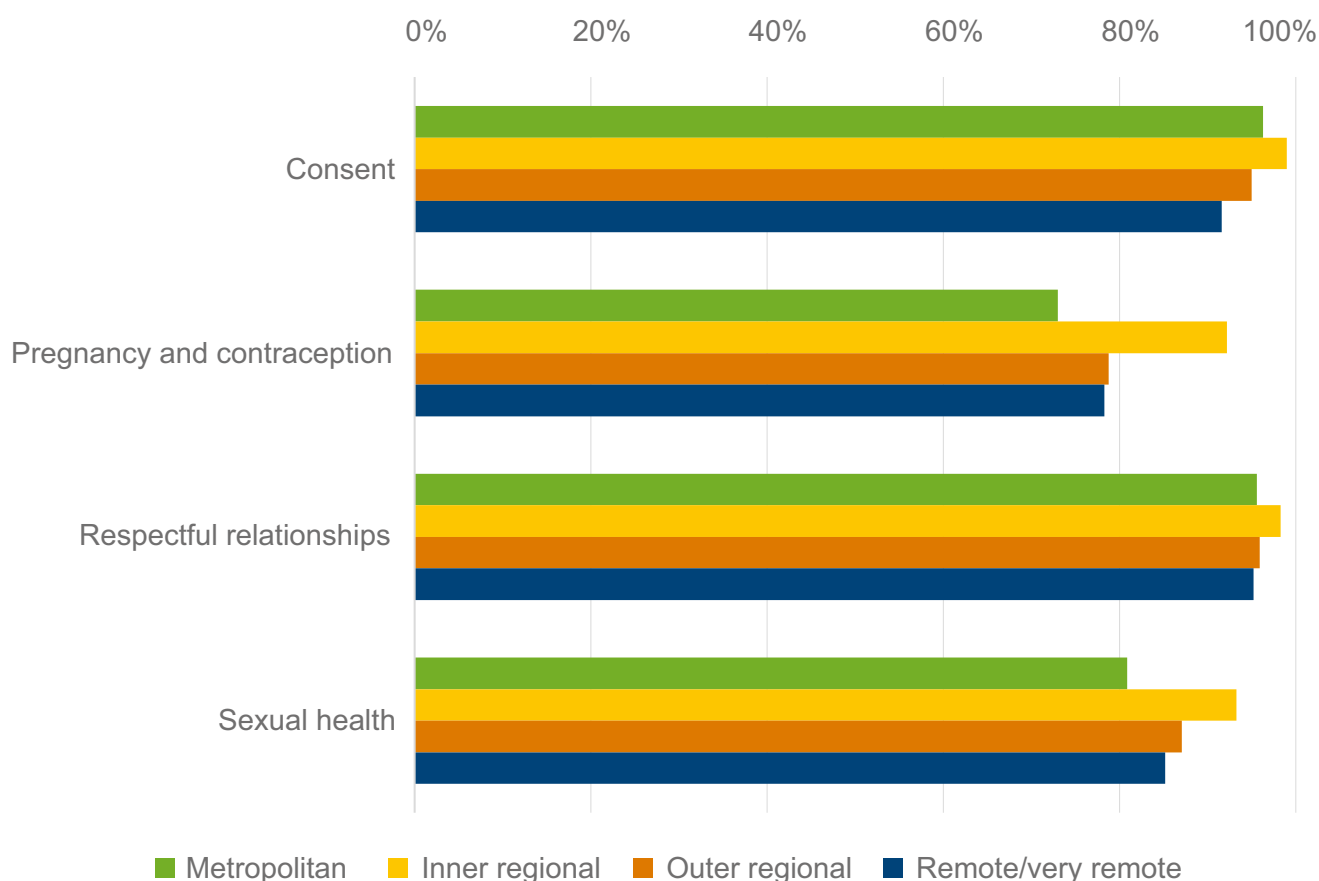
Young people were asked if they felt they knew enough about sexual health topics. Three in four (75.2%) young people felt they knew enough about pregnancy and contraception, but this did increase with age (Year 7, 53.9% vs Year 12, 88.8%). More than eight in 10 (82.6%) felt they knew enough about sexual health which increased with age but then dipped in Year 12 (Year 7, 74.8%; Year 11, 89.8%;

Year 12, 84.6%). Young people were confident in their knowledge of respectful relationships and consent, with 95.8 per cent and 96.2 per cent selecting ‘yes’, respectively. There was no notable difference observed between genders. Young people in inner regional areas were most likely to say ‘yes’ across all topics.

Most students learnt about sexual health in school as part of ‘health/physical education’ (82.9%), followed by ‘science/biology’ (19.2%), while 4.9 per cent identified ‘religious instruction/education’ as a source. The remaining 9.6 per cent had ‘not yet had sexual health education’.

6. Healthy and connected

Graph 6.5.3: Proportion of Year 7 to 12 students who think they know enough about consent, pregnancy and contraception, respectful relationships, and sexual health, by remoteness



When asked how relevant they found these classes, most young people found it to be 'somewhat relevant' (56.5%), 23.9 per cent found it to be 'very relevant', and only 5.7 per cent found it to be 'extremely relevant'. This leaves more than one in eight (13.9%) who found it 'irrelevant'. Promisingly, young people in upper secondary school were more likely to find it 'extremely' or 'very relevant' compared to young people in lower school (Year 7, 19.1% vs Year 12, 41.1%).

Three in five (60.2%) young people knew where to go for help about their reproductive and sexual health, leaving two in five young

people who didn't know or who were unsure where to go. This finding is consistent with SOS21 in which only 58.5 per cent identified knowing where to go for help. The proportion of young people who said 'yes' slightly increased with age, but still only accounted for 65.7 per cent of the Year 12 students who said 'yes'.

Our findings clearly demonstrate that many young people do not feel as though their in-school sexual health classes are sufficiently relevant or informative, and they remain unsure about where to seek help.

6. Healthy and connected

6.5.1 Sexual experiences

Only Years 9 to 12 were asked about their own sexual experiences.

When asked if they had had an intimate or sexual experience, the proportion of young people who said ‘yes’ notably increased with age. It is worth noting that many young people selected ‘prefer not to say’ on this question: specifically, 6.0 per cent of Year 9 and Year 10 students, 10.2 per cent of Year 11 students, and 8.1 per cent of Year 12 students.

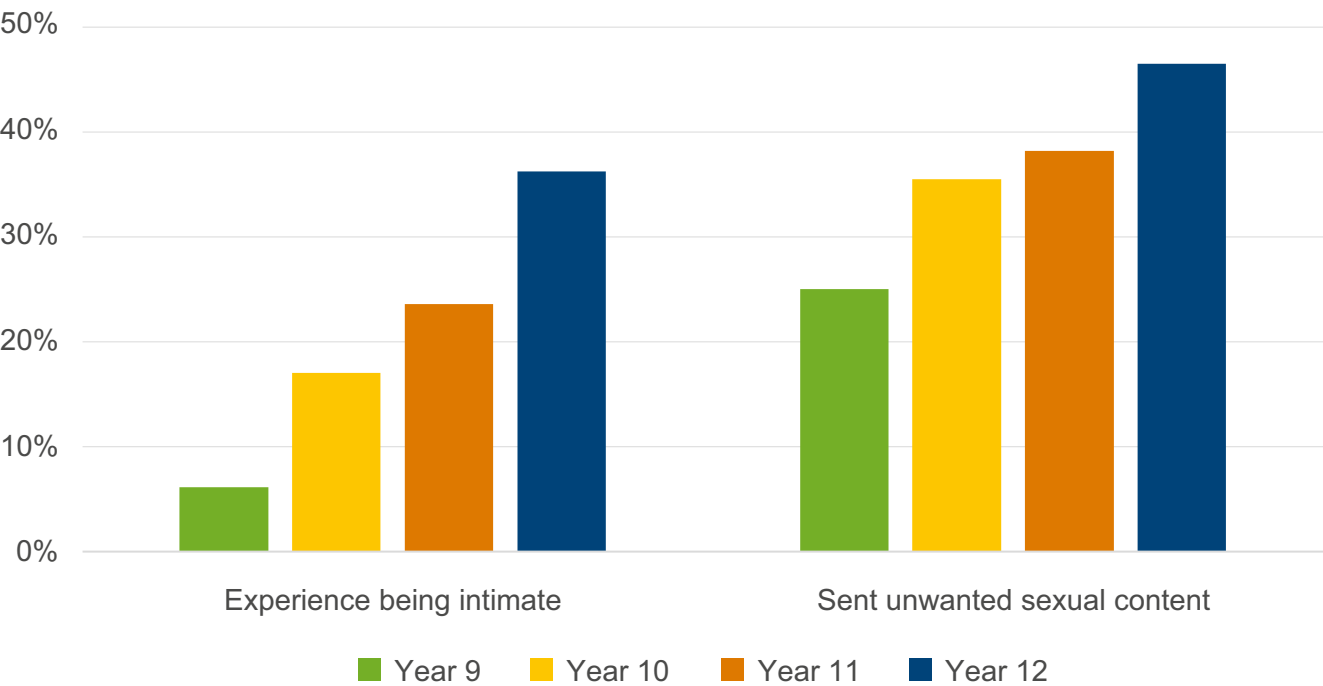
There was a small difference observed between genders when asked about sexual experiences (boys 18.7% vs girls 16.0%). Interestingly young people in inner regional areas were notably more likely to say ‘yes’ (28.8%); nearly double the amount of young people in the metropolitan area (15.7%).

One in three young people (34.1%) reported having been sent unwanted sexual content, including images, videos, or messages. When exploring the proportion of young people per year group, findings showed 25.0 per cent of Year 9 students had been sent unwanted material. This proportion nearly doubled by Year 12 (to 46.5%).

Girls were notably more likely to say ‘yes’ to receiving unwanted sexual content (girls 39.3% vs boys 28.9%). This is consistent with broader literature which finds that girls are more likely to experience negative online experiences when compared to boys.⁶⁷ Notably, the proportion of girls who received unwanted sexual content decreased between SOS25 and SOS21 (SOS21 56.3% vs SOS25 39.3%).

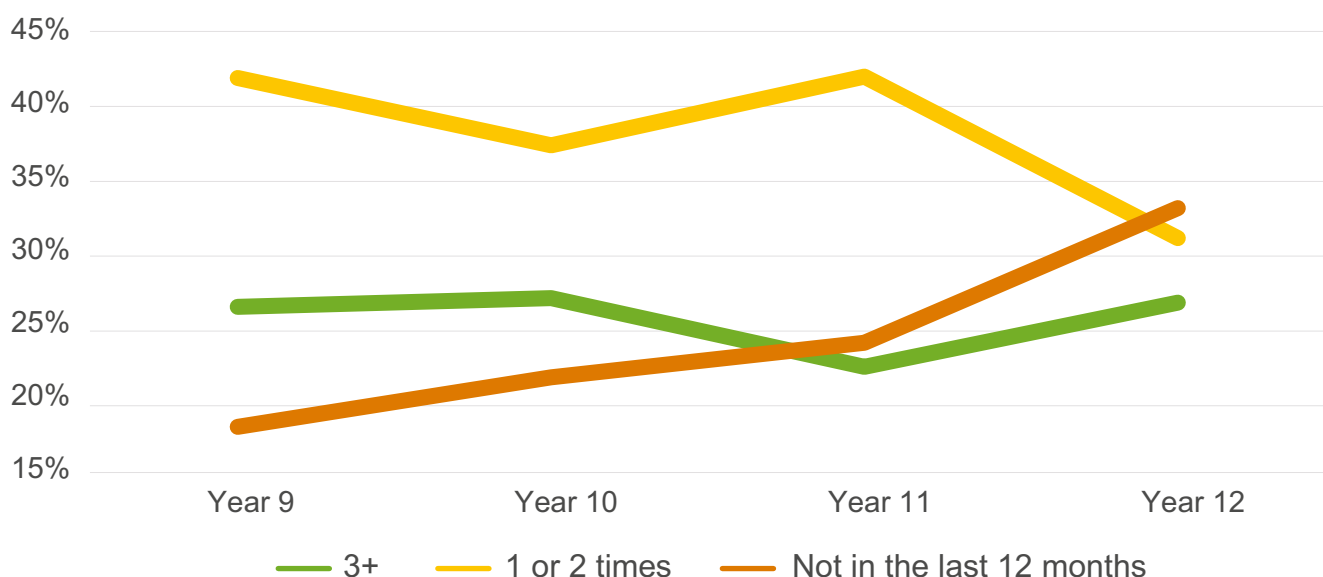
Young people in remote/very remote areas were least likely to say ‘yes’ (26.8%), while young people in inner regional areas were the most likely (39.4%).

Graph 6.5.4: Proportion of Year 9 to 12 students who had a sexual experience or were sent unwanted sexual content, by school year



6. Healthy and connected

Graph 6.5.5: Frequency of Year 9 to 12 students receiving unwanted sexual content in the past 12 months, by school year



Young people who had received unwanted sexual content were asked follow-up questions relating to frequency in the past 12 months and the content-medium used. More than one in four (25.9%) reported being sent content 'three or more times' in the past year; 38.4 per cent were sent it 'once or twice' and 23.6 per cent had not been sent content in the past year. Interestingly, the proportion of young people who identified having not received content in the past 12 months increased with age.

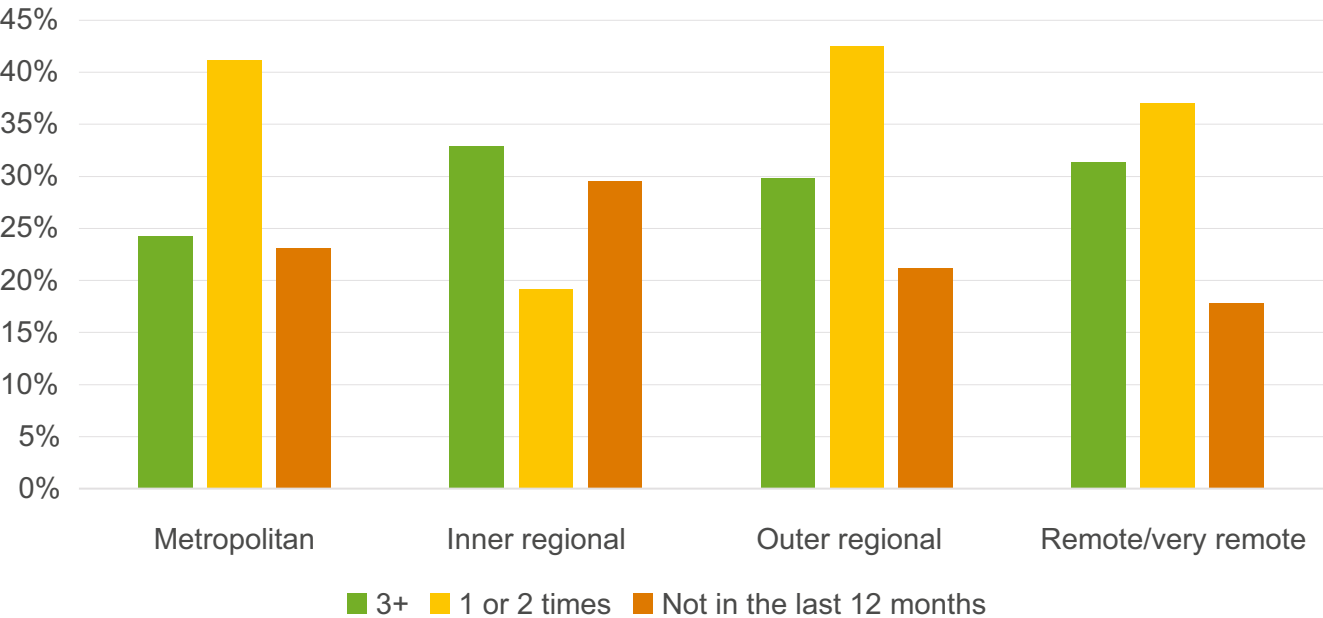
Despite a larger proportion of girls receiving unwanted sexual content, girls were more likely to identify having not received content within the past year (girls 26.8% vs boys 19.3%). Boys were more likely to have

received it 'once or twice' (boys 40.9% vs girls 36.6%). Boys and girls were equally likely to have received unwanted sexual content 'three or more times' in the past year (25.9%).

Consistent with broader research, our findings indicate that young girls are more likely to experience sexual harassment online, including receiving unwanted sexual images, videos, and messages.⁶⁸ This aligns with longstanding evidence on the gendered nature of digital harm, where girls and young women are more frequently targeted due to social norms, power imbalances, and gendered expectations around sexuality and appearance.

6. Healthy and connected

Graph 6.5.6: Frequency of Year 9 to 12 students receiving unwanted sexual content in the past 12 months, by remoteness



There were no clear trends across remote areas as young people in inner regional areas were the most likely to receive the content ‘three or more times’ (32.9%) and also most likely to report that they had not received content within the past 12 months (29.5%). Young people in the metropolitan area and outer regional areas were most likely to select ‘once or twice’.

When asked about how they were sent unwanted sexual content, 86.9 per cent of boys and 91.3 per cent of girls identified through social media. Text messages were the next most common platform (girls 19.6% vs boys 20.6%).

Analysis of the results by school year shows that there was a slight increase in the proportion of young people who received unwanted content via social media as age increased (Year 9, 84.1% vs Year 12, 94.0%).

The proportion of young people who received content via text message was largely consistent, but there was a notable decrease in Year 11 (14.9%) when compared to Year 10 (20.2%), and Year 12 (21.6%).

All young people in inner regional areas who had received unwanted sexual content had received it via social media, and more than one in five (22.2%) had also received it via text message. In other areas, 87-90 per cent had received content via social media and 15-22 per cent via text message.

It is important to note that the survey was completed prior to the under-16s social media ban taking effect in Australia in December 2025. As a result, the findings of SOS25 relating to content received via social media may no longer be fully representative of the current situation of young people.

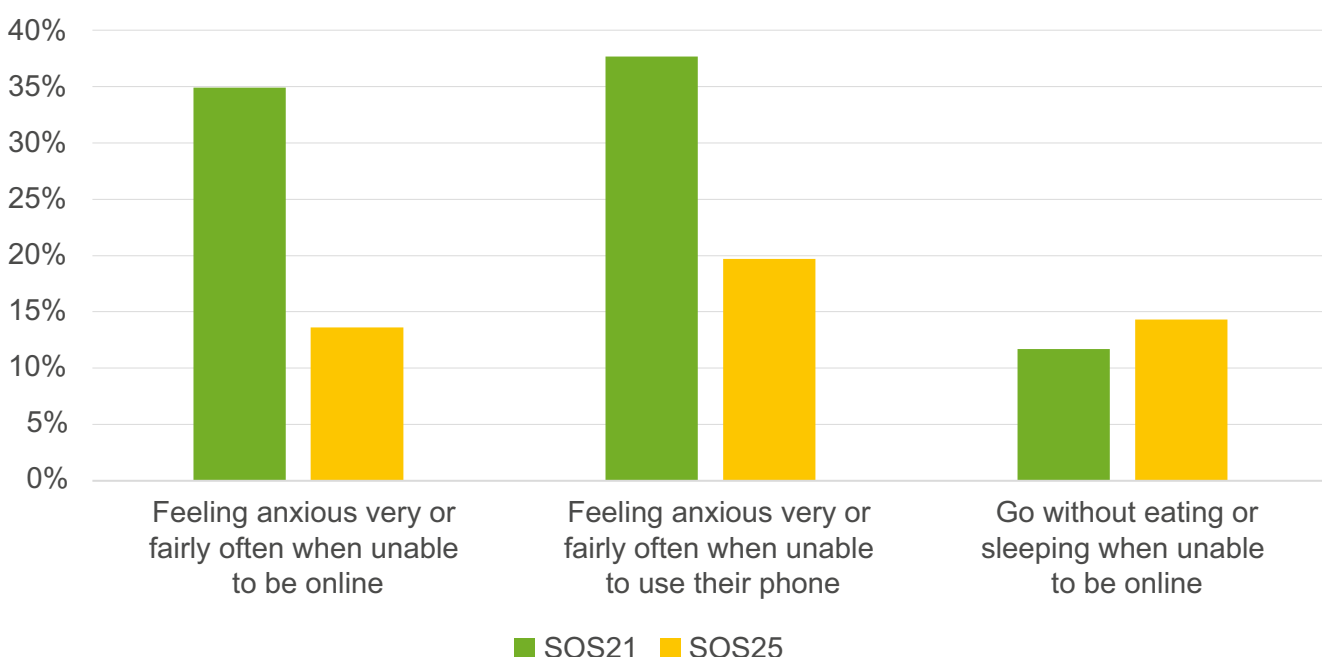
6. Healthy and connected

6.6 Problematic phone use

Problematic phone use has emerged as a growing concern for young people, with research demonstrating that excessive phone use is associated with depression, anxiety, poor sleep quality, and impacted day-to-day functioning.⁶⁹ As more aspects of young people's lives continue to shift online, including learning, their reliance on phones is likely to grow. This makes it even more important to understand how these patterns of use may be affecting their wellbeing.

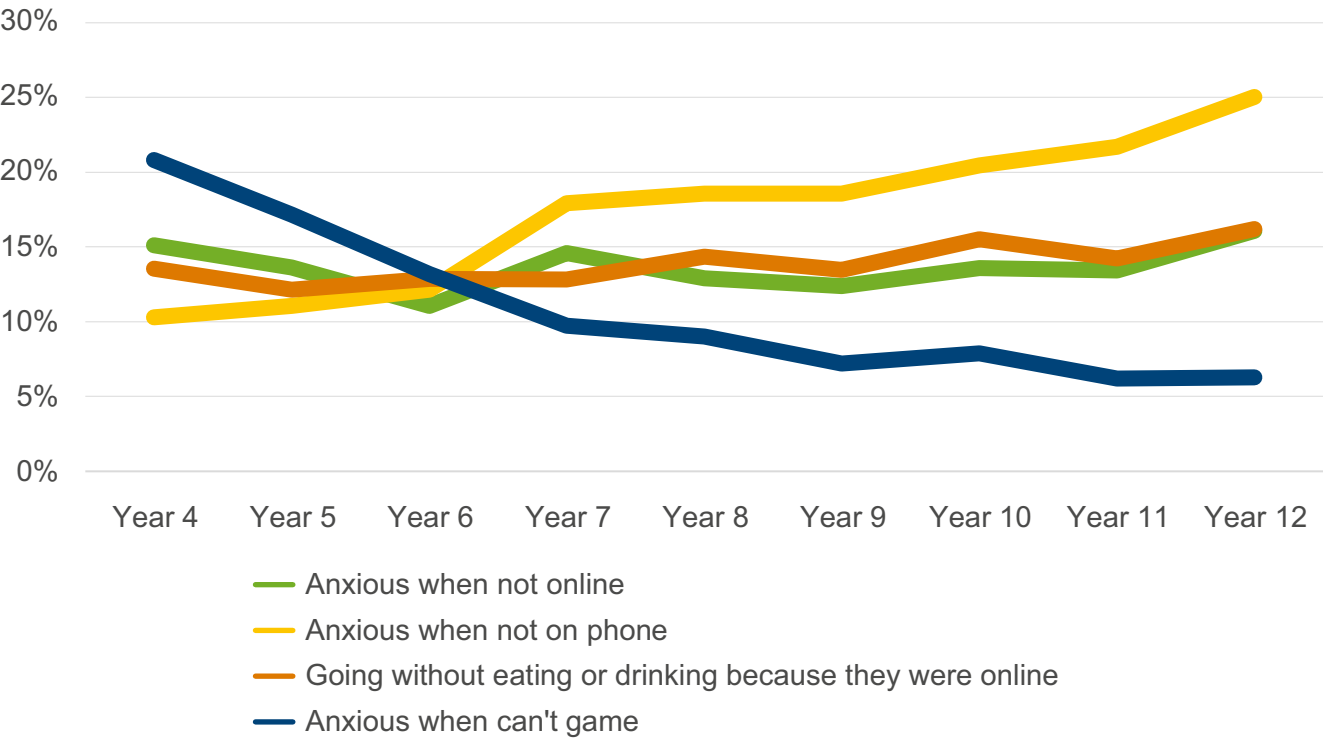
Promisingly, only one in eight (13.3%) children identified feeling anxious 'very' or 'fairly often' when they could not be online. This is a notable decline in the ratio observed in SOS21, where one quarter (26.9%) of children identified feeling bothered 'very' or 'fairly often'. The downward trend continued when we asked young people if they felt anxious 'very' or 'fairly often' when they were unable to use their phone. Interestingly, the proportion of young people who said they went without eating or sleeping because they were online slightly increased.

Graph 6.6.1: Proportion of Year 7 to 12 students who experienced negative feelings when they are unable to be online or use their phone, by SOS21 vs SOS25



6. Healthy and connected

Graph 6.6.2: Proportion of Year 4 to 12 students who experienced negative feelings when they are unable to be online or use their phone, by school year



Across all questions relating to being online or phone use, young girls were more likely to identify negative responses. Secondary school girls (18.1%) were twice as likely to identify feeling ‘very’ or ‘fairly anxious’ (combined) when they could not be online, compared to boys (9.3%). A similar difference was also noted when young people were asked if they could not use their phone (girls 26.6% vs boys 12.9%).

Girls were also more likely to go without eating or sleeping because they were online (girls 17.4% vs boys 11.1%). However, when specifically asked about feeling anxious when they could not game, girls were more likely to select ‘never/almost never’ (girls 67.7% vs boys 49.7%), compared to boys

who were slightly more likely to select ‘very’ or ‘fairly often’ (boys 9.9% vs girls 6.1%). Findings were consistent for children (boys 22.0% vs girls 12.0%).

The proportion of young people who felt anxious when they could not use their phone and who went without eating or sleeping because they were online increased with age. Conversely, the proportion who felt anxious when they could not play online games, decreased slightly with age. This downward trend began in primary school children.

6. Healthy and connected

6.7 Connection to community and culture

Feeling connected to culture and community is essential for children and young people, shaping their sense of identity, belonging, and relationships. Cultural connectedness supports a strong, positive self-concept and fosters respectful, responsive interactions with others.

A sense of belonging can be strengthened through many experiences, including participating in cultural activities, spending time with family and elders, and learning about family history, language, and traditions.

6.7.1 Country of birth

Most participants were born in Australia (Years 4 to 6, 86.4%; Years 7 to 12, 85.9%). The remaining proportion of participants were born in more than 94 other countries.

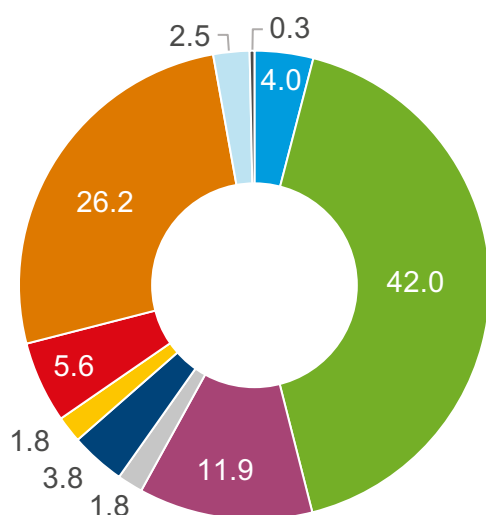
6.7.2 Cultural background

When asked about their cultural background, students were able to select multiple options. Students born outside Australia and students who reported speaking one or more languages other than English at home were all classified as Culturally and Linguistically Diverse (CaLD).

Forty per cent (42.0%) of students in Year 4 to 6 self-identified as 'Australian', followed by 'Other' (26.2%), and 'English' (11.9%). More than one-third of all students (36.4%) met the defined CaLD criteria.

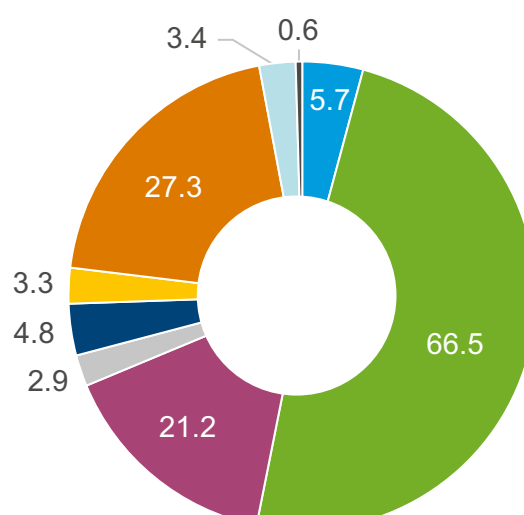
Two-thirds (66.5%) of Years 7 to 12 students identified with an 'Australian' background. The next most highly selected was 'Other' (27.3%), and 'English' (21.2%). One-third (33.8%) of young people met the CaLD criteria.

Graph 6.7.1: Proportion of Year 4 to 6 students by cultural background (percentage)



■ Aboriginal Australian
 ■ Australian
 ■ English
 ■ Filipino
 ■ Indian
 ■ Malayasian
 ■ New Zealander
 ■ Other
 ■ South African
 ■ Torres Strait Islander

Graph 6.7.2: Proportion of Year 7 to 12 students by cultural background (percentage)



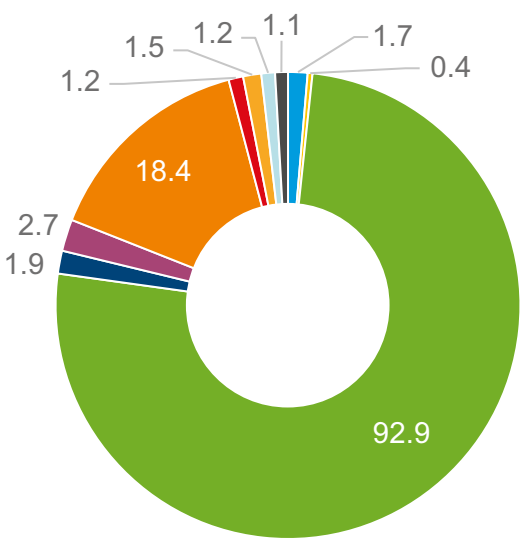
6. Healthy and connected

In total, 4,718 CaLD children and young people participated in SOS25, equating to more than one-third of the sample. More information can be found in the Participants section (see above 4.2.4).

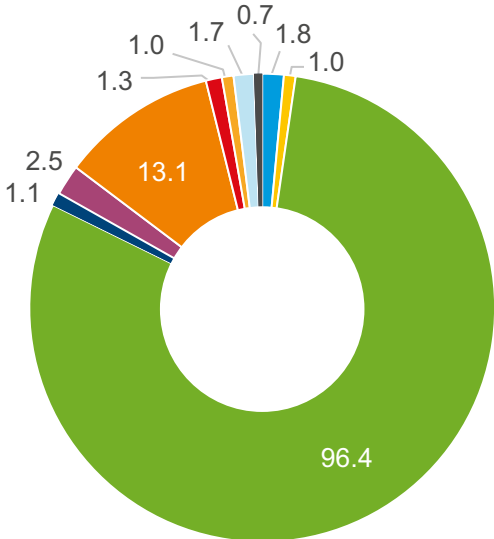
6.7.3 Language spoken

More than nine in 10 children and young people spoke English at home (children 92.9%, young people 96.5%). The next most frequently selected language option was ‘Other’.

Graph 6.7.3: Proportion of Year 4 to 6 students by language spoken at home (percentage)



Graph 6.7.4: Proportion of Year 7 to 12 students by language spoken at home (percentage)



- Arabic
- Cantonese
- English
- Italian
- Mandarin
- Other
- Punjabi
- Spanish
- Tagalog
- Vietnamese

6. Healthy and connected

6.7.4 People in their community

The neighbourhood in which a young person grows up plays a significant role in shaping their wellbeing and behaviour.⁷⁰ Research shows that when young people have a safe and supportive community environment, it can act as a protective factor against engaging in high-risk behaviours or experiencing emotional distress.⁷¹ In such an environment, they are also more likely to develop positive health habits and a stronger sense of personal efficacy.^{70,71}

More than eighty per cent (81.5%) of Years 4 to 6 students and more than seventy per cent (75.3%) of Years 7 to 12 students reported that they have friends who live near them. Children in outer regional areas (84.3%) and remote areas (87.0%) were most likely to have friends who lived near them, while those in inner regional areas (76.2%) were least likely. Consistently, young people in inner regional areas (71.4%) were least likely to have friends near them, and those in remote/very remote (83.8%) were most likely.

Nine in 10 children in Years 4 to 6 (90.9%) thought their neighbours were friendly, whereas only 64.1 per cent of young people in Years 7 to 12 thought the same. There were no gender differences among children; however, in young people, boys were more likely than girls to agree 'a lot' or 'a little' (boys 68.4% vs girls 59.5%, figures combined).

Young people in remote areas were the most likely to say they agreed (67.6%), while those in inner regional areas were the least likely (58.5%).

Again, nine in 10 (90.3%) children thought people were friendly when they went to the shops. In contrast, only 64.5 per cent of young people shared this view. There were no gender differences observed among children; however, among young people, boys were notably more likely to agree than girls (boys 69.2% vs girls 59.6%). Consistent with the previous responses, young people in inner regional areas were least likely to agree with this statement (64.4% responded 'a lot' or 'a little'), while those in remote/very remote areas were most likely to agree (77.7%).



6. Healthy and connected

6.7.5 Local area

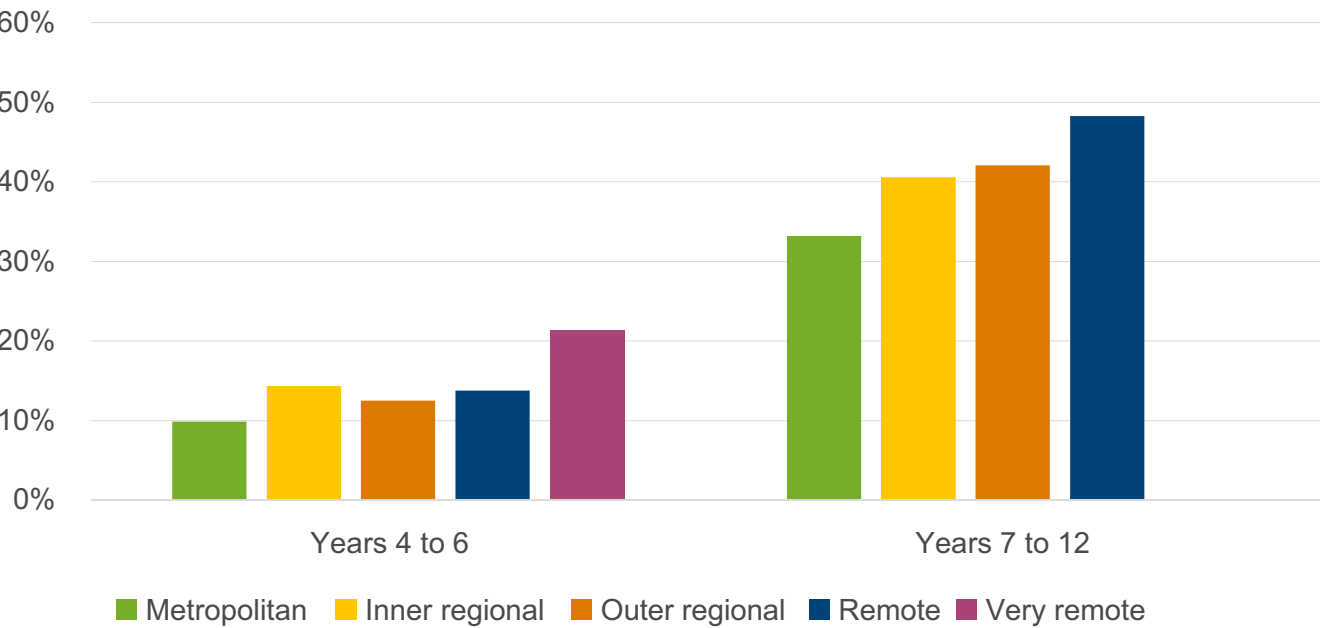
Most children felt they belonged in the community (92.9%), liked where they lived (94.9%), and thought there were fun things to do (87.6%) or outdoor places to visit in their area (95.0%). This was consistent across genders, and mostly consistent across school years and remote areas except when asked if there were fun things to do where they lived.

When asked if there was nothing to do in their area, children and young people in regional and remote areas were more likely to agree than those in the metropolitan area. Due to limited infrastructure, resources, and greater distances between resources, children and young people in regional and remote areas do not have access to as many facilities, which subsequently leads to decreased physical activity.⁷²

When compared to Years 4 to 6, students in Years 7 to 12 were notably less likely to agree ('a bit' or 'a lot') when asked if they felt like they belonged in their community (58.9%) and if there were fun things to do (47.4%). However, results were more consistent when asked if they liked where they lived (80.9%), and if there were outdoor places for them to visit (85.4%). More than a third agreed there was nothing to do in their area (35.0%).

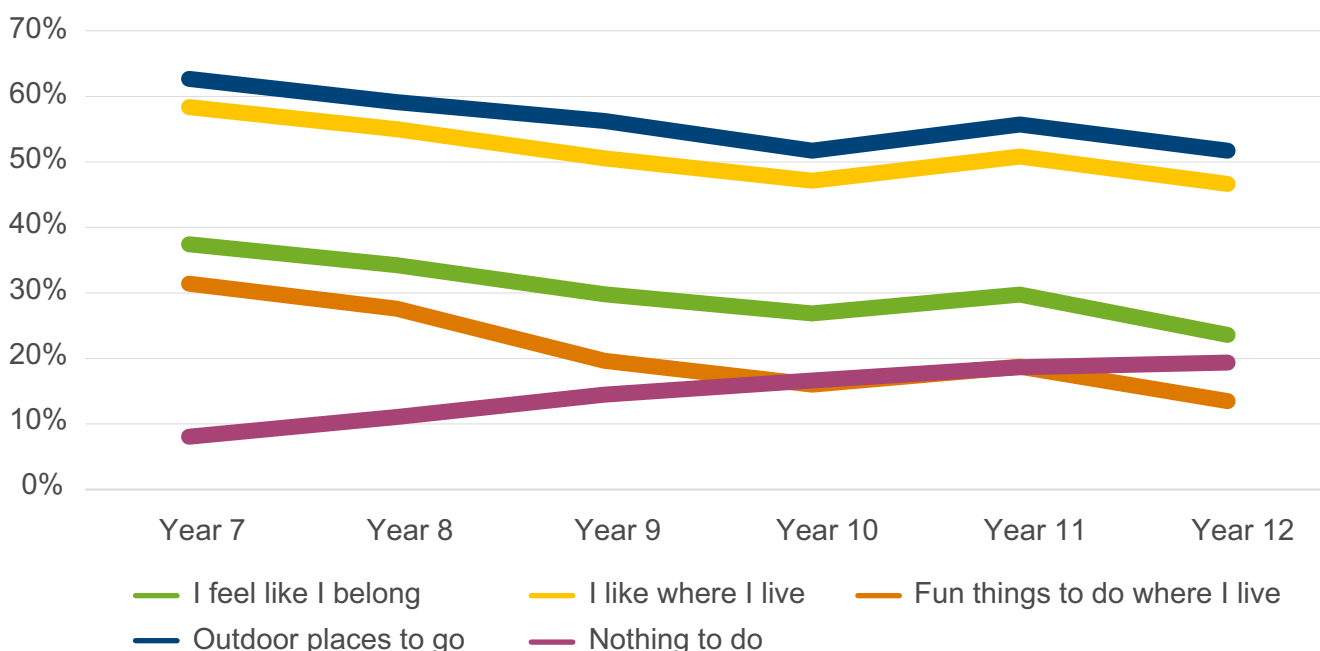
When examining young people who agreed 'a lot', agreement can be seen to decline with age. However, for both children and young people, the likelihood of agreeing with the statement 'there is nothing to do in their area' increased with age.

Graph 6.7.5: Proportion of Year 4 to 12 students who agreed a lot or a bit with the statement there is nothing to do in my area, by remoteness



6. Healthy and connected

Graph 6.7.6: Proportion of Year 7 to 12 students who agreed a lot with statements about their community, by school year



While the responses showed minimal gender-correlated differences among children, the differences among young people were more pronounced. Boys were notably more likely than girls to agree ‘a lot’ that they felt they belonged in the community (boys 38.4% vs girls 23.9%); more likely to say they liked where they lived (boys 59.4% vs girls 44.7%); and more likely to say they had fun things to do where they lived (boys 29.6% vs girls 15.1%).

When asked what they would change about their local area, both children and young people identified a preference for more bush, trees and parks, stating the importance of more parks/playgrounds/places or more time to play. Access to parks and natural environments provides numerous benefits for children and young people.

These extend beyond physical health to include improvements to mental wellbeing and cognitive development.⁷³ The survey’s findings demonstrate that children and young people want to be able to play and be in nature but feel as though they have limited opportunities.

Wanting to live closer to friends and family was another frequent statement by children. Young people were more likely to identify wanting more/better/closer shops and identified wanting the neighbourhood to be safer and cleaner.

6. Healthy and connected

"More nature and bushland."

Boy aged 13, metropolitan

"Make it more engaging like including parks, leisure facilities and other stuff."

Girl aged 14, metropolitan

"More shops and activities Stop people from destroying the native wildlife."

Girl aged 14, metropolitan

"Higher number of and more affordable activities to do as a family where there are upper high school and uni aged kids that doesn't include things like a trampoline park, shopping, going to the movies or adventure world. I wish there was stuff to do that helps you build relationships while doing it."

Girl aged 17, metropolitan

"Make it cleaner and safer."

Boy aged 14, metropolitan

"More trees in the parks there is like only 3!!!."

Girl aged 10, metropolitan

"More parks and neighbours I beg you."

Boy aged 10, metropolitan

"More friends to live closer so I can go to there house or them come to mine."

Boy aged 9, metropolitan

6.7.6 Activities outside school

Community involvement is an important contributor to the overall wellbeing of children and young people. Participating in extracurricular activities helps fulfil young people and provides them with an opportunity for individual development. Participating in activities with others also helps with the development of their interpersonal and socioemotional skills.⁷⁴ Much like cultural connection, it helps them develop a strong sense of identity and belonging.

Children and young people benefit greatly from taking part in activities beyond the school environment, where they can build relationships with people outside their immediate family. Through these experiences, they can continue to learn, develop new skills, and grow by actively contributing to their wider community.

“

Nothing, I live just a minute away from my best friend and hang out with her almost every weekend."

Girl aged 12, metropolitan

6. Healthy and connected

6.7.6.1 Spending time with friends

Two in five children (40.1%) spent time with their friends almost daily, while almost one in five (17.1%) selected 'hardly ever/never'. The proportion of young people who saw their friends daily decreased slightly to one in three (32.2%), however, the proportion of those who selected 'hardly ever/never' did not change (17.8%). This is a notable increase from SOS21 where 31.9% of both children and young people spent time with their friends almost daily. Importantly, children seemed to be spending more time with their friends regularly. Minimal differences were observed between children when comparing genders, but boys in secondary school were notably more likely to select 'everyday' compared to girls (boys 38.8% vs girls 25.5%).

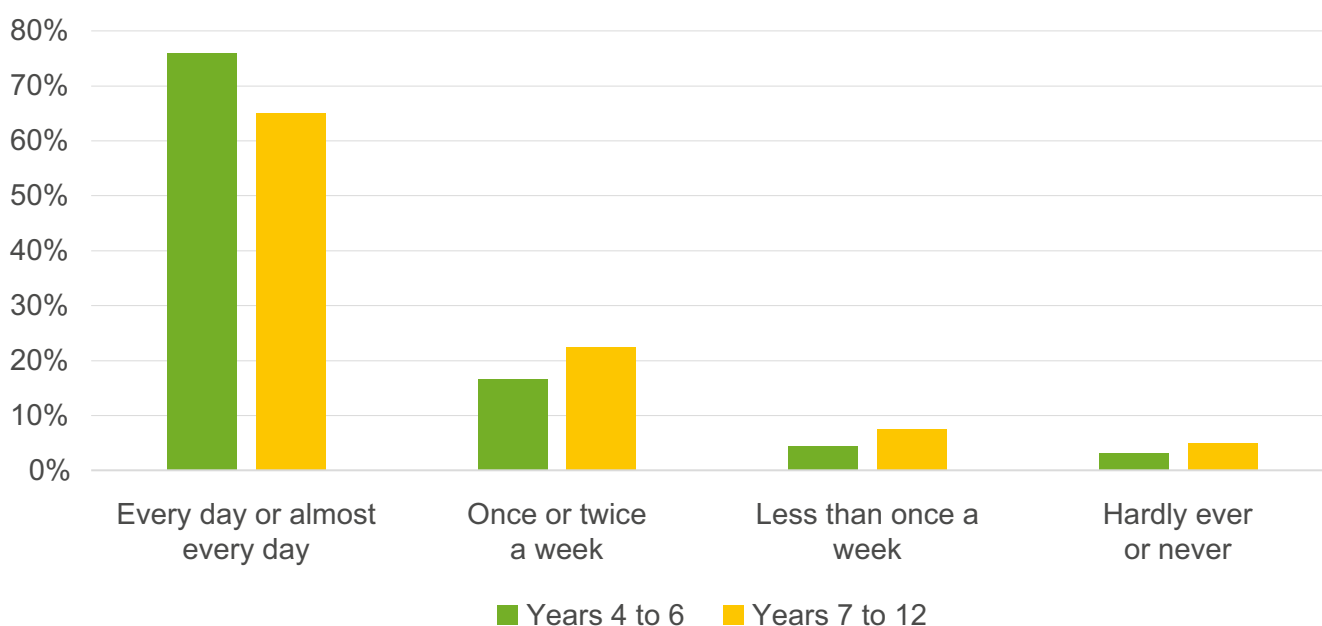
Very remote children (8.0%) were the least likely to say, 'hardly ever/never', while those

in inner regional areas (23.6%) were the most likely. Consequently, young people in remote areas were most likely to report spending daily time with friends (47.7%) and those in inner regional areas were the least likely (30.5%).

6.7.6.2 Spending time with family

Consistent with SOS21 findings, children were more likely to report spending time with their family more frequently during the week compared to young people. Three in four children (76.0%) spent time with their family daily, followed by 16.6 per cent reported doing so 'once or twice a week'. Leaving 7.5 per cent of children spending time with their family once a week or less. By comparison, 65.1 per cent of young people spent time with their family daily, and 22.4 per cent did this 'once or twice a week'. Meaning 12.5 per cent of young people spent time with their family once a week or less.

Graph 6.7.7: Frequency of Year 4 to 12 students spending time with their family, by year group



6. Healthy and connected

Unsurprisingly, the proportion of young people who spent time with their family daily decreased with age (Year 7, 69.4% vs Year 12, 56.4%). As previously mentioned, young people tend to spend increasing amounts of time with peers as they become more independent. However, maintaining positive relationships with parents and spending meaningful time with them remains a crucial protective factor for young people’s mental health and engagement in prosocial behaviour.⁷⁵

While young people in remote areas (69.3%) were most likely to spend time together daily, those in inner regional areas (61.8%) were the least likely. However, there were minimal differences in the proportion of young people across regions who identified ‘hardly ever/never’.

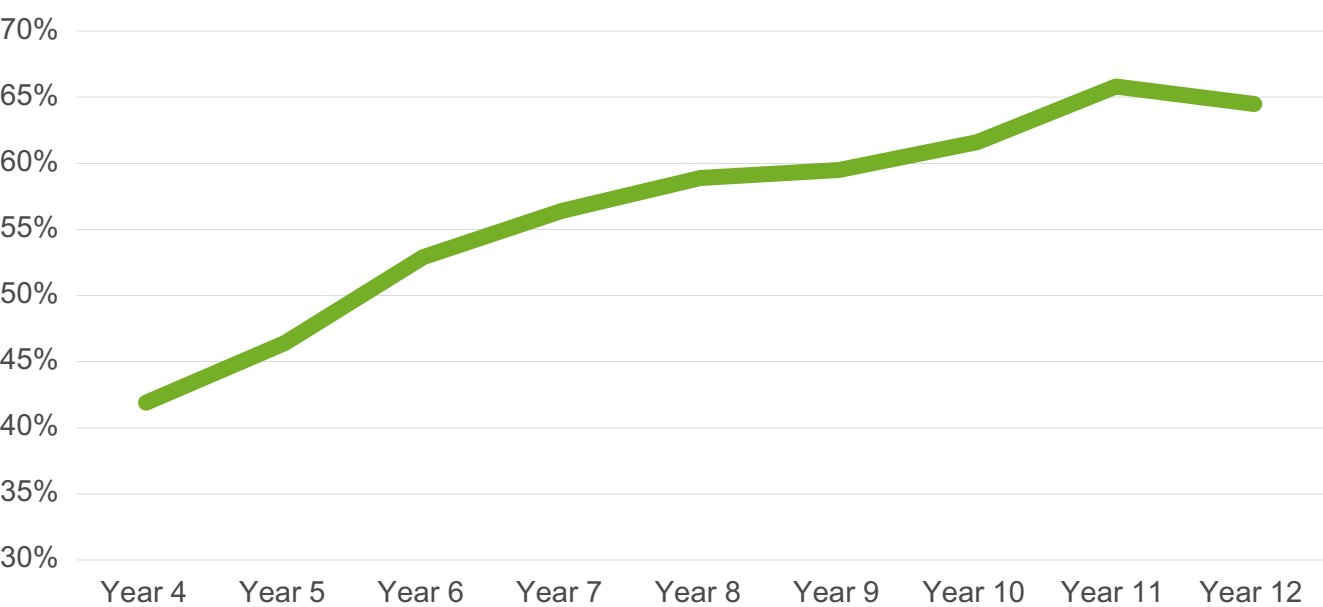
6.7.6.3 Helping with housework

Akin to the findings of SOS21 (girls 61.4% vs boys 57.6%), minimal gender differences were observed in the frequency of housework tasks being performed by young people (SOS25 girls 62.3% vs boys 58.3%).

Children and young people were more likely to participate in daily housework as they aged.

Inner regional (13.5%) children were twice as likely to say ‘hardly ever/never’ compared to children in the other areas (approximately 6.0-6.6%). Interestingly, inner regional young people (67.9%) were the most likely to report completing daily housework, while those in remote/very remote (56.8%) areas were the least likely.

Graph 6.7.8: Proportion of Year 4 to 12 students completing housework daily, by school year



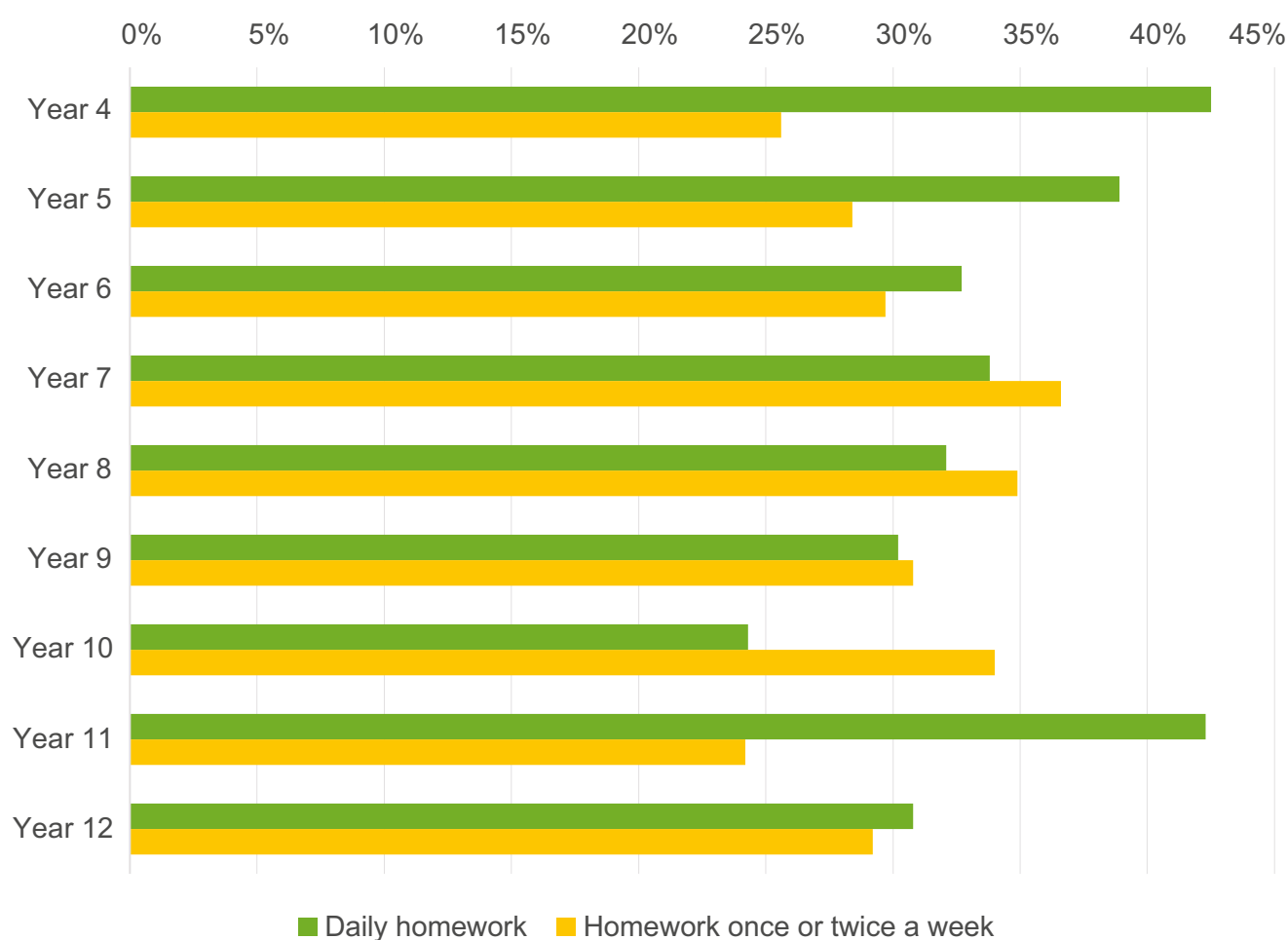
6. Healthy and connected

6.7.6.4 Completing homework

The proportion of children and young people completing homework daily has decreased considerably from 49.2 per cent in SOS21 findings. SOS25 findings showed students in Years 4 to 6 (38.0%) were more likely to have daily homework

compared to those in Years 7 to 12 (31.6%). Among primary school children, there appeared to be a downward trend in completing daily homework as the school year progressed. This trend continued into secondary school until Year 11, where there was a notable increase.

Graph 6.7.9: Proportion of Year 4 to 12 students completing homework daily or once or twice a week, by school year



6. Healthy and connected

It is important to note that the survey did not ask about the amount of time spent completing homework, which would likely differ across year levels. Older students are particularly more likely to devote time each day to completing homework. While homework is a useful tool and can help students consolidate their learnings,⁷⁶ excessive homework has been found to negatively impact young people's mental health,⁷⁷ causing stress and limiting their time for other valuable extracurricular activities. Many young people stated that they felt the amount of homework they were given was excessive and unachievable within the given timeframes.

"As we get to much in such a little amount of time. We are expected to complete so much homework from many different classes."

Girl aged 15, metropolitan

"The way exams and stuff are implemented put students in a stressful environment."

Boy aged 15, very remote

There were notable differences in the proportion of children and young people completing daily homework, across different regional and remote areas. Years 4 to 6 students in remote areas were least likely to complete their homework daily, while Years 7 to 12 students in inner regional areas were the least likely to do so.

“

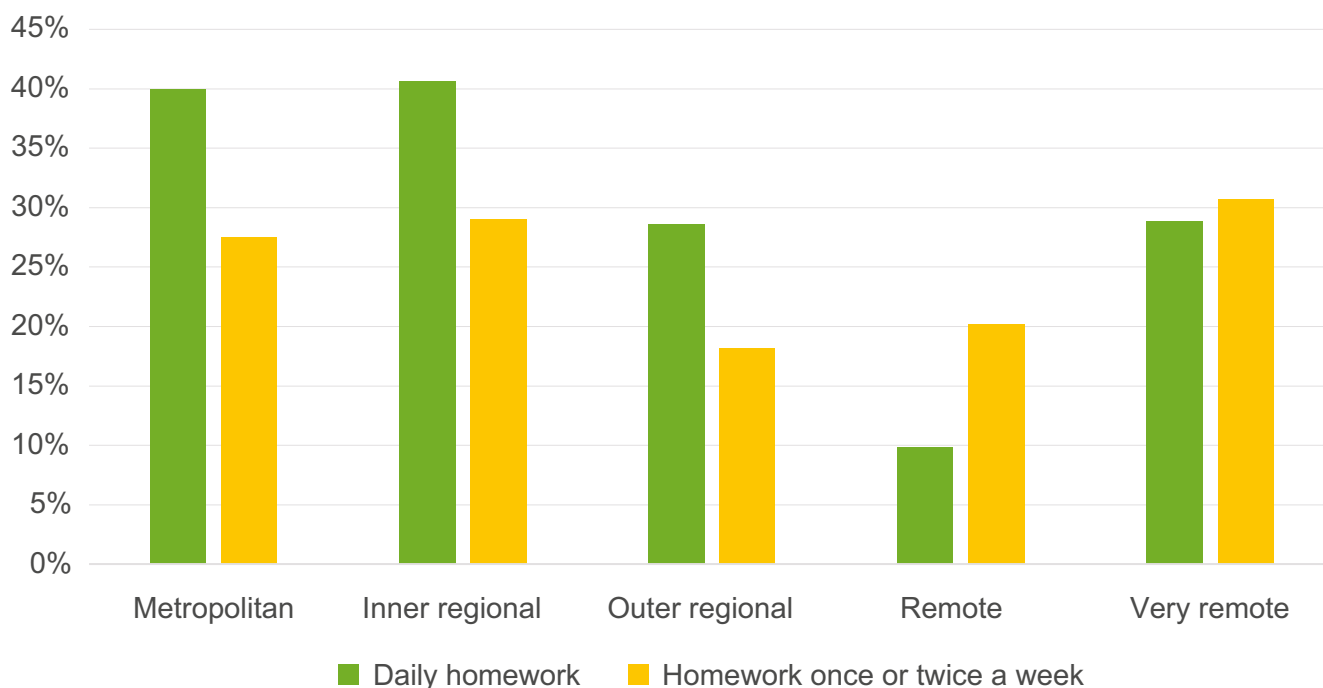
Because exams are all at the same time and it is overwhelming because it all matters."

Boy aged 15, outer regional

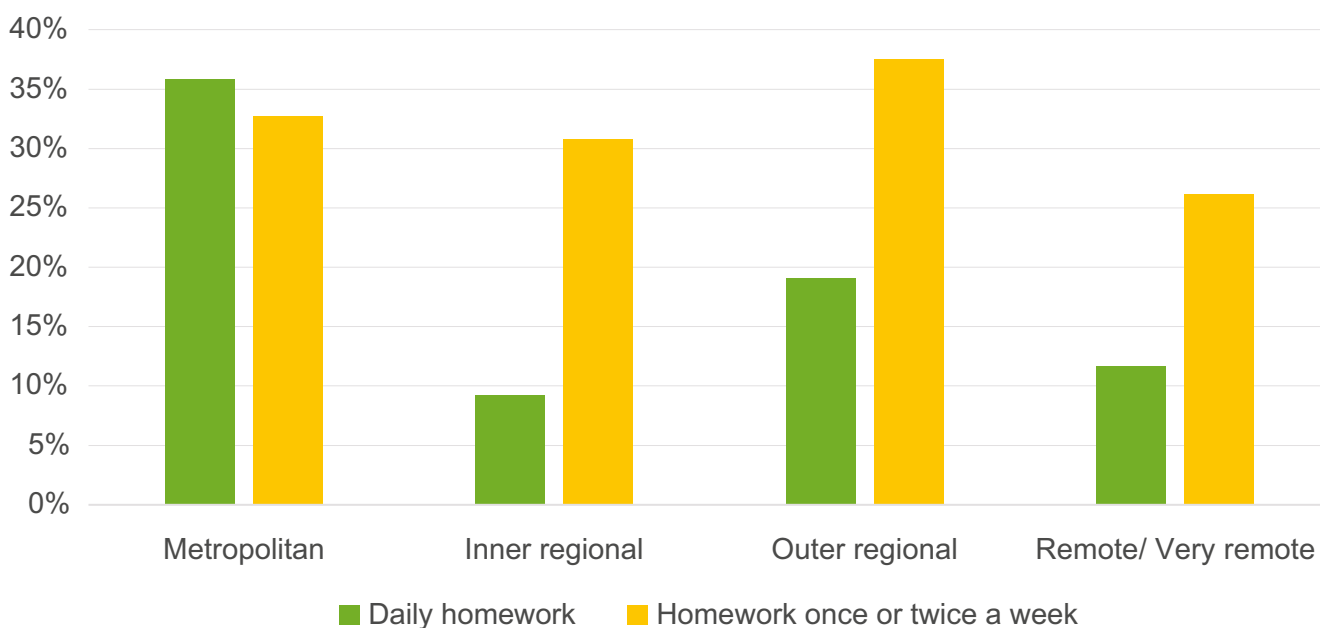


6. Healthy and connected

Graph 6.7.10: Proportion of Year 4 to 6 students completing homework daily or once or twice a week, by remoteness



Graph 6.7.11: Proportion of Year 7 to 12 students completing homework daily or once or twice a week, by remoteness



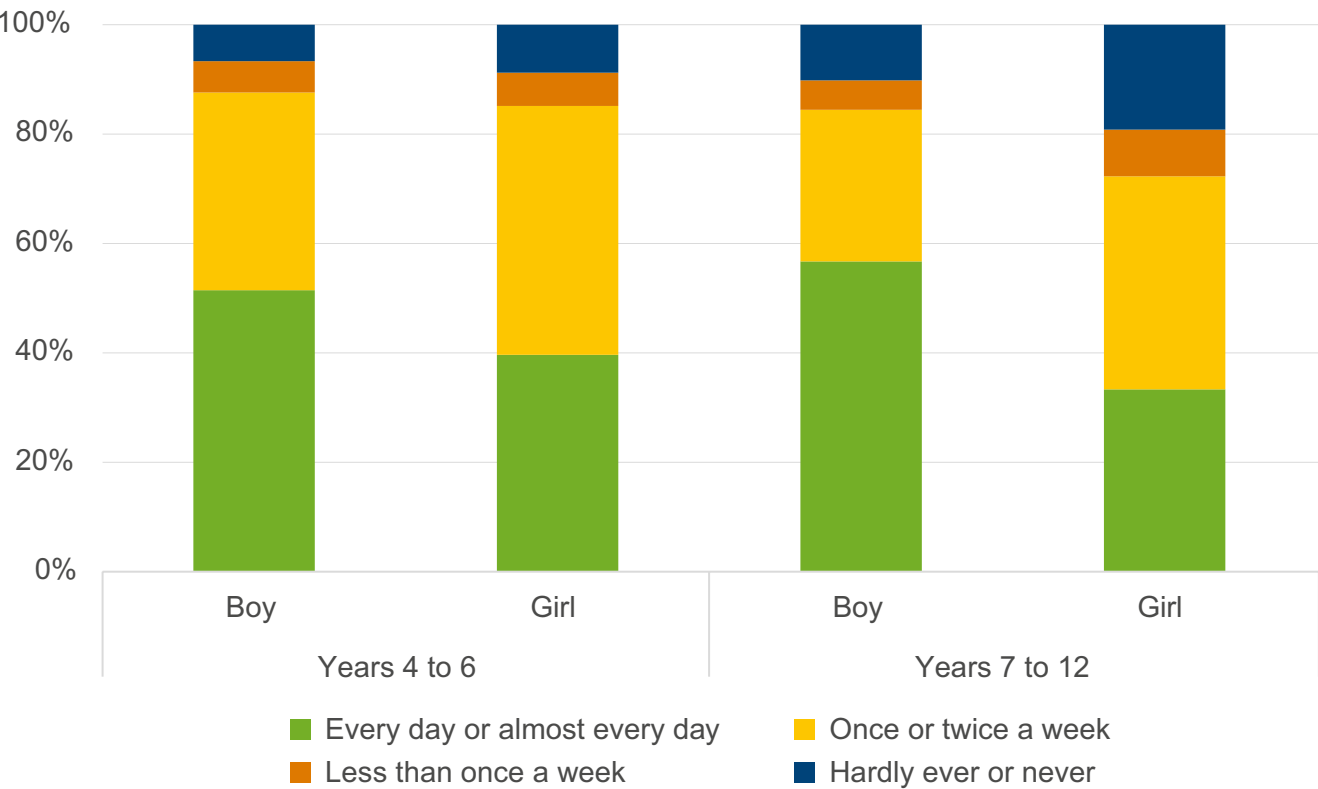
6. Healthy and connected

6.7.6.5 Sport or exercise

Nearly one in two children (45.7%) and one in two young people (45.2%) participated in sports or exercise almost daily. This proportion was slightly more than the 40.5 per cent identified in SOS21. However, the proportion of young people in Years 7 to 12 who engaged in sport or exercise ‘less than once a week’ or ‘hardly ever/never’ (21.5%) was more than children in Years 4 to 6 (13.6%).

The proportion of Year 7 to 12 students who did not frequently participate in sports was slightly higher in SOS25 than in SOS21 (SOS25, 14.6% vs SOS21, 12.3%). As previously mentioned, physical health is vital for healthy physiological, mental, and social development.⁷⁸ This highlights the need for government and service providers to invest in preventive health initiatives that encourage active living from early childhood through adolescence.

Graph 6.7.12: Frequency of Year 4 to 12 students participating in physical activity, by year group



6. Healthy and connected

Girls in both primary and secondary school were less likely to participate in daily physical activity but more likely to select 'once or twice a week' as a response, when compared to boys. These findings are consistent with the results of our previous question, in which girls were less likely to be concerned about physical activity.

Specifically, girls were more likely to identify that they engaged in physical activity 'less than once a week' or 'hardly ever/never'. There was a notably higher proportion of girls in secondary school who did not engage frequently in physical activity (27.7%), compared to girls in primary school (14.9%).

Consistent with our previous findings, young people became less likely to partake in physical activity daily or weekly as they grew older (Year 7, 83.4% vs Year 12, 61.9%).

6.7.6.6 Taking lessons (such as music, dancing, languages, other tutoring)

The proportion of students taking lessons more than 'once or twice' a week showed a small but noticeable decline across the Years 4 to 6 and the Years 7 to 12 cohort. More than one in two (54.8%) Years 4 to 6 students participated in lessons more than once a week (combined), with most children participating in extra lessons 'once or twice a week' (38.3%). By comparison, only about one in three (36.9%) Years 7 to 12 students took lessons more than once a week, with a majority of young people 'hardly ever/never' participating in extra lessons (55.6%). This disparity continued to increase with age (Year 7, 46.2% vs Year 12, 64.6%).

Boys in primary school were more likely to report that they 'hardly ever/never' participated in extra lessons (boys 43.2% vs girls 28.7%), while there were minimal gender-related differences observed in secondary school.

Very remote Years 4 to 6 students were the most likely to report taking lessons 'every day' (22.4%), while those in inner regional areas were the least likely (14.9%). Inner regional Years 7 to 12 students were also the most likely to select 'hardly ever/never' (80.2%), while those in the metropolitan area (52.4%) and remote/very remote areas (58.1%) were least likely to say 'never'.

6. Healthy and connected

6.7.6.7 Being active outdoors

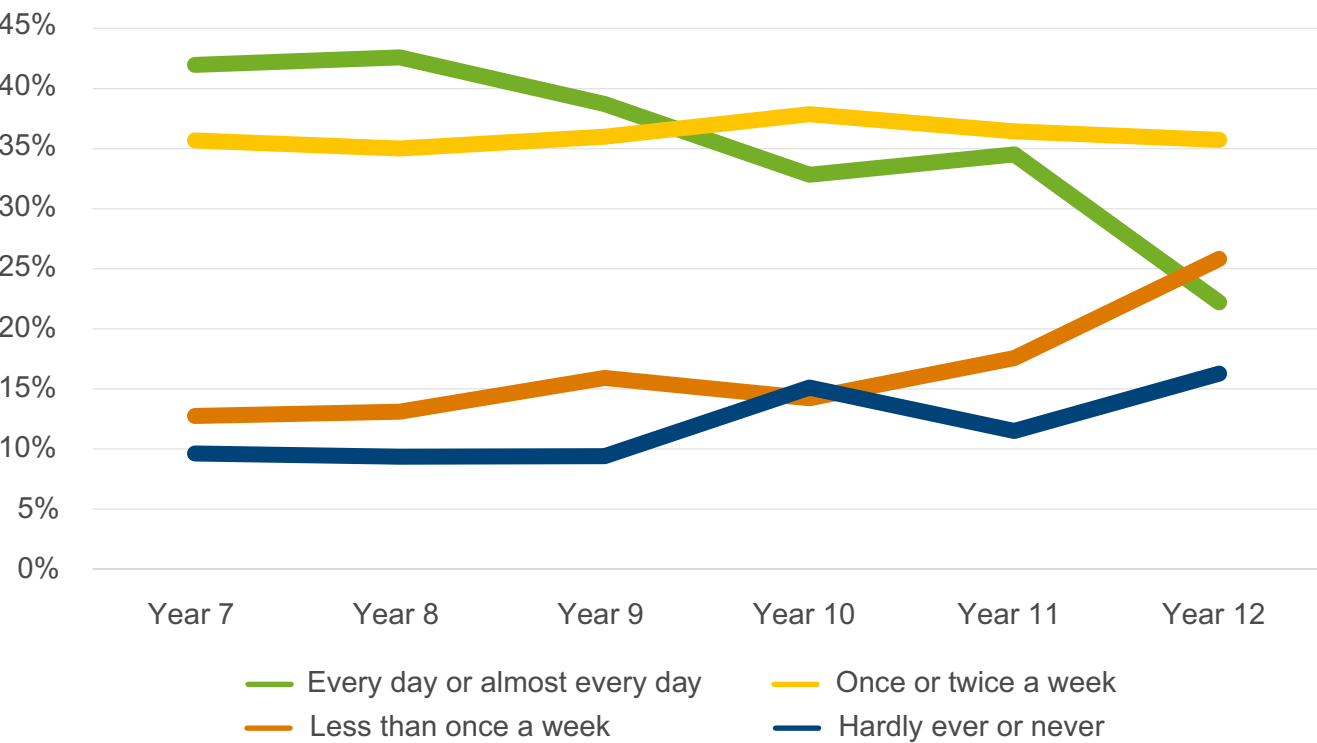
Almost one in two (45.7%) children played outdoors daily, while 16.6 per cent were outdoors ‘less than once a week’ or ‘hardly ever/never’. Children in remote areas (53.1%) and very remote areas (52.2%) were most likely to play outside daily, with those in inner regional areas being the least likely (39.3%). Children in inner regional areas (17.1%) and in the metropolitan area (17.1%) were most likely to indicate they played outside ‘less than once a week’ or ‘hardly ever/never’.

The proportion of young people who engaged in daily outdoor activity notably decreased as they aged; subsequently,

the proportion who were active outdoors ‘less than once a week’ or ‘hardly ever/never’ increased with age. The proportion of those who participated ‘once or twice a week’ remained consistent.

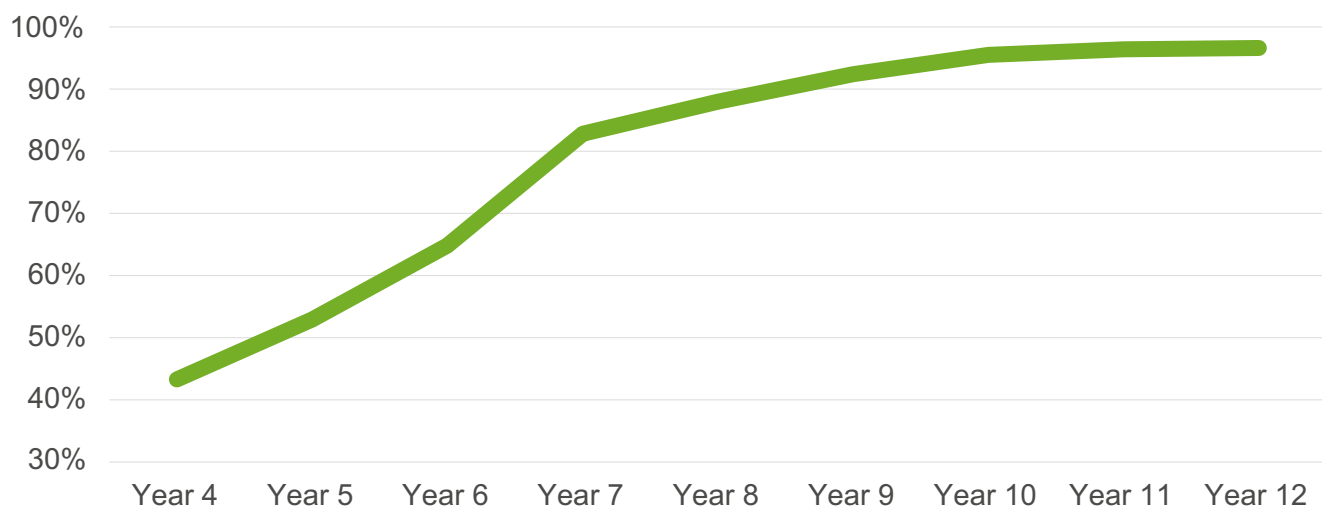
There were clear gender-related differences apparent in young people, with boys notably more likely to engage in daily outdoor activity (boys 47.5% vs girls 26.6%). Girls were also twice as likely to select ‘hardly ever/never’ (boys 7.7% vs girls 15.2%). Once again, this finding is consistent with the finding of SOS21, in which girls were shown to be less likely to engage in regular outdoor activity.

Graph 6.7.13: Frequency of Year 7 to 12 students participating in activities outdoors, by school year



6. Healthy and connected

Graph 6.7.14: Proportion of Year 4 to 12 students using internet daily, by school year



6.7.6.8 Using the internet on a smartphone or computer

The proportion of children and young people who used the internet was found to increase consistently with age. A steep increase can be seen in the transition from primary school into secondary school, before levelling out in upper secondary school. The proportion of children and young people who use the internet daily is consistent with SOS21, indicating that there has been little change in this space.

Young people in remote/very remote areas were least likely to be on the internet daily (82.2%), while young people in inner regional areas were the most likely (91.8%).

Childhood and adolescence are known to be a pivotal time for cognitive development, and frequent internet use during this time has been found to negatively impact cognitive functioning, including attention, language, and emotions, as well as physical brain development.⁷⁹ Online activities include playing online games and watching/streaming YouTube, movies, etc. While the survey did not ask the amount of time that

participants spent on the internet, other studies have shown that Australian children and young people are exceeding well-accepted guidelines.⁸⁰

6.7.6.9 Playing games on devices

The findings show a steep increase with age in the proportion of children playing games on devices 'daily' (Year 4, 45.3% vs Year 6, 56.8%). By comparison, the proportion of young people playing on devices 'daily' remained relatively consistent across school years (approximately 58%). Boys were more likely to play games daily in both primary school (boys 55.1% vs girls 45.5%) and secondary school (boys 63.3% vs girls 52.4%).

6.7.6.10 Watching TV, streaming movies/shows, or watching YouTube, TikTok etc.

Almost three in five (57.0%) children watched some form of media daily. The frequency of consumption appeared to increase with age (Year 4, 49.5% vs Year 6, 65.4%). This trend continued in secondary school students as four in five (79.2%) young people watched media daily, which

6. Healthy and connected

further increased with age (Year 7, 72.3% vs Year 12, 85.1%). There were no notable differences between children by location. However, young people in inner regional areas (87.5%) were notably the most likely to say ‘daily’, while those in outer regional and remote/very remote areas were the least likely (75.4% and 75.6%, respectively).

6.7.6.11 Reading a book or online book (ebook)

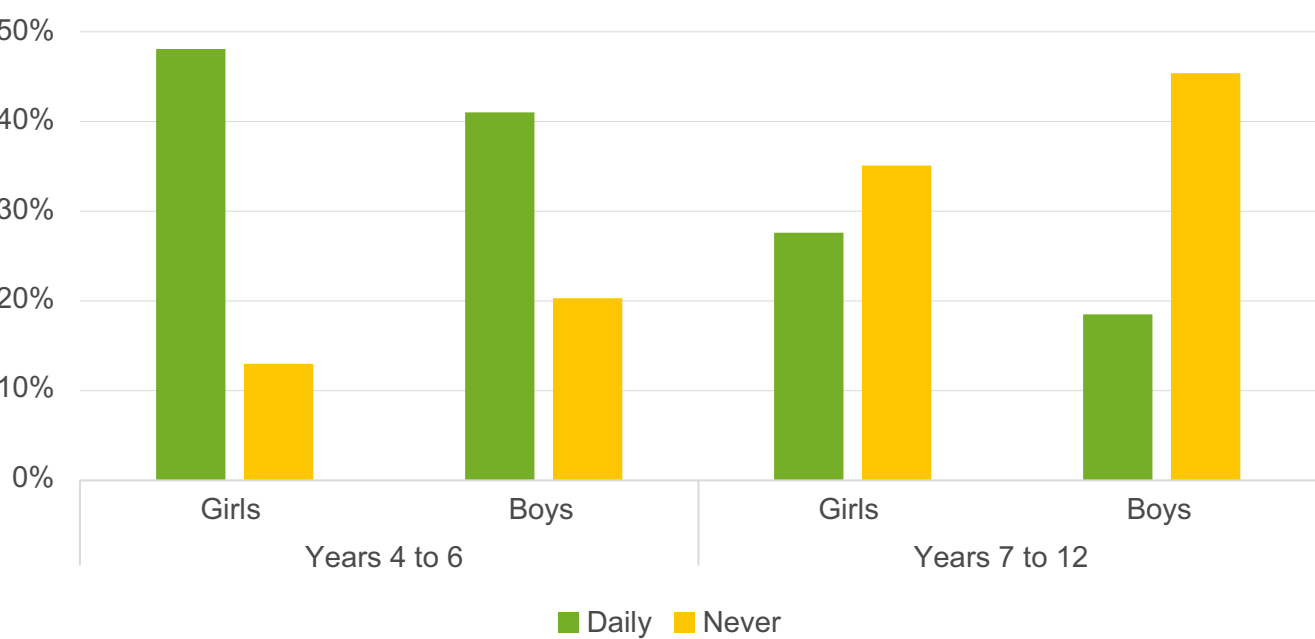
More than two in five (44.5%) Year 4 to 6 students stated that they read almost daily, while only one quarter of Year 7 to 12 students (23.0%) did so. Concerningly, 40.3 per cent of Year 7 to 12 students ‘hardly ever/never read’, compared to only 16.6 per cent of those in Years 4 to 6. This illustrates a clear trend of children and young people becoming less likely to read daily with increasing age. Unfortunately, since SOS21 there has been a slight decline in the proportion of children who read daily (SOS21 56.9%, SOS25 44.5%).

Girls in both primary and secondary school were more likely to read than boys.

Reading is known to be one of the most useful activities to encourage brain and cognitive development, build language and literacy skills,⁸¹ and can aid in socioemotional development.⁸² However, many young people would currently rather spend their time on social media or watching YouTube.⁸³ This shift in leisure habits highlights the need for efforts to encourage reading habits.

Children in remote areas (31.2%) and very remote areas (29.3%) were the least likely to read daily, while children in the metropolitan area were the most likely (46.3%). Children in remote areas (24.2%) were also most likely to read ‘hardly ever/never’, with children in the metropolitan area being the least likely (15.5%). Interestingly, young people in remote/very remote areas were the most likely to read daily (24.9%); slightly more than young people in outer regional areas (19.4%) who were the least likely.

Graph 6.7.15: Proportion of Year 4 to 12 students reading daily or never, by gender



6. Healthy and connected

6.8

Summary of key statistics – Healthy and connected

6.8.1 Physical and mental health

- 8.7% of children and 16.4% of young people reported their health as being 'fair' or 'poor'.
- **Girls (18.8%) in secondary school were almost twice as likely to rate their health as 'fair' or 'poor' compared to boys (9.3%).**
- 2 in 3 children and young people brush their teeth twice a day, but 4.0% do not brush their teeth daily.
- **1 in 3 (35.3%) children and 1 in 2 (56.3%) young people did not eat breakfast daily.**
- 1 in 4 (26.0%) children and 2 in 5 (42.6%) young people did not eat lunch daily.
- **Girls in secondary schools were less likely to eat all meals compared to boys.**
- 73.8% of children ate the recommended serving of fruit daily, while only 53.6% of young people did.
- **Only 34.1% of children and 24.8% of young people ate the recommended serving of vegetables daily.**
- 1 in 4 (26.6%) young people thought they were overweight.
- **Girls were more likely to think they were overweight (31.7%), while boys were more likely to think they were underweight (25.5%).**
- Almost 1 in 5 (19.0%) young people said they had a long-term health condition.
- **42.6% of children were concerned about their weight, and this increased to 54.0% of young people.**
- Boys were more likely than girls to have high life satisfaction among both primary and secondary school students.
- **The proportion of students who agreed with the statement 'I am happy with myself' decreased with age (primary school 89.8% vs secondary school 73.5%).**
- More than 1 in 3 (35.7%) young people had mental health concerns.
- **1 in 2 (51.1%) girls reported having mental health concerns compared to 1 in 5 (22.3%) boys.**

6. Healthy and connected

6.8.2 Healthy behaviours

- 1 in 4 young people (26.3%) did not know where to get help at school for their mental health.
- 2 in 5 (37.4%) young people did not know where to get help in their local area for their mental health.
- The proportion of children and young people who engaged in daily exercise decreased with age.
- 1 in 4 (25.2%) young people were unable to see someone for their health when they wanted to. Girls were twice as likely to identify this as a problem.
- Almost all students felt they knew enough about the impacts of cigarettes and alcohol.
- Nearly 1 in 3 (29.2%) young people had tried alcohol, and the prevalence of its use increased with age.
- Almost all young people felt they knew enough about consent and respectful relationships. 4 in 5 (82.6%) said they knew enough about sexual health.
- Nearly 1 in 5 (19.7%) young people said they felt anxious 'very often' or 'fairly often' when they could not be on their phone.

6.8.3 Connection to community and culture

- Daily participation in sports or exercise decreased with age.
- Daily reading decreased notably with age.
- Girls were less likely than boys to participate in sports or exercise, but more likely to read daily.
- 1 in 4 (24.7%) young people did not have friends who lived near them.
- 1 in 3 (36.0%) young people did not think their neighbours were friendly.
- Students became less likely with age to like where they lived, feel like they belonged in their communities, or think there were fun things to do in their area.

6. Healthy and connected

6.9

Healthy and connected summary

Although our research into young people's health offers valuable insights, we were unable to specifically examine the experiences of gender-diverse young people. This limitation reflects a broader gap in available data rather than a lack of relevance or need. Gender-diverse young people often face distinct social pressures, exclusion, and barriers to support, all of which can influence their health.

Young girls were found to fare worse than boys across multiple questions that examined physical and mental health. This follows our SOS21 findings in which girls' wellbeing was highlighted as a significant area of concern. Many of our findings are comparable to SOS21, suggesting that the challenges highlighted several years ago have not meaningfully improved. Despite increased public awareness and ongoing discussions about youth wellbeing, specifically mental health, the supports available to young people do not appear to have strengthened in ways that translate into measurable change.

Consistent with ongoing national research, children and young people in regional and remote areas were also more likely to report poorer mental health outcomes, less physical activity, and more likely

to try alcohol and drugs. As previously mentioned, these findings reflect limited access to services, community resources, and opportunities for support, which continue to disproportionately affect young people outside the metropolitan area. The persistence of these disparities across multiple studies highlights the need for targeted investment and tailored approaches that recognise the unique challenges faced by regional and remote communities. Without addressing these structural barriers, young people in these areas will remain at heightened risk of being under-served by existing mental health systems.



Safe and supported

7



7. Safe and supported

Feeling secure and well-supported comes from strong family bonds, meaningful connections with trusted adults, and a sense of safety both personally and within the wider community. All children and young people deserve to feel valued, protected, and cared for. Key outcomes for this area of wellbeing include children and young people feeling safe at home and in the community, being supported by the people around them, and having their basic material needs met.

To understand how well these needs are being met, the survey included questions relating to their relationships with parents and other adults, whether they had reliable access to essentials like housing, transport, food, and whether any family issues caused them concern. They were also asked to share how safe they felt at home and in their neighbourhood, as well as any experiences they had with violence or harm.

7.1 Supportive relationships

Children and young people who are supported by safe and positive relationships are more likely to have good mental health, be resilient, be able to learn and sustain healthy relationships into the future.⁸⁴

Relationships with friends are critical for children and young people as they provide social and emotional support and can be a protective factor against bullying and mental health issues.⁸⁵ Supportive relationships with friends can also help children and young people develop patterns of persistence and motivation in their schooling. During adolescence, young people increase their independence from family and friendships become more important.⁸⁶

The Commissioner's consultations with children and young people across WA have consistently found that having friends is one of the most important things to them.

We asked children and young people a series of questions about 'supportive adults', defined as parents or other adults they lived with who believe in them, listen to them, and talk to them about their worries and concerns.

7. Safe and supported

7.1.1 Supportive adults

7.1.1.1 Believing in children and young people

Approximately ninety per cent of children (93.1%) and young people (90.0%) reported having a supportive adult in their life who believed they would achieve good things, indicating an overall strong foundation of perceived encouragement and support. There were, however, slight differences across remoteness and gender.

Both children and young people living in remote/very remote areas were less likely to feel this statement was 'very much true' than those living in the metropolitan area. For children, this was 65.8 per cent in remote/very remote areas compared with 71.9 per cent in the metropolitan area. Among young people, this corresponded to 63.4 per cent in remote/very remote areas compared to 69.2 per cent in the metropolitan area.

Among young people, girls (63.5%) were less likely than boys (74.0%) to feel this statement was 'very much true'.

7.1.1.2 Listening and feeling heard

Most children (85.1%) and young people (78.9%) either 'very much' or 'pretty much' agreed that they had a supportive adult who listened to them when they had something to say, indicating that most children and young people feel heard by a trusted adult in their lives.

While demographic differences were limited overall, there were notable gender disparities among young people. Boys (61.0%) were far more likely to 'very much' agree with this statement compared with girls (43.3%), indicating a gender gap in perceived quality of interpersonal support.

7.1.1.3 Someone to talk to

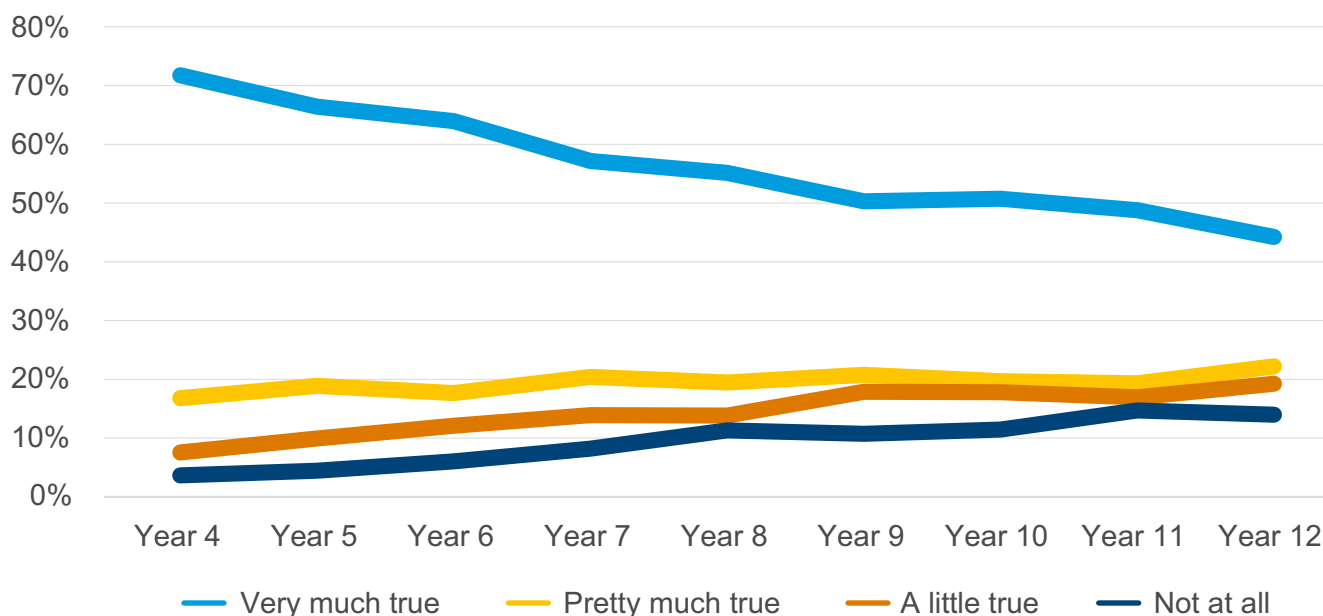
Most children and young people reported having someone they could talk to about their worries. While most children and young people either 'very much' or 'pretty much' agreed with this statement, our findings indicate that children and young people's agreement tended to decrease with age, suggesting perceived accessibility of support may weaken during adolescence.

Among children, boys (70.5%) were more likely to 'very much' agree with this statement than girls (64.6%). Similarly, among young people, boys (62.7%) were more likely to 'very much' agree with this statement than girls (41.8%); with girls (37.2%) more likely to agree 'a little' or 'not at all' compared to boys (17.9%). Again, this further highlights the gender divide in perceived interpersonal support as children and young people age and mature.

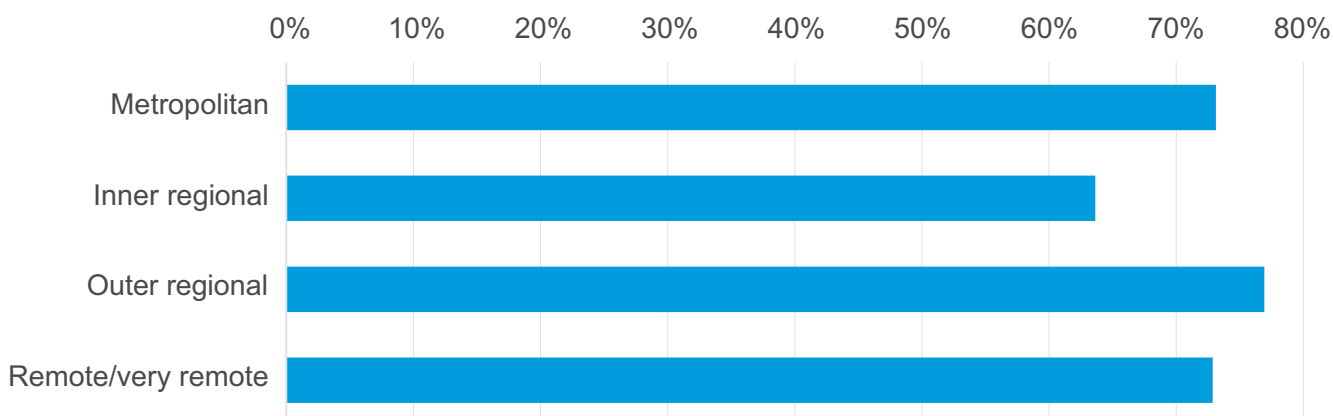
Proportionally, young people living in inner regional areas demonstrated less overall agreement with this statement than those living in the metropolitan, regional or remote/very remote areas.

7. Safe and supported

Graph 7.1.1: Proportion of Year 4–12 students indicating how true the statement “I have a supportive adult I can talk to” was for them, by school year



Graph 7.1.2: Proportion of Year 7–12 students who agreed they had a supportive adult they could talk to, by remoteness



7. Safe and supported

7.1.2 People who care

To further understand children and young people’s support networks, we asked how much they feel the people in their lives care about them.

7.1.2.1 Parents

More than eighty per cent of children (89.1%) and young people (83.9%) felt their mother or maternal figure cared about them ‘a lot’. Among young people, boys (89.5%) were more likely than girls (78.3%) to feel their mother or maternal figure cared about them ‘a lot’. Additionally, young people’s perceived level of maternal care declined with age.

Similarly, around eighty per cent of children (82.9%) and young people (75.4%) felt their father or other paternal figure cared about them ‘a lot’. Among young people, boys (82.4%) were more likely than girls (68.0%) to feel their father or paternal figure cared about them ‘a lot’. Consistent with the

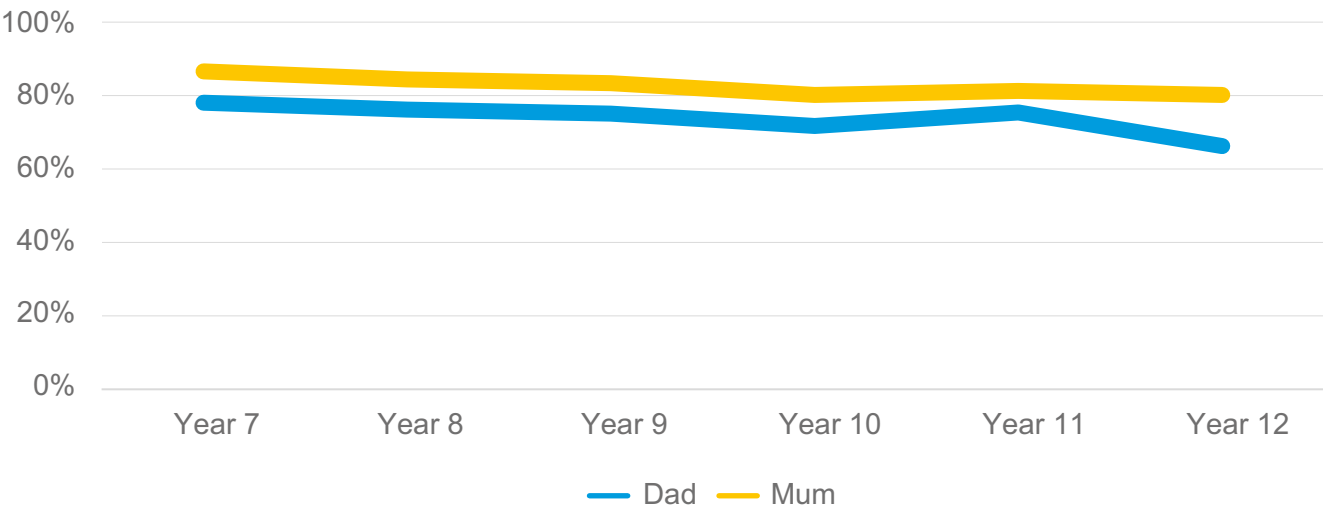
maternal findings, perceptions of paternal care declined with age. This suggests a broader age-related shift in perceived interpersonal support, rather than specific differences between caregivers.

Children living in very remote areas (12.0%) were notably more likely than children living in the metropolitan area (2.5%) to feel their father or paternal figure did not care for them at all.

7.1.2.2 Siblings, other parent, other family members

Although perceptions of care from siblings, other parents, and family members were lower overall than perceived care from primary parents and caregivers, around one in two children and young people still felt these people in the wider group cared about them ‘a lot’. This finding demonstrates the importance of the broader role of extended familial networks. However, among young

Graph 7.1.3: Proportion of Year 7–12 students who reported their mum or dad cared about them a lot, by school year



7. Safe and supported

people, girls (12.8%) were almost twice as likely as boys (7.6%) to report their other parent did not care about them at all, reinforcing gender disparities in perceived familial support beyond the primary caregivers.

While perceived care from extended family tended to decrease with age, young people's perceptions of care from siblings increased. For instance, 46.0 per cent of Year 7 students felt their siblings cared about them 'a lot', rising to 54.0 per cent of Year 12 students. This shows that adolescents tend to shift more positively toward peer-like relationships as they enter their teenage years.

7.1.3 Online communication

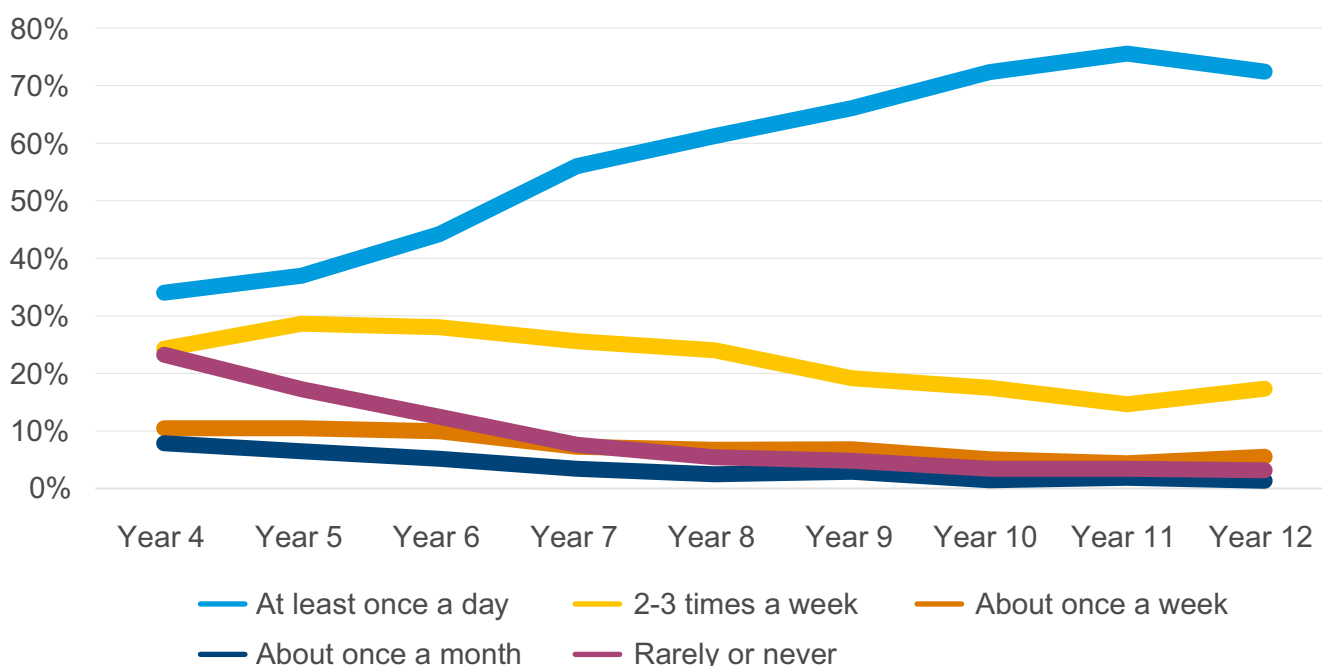
Children and young people were asked how often they communicated online with different groups of people, including family, people they knew personally, people they knew online, and people they either did not know or had not met face to face.

Approximately half of all children and young people reported communicating with family online on a daily basis.

For children, daily online contact was highest with family (52.2%), compared to people they knew personally or had met before (38.5%), and people they only knew online (14.2%).

For young people, daily online contact was highest with people they knew personally or had met before (66.0%) compared with family (54.0%), people they only knew online (14.1%), and people they did not know or had not met face to face (7.7%).

Graph 7.1.4: Frequency of Year 4–12 students speaking online with someone they knew personally or met before, by school year



7. Safe and supported

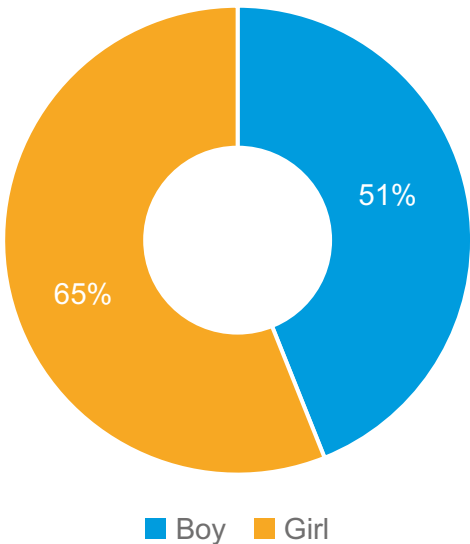
Both children and young people reported high levels of online contact with people they knew personally or had met before. Frequency of online contact increased with age and school year, reflecting the growing importance of peer-based relationships during adolescence. For example, daily contact rose from 35.0 per cent in Year 4 students to 72.6 per cent in Years 12 students.

The frequency of online contact with people they did not know, had not met face to face, or only knew online, also increased with age. However, the levels of online contact were markedly lower than with family and people they knew personally. For instance, less than 15 per cent of children and young people reported daily contact with people they only knew online.

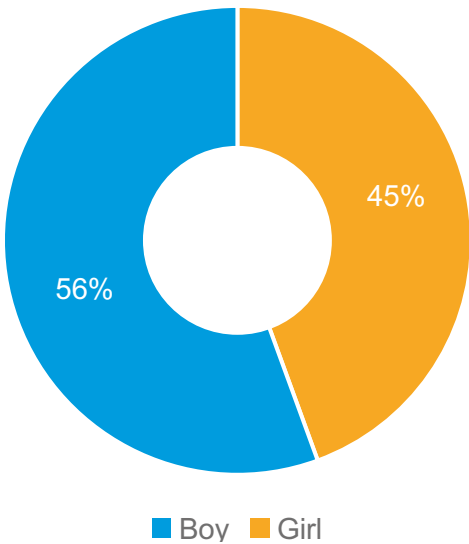
Young people living in the metropolitan area (66.1%) were more likely than those living in remote areas (57.4%) to report daily online contact with people they knew personally. Young people living in more remote areas (23.4%) were twice as likely than those living in the metropolitan area (12.8%) to report daily online contact with people they only knew online. This indicates that online spaces may play a compensatory role in satisfying the social needs of young people living in more isolated areas.⁸⁷

Girls across age groups consistently reported less online communication with people they did not know in-person than boys, and were more likely to report having ‘never’ communicated with people they did not know or only knew online.

Graph 7.1.5: Proportion of Year 4–6 students who rarely or never spoke to someone they only knew online, by gender (percentage)



Graph 7.1.6: Proportion of Year 7–12 students who rarely or never spoke to someone they only knew online, by gender (percentage)



7. Safe and supported

7.1.4 Friendships

Around one in two children and young people felt confident in their abilities to make and keep friends. However, this confidence appeared to gradually decline with age, with 59.9 per cent of children reporting they were 'very good' at making and keeping friends, compared to 49.8 per cent of young people.

Secondary school boys (57.0%) were more likely than girls (42.5%) to report feeling 'very good' at making and keeping friends.

More than eighty per cent of children (84.6%) and young people (86.7%) felt they had enough friends. Boys were around six per cent more likely than girls to report having enough friends in both primary and secondary school.

Students in Years 4 to 6 were slightly more inclined to report that their friends cared about them 'a lot' (55.1%), compared with students in Years 7 to 12 (45.6%).

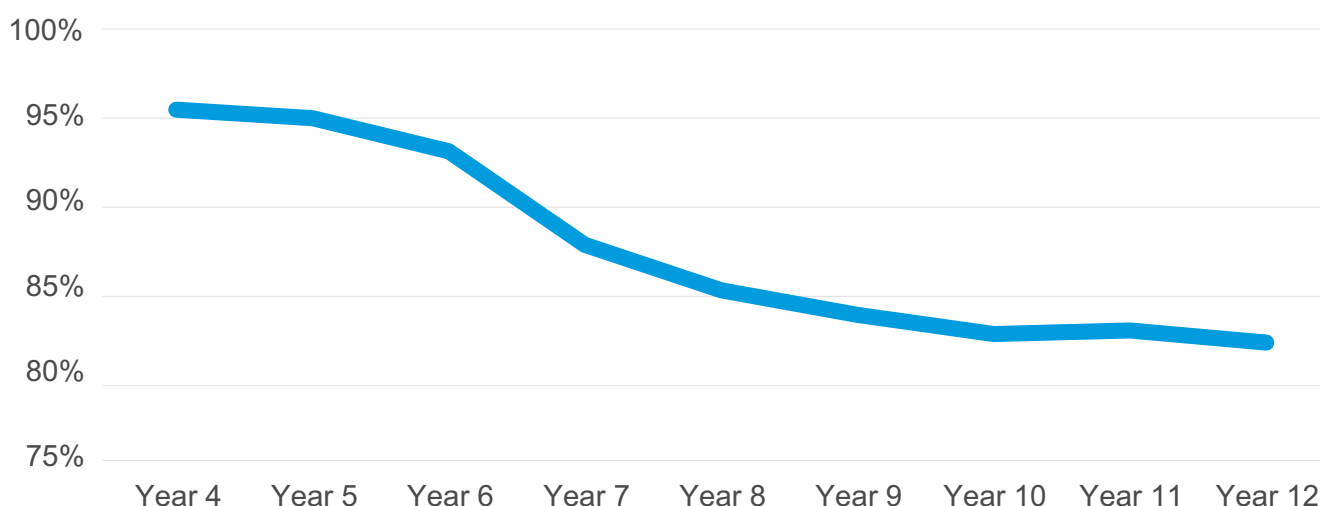
7.1.5 Adults to talk to about serious problems

Children and young people were asked whether they had an adult they felt comfortable talking to if they were experiencing a serious problem. Most children (94.8%) and young people (84.8%) said 'yes', confirming they did have an adult who they could talk to about a serious problem. However, this sentiment did appear to decline with age.

Among young people, boys (88.3%) were more likely than girls (80.8%) to report having an adult to talk to about a serious problem.

Overall, the findings suggest that while most children and young people feel they have access to trusted adults, confidence in this support and in talking about serious problems decrease with age.

Graph 7.1.7: Proportion of Year 4–12 students who reported they had a supportive adult to talk to about a serious problem, by school year



7. Safe and supported

7.1.6 Things adults should know

The qualitative findings highlighted both common and distinctive perspectives among children and young people about the things they want adults to know.

Both children and young people consistently expressed a strong desire for supportive relationships with adults who actively listen and take their views, concerns and experiences seriously.

For children, key themes centred on adults being more engaged and responsive in their everyday lives. This included taking an interest in their experiences at school and other activities, and providing support when they encounter challenges, particularly bullying.

Children emphasised the need for adults to create emotionally safe home environments where they can feel comfortable to talk and seek support from their parents. Specifically, they want adults to listen without dismissing their concerns as “just kid stuff” and help them feel safe, cared for and respected. They also highlighted wanting to see improvements in their local communities through child-friendly infrastructure, such as playgrounds and skate parks, and other accessible and affordable activities.

“Kids might have something going on at school like being bullied or cyber bullied and you should check on them because otherwise you won’t know what they’re feeling.”

Girl aged 10, metropolitan

“I feel like more people need to understand that when I have anxiety or anyone in the world does, it’s hard to stop it and when I try to calm I get told to stop being silly and just grow up which makes my situation worse and that led to a panic attack a few weeks ago.”

Girl aged 11, metropolitan

“Maybe make some places where kids can ride their bikes/scooters on so kids can feel safe while having their own exercise.”

Boy aged 10, metropolitan

Young people provided similar responses but with greater complexity and a stronger focus on autonomy as they approach adulthood.

Young people repeatedly highlighted school-related pressures, including academic demands, social expectations and bullying. They urged adults to better recognise and understand these challenges from the perspective of young people. They stressed the importance of adults recognising their mental health needs as legitimate, particularly in relation to managing their stress, anxiety and depression.

They also expressed an ongoing desire for adults to hear their concerns without judgement. Many said they wanted to seek support from adults but felt hindered by fears they would be dismissed, misunderstood or penalised. They wanted adults to be actively involved in their lives to help prepare them for adult life after school, while acknowledging their need for independence in forging their own experiences and identities.

Lastly, young people consistently commented on the importance of feeling safe in their environments and in their

7. Safe and supported

relationships. They described concerns about exposure to crime, risk-taking behaviours and substance use, while not yet having the skills to manage independently. In this context, young people described the role of a supportive adult as someone who is aware of their experiences but maintains appropriate boundaries. The desired supportive adult is one who provides guidance, supervision and safety without undermining a young person's autonomy.

"Be patient with them. Let them talk and explain themselves. Don't straight away criticise the child/young person for what they did or say. Let them feel safe and heard."

Girl aged 14, metropolitan

"A lot of us are in stages of our lives where we need independence, so allowing us to learn from our mistakes is good for our development."

Boy aged 16, metropolitan

"We should get more support for when we are in relationships cause not every teen relationship is childish and bad stuff happens in then like adults and we get no help when we are being abused."

Boy aged 17, metropolitan

Overall, the qualitative data indicated that children were focused on their immediate relationships, immediate environments and day-to-day experiences, whereas young people provided more complex and future-oriented perspectives. Despite the differences, both children and young people are clear they want adults to be present, respectful and responsive to their experiences, their views and opinions, and their overall wellbeing.

7.2 Material basics

The material circumstances of a family make a significant contribution to the health and wellbeing of a child or young person. Access to basic material needs such as adequate food and security of housing protects against the risks of ongoing disadvantage.⁸⁸

In general, children and young people from low socioeconomic backgrounds are at greater risk of poor health over their lifetime, including higher rates of illness, disability and death. Young people experiencing material deprivation, social exclusion or homelessness are also more likely to have poor mental health, high risk of alcohol and substance misuse, and low educational and employment outcomes over the longer term.⁸⁹

7.2.1 Family car

We asked children and young people if they have access to a family vehicle for transport.

Family car ownership was high overall, with approximately seventy per cent of children (74.5%) and young people (78.7%) reporting their families owned two or more cars. Around twenty per cent of families (children 21.1% vs young people 18.5%) owned at least one car and a small minority (children 4.4% vs young people 2.8%) had none. Children (9.2%) and young people (5.8%) in remote/very remote areas were most likely to report no access to family cars.

In terms of financial capacity to use a family vehicle, very few respondents reported constraints. Less than two per cent of children (1.3%) and young people (1.5%) indicated their family did not have the financial means to purchase fuel when needed, suggesting that fuel did not represent a significant barrier for most families who owned a car. It should be noted

7. Safe and supported

that this survey was administered prior to the 2026 global fuel crisis which would likely have impacted student responses.

Overall, these findings indicate that most children and young people have access to family-based transport, with higher levels of car ownership (two or more vehicles) being common. However, both children and young people in very remote areas (9.2%), and young people in remote/very remote areas (5.8%), were comparatively more likely to experience a lack of ownership of a family vehicle. This highlights a modest geographic disparity regarding access to private transportation.

Evidence shows that in rural and remote communities where public transport can be limited or unavailable, community transport and locally coordinated services can support children and young people's access to education and other essential services. This is especially important for those without any access to private family vehicles.⁹⁰

7.2.2 Enough food

Responses from children and young people indicate that most have consistent access to food at home. However, a small proportion continue to experience some level of food insecurity.

Overall, approximately seventy per cent of children and young people reported 'always' having enough food to eat at home when they are hungry (children 71.4% vs young people 71.1%). A further twenty per cent reported 'often' (children 21.0% vs young people 22.0%); seven per cent reported 'sometimes' (children 7.1% vs young people 6.2%); and less than one per cent reported 'never' having enough food (children 0.5% vs young people 0.7%).

Together, these results indicate that seven out of 10 children and young people experience true food security by always having access to food at home. Nevertheless, the fact that a small minority of children and young people report intermittent or persistent food insecurity raises concerns.

7.2.3 Items young people have

Children and young people were asked whether they had access to a range of items considered important for participation in everyday life, including money for school activities, personal spending money, appropriate clothing, digital devices, mobile phone, and internet access at home.

7.2.3.1 Money

Nine out of 10 children (90.6%) and young people (93.4%) reported their family had enough money to pay for school excursions or camps. However, children and young people living in very outer regional and remote areas were most likely to report not having the financial means to pay for school excursions or camps, regardless of whether they wanted to attend.

More than eighty per cent of children (83.9%) and young people (83.5%) reported having personal money they could either spend or save, with approximately 15 per cent reporting either not having access to personal money but wanting it, or not wanting nor needing it.

7.2.3.2 Clothing

Nine out of 10 (90.4%) children and young people (89.9%) reported having the right kind of clothes to fit in with their peers, while one in 10 (children 9.5% vs young people 10.1%) reported they did not. Differences across demographic groups were relatively limited.

7. Safe and supported

7.2.3.3 Digital devices and internet access

More than eighty per cent of children (80.9%) and young people (87.7%) reported having access to their own tablet, laptop or computer. However, access differed by remoteness, with children in outer regional areas (30.4%) and young people in remote areas (27.5%) being the least likely to report having their own device. By comparison, children living in the metropolitan area were the least likely to report not having their own device (17.3%), as were young people in outer regional areas (4.9%).

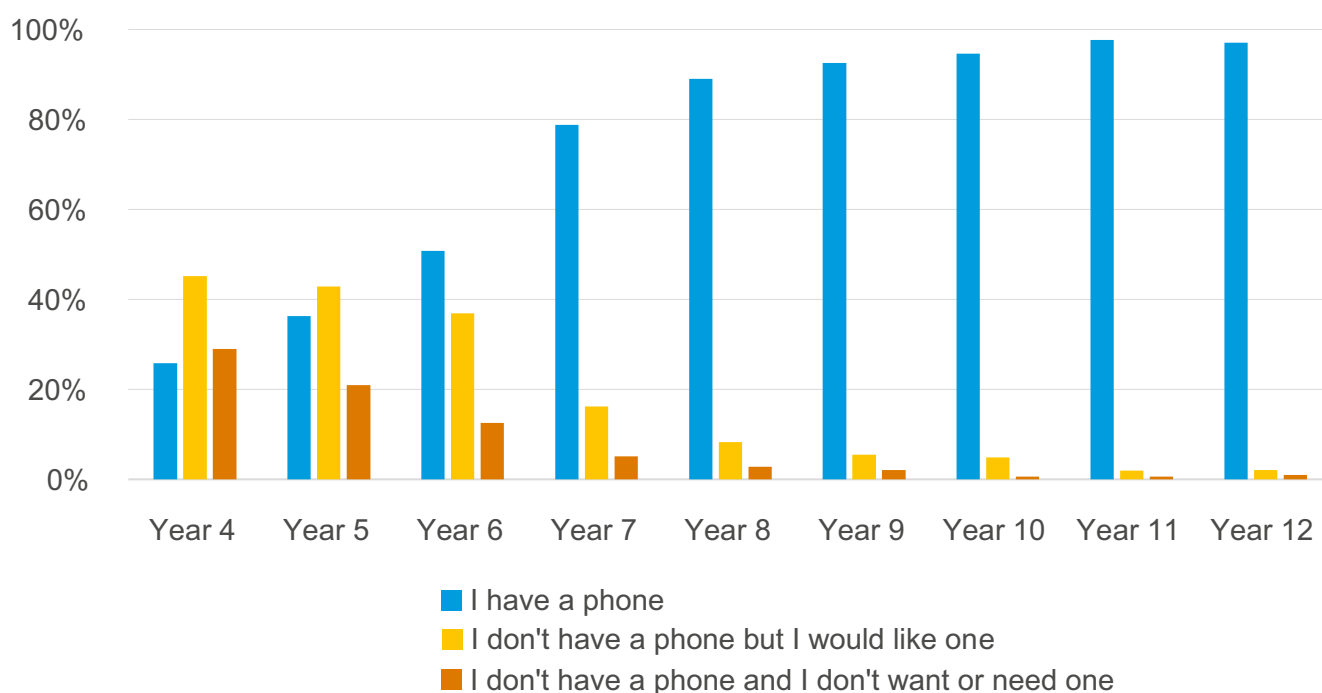
Access to a personal mobile phone steadily increased with age, rising from 37.8 per cent of children to 90.1 per cent of young people. Almost all Year 12 students reported owning a personal mobile phone.

Interestingly, many children (41.6%) reported not owning a mobile phone but wanting one, while a further 20.7% reported not having a phone but also not wanting or needing it. The larger proportion of children wanting a phone may indicate a continuing demand for mobile phones at a younger age.⁹¹

More than ninety per cent of children (93.8%) and young people (97.9%) had access to the internet at home. Access generally increased by school year, although young people living in remote/very remote areas (92.6%) were the least likely to report reliable internet access compared with those living in outer regional (98.2%), inner regional (97.7%) and metropolitan areas (98.1%).

Overall, these findings suggest that most children and young people have access to the material basics required to participate in school and life.

Graph 7.2.1: Proportion of Year 4–12 students who had a phone, did not have a phone but would like one, or did not have a phone and don't want one, by school year



7. Safe and supported

However, disparities remain for some groups, namely children and young people based in remote and very remote areas. These students continuously reported lower levels of access to certain financial resources and freedoms, digital devices and the internet. This underscores the continuing importance of addressing geographic inequalities in access to material basics.

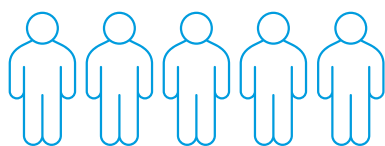
7.2.4 Households

We asked a series of questions relating to family households, including primary and secondary residences, personal and shared bedrooms, and frequency of moving house. Responses highlighted the diverse living arrangements among children and young people.

7.2.4.1 Primary household

Most children and young people reported living in their primary household with immediate family. Around nine in 10 reported living with their mother (children 92.3% vs young people 90.1%), with marginally fewer living with their father (children 81.2% vs young people 75.8%), and fewer again with siblings (children 68.3% vs young people 74.5%).

Primary households were commonly composed of around four to five people.



Primary households were commonly composed of around 4 to 5 people

7.2.4.2 Secondary and multiple households

Around one in five children (18.5%) and young people (18.4%) reported living in both primary and secondary households.

Living between two households was more common for young people in remote/very remote areas (28.5%) compared with those in outer regional (19.3%), inner regional (22.3%) and metropolitan areas (17.4%).

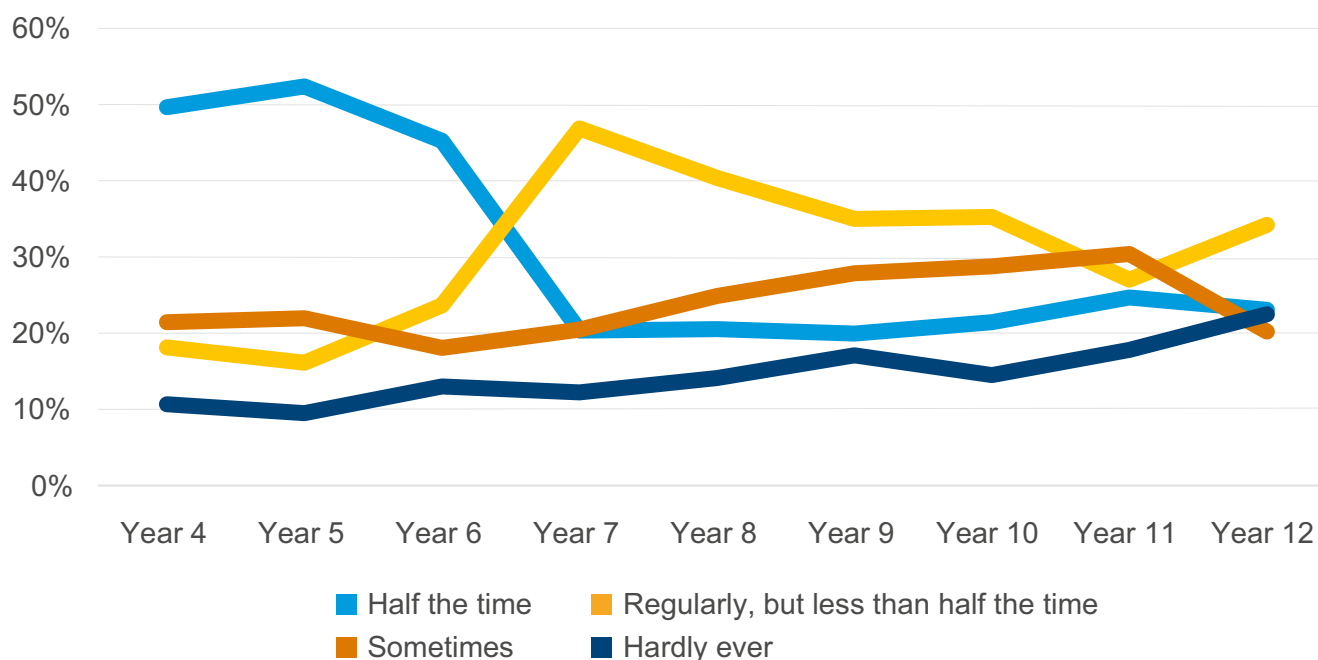
Children and young people reported living in secondary households primarily with their father (children 61.1% vs young people 63.1%), followed by living with their mother (51.8% vs 31.1%), with a grandparent (21.7% vs 15.0%) or with a stepmother (12.6% vs 17.8%). Both children and young people in remote/very remote areas were least likely to report living with their father and most likely to report living with a grandparent. This may reflect the diverse family structures and kinship systems in Aboriginal communities, where connections to extended family and multiple households play a culturally important role in the living arrangements.⁹²

Children and young people reported living in secondary households either 'half the time' (children 49.1% vs young people 38.2%), 'regularly but less than half the time' (19.4% vs 25.4%), 'sometimes' (20.5% vs 21.2%), or 'hardly ever' (11.1% vs 15.2%).

Interestingly, the rate of living equally across two households decreased with age, suggesting children and young people experience more stable living arrangements as they age.

7. Safe and supported

Graph 7.2.2: Frequency of Year 4–12 students living at their secondary home, by school year



Conversely, most children and young people did not live in multiple households (children 62.7% vs young people 78.2%). A small proportion of children and young people reported living in 'one or more homes' (children 32.3% vs young people 19.3%) or living in 'several other homes' (children 5.1% vs young people 2.5%). This reflects more complex living arrangements, particularly in remote/very remote areas (where it was more commonly reported).

7.2.4.3 Bedrooms and personal space

Most children (82.6%) and young people (92.7%) reported having their own bedroom. Access to a personal bedroom tended to increase with age, which likely reflects adolescents' growing need for privacy and personal space.⁹³

The proportion of children and young people with their own bedroom was slightly higher in the metropolitan area (children 83.2% vs young people 92.7%) compared with those in inner regional (80.2% vs 91.5%), outer regional (82.1% vs 93.6%), remote (children 84.0%) and very remote areas (children 73.6% vs young people combined remote/very remote 86.8%).

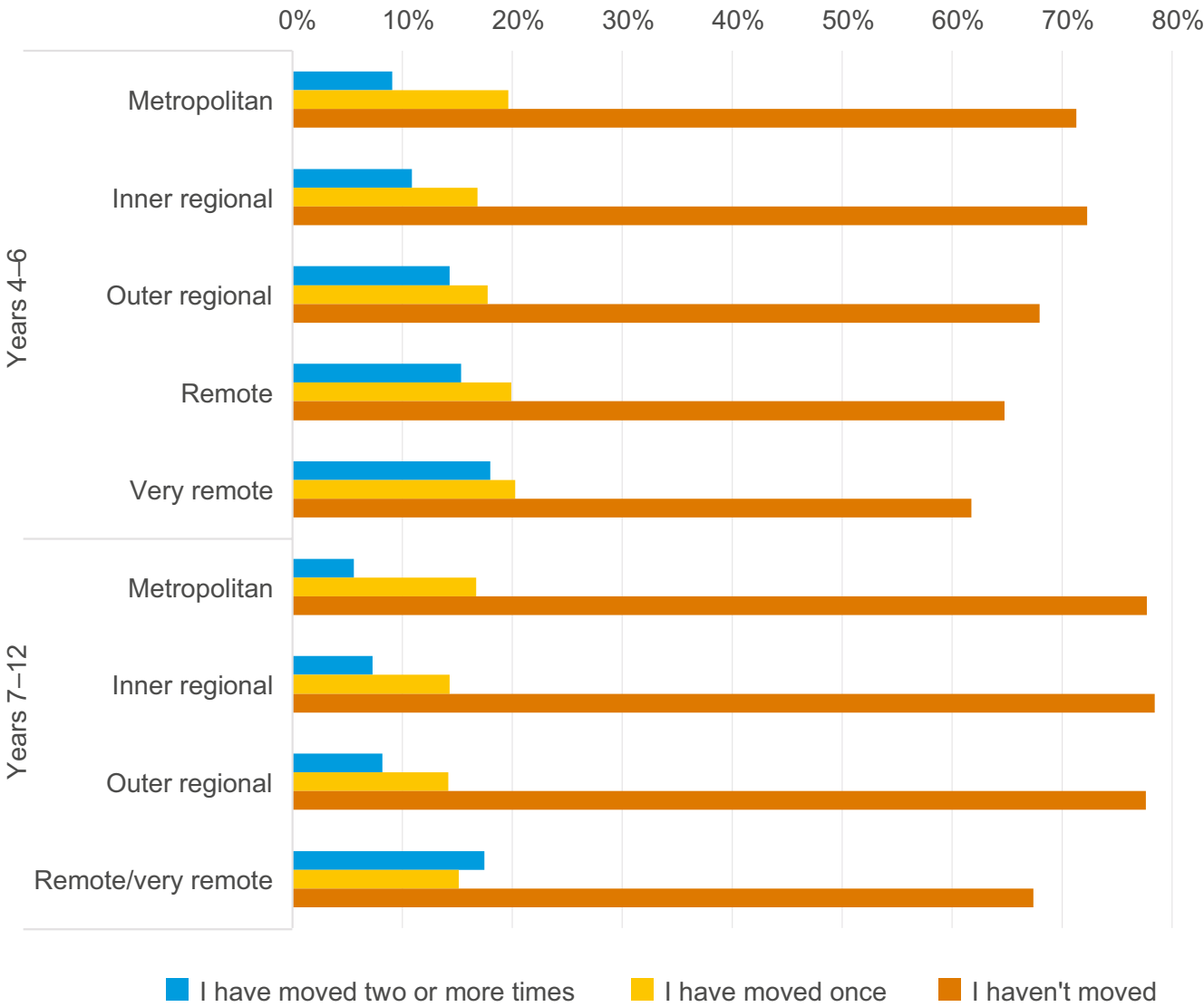
7.2.4.4 Moving house

Around seventy per cent of children (70.7%) and young people (77.3%) reported having not moved in the past twelve months. However, around one in 10 reported having moved house twice during this period, indicating some level of residential instability.

Moving house appeared to be more common among children and young people in remote/very remote areas, particularly when it involved moving two or more times.

7. Safe and supported

Graph 7.2.3: Frequency of Year 4–12 students moving homes in the past 12 months, by year group and remoteness



While it is important to recognise that some flexible living arrangements may reflect Aboriginal kinship systems and family structures, a proportion of children and young people reported some degree of residential instability, including frequent moves and living across multiple households. These experiences can disrupt learning, as well as students' overall social and emotional wellbeing.

7. Safe and supported

7.3 Safe in the home

Feeling safe and being safe at home are critical for children and young people's healthy development. A safe and supportive family provides a sense of security, fosters self-esteem and responds appropriately to young people's needs.⁹⁴

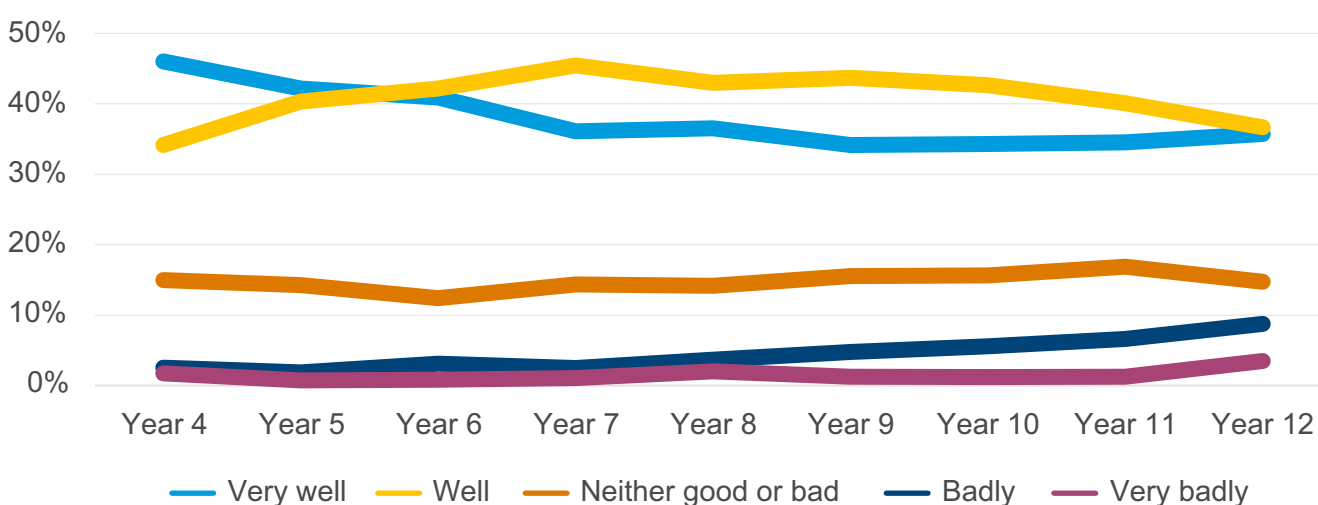
Conversely, exposure to family and domestic violence, abuse and neglect is associated with a range of adverse outcomes for children and young people, including poor physical health, learning and developmental difficulties, increased risk of AOD use, self-harm, mental illness, contact with the justice system, and other challenges later in life.⁹⁵

7.3.1 Family cohesion

We asked children and young people how well their families got along. Overall, most children reported their families got along either 'very well' (43.3%) or 'well' (39.1%), with fewer than five per cent reporting their families got along 'badly' (2.5%) or 'very badly' (1.1%). Similarly, most young people reported getting along with their families either 'very well' (35.4%) or 'well' (43.0%), with less than 10 per cent reporting 'badly' (4.7%) or very badly (1.5%).

Interestingly, both children's and young people's perceptions of family cohesion appeared to slightly decline with age. For instance, 46.2 per cent of Year 4 students reported that their families got along 'very well', compared to 41.1 per cent of students in Year 6. Year 12 students (12.3%) were almost four times as likely as Year 7 students (3.6%) to report their families got along 'badly' or 'very badly' (combined totals).

Graph 7.3.1: Proportion of Year 4–12 students reporting on how well their family gets along, by school year



7. Safe and supported

Gender differences were evident at the secondary school level, with boys (83.9%) reporting their families got along 'well' or 'very well' more often than girls (73.0%). Girls were more likely to report their family relationships as 'neither good nor bad' (18.9%) more often than boys (11.7%).

Responses were largely consistent across locations. The only exception was among children living in very remote areas (6.9%) who were twice as likely to report their families got along 'badly' or 'very badly' compared to children living in the metropolitan area (3.5%).

7.3.2 Domestic safety

Children and young people were asked how often they felt safe at home. While responses across year groups were similar, children (69.7%) were far less likely to report feeling safe in the home 'all the time' compared with young people (92.0%). Concerningly, 7.5 per cent of children reported feeling safe only 'sometimes', 'a little bit', or 'never'. This is a notable finding as it raises questions about differences in how safety is perceived and experienced across developmental stages.⁹⁶ However, it is important to note that children may have interpreted the question as referring to the structural integrity and safety of their home/house, rather than referring to family dynamics. This kind of response may have been more prevalent among children living in areas that experience flooding, cyclones or bushfires.

Remoteness appeared to influence children's perceptions of safety at home. For example, children living in very remote areas were more likely to feel safe at home 'sometimes'

(9.7%), compared to children living in the metropolitan area (4.4%). Children living in inner regional areas (64.0%) and very remote areas (63.5%) were less likely to feel safe at home 'all the time' than those living in outer regional areas (70.5%), remote areas (70.0%) or in the metropolitan area (70.4%).

Gender-related differences in perceptions of safety at home were minimal, for both children and young people.

7.3.3 Family concerns

We asked children and young people whether they worried about family or household members fighting, hurting themselves, hurting others, or getting arrested.

7.3.3.1 Fighting

Approximately half of all children (45.7%) and young people (53.2%) reported not worrying about fighting at all. However, around one in 10 children (12.4%) and young people (9.1%) reported worrying 'a lot' about fighting taking place within their household.

Gender differences were apparent among young people. Secondary school girls (12.5%) were more than twice as likely to worry 'a lot' about fighting at home than boys (5.8%). Girls were also considerably less likely to report 'not worrying at all' (44.1%) compared to boys (62.2%). These differences align with broader research that suggests girls are more likely to internalise stress and anxiety during adolescence, particularly in response to interpersonal conflict.^{97,98}

7. Safe and supported

Remoteness appeared to impact children's responses. Children residing in outer regional areas (50.0%) were most likely to report 'not worrying at all' about fighting, compared to children residing in the metropolitan (46.1%), remote (45.1%), inner regional (40.8%) and very remote areas (38.5%).

7.3.3.2 Self-harm

Sixteen per cent (16.1%) of children reported worrying 'a lot' about family or household members hurting themselves, with a further 10.9 per cent worrying 'somewhat', and 27.5 per cent worrying 'a little'. Less than half of the children (45.6%) reported 'not worrying at all'.

This differs markedly from young people, among whom 70.6 per cent reported 'not worrying at all', and only 6.2 per cent worrying 'a lot'. Children were therefore more than twice as likely than young people to worry about self-harm occurring within the household.

Among children, worry appeared to decrease with age as they progressed through primary school. Year 4 students were most likely to report worrying 'a lot' (20.7%), followed by Year 5 students (15.1%) and Year 6 students (12.6%). Conversely, Year 6 students were most likely to report 'not worrying at all' (52.5%), compared to students in Year 5 (45.1%) and Year 4 (38.9%). Again, these findings highlight differences between children's and young people's perceptions of safety and risk within the home.

Gender differences were evident across age groups, with girls less likely to report 'not worrying at all' than boys. This pattern was consistent in both primary school (girls 42.9% vs boys 48.3%) and secondary school (girls 67.2% vs boys 73.8%).

Children living in remote areas were least likely to report 'not worrying at all' (38.7%), compared to children living in the metropolitan area (46.1%). This pattern was consistent with young people living in remote areas who were also least likely to report 'not worrying at all' (64.1%) compared to young people living in the metropolitan area (71.2%).

7. Safe and supported

7.3.3.3 Physical harm

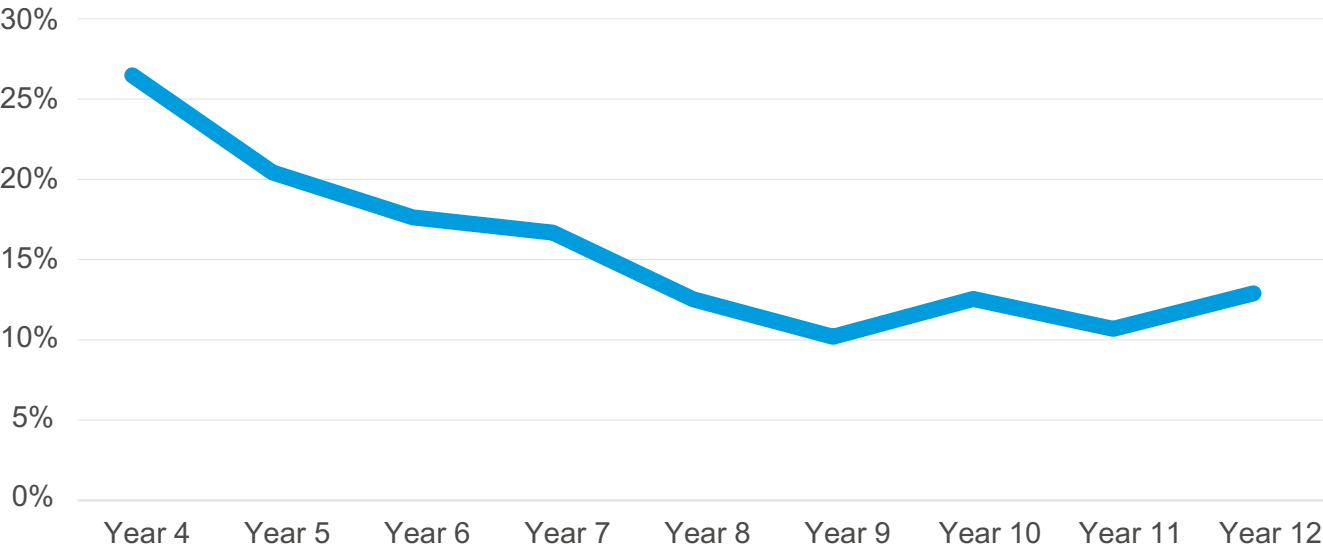
Children (12.5%) were twice as likely as young people (5.9%) to report feeling concerned that someone in their family would hurt somebody.

Worry appeared to decline with age. For example, Year 4 students (17.0%) were more likely to report worrying ‘a lot’, compared to students in Year 5 (11.0%) and Year 6 (9.6%). Similarly, Year 7 students (68.3%) were least likely to report ‘not worrying at all’, compared to students in Years 8-12 (74.5%). These results indicate that age could be a key factor in influencing children’s and young people’s perception of the risk of interpersonal harm occurring within the household.

Gender differences were minimal in primary school students. However, secondary school girls (69.7%) were less likely than boys (78.1%) to report ‘not worrying at all’.

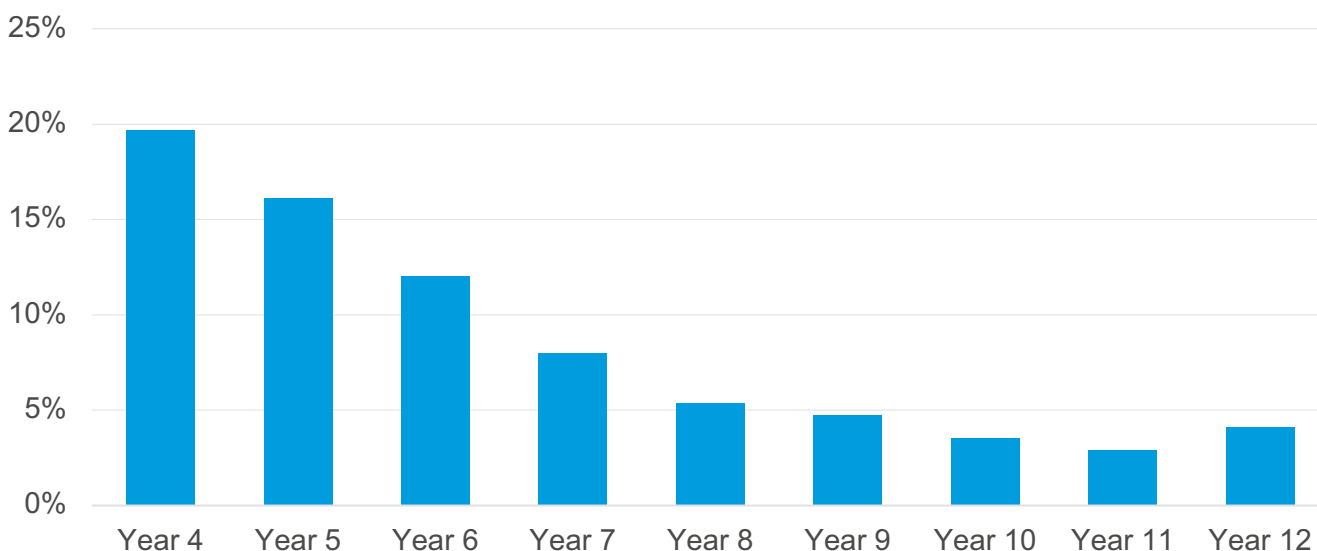
Children living in inner regional areas (12.5%) were twice as likely to report worrying ‘somewhat’ compared with children living in very remote areas (6.9%). Young people living in remote areas (66.0%) were also less likely to report ‘not worrying at all’ than young people living in the metropolitan area (74.7%).

Graph 7.3.2: Proportion of Year 4–12 students worrying a lot/somewhat that their family member will hurt someone, by school year



7. Safe and supported

Graph 7.3.3: Proportion of Year 4–12 students worrying a lot that their family member would be arrested, by school year



7.3.3.4 Arrests

Children (15.9%) were more than three times as likely as young people (5.0%) to worry 'a lot' that someone in their family would get arrested.

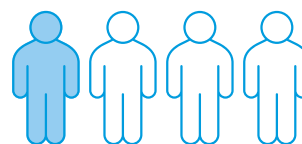
Children living in very remote areas (14.6%) were most likely to worry 'a little', compared with children living in the metropolitan area (7.2%) or remote areas (10.4%). Young people living in remote areas (71.9%) were least likely to worry 'not at all', compared to young people living in the metropolitan area (83.7%).

Our findings show clear differences between children and young people's perceptions of domestic safety, with children consistently reporting higher levels of worry about family conflict, harm and instability. Children and young people in remote and very remote areas consistently reported higher levels of worry and reduced feelings of safety at home, reflecting structural barriers to accessing essential support services

7.3.4 Nights away from home

We asked young people if they ever spent a night away from home because of a family problem, and if so, how many nights they had they spent away from home in the past 12 months.

One quarter of all young people (25.4%) responded 'yes', saying they had spent a night away from home because of a family problem.



1 in 4

**young people had left
their primary residence due
to family problems**

7. Safe and supported

Within this group, more than half (59.6%) reported having spent a night away from home ‘at least once’ within the past 12 months, with almost one in three (32.5%) having spent a night away more than once.

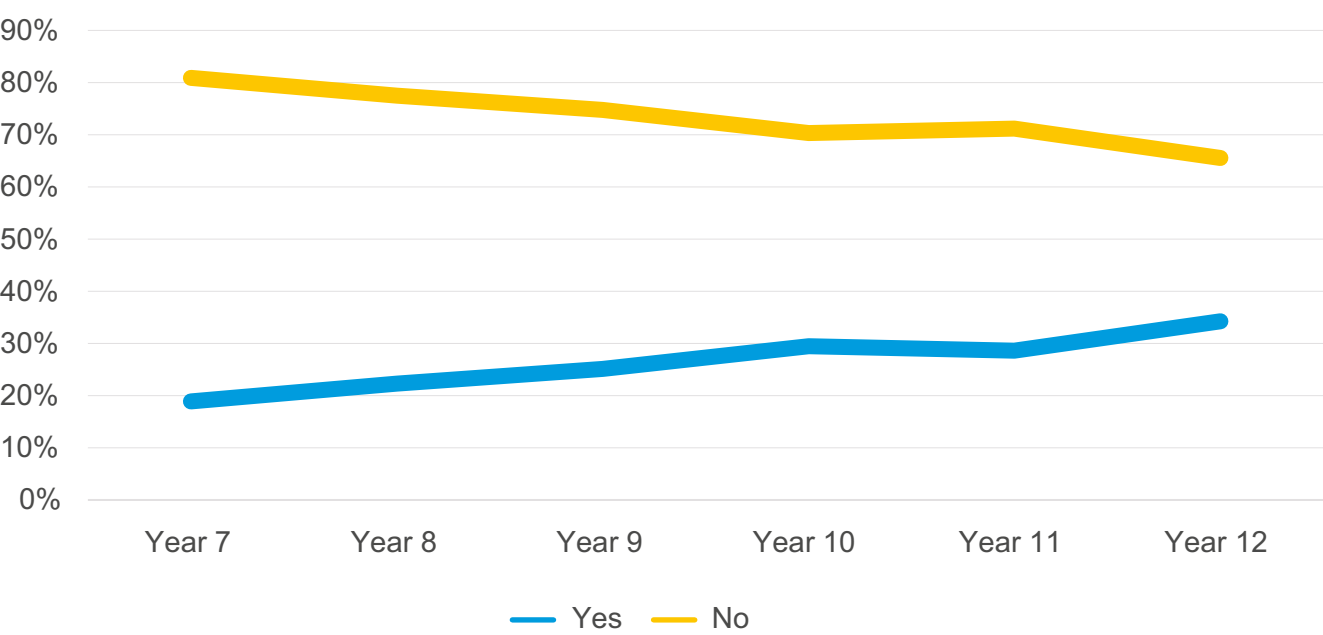
Girls (30.4%) were more likely to report having spent at least one night away from home than boys (20.6%). This is consistent with previous SOS21 findings that showed a higher proportion of girls between Year 7 and 12 spending a night away from home due to a family problem (girls 31.7% vs boys 22.4%).

Young people living in remote areas (31.8%) were also more likely to report having spent a night away from home, compared with young people living elsewhere. Young people living in the metropolitan area (23.5%) were least likely to report spending a night away from home.

Interestingly, the likelihood of spending a night away from home increased with age. For example, 18.9 per cent of Year 7 students reported spending a night away from home because of a family problem, compared to 34.3 per cent of Year 12 students. While children’s and young people’s level of worry about people in their household appeared to decrease with age, the frequency of spending a night away from home appeared to increase with age.

Young people reported spending nights away from home due to family problems. This could indicate that family conflict and dysfunction could increase the risk of young people experiencing serious housing instability and homelessness.

Graph 7.3.4: Proportion of Year 7–12 students who spent a night away from home due to a family issue, by school year



7. Safe and supported

7.4 Safe in the community

Feeling safe in their neighbourhood and other communities or groups is essential for children and young people to develop their independence, engage in physical activity outside their home and build positive relationships with other adults and peers.¹⁰⁰

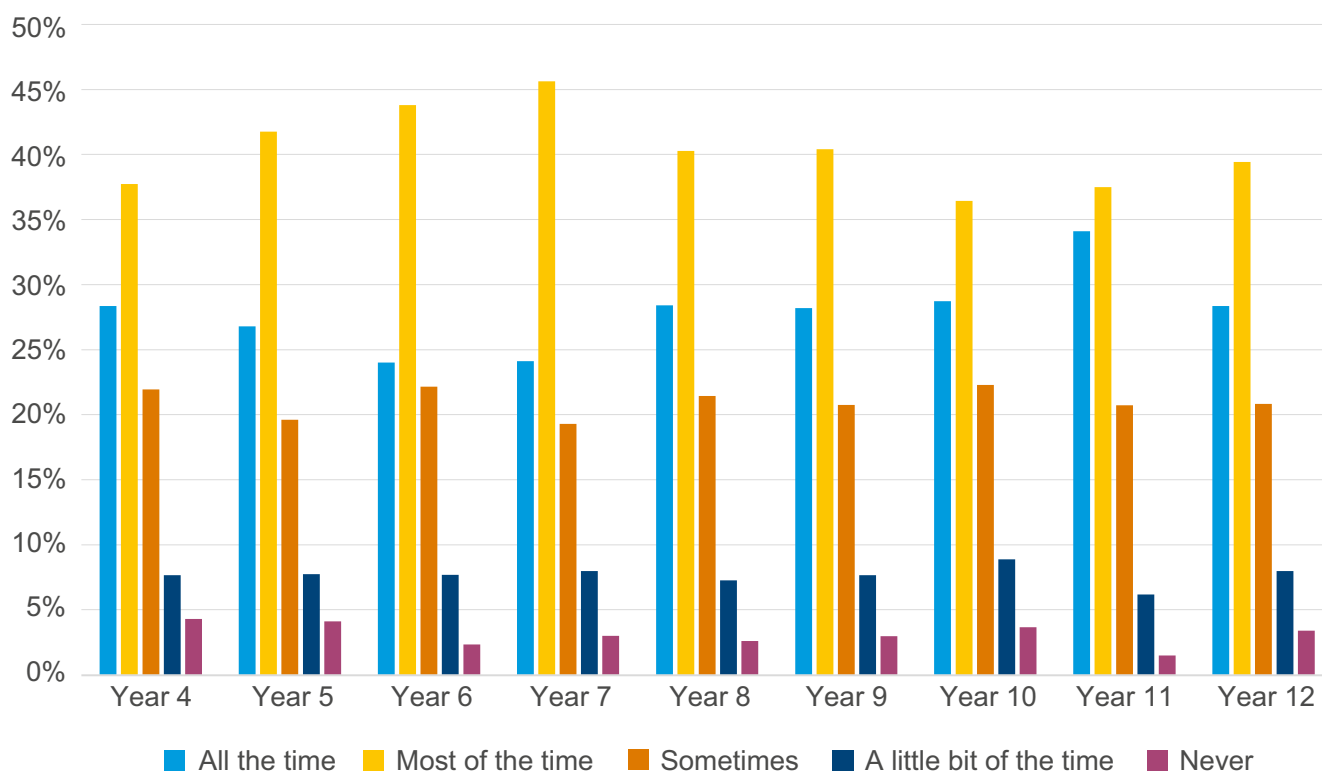
Children and young people who feel unsafe in their community are more likely to experience negative long-term outcomes including anxiety-related disorders, alcohol and drug misuse and behavioural difficulties.¹⁰¹

7.4.1 Feeling safe in the local area and community

Most children and young people reported feeling safe in their local area and community. Across school groups, gender and remoteness, the most reported response was feeling safe 'most of the time', followed by 'all of the time', 'sometimes' and then 'a little bit of the time' or 'never'.

Notably, a greater proportion of children and young people reported feeling safe 'most of the time' than reported 'all the time', indicating that while feelings of safety are experienced often, they are not always felt.

Graph 7.4.1: Proportion of Year 4–12 students reporting how frequently they feel safe in their local community, by school year

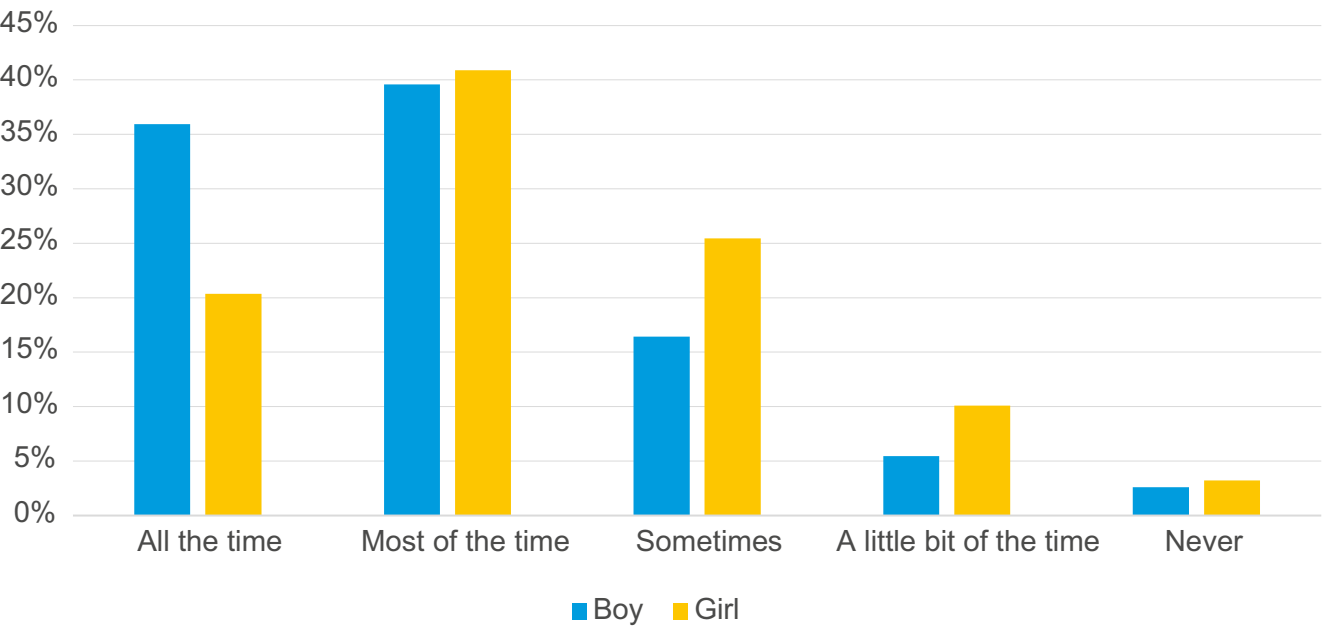


7. Safe and supported

Gender differences in perceived safety were apparent in young people. Boys were more likely to report feeling safe ‘all of the time’ (35.9%) compared to girls (20.4%). In contrast, girls were more likely than boys to report feeling safe ‘most of the time’,

‘some of the time’, ‘a little bit of the time’ or ‘never’. This pattern indicates a gradient of perceived safety, whereby girls generally feel less consistently safe than boys in their local area and community.

Graph 7.4.2: Proportion of Year 7–12 students reporting how frequently they feel safe in their local community, by gender



I feel like there may be something or someone in the dark and maybe someone shady will kidnap me or hurt me."

Girl aged 10, metropolitan

7. Safe and supported

These results are consistent with previous SOS21 findings, in which children and young people reported feeling safe most of the time, rather than all of the time; and girls reported feeling safe sometimes or less, far more than boys.

Qualitative findings highlighted both shared and distinctive factors influencing perceived safety among children and young people in their local areas and communities.

For children, the most frequently reported factors contributing to them feeling unsafe were dangerous people, being alone, fear of crime and fear of the dark. In this context, 'dangerous people' are defined as strangers or unfamiliar people who engage in antisocial or unsafe behaviours, such as substance abuse, conflict, or other concerning behaviours witnessed in public spaces.

"Being in a dodgy area. Being without a parent with people I don't trust."

Girl aged 11, outer regional

"Fighting in my local area, yelling in my local area, a person that was in front of the IGA with a knife, and one time I saw kids smashing a bus window with bricks."

Boy aged 11, metropolitan

Young people also identified "dangerous people" as the leading factor contributing to their perceived safety. In conjunction with dangerous people, they frequently reported unsafe environments, fear of crime, domestic safety, substance abuse, tobacco/nicotine use, and racism.

"Where there can be bad people doing bad stuff, including drugs and alcohol, such as trains and buses."

Boy aged 13, metropolitan

"When my mum and step dad argue a lot of the time and make the house a place I don't want to be in."

Girl aged 14, metropolitan

"Random people who start yelling stuff, or people that are racist in public, and sometimes older men being weird around younger girls like me."

Girl aged 14, metropolitan

Notably, girls identified safety concerns at a substantially higher rate than boys across several key areas. For example, girls referenced domestic safety twice as often as boys (228 mentions compared with 97), and similarly reported higher levels of concern regarding dangerous people (857 mentions compared to 492) and unsafe environments (184 mentions compared to 76).

Overall, children's and young people's responses suggest their perception of safety is linked to their immediate surroundings and to situational factors that create feelings of uncertainty and vulnerability. Young people, however, demonstrated more complex understandings of safety than children did, including awareness of a wider range of social, environmental and interpersonal risks.

7. Safe and supported

7.4.2 Safety on public transport

Young people were asked to report on their feelings of safety on public transportation. Around one in two young people (44.6%) reported feeling safe ‘all of the time’.

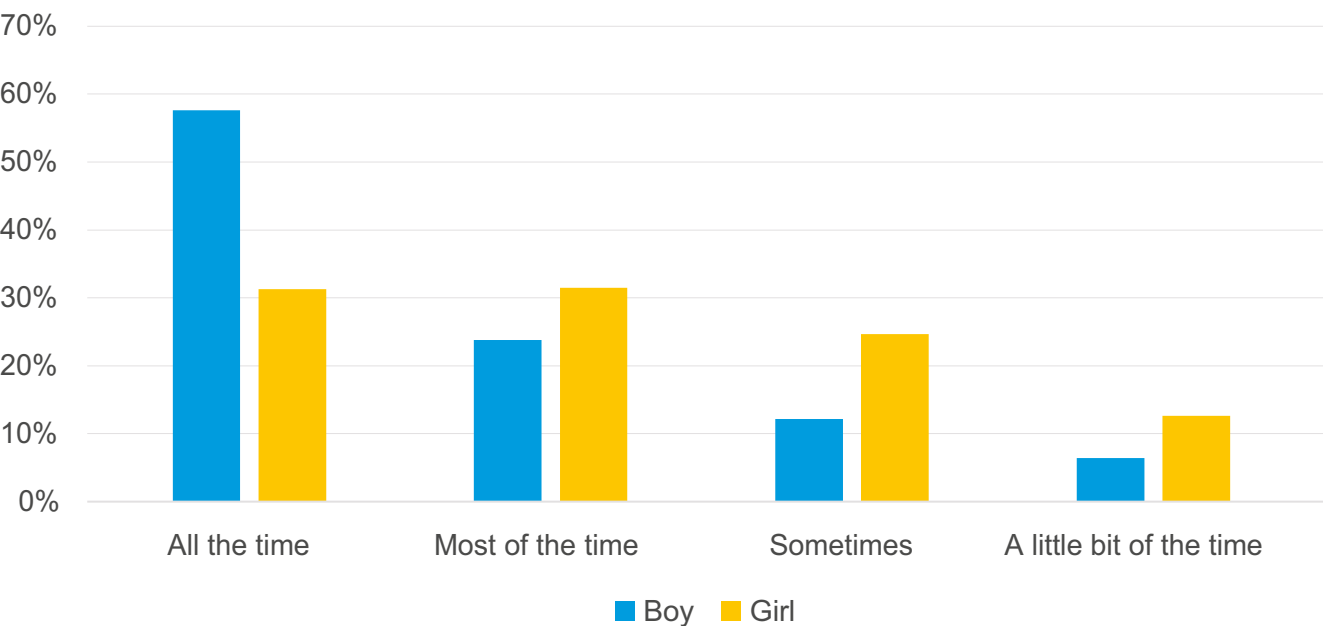
Boys (57.7%) were more likely than girls (31.3%) to report feeling safe ‘all of the time’ when travelling on buses and trains. In contrast, girls were more likely than boys to report feeling safe ‘most of the time’, ‘some of the time’, or ‘a little bit of the time’.

This finding is consistent with a previous SOS21 finding that indicated girls felt safe on buses and trains less often than their male peers. This finding may reflect broader gender experiences in community spaces and public transportation, in which girls and young women tend to fear, anticipate or encounter unwanted attention or threatening and unsafe situations more than boys and young men, particularly as they mature.¹⁰²

Approximately seventy per cent of all secondary school students reported feeling safe on public transportation either ‘all the time’ or ‘most of the time’ (combined 72.6%). However, only 34.8 per cent of Year 12 students reported feeling safe ‘all of the time’ or ‘most of the time’. Year 12 students were also most likely to report feeling safe only ‘a little bit of the time’, indicating overall lower levels of perceived safety compared with students in Years 7–11.

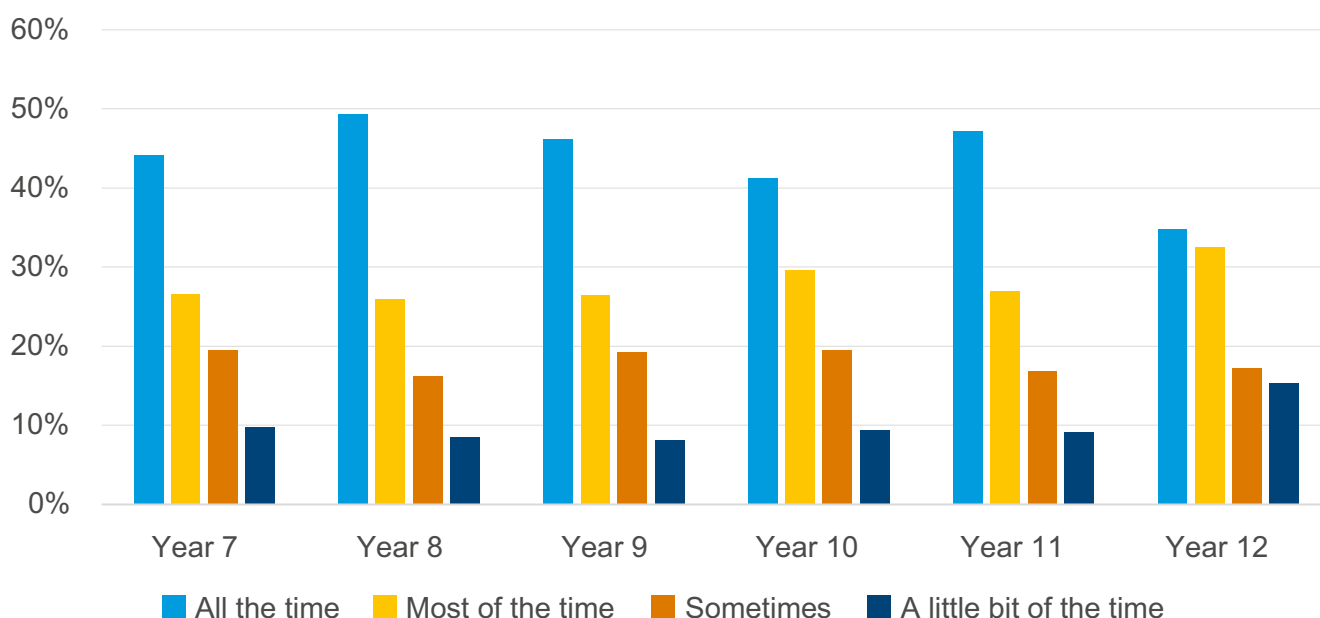
Young people living in the metropolitan (45.1%), outer regional (49.4%) and remote/very remote areas (44.7%) were more likely to report feeling safe on public transportation ‘all of the time’, compared to those living in inner regional areas (35.8%). In contrast, young people living in inner regional areas were more likely to report lower levels of perceived safety, including higher proportions reporting only feeling safe ‘sometimes’ (24.5%) or ‘a little bit of the time’ (10.1%).

Graph 7.4.3: Proportion of Year 7–12 students reporting how frequently they feel safe on public transport, by gender

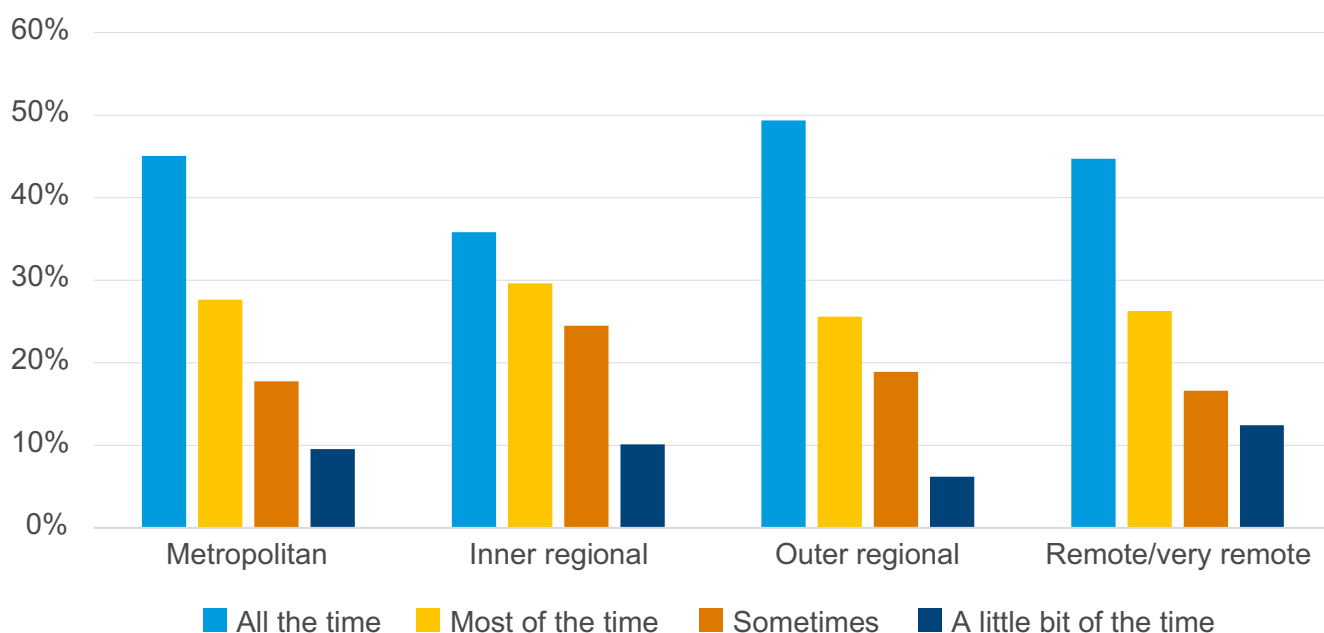


7. Safe and supported

Graph 7.4.4: Proportion of Year 7–12 students reporting how frequently they feel safe on public transport, by school year



Graph 7.4.5: Proportion of Year 7–12 students reporting how frequently they feel safe on public transport, by remoteness



These findings show perceived safety on public transport is generally higher in the metropolitan area and in some outer regional areas than it is for those living in inner regional areas. This disparity may reflect variation in public transportation environments and systems throughout WA, including frequency of service, infrastructure and surveillance/security.¹⁰³

7. Safe and supported

7.4.3 Advice for feeling safe

We asked young people what adults could do to help them feel safer at home, school and in the community. Their responses highlighted several key areas for action.

The most-reported suggestions related to adults engaging respectfully with young people and showing them unconditional positive regard and support. Young people repeatedly described wanting to be taken seriously by adults and feeling accepted by them, regardless of how they were thinking, feeling or behaving. Many young people expressed wanting adults to pay more attention and be active participants in their lives.

“If they communicate with you and support you even if what you are doing is wrong or isn’t the best thing for yourself and they try to understand and help you through rough times.”

Girl aged 16, very remote

“Be kind and more understanding about kids, and just because you’re older don’t shut us down.”

Girl aged 14, metropolitan

“By staying involved in their child’s school so they succeed.”

Boy aged 16, very remote

Young people also said they want to see more community protections in place, including greater security and policing, and a consistent reinforcement of consequences for anti-social behaviour, especially for students causing disruptions in school and school-associated activities and events.

Lastly, many young people emphasised the importance of adults helping them to become informed, so they could develop independence and a greater awareness of the world around them. This included wanting greater transparency about issues affecting them and their households, and honest conversations about some of life’s more challenging realities, instead of being shielded or underestimated by adults.

“Teachers can actually punish kids for bad behaviour. Too many times other students have done something wrong or aggressive, yet teachers do nothing, even worse they get rewarded for their behaviour and it angers me.”

Girl aged 15, metropolitan

“By having security cameras/ protocols, having adults supervising when needed, letting us have some way of being able to communicate with a trusted adult when needed.”

Girl aged 12, metropolitan

“Make sure that we can be independent and know how to handle life and make decisions on our own - equip us with more life skills.”

Girl aged 16, outer regional area

Girls more frequently referenced wanting greater relational and emotional engagement from adults, producing themes such as respectful engagement, acceptance and support from adults, whereas boys tended to indicate that nothing further was needed or could be done (120 mentions compared to 81).

7. Safe and supported

7.5 Experiences of violence

Every child or young person has the right to live free from violence, abuse and neglect.⁶ Most children and young people live in safe and supportive homes, but for some, home can be a place of conflict and distress because of family and domestic violence. Equally, some children and young people are exposed to violence in the community, commonly characterised as violence not perpetrated by a family member which is intended to cause harm.¹⁰⁴

Living with family and domestic violence has short-term and long-term impacts on children and young people's health and wellbeing. These include mental health issues such as anxiety and depression, difficulties at school, behavioural issues including violent behaviour, a higher likelihood of alcohol and drug misuse, and greater risk of homelessness.¹⁰⁵

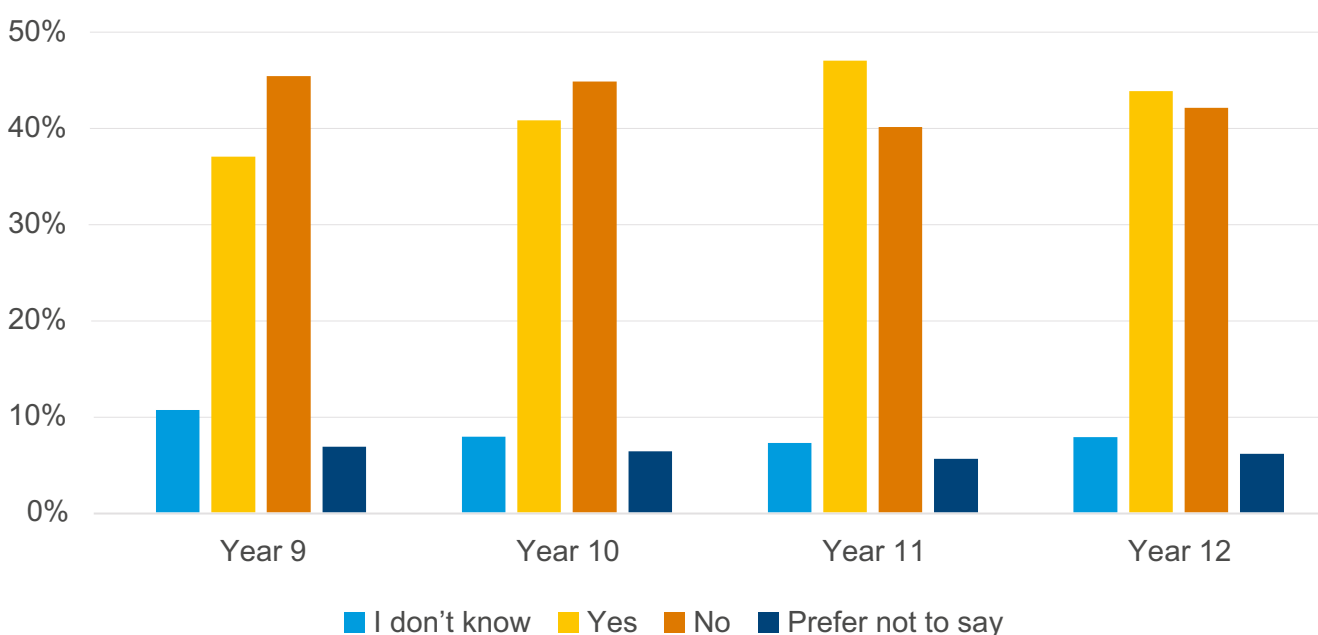
Children and young people who experience violence in the community are also at higher risk of negative long-term outcomes including substance abuse, anxiety-related disorders and violent behaviour. Exposure to violence in the community can also contribute to problems forming positive and trusting relationships and is strongly associated with young people exhibiting conduct problems.¹⁰⁶

7.5.1 Being harmed by someone on purpose

We asked young people in Years 9–12 about their experiences of violence.

Almost one in two said they had been hit or physically harmed by someone on purpose.

Graph 7.5.1: Proportion of Year 9–12 students reporting their experience of being physically harmed by someone on purpose, by school year



7. Safe and supported

Boys (46.6%) were more likely than girls (36.0%) to report being physically harmed.

Young people in inner regional areas (49.0%) were the most likely to report being physically harmed, compared with those in the metropolitan (40.8%), outer regional (36.9%) and remote/very remote areas (38.2%).

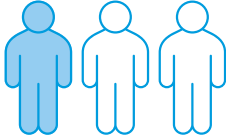
There was a slight age-related increase in the rate of being physically harmed.

These findings have been relatively consistent over the course of all three Speaking Out Surveys, suggesting experiences of physical harm among young people remains a persistent and ongoing issue, rather than an emerging or declining trend.

7.5.2 Frequency of physical harm

Thirty per cent (30.3%) of young people said they had been physically harmed on purpose ‘once or twice’ in the past 12 months,

with 32.3 per cent saying they had been physically harmed three or more times in that period.

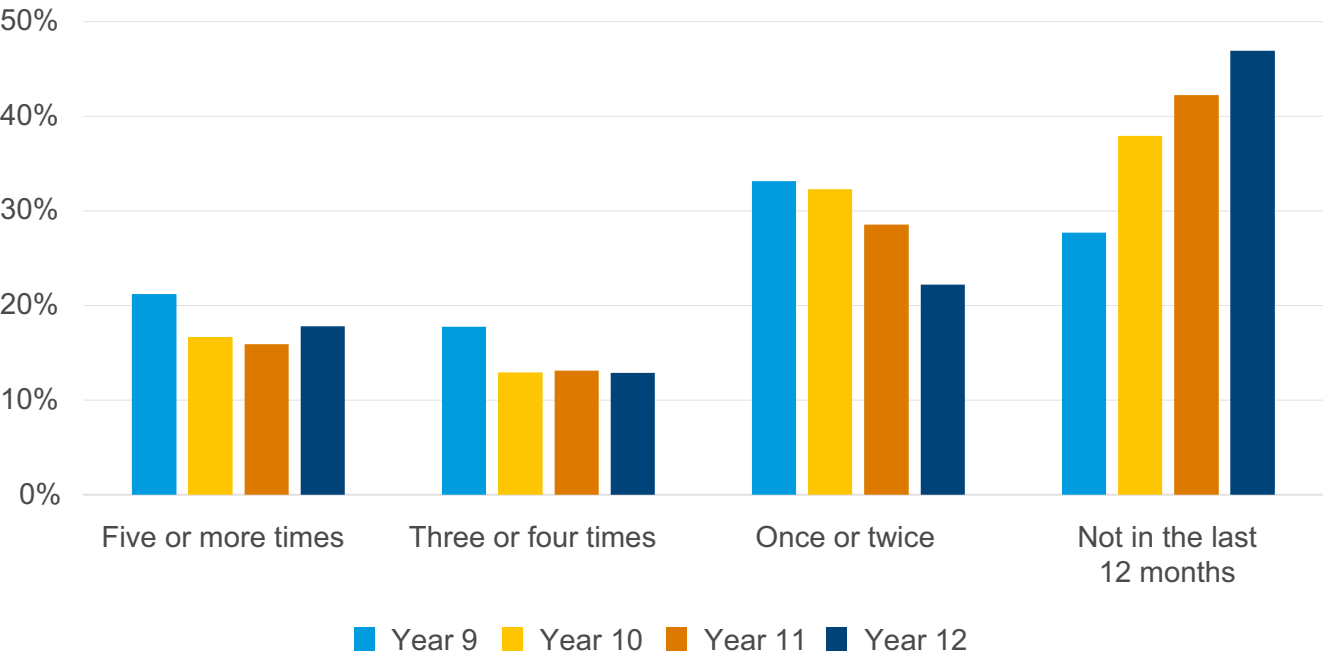


1 in 3

young people said they had been physically harmed 3 or more times in the past 12 months

Year 9 students were consistently more likely to report instances of physical harm compared to those in Years 10–12. Gender had minimal impact on responses, but boys were more likely than girls to report higher rates of physical harm.

Graph 7.5.2: Frequency of Year 9–12 students experiencing physical harm, by school year



7. Safe and supported

7.5.3 Location of physical harm

More than fifty per cent (56.1%) of young people who reported being physically harmed on purpose said that it occurred at home, followed by 40.4 per cent reporting occurrence at school, 20.3 per cent in a public place, 15.6 per cent at a sporting event, 9.4 per cent at a party or social event, 8.2 per cent in their neighbourhood, 8.1 per cent at another location and 7.0 per cent while waiting for or using public transport. These findings highlight home and school as the places where physical harm occurs most frequently.

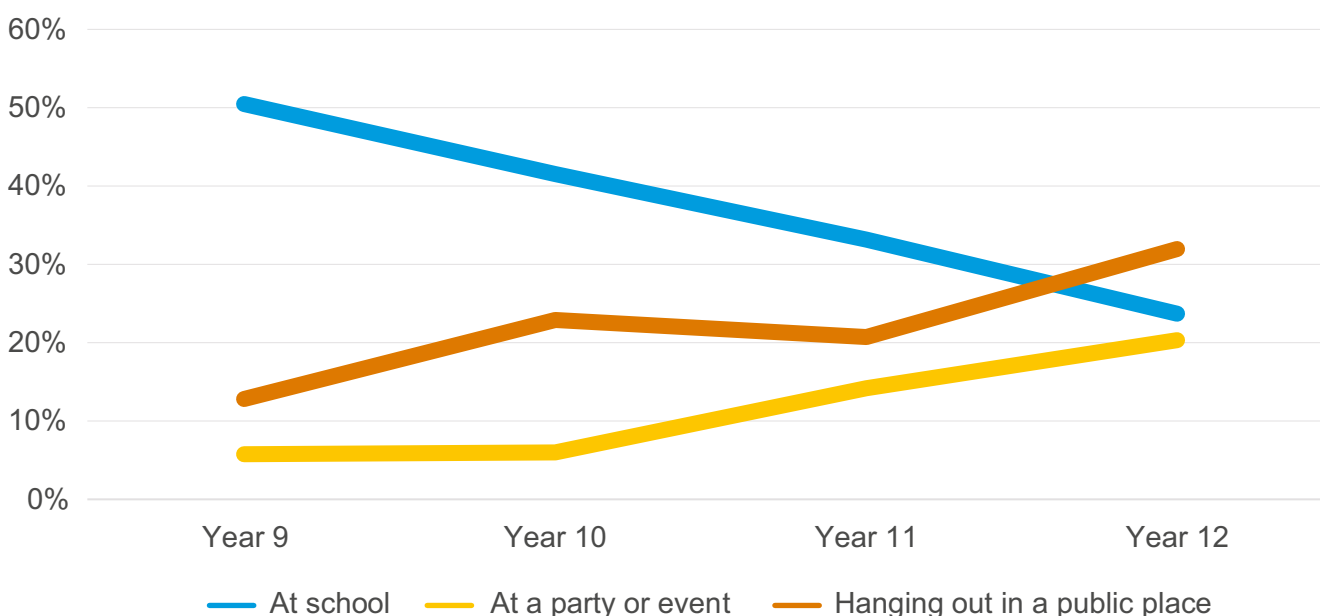
Girls were considerably more likely to experience violence at home (76.7%) compared to boys (42.7%). Conversely, boys were more likely to experience violence at school than girls (boys 50.7% vs girls 24.9%) and at sporting events (boys 21.6% vs girls 6.3%). Unfortunately, there has been no improvement observed since SOS21 in

relation to the proportion of young people, especially girls, experiencing violence in the home.

Remoteness had minimal impact on responses, except for young people in remote/very remote areas who were twice as likely to experience violence at parties (19.8%), compared with those in outer regional (11.2%), inner regional (9.8%) and the metropolitan area (8.8%).

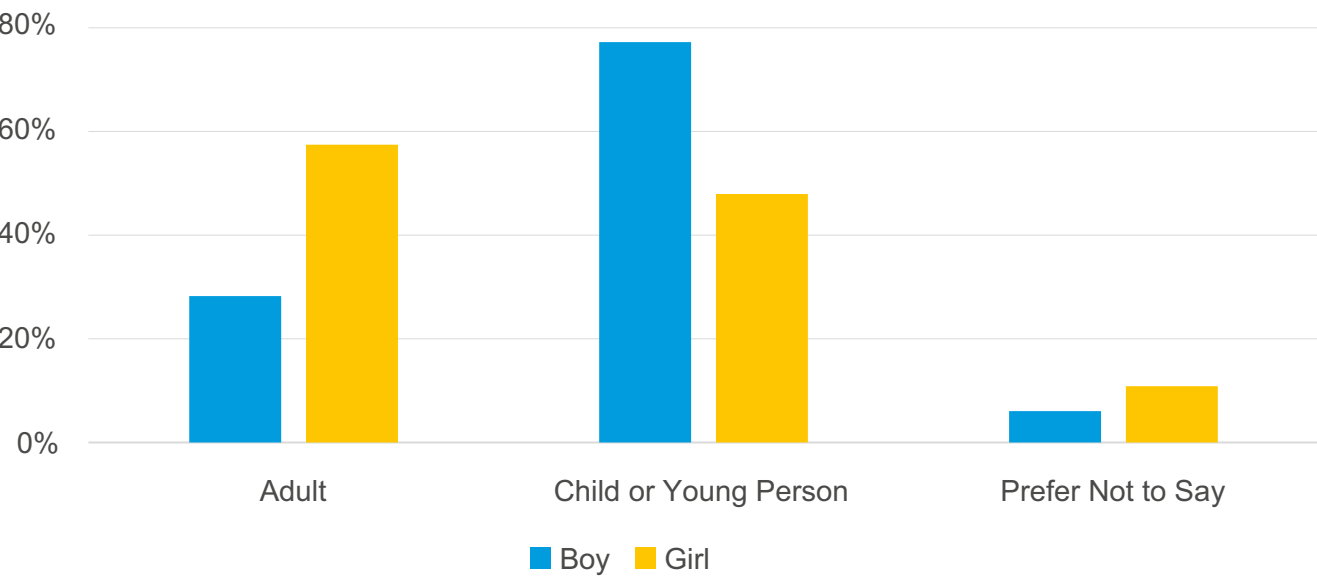
Age-related trends were evident across some locations, including schools, public places and parties. Rates of physical harm at parties or social events and public places increased with age, while rates of physical harm at school decreased with age. This suggests that as young people age, their exposure to physical harm shifts from structured environments, such as school, to more unstructured social or communal settings.

Graph 7.5.3: Proportion of Year 9–12 students who experienced physical harm at school, at a party or event, or in a public space, by school year



7. Safe and supported

Graph 7.5.4: Proportion of Year 9–12 students who experienced physical harm by an adult, child or young person, or preferred not to say, by gender



7.5.4 Persons who caused physical harm

Approximately half of the young people who reported having been physically harmed, said it was perpetrated by either an adult (39.5%) or another child or young person (65.1%), with less than 10 per cent (7.9%) preferring not to say.

Girls were twice as likely to report being physically harmed by an adult, with boys more likely to report being physically harmed by another child or young person.

The likelihood of being physically harmed by an adult appeared to increase with age. 34.1 per cent of Year 9 students reported physical harm by an adult, which steadily increased to 36.9 per cent in Year 10, 44.2 per cent in Year 11 and 52.6 per cent in Year 12. Concerningly, this equates to one in two Year 12 students having experienced violence at the hands of an adult.

7.6 Caring at home

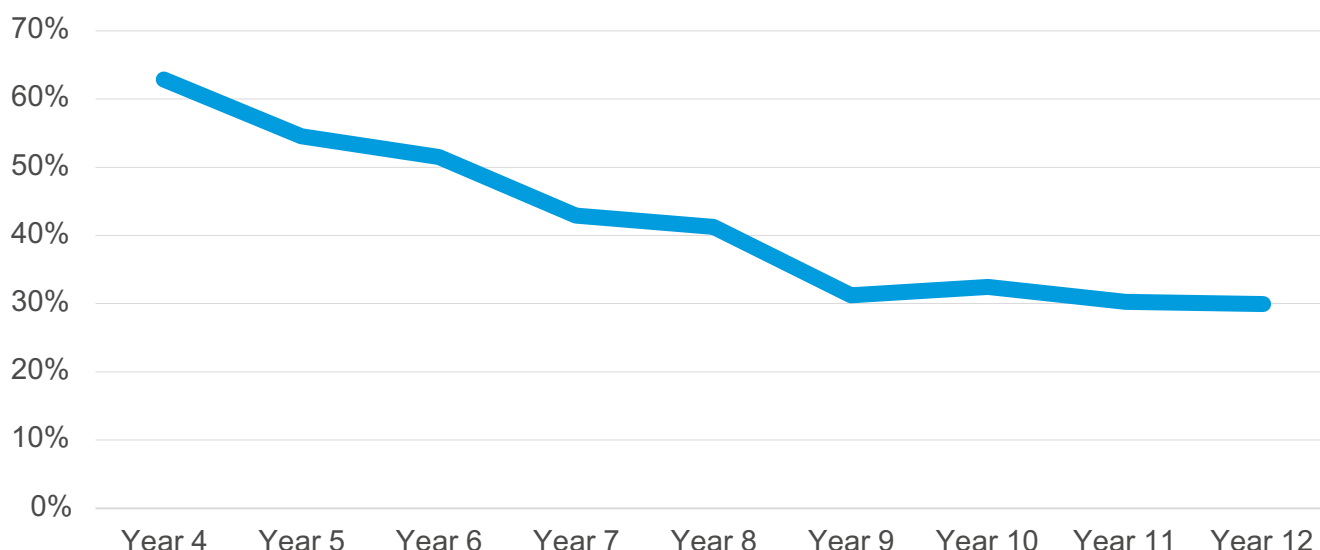
More children and young people are taking on caring responsibilities for other people in their family who might have a disability, mental health challenges, long-term health conditions, a substance dependency, or who might be frail and elderly. Children and young people might not identify as ‘carers’ because they accept these responsibilities as a normal part of family life.

We asked children and young people if they took care of anyone at home. 56.3 per cent of primary students said ‘yes’, while 35.7 per cent of secondary students said ‘yes’.

Almost two-thirds (62.9%) of primary students in Year 4 said ‘yes’, but this decreased to about half of Year 6 students (51.5%). This downward trend continued into secondary school, with 42.9 per cent of Year 7 students and 30.0 per cent of Year 12 students responding ‘yes’.

7. Safe and supported

Graph 7.6.1: Proportion of Year 4–12 students who help take care of someone at home, by school year



Children in very remote areas were much more likely to say they cared for someone (69.5%), compared with those in the metropolitan area (55.9%). For young people, almost half of those in remote and very remote areas said ‘yes’ (46.9%), while young people in outer regional areas were most likely to say ‘no’ (67.8%).

Those who had responded ‘yes’ were then asked follow-up questions about who they cared for and what kind of supports they provided. Students were able to select multiple options.

Children’s care responsibilities were most likely to involve care for their siblings (71.5%), followed by care for a parent (53.1%). All children were equally likely to care for their siblings regardless of gender (girls 73.0% vs boys 70.2%). Boys were slightly more likely than girls to care for a parent (boys 58.3% vs girls 47.5%) or care for a grandparent (boys 22.0% vs girls 16.5%).

Similar trends continued through to secondary school, where boys were more likely to care for their parents (boys 46.7% vs girls 37.1%) or care for grandparents (boys 15.6% vs girls 10.2%). However, girls in secondary school were more likely to help care for a sibling than boys were (girls 74.9% vs boys 66.4%). Young people in remote and very remote areas were almost twice as likely to care for their grandparents (remote areas 27.2% vs metropolitan 12.3%).

As to specific care activities, the most common activities that children and young people performed were entertaining (children 47.6% vs young people 51.7%) and preparing meals (children 47.2% vs young people 61.6%).

To understand young people’s self-perceptions about their caring responsibilities, we asked an additional question about whether they considered themselves to be a ‘Young Carer’, and included a definition adapted from Carers Australia. The definition specified that a

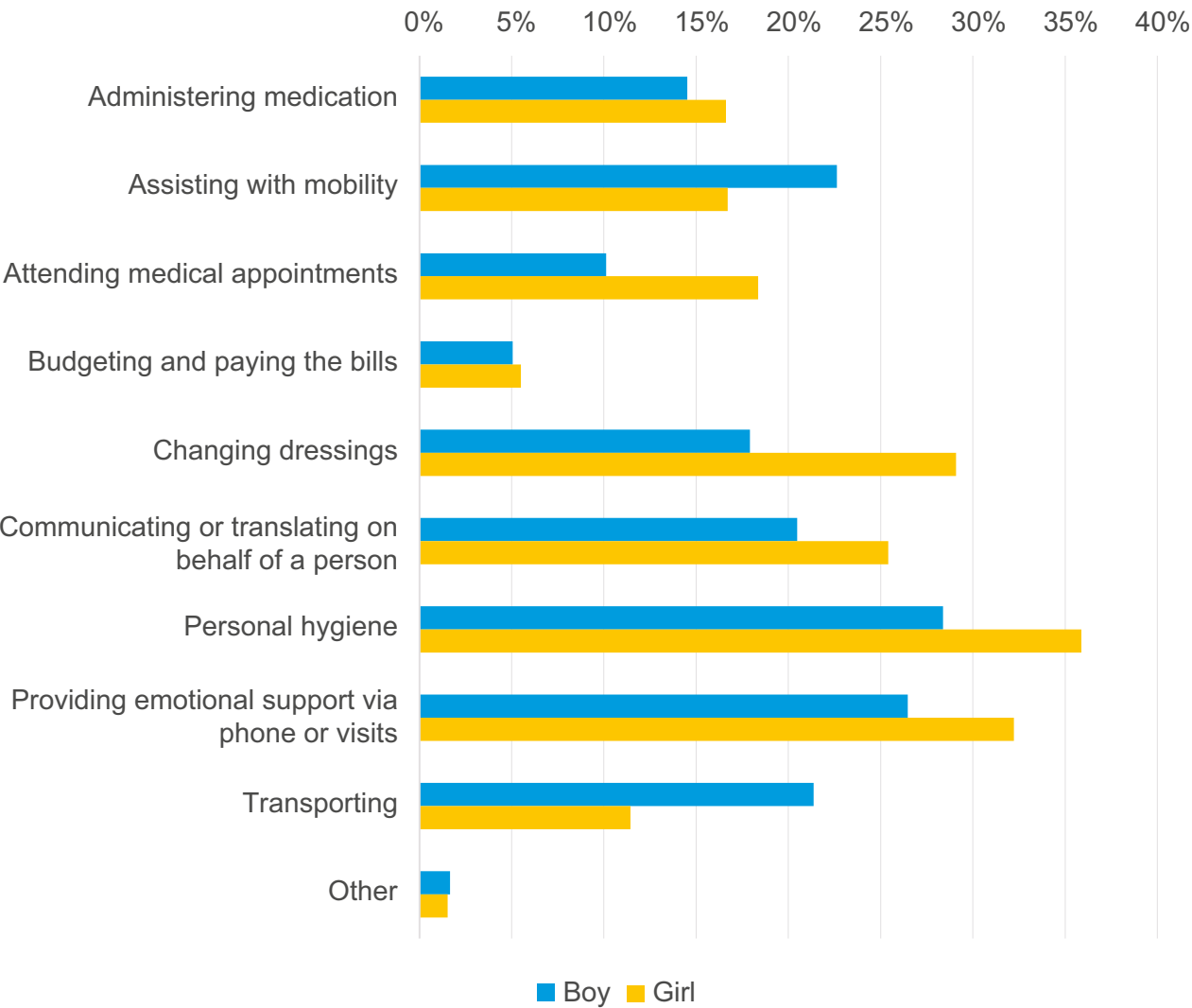
7. Safe and supported

Young Carer is ‘someone under 18 who provides unpaid care and support to family member/s; or friends with a disability; a physical or mental illness; a substance dependency; or someone who is aged’.¹⁰⁷

Overall, 8.1 per cent of young people said they considered themselves to be a Young Carer, and 24.0 per cent were unsure. Personal hygiene and emotional support were the most likely types of care provided, followed by changing dressings and translating. However, there are clear gender differences in the types of supports provided.

It is evident that many children and young people are participating in a range of caring responsibilities for not only siblings, but also their parents and grandparents. While we did not delve into how having caring responsibilities impacts children and young people, we know that care responsibilities can impact many aspects of children and young people’s lives including financial hardships, falling behind at school, and missing out on experiences.¹⁰⁸

Graph 7.6.2: Young carer responsibilities undertaken by Year 7–12 students, by gender



7. Safe and supported

7.7

Summary of key statistics – Safe and supported

7.7.1 Supportive relationships

- 7 in 10 children ‘very much’ agreed that they had an adult who believes they will achieve good things, and they could talk to about their problems. More than 1 in 2 children ‘very much’ agreed they had someone who listened to them.
- **Only 1 in 2 young people ‘very much’ agreed with the statements they have someone to talk about their problems, and who listens when they have something to say.**
- Boys (3 in 5) in secondary school were more likely to have an adult they can talk to about their problems, who listens when they have something to say, compared with girls (2 in 5).
- **9 in 10 children thought their mums cared about them ‘a lot’, and 4 in 5 thought their dads cared about them ‘a lot’.**
- 4 in 5 young people thought their mums cared about them ‘a lot’, and 3 in 4 thought their dads cared about them ‘a lot’.
- **More than 4 in 5 children and young people thought they had enough friends, but only 1 in 2 thought their friends cared about them ‘a lot’.**
- Almost all children (94.8%) said ‘yes’ when asked if they had an adult to talk to about a serious problem, but this decreased by 10 per cent for young people (84.8%).

7.7.2 Material basics

- 7 in 10 children and young people said they ‘always’ have food to eat at home.
- **9 in 10 children and young people said their family had enough money to send them on school excursions or camps.**
- Almost 1 in 5 children and young people said they did not have money for themselves that they could save or spend.
- **1 in 2 in Year 6 students had their own phone, this gradually increased with age. Almost all Year 12 students had phones (96.9%).**
- Children who had more than one home were likely to have a 50/50 split between houses. This decreased with age.
- **4 in 5 (82.6%) children had their own bedrooms, and more than 9 in 10 (92.7%) young people had their own bedroom.**

7. Safe and supported

7.7.3 Safe in the home

- Notably less children said they felt safe at home all the time (69.7%), when compared to young people (92.0%).
- **Almost 1 in 10 children and young people said they were worried 'a lot' about someone fighting in their home.**
- Children were twice as concerned that someone in their family would hurt somebody compared with young people (12.5% vs 5.9%).
- **Children were twice as likely to say they were worried 'a lot' that someone in their family would hurt themselves compared with young people (16.1% vs 6.2%).**
- Children were three times more likely to say they were worried 'a lot' that someone in their family would get arrested than young people (15.9% vs 5.0%).
- **1 in 4 (25.4%) young people reported that they had to spend a night away from their home due to a family problem.**

7.7.4 Safe in the community

- More than 1 in 4 children and young people feel safe in their local area 'all the time'. Almost 1 in 10 felt safe 'a little bit of the time' or 'never'.
- **1 in 10 young people only felt safe on public transport 'a little bit of the time'.**

7.7.5 Experiences of violence

- Almost 2 in 5 (41.3%) young people reported that they had experienced deliberate physical harm.
- **Almost 1 in 3 (32.2%) young people identified that they were harmed three or more times.**
- 1 in 2 (56.2%) young people identified being harmed at home, with girls almost twice as likely to be harmed at home (girls 76.7% vs boys 42.7%).
- **Girls were almost twice as likely to be harmed by an adult (girls 57.0% vs boys 28.0%).**

7.7.6 Caring at home

- 1 in 2 (56.3%) children reported that they helped take care of someone at home, compared to 1 in 3 (35.8%) young people.
- **Children and young people were most likely to help care for a sibling, followed by parents.**
- Care responsibilities mostly involved preparing meals, entertaining, and feeding.
- **8.1 per cent of young people identified themselves as a 'Young Carer', while 24% were unsure if they fitted the definition.**
- 'Young Carers' responsibilities were most likely to involve personal hygiene support, providing emotional support, changing dressings, or helping with communication/translation.

7. Safe and supported

7.8

Safe and supported summary

Most children and young people reported having someone they could talk to about their worries. However, a minority lacked consistent access to supportive adults or experienced a decline in these relationships as they grew older. Within their qualitative comments, they repeatedly mentioned a desire for better communication with adults, characterised by honesty, respect and being taken seriously.

Clear differences emerged between groups. Specifically, girls consistently fared worse than boys in relation to feeling safe and secure at home and in their community, and in their relationships with the adults and friends in their lives. When exploring differences based on remoteness, children in regional and remote areas faced structural barriers to connection, fewer social opportunities and reduced access to essential resources such as digital devices and transport. These geographic disparities were also reflected in higher levels of worry, lower feelings of safety and more limited access to support services.

Across the state, most children had reliable access to material basics and food, although a small proportion continued to experience food insecurity or financial hardship. Reports of family conflict, instability and nights spent away from home suggest that some young people face heightened risks of housing insecurity and homelessness.

Perception of safety within their community also varied among young people. Once again, girls felt less safe in their local area and on public transport. A minority of young people did not feel safe on public transport, and many called for stronger community protections, consistent consequences for antisocial behaviour and improved safety measures in schools and public spaces. Overall, their responses show that feelings of safety are closely tied to immediate surroundings, stability at home and the availability of trusted adults.



Learning and participating

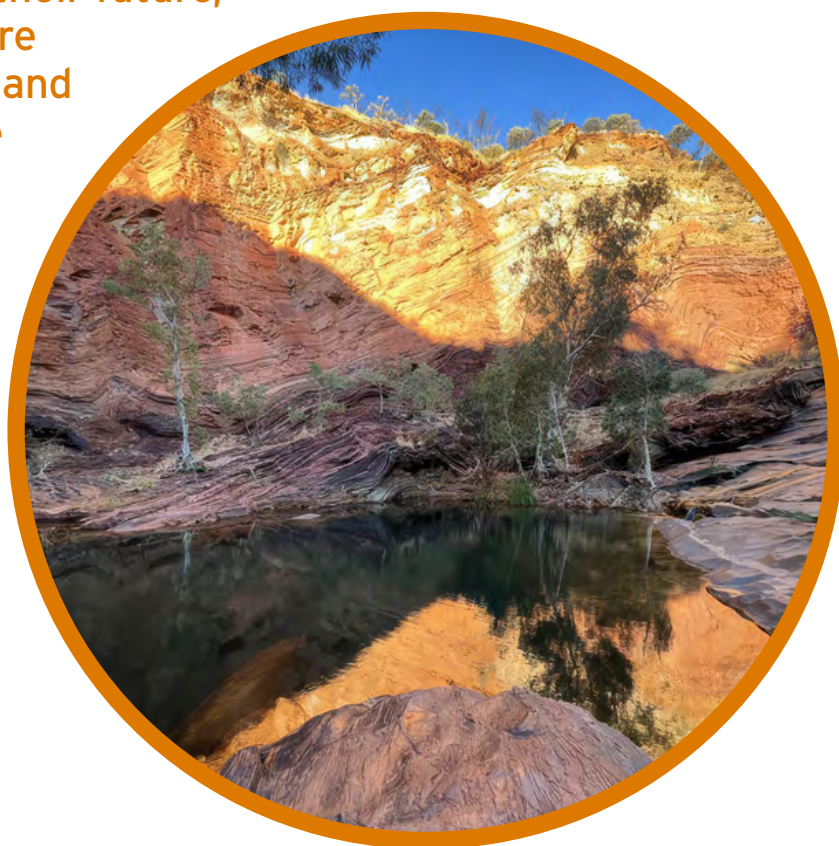
8



8. Learning and participating

Children's and adolescents' long-term wellbeing is strongly shaped by their school experiences, their passion for and interest in learning, and the degree of autonomy they are allowed as they grow. The key aims of this domain are for young people to stay engaged in their education, receive the support they need, feel optimistic and prepared for their future after leaving secondary school, and have genuine opportunities to express their views and be taken seriously.

To understand these aims, students were asked a range of questions relating to the quality of their relationships at school, their sense of belonging, their sense of achievement and the support they receive with learning. Questions relating to their experiences of bullying were included as bullying can significantly affect wellbeing. Students in secondary school were also queried on how well they think school prepared them for their future, the extent to which they are developing independence, and whether they feel they are given a say in decisions that affect their future.



8. Learning and participating

8.1 Attendance

Regular attendance and engagement in school is important for the intellectual and psychosocial development of children and young people. It meaningfully contributes to both their immediate educational outcomes, as well as outcomes across their life course.

While engagement with school and learning is a multifaceted concept, absence can be considered a marker for disengagement.

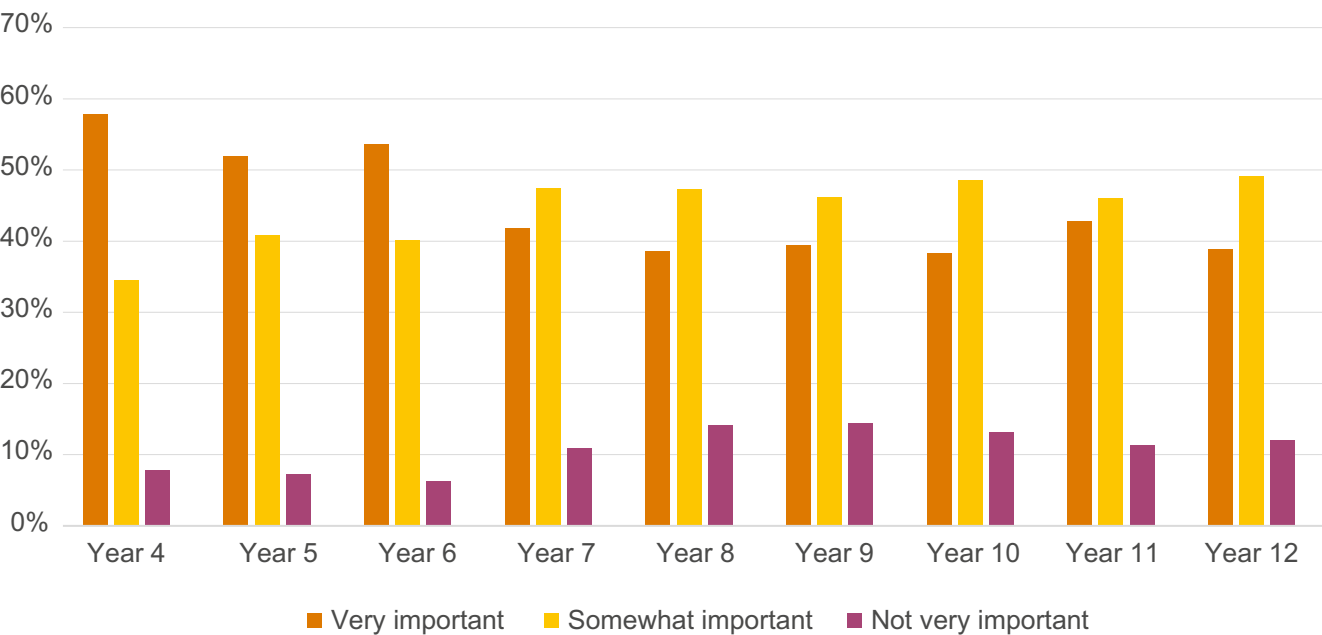
8.1.1 School attendance

We asked children and young people how important it was for them to attend school every day. Overall, most felt daily school attendance was either ‘very important’ or ‘somewhat important’, with less than 12 per cent rating daily school attendance as ‘not very important’. Perceived level of importance appeared to decline between primary school and secondary school. More than one in two children (54.4%) considered

daily school attendance as ‘very important’, compared to only 39.9 per cent of young people. This indicates that attitudes towards daily school attendance shift as students age. This finding is consistent with SOS21 that reported children in Years 4 to 6 (64.7%) were more likely than young people in Years 7 to 12 (48.9%) to consider daily school attendance as ‘very important’.

Young people in the metropolitan area (41.5%) were more likely than young people in inner (28.6%) and outer regional areas (37.8%) and remote areas (33.8%) to report daily attendance as ‘very important’. The attitudinal differences between the metropolitan area and remote areas may reflect broader place-based issues, including school resourcing, teaching capacities, and other practical challenges often faced in regional areas, such as access to public transport, commuting distances and pre/post school care services.¹⁰⁹

Graph 8.1.1: Proportion of Year 4–12 students reported views on the importance of attending school daily, by school year



8. Learning and participating

8.1.2 Suspension

To get a better understanding of student attendance at school, we also asked students whether they had been suspended from school for doing something wrong. Overall, 91.4 per cent of children and 81.3 per cent of young people reported having never been suspended. However, 8.6 per cent of children and 18.7 per cent of young people reported having been suspended at least once; indicating the rate of suspension increases with age. For instance, the likelihood of suspension appeared to steadily increase throughout secondary school from Year 7 (10.1%) to Year 12 (29.2%).

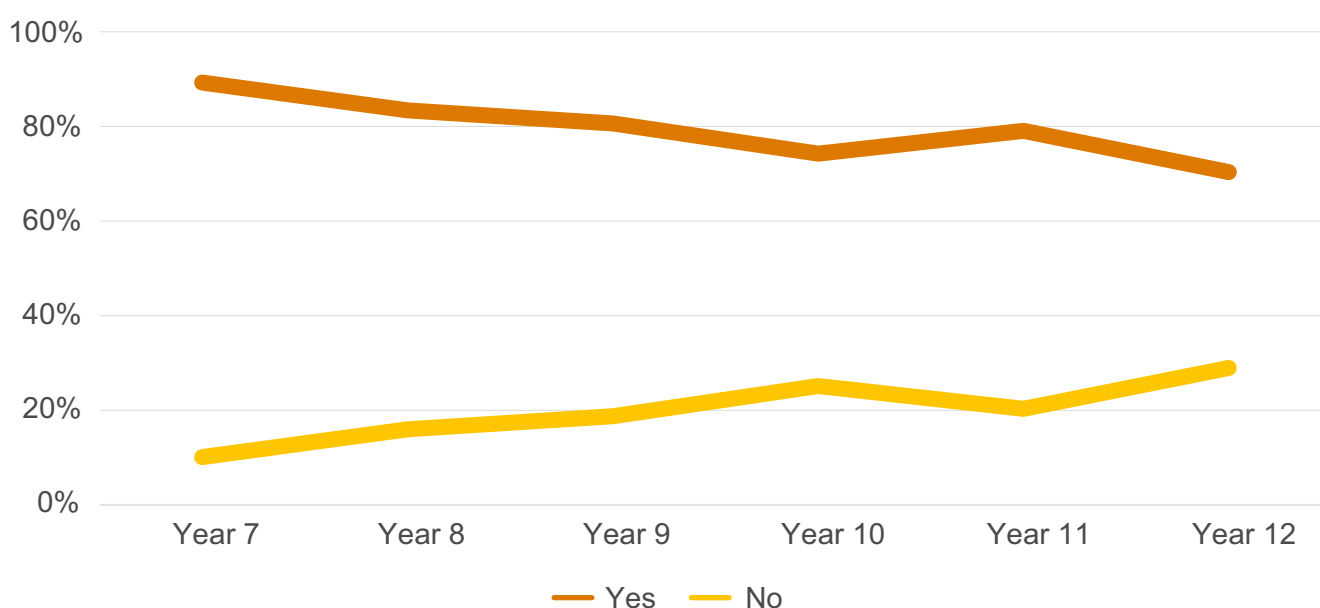
This age gradient is consistent with evidence that suggests antisocial and risk-taking behaviours are more likely to emerge during adolescence than at other life stages.¹¹⁰ Young people are particularly sensitive to peer influence, with peer dynamics strongly linked to behaviours, such as aggression and delinquency.¹¹¹

Together, these socio-emotional and developmental changes may contribute to the higher rates of suspensions as students age and transition through their teenage years.

Gender differences also factored into the suspension rates. Among children, boys (12.9%) were far more likely than girls (4.3%) to report having been suspended. A similar pattern emerged among young people, where boys were almost twice as likely (24.2%) as girls to report having been suspended (13.2%).

Children living in very remote areas reported higher rates of suspension (21.7%), compared to children living in remote (9.6%), outer (12.3%) and inner regional (9.8%) and metropolitan areas (7.8%). Similarly, young people living in remote/very remote (28.4%) and inner regional (33.6%) areas reported higher rates of suspension compared with young people living in outer regional (20.0%) and metropolitan areas (16.7%).

Graph 8.1.2: Proportion of Year 7–12 students who had been suspended, by school year



8. Learning and participating

8.1.3 Number of days suspended

We posed an additional question to young people who had been suspended, asking how many days altogether they had missed in the past 12 months due to suspension. Within that cohort, more than half (55.8%) reported having been suspended for 10 or more days.



More than 1 in 2

**young people who had been
suspended at least once, missed
10 or more school days in the
past 12 months**

Interestingly, among the young people who reported having been suspended, girls (60.6%) were more likely than boys (51.4%) to report missing a total of 10 or more school days due to suspension within the past 12 months. This is an important finding as it is inconsistent with what is expected based on the previous findings where boys were more likely to be suspended than girls. It suggests that while it may be more common for boys to be suspended, girls are more likely to experience suspensions that result in a greater number of days missed. However, as the survey question did not ask students to specify the duration of each suspension, it is not possible to determine whether these results indicate that girls who are suspended receive suspensions with greater frequency or severity than boys. Nonetheless, according to regulation 45 of the *School Education Regulations 2000*, a single suspension of 10 days or longer is classified as a “serious breach”.¹¹²

These gender differences may reflect socio-emotional development and peer socialisation factors that intensify during adolescence. Data from the 2021 and 2025 Speaking Out Surveys consistently shows that secondary school girls report poorer wellbeing and mental health concerns than boys. While this does not directly translate to higher rates of suspension, it may reflect gender differences in how distress is expressed by students and recognised by teachers in schooling environments.¹¹³

The number of school days missed due to suspensions also varied by remoteness. Young people living in the inner (69.2%) and outer regional areas (65.1%) were more likely to report having missed 10 or more days due to suspension, compared to students living in the metropolitan area (53.6%) and remote/very remote areas (42.1%).

These findings suggest that suspension practices may differentially impact boys and girls, as well as students from regional and remote areas. These impacts not only relate to the likelihood of suspension, but also in the potential severity and cumulative impact of suspensions. This is noteworthy, as suspension can serve as both a consequence and predictor for disengagement with school,¹¹⁴ and can potentially compound attendance-related challenges, including academic success, relationships with teachers and school administrations, and broader psychosocial outcomes.

8. Learning and participating

8.2 Liking school and sense of belonging

Sense of belonging is a basic human need and is critically important to a child or young person's healthy physical and mental development. Sense of belonging at school can be referred to as 'the extent students feel personally accepted, respected, included and supported by others in the school environment'.¹¹⁵

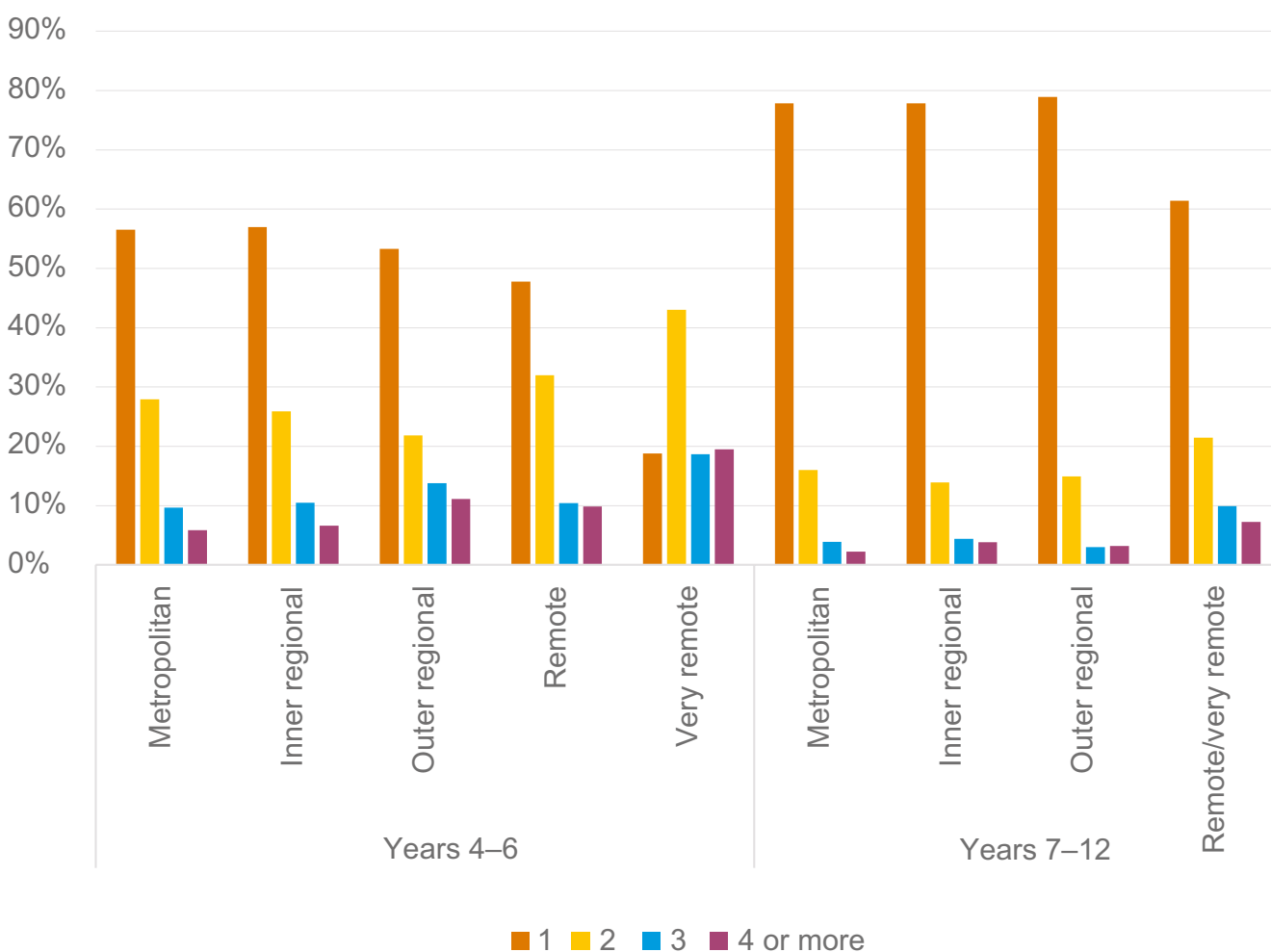
Research suggests that sense of belonging at school and the degree to which students

like school, has an important influence on their academic motivation, engagement and participation, and that unless students identify well with their schools, their educational outcomes will be limited.¹¹⁶

8.2.1 Number of schools

A little over half (55.2%) of primary school students reported having only attended their current school, with 27.8 per cent having attended two schools, 10.2 per cent attending three schools, and 6.7 per cent attending four or more schools.

Graph 8.2.1: Number of schools attended by Year 4–12 students, by year group and remoteness



8. Learning and participating

More than seven in 10 secondary school students (77.2%) reported having only attended their current secondary school, with 16.0 per cent having attended two schools, 4.1 per cent attending three schools, and 2.7 per cent attending four or more schools.

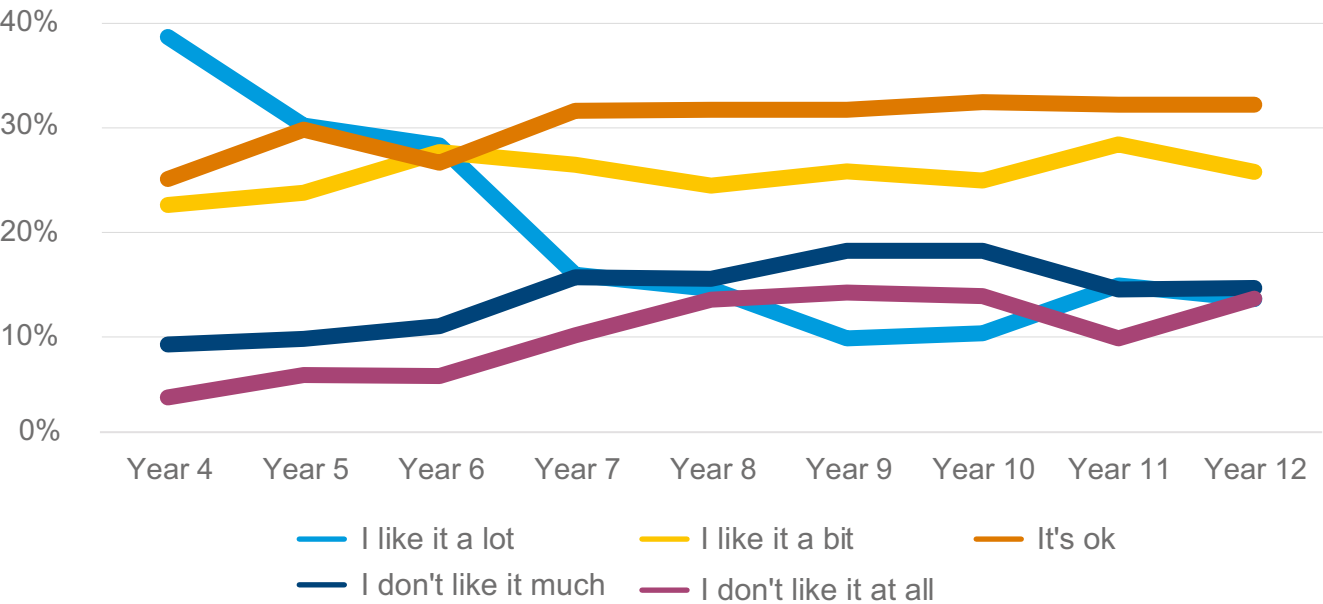
Both primary and secondary school students in remote/very remote areas were considerably more likely to have changed school multiple times and less likely to have attended just one school. The fact students in remote/very remote areas were more likely to attend multiple schools, may reflect the way education is delivered in regional and remote/very remote areas where students often need to change schools to access different year levels, modes of delivery, or access suitable educational programs, such as senior secondary subjects (Year 11 and 12), vocational education pathways, or specialty learning support.¹¹⁷

8.2.2 Attitudes toward school

Around half of primary school students reported liking school either ‘a lot’ (32.4%) or ‘a bit’ (24.7%); whereas around half of secondary school students reported liking school ‘a bit’ (25.9%) or felt it was ‘OK’ (32.0%). Approximately fifteen per cent of primary school students reported not liking school much (10.1%) or at all (5.6%), compared to the nearly thirty per cent of secondary school students who reported not liking school much (16.5%) or at all (12.6%). Overall, these findings suggest that students dislike of school increases with age.

In primary school, girls were more likely to report liking school ‘a lot’ (34.9%) compared to boys (30.0%). This pattern reversed in secondary school, where girls were more likely to dislike school (34.5% – combined ‘I do not like school much’ and ‘at all’) compared to boys (23.8%); while boys were more likely to like school (44.7% – combined

Graph 8.2.2: Proportion of Year 4–12 students reporting different attitudes towards school, by school year



8. Learning and participating

'I like school a lot' and 'a bit') compared to girls (33.1%). These findings may reflect changing social, academic and development pressures experienced during adolescence and the transition from primary to secondary school, particularly in how boys and girls experience the schooling environment.¹¹⁸

Student attitudes towards school were consistent across remote demographics.

8.2.3 Belonging at school

8.2.3.1 Sense of belonging

Around half of all children and young people agreed school was a place they belonged; however, the proportion of students who 'strongly agreed' with this statement appeared to decrease with age.

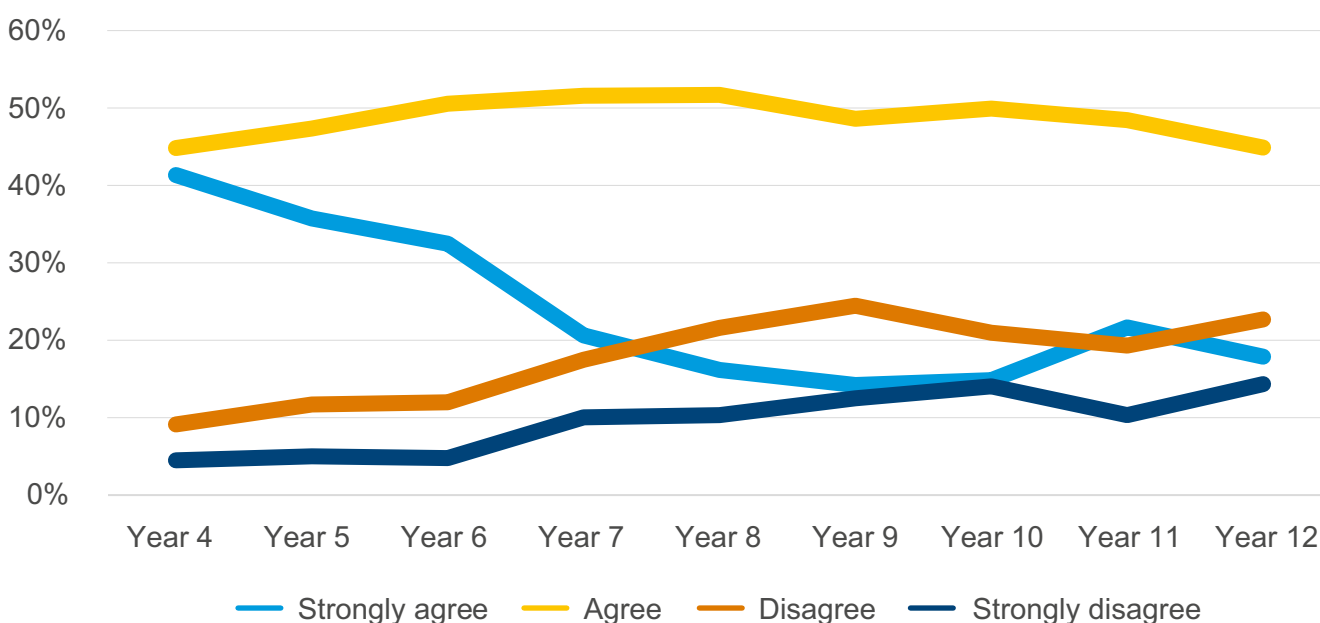
Primary school students from inner regional areas were most likely to 'strongly agree' that school was a place they belonged (40.3%), compared to students from metropolitan

(36.4%), outer regional (36.7%), remote (37.3%) and very remote (28.2%) areas.

Secondary school students from inner regional areas were least likely to 'strongly agree' that school was a place they belonged (10.7%), compared to students from metropolitan (18.2%), outer regional (15.1%) and remote/very remote areas (16.8%). Young people from inner regional areas were also most likely to strongly disagree (19.7%) compared to students from metropolitan (10.8%), outer regional (13.9%) and remote/very remote (13.3%) areas.

While primary school children provided relatively similar responses across gender, secondary school student responses were markedly different. Boys were twice as likely to 'strongly agree' that school was a place they belonged (23.5%) compared to girls (11.0%); and girls were more likely to 'strongly disagree' (14.7%) than boys (8.9%).

Graph 8.2.3: Proportion of Year 4–12 students agreement with the statement school is a place I belong, by school year



8. Learning and participating

8.2.3.2 Happiness

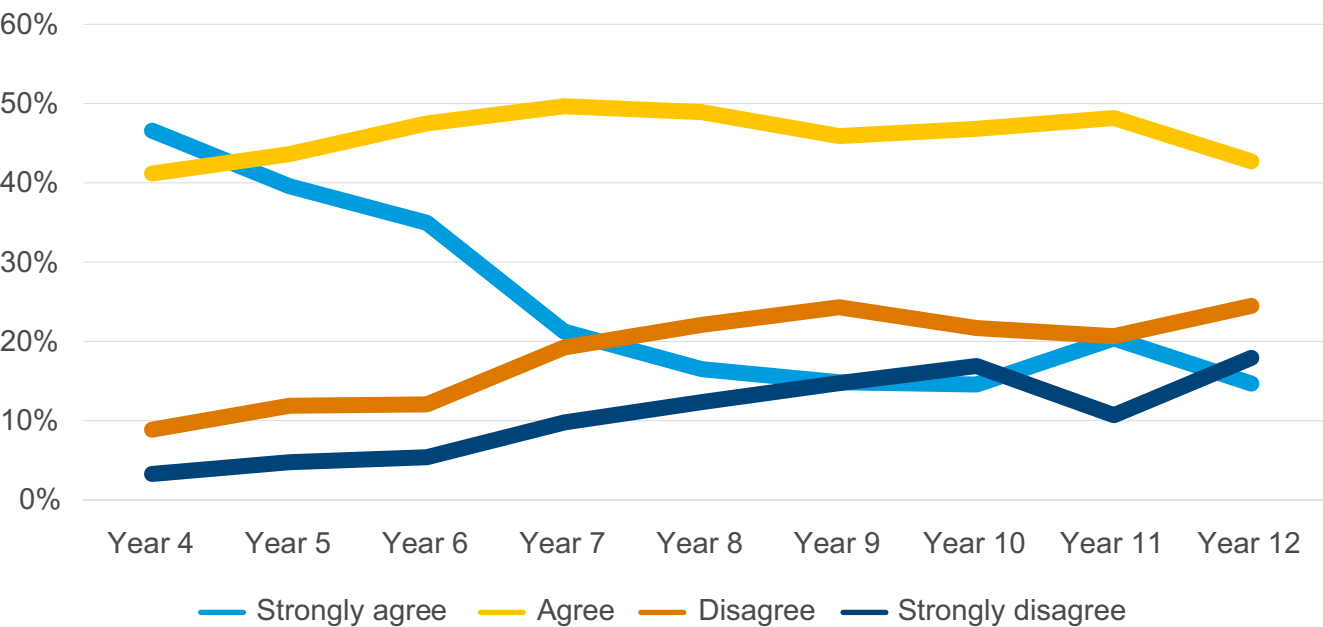
More than four in five (combined 84.6%) primary school students either ‘strongly agreed’ (40.4%) or ‘agreed’ (44.2%) that they felt happy at school.

Almost two in three (combined 64.8%) secondary school students either ‘strongly agreed’ (17.2%) or ‘agreed’ (47.6%) that

they felt happy at school, but forty per cent (combined 39.8%) ‘disagreed’ (21.8%) or ‘strongly disagreed’ (13.4%). This roughly equates to one in three young people who do not feel happy at school.

Findings also showed a clear age-related trend, where students feel less happy at school as they age.

Graph 8.2.4: Proportion of Year 4–12 students agreement with the statement school is a place I feel happy, by school year



8. Learning and participating

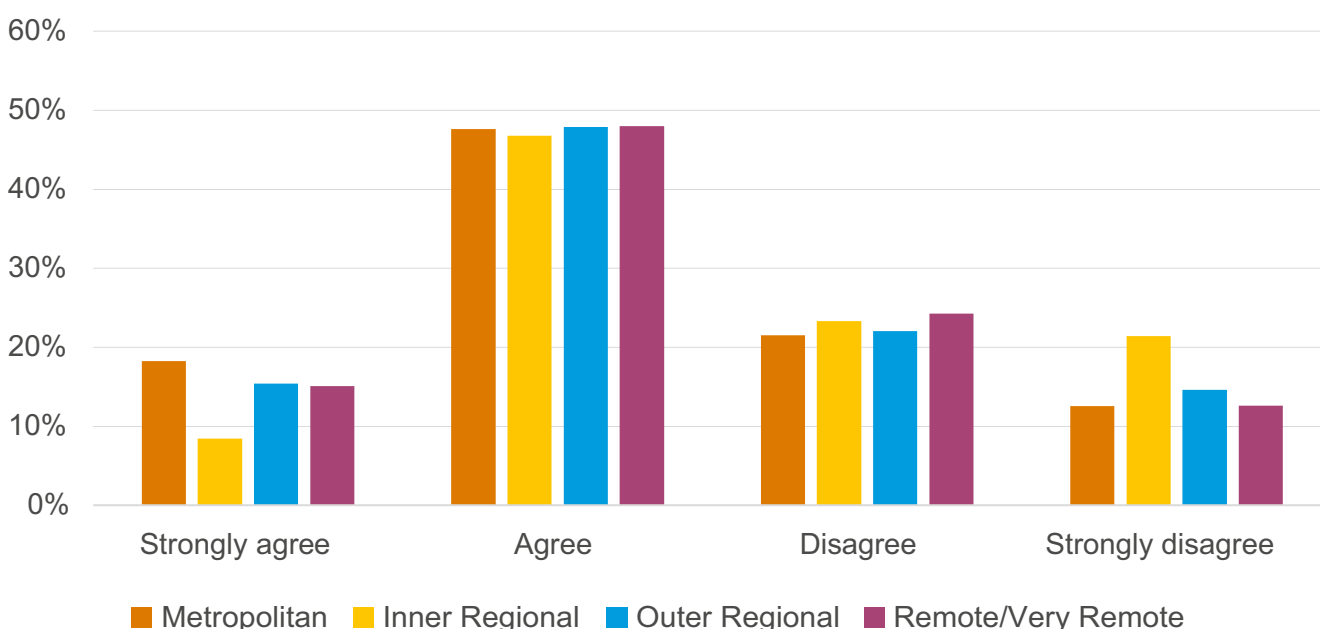
In primary school, students in very remote areas were notably less likely to 'strongly agree' that they felt happy at school; however, this was largely offset by higher rates of agreement compared to students in other locations, suggesting similar overall levels of happiness at school.

In secondary school, students from inner regional areas were least likely to 'strongly

agree' that they felt happy at school, compared to those from metropolitan, outer regional and remote/very remote areas.

Secondary school boys (22.5%) were more than twice as likely as girls (11.7%) to 'strongly agree' they felt happy at school, while girls (17.0%) were almost twice as likely as boys (9.9%) to 'strongly disagree' they felt happy at school.

Graph 8.2.5: Proportion of Year 7–12 students agreement with the statement school is a place I feel happy, by remoteness



8. Learning and participating

8.2.3.3 Enjoyment of learning

Differences were evident across school years, with children and young people reporting less enjoyment of learning as they progressed through school. Among primary school students, responses were generally more positive, with the majority reporting they ‘strongly agreed’ or ‘agreed’ that they liked learning at school. However, rates of strong agreement steadily declined from Year 4 to Year 6, alongside increasing rates of disagreement.

This shift was more pronounced among secondary school students. While ‘agree’ remained the most common response, fewer students reported strong agreement and substantially higher proportions reported neutral or negative responses. Overall, secondary school students were more likely to express mixed levels of enjoyment compared to primary school students,

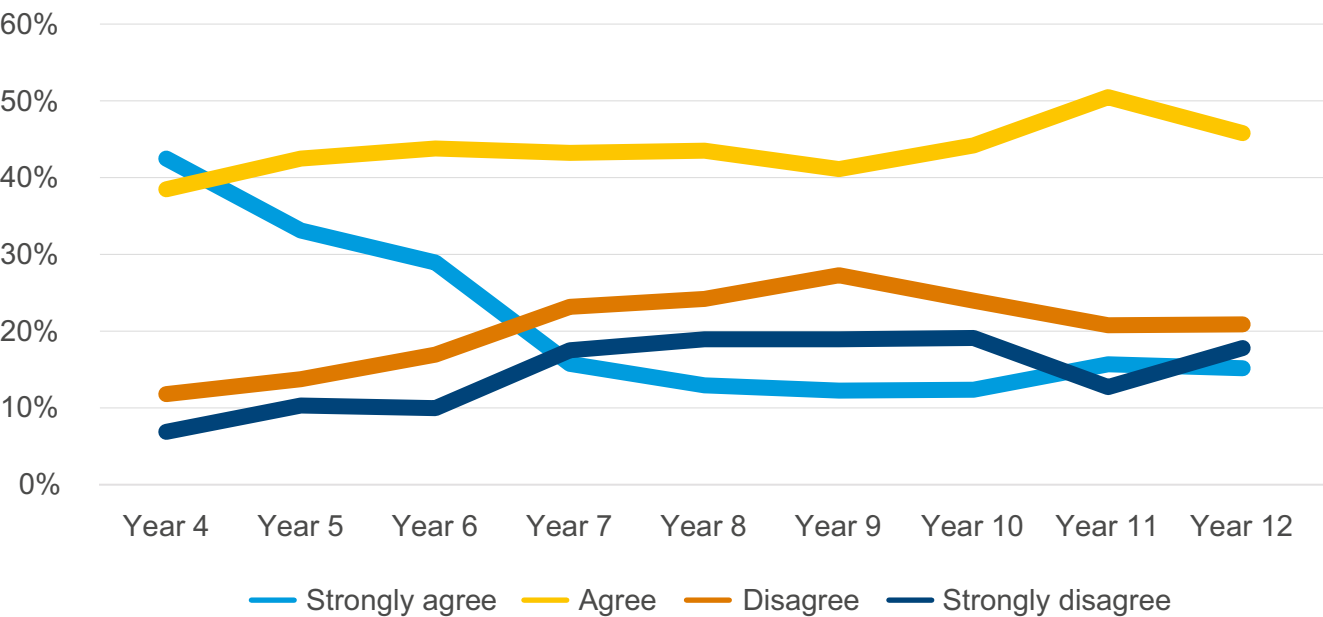
indicating that student enjoyment of learning declines as they age and transition into secondary school.

8.2.3.4 Peer relationships

Primary school students reported generally consistent experiences regarding how they got along with their classmates, with 64.5 per cent reporting they ‘usually’ got along with classmates and 30.4 per cent reporting they got along ‘sometimes’. Only a small minority (combined 5.1%) reported they got along with classmates ‘hardly ever’ or ‘not at all’.

Secondary school students reported similar distribution of responses, but some variation was evident across year groups. Year 9 students in particular reported less positive interactions with their peers, compared to other year groups.

Graph 8.2.6: Proportion of Year 4–12 students agreement with the statement I like learning, by school year



8. Learning and participating

Both children and young people from inner regional and remote/very remote areas reported getting along with their classmates less than students from metropolitan and outer regional areas.

Gender differences were evident across primary and secondary school students, with boys reporting better relationships with their classmates than girls. In both groups, boys were more likely than girls to report 'usually' getting along with their classmates, while girls were more likely than boys to report they 'sometimes' or 'hardly ever/not at all' got along with classmates.

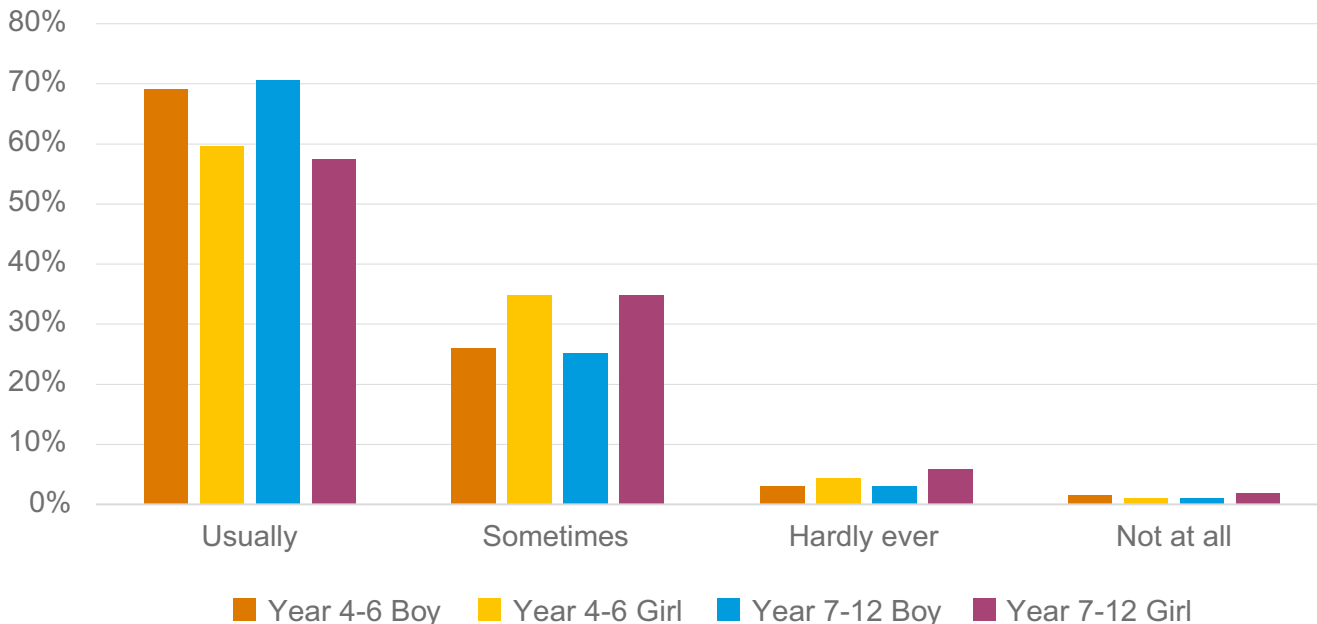
These findings are largely consistent with SOS21, indicating that key patterns

in students' schooling experiences have remained relatively stable over time.

While children and young people generally report positive school experiences, their attitudes toward school across several key measures, including liking school, belonging at school, feeling happy at school, enjoying learning at school, and getting along with classmates, decline with age, particularly throughout their secondary school years.

Gender differences have also persisted since SOS21, and in some instances appear to have widened, with girls continuing to report lower levels of enjoyment, happiness and positive peer interactions at school compared to boys.

Graph 8.2.7: Frequency of Year 4–12 students getting along with classmates, grouped by year group and gender



8. Learning and participating

8.2.4 Supportive teachers

8.2.4.1 Teacher relationships

Nearly seventy per cent of primary school students (68.7%) reported ‘usually’ getting along with their teachers, compared to 54.8 per cent of secondary school students. Between Years 4 and 9, results show a gradual decline in students reporting that they ‘usually’ got along with their teachers, which then plateaus through lower secondary school and increases in upper secondary school.

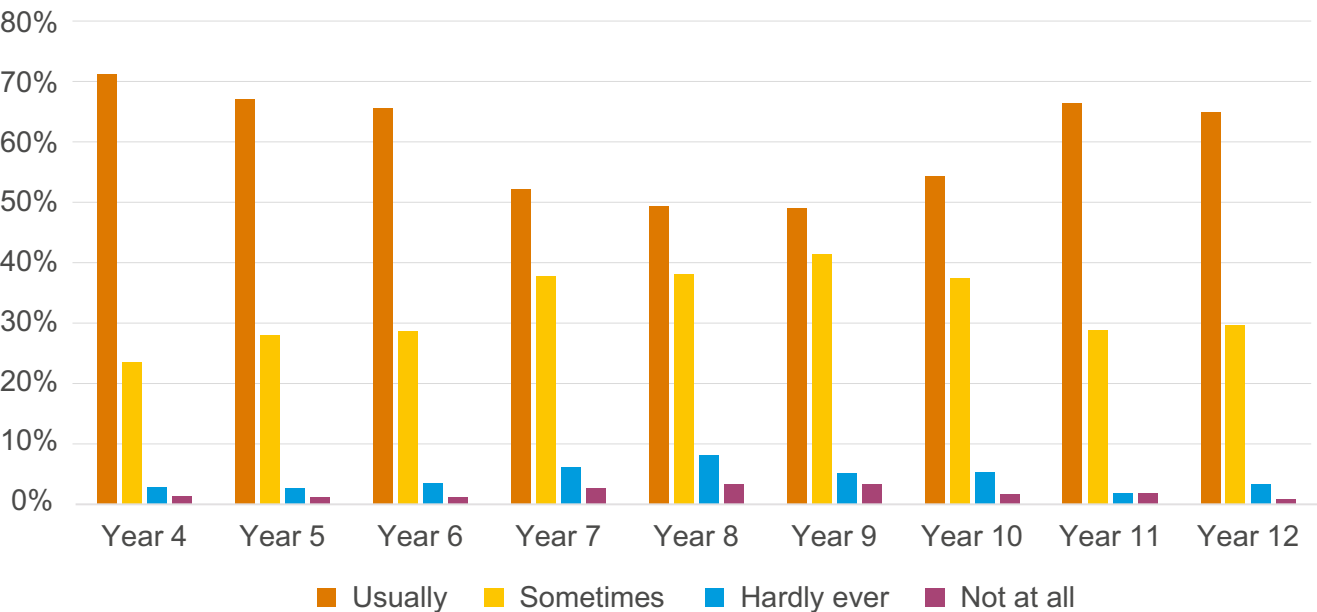
This pattern suggests that student relationships with teachers weaken during their transition from primary school to secondary school before stabilising and improving in later years. This pattern may further reflect typical developmental changes occurring in early adolescence, where young people become more independent and are increasingly influenced by their peers rather than teachers and other adults.¹¹⁹

Primary school girls (73.1%) were more likely than boys (64.2%) to report ‘usually’ getting along with their teachers; however, these gender disparities reduced in secondary school (girls 53.5% vs boys 56.0%).

Primary school students in very remote areas (58.8%) were notably less likely to report ‘usually’ getting along with their teachers compared to students from metropolitan (69.0%), inner regional (69.8%), outer regional (64.9%) and remote (70.9%) areas.

Similarly, secondary school students from remote/very remote areas (50.0%) were less likely to report ‘usually’ getting along with their teachers compared to students from metropolitan (54.8%), inner regional (59.2%) and outer regional (52.2%) areas. These results indicate slightly lower levels of positive teacher-student interactions in remote/very remote areas.

Graph 8.2.8: Frequency of Year 4–12 students getting along with teachers, by school year



8. Learning and participating

8.2.5 Teacher care

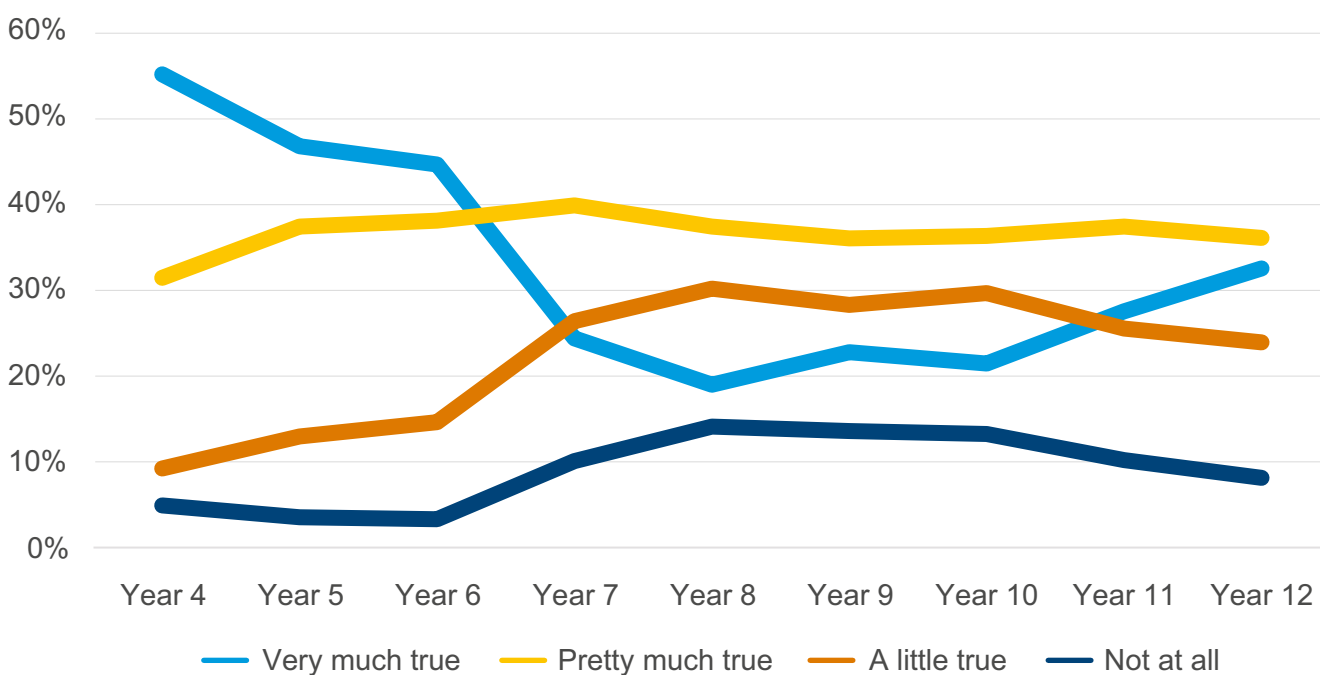
Most children and young people felt their teachers cared about them.

Year 7 and 8 students showed a noticeable drop in selecting 'very much true', with this response gradually increasing again by Year 12. This pattern suggests that perceptions of teacher care decline as students get older, with fewer strongly agreeing and more giving neutral or negative responses.

Geographic differences were limited across year groups; however secondary school students from remote/very remote areas were slightly more likely to report higher levels of teacher care.

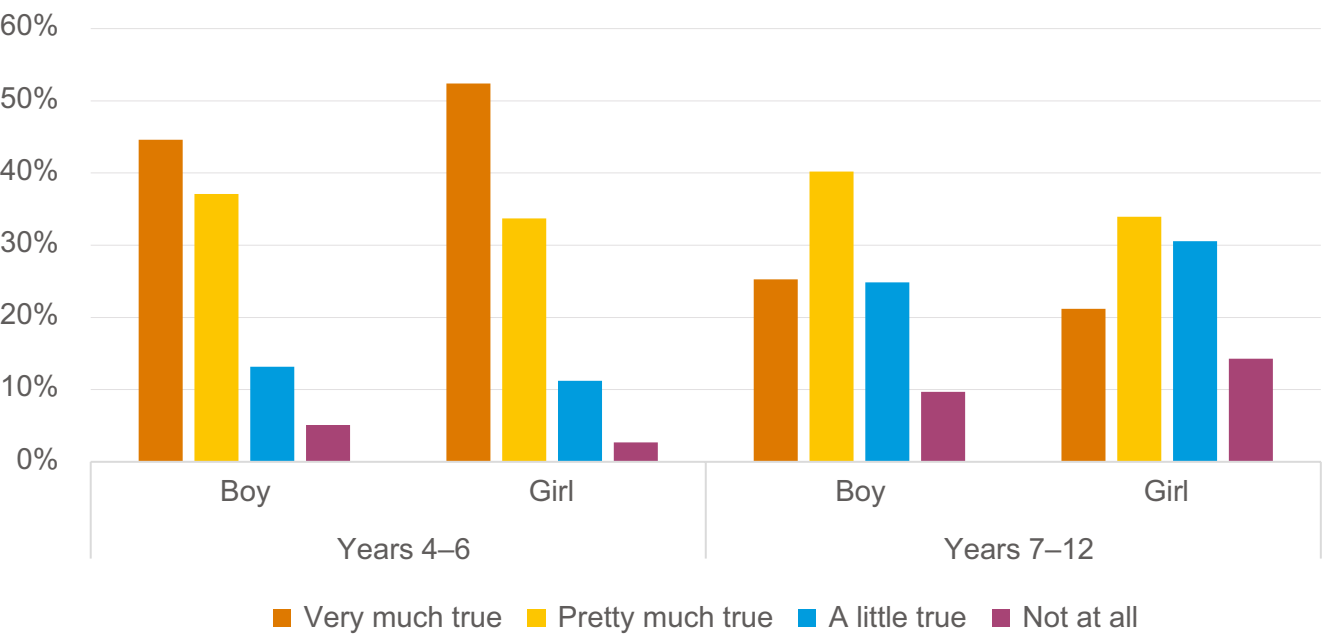
Gender disparities were observed across year groups, with girls reporting overall lower levels of teacher care.

Graph 8.2.9: Proportion of Year 4–12 students responses when asked if their teachers care about them, by school year



8. Learning and participating

Graph 8.2.10: Proportion of Year 4–12 students responses when asked if they believe their teachers care about them, by year group and gender



8.2.5.1 Ability to achieve

Most children and young people felt their teachers believed they would achieve good things.

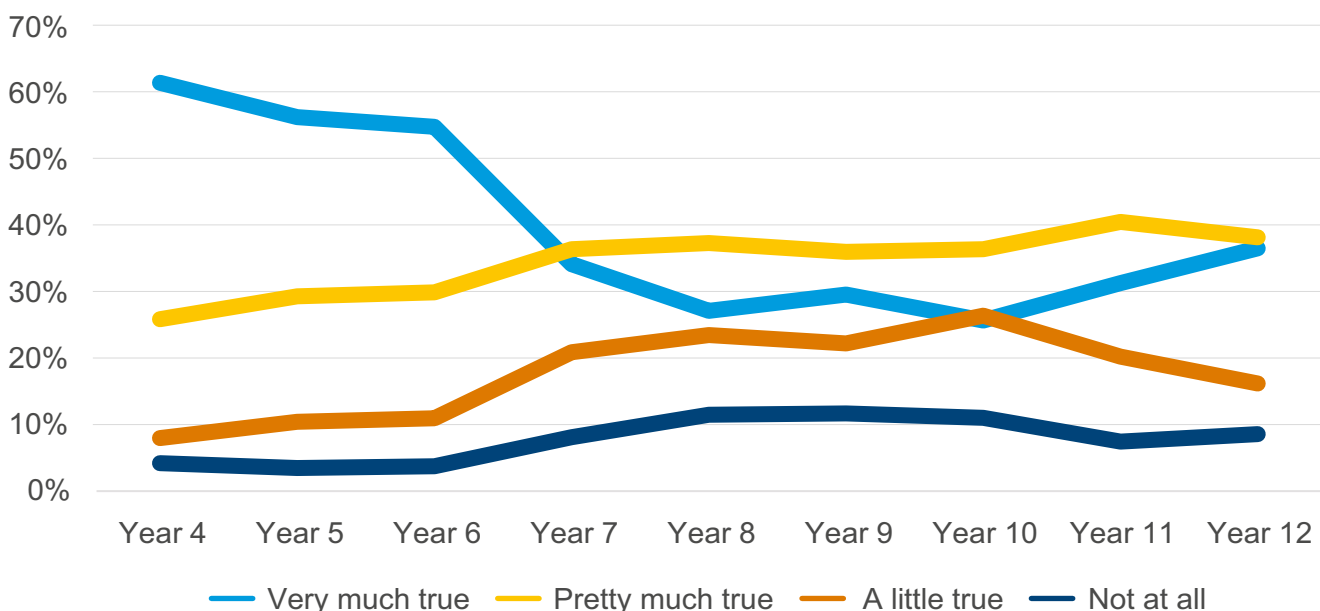
Primary school students reported the statement “My teacher believes I will achieve good things” was either ‘very much true’ (59.6%) or ‘pretty much true’ (28.9%), with only a minority reporting it was ‘a little bit true’ (8.7%) or ‘not at all’ (2.8%).

Secondary school students tended to respond with more neutral responses. 31.9 per cent felt the statement was ‘very much true’, followed by 40.1 per cent who felt it was ‘pretty much true’, 19.6 per cent ‘a little bit true’, and 8.5 per cent ‘not at all’ true.

Remoteness did not yield any significant differences, except for primary school students from very remote areas who were notably less likely to report the statement was ‘very much true’ (53.6%) compared to students from metropolitan (59.3%), inner regional (62.8%), outer regional (60.9%) and remote areas (62.1%).

8. Learning and participating

Graph 8.2.11: Proportion of Year 4–12 students responses when asked if they believe their teachers listen to them, by school year



8.2.5.2 Listening and feeling heard

Most children and young people reported their teachers listened to them when they had something to say.

Primary school students responded more favourably to the statement “My teacher listens to me when I have something to say” than secondary school students, who tended to respond with more neutral responses. Students in Years 7 to 9 showed a marked drop in the response ‘very much true’ and an increase in ‘not at all’.

There were minimal differences observed by remoteness; however, secondary school students from inner regional areas were less likely to report the statement “My teachers listen to me” was ‘very much true’ (24.6%), compared to students from metropolitan (30.4%), outer regional (31.0%) and remote/very remote areas (34.3%).

Minor gender disparities were observed across primary and secondary school students. Girls reported ‘very much true’ (60.5%) more than boys (55.1%) in primary school, whereas boys reported ‘very much true’ (32.7%) more than girls (27.5%) in secondary school. Secondary school girls were also more likely to report ‘not at all’ (11.6%) compared to boys (8.6%).

However, when looking across findings exploring student experience at school, girls consistently reported lower levels of happiness, sense of belonging, safety and positive relationships with peers, teachers and parents, in comparison to boys. These findings indicate a system-wide gender disparity in student school experiences that requires action, using approaches that actively capture and incorporate girls’ perspectives in school decision-making, intervention and reform.

8. Learning and participating

There is a consistent trend between SOS21 and SOS25 where students’ positive responses to teacher-student related measures decline with age. As was the case in SOS21, primary school students report the highest level of strong agreement which progressively shifts to more neutral, and to a lesser extent, negative responses in secondary school. This decline is most pronounced in students in Years 7 to 9, indicating the transition from primary school to secondary school is a critical period where student perceptions of teacher support (including caring about them, believing in their success and listening to them) weaken.

While many schools already provide transition programs between Years 6-7, our findings show a consistent decline in student happiness, sense of belonging, engagement, and relationships with peers, teachers and parents, across the broader transition period from primary to secondary school, indicating support is needed across Years 6 to 9 students.

8.2.6 School safety

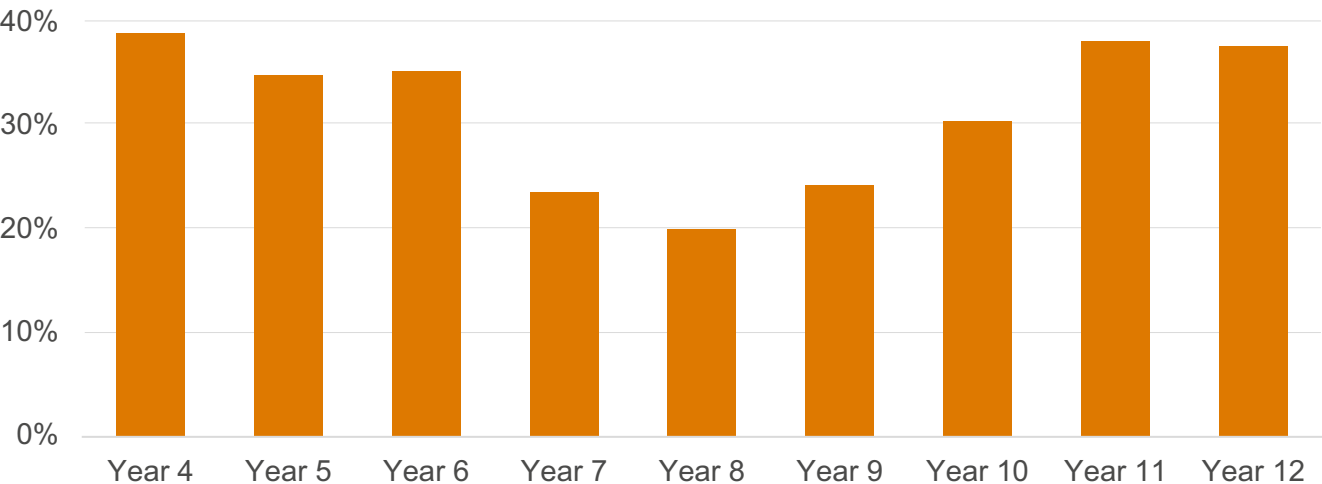
Most children and young people felt safe at school, with around one in three feeling safe ‘all the time’. ‘Most of the time’ was the most frequently reported response, while ‘never’ was the least common.

Among primary school students, 36.4 per cent reported feeling safe ‘all the time’, 42.9 per cent ‘most of the time’, 12.3 per cent ‘sometimes’, and less than 10 per cent ‘a little bit of the time’ or ‘never’ (combined 8.3%).

Among secondary school students, 27.3 per cent reported feeling safe ‘all the time’, 47.9 per cent ‘most of the time’, 15.3 per cent ‘sometimes’, and less than 10 per cent ‘a little bit of the time’ or ‘never’ (combined 9.4%).

While primary school students reported higher perceptions of safety at school compared to secondary school students, results show that students between Years 7 and 9 experienced lower rates of feeling safe ‘all the time’ which then gradually increased through to Year 12.

Graph 8.2.12: Proportion of Year 4–12 students who reported feeling safe at school all the time, by school year



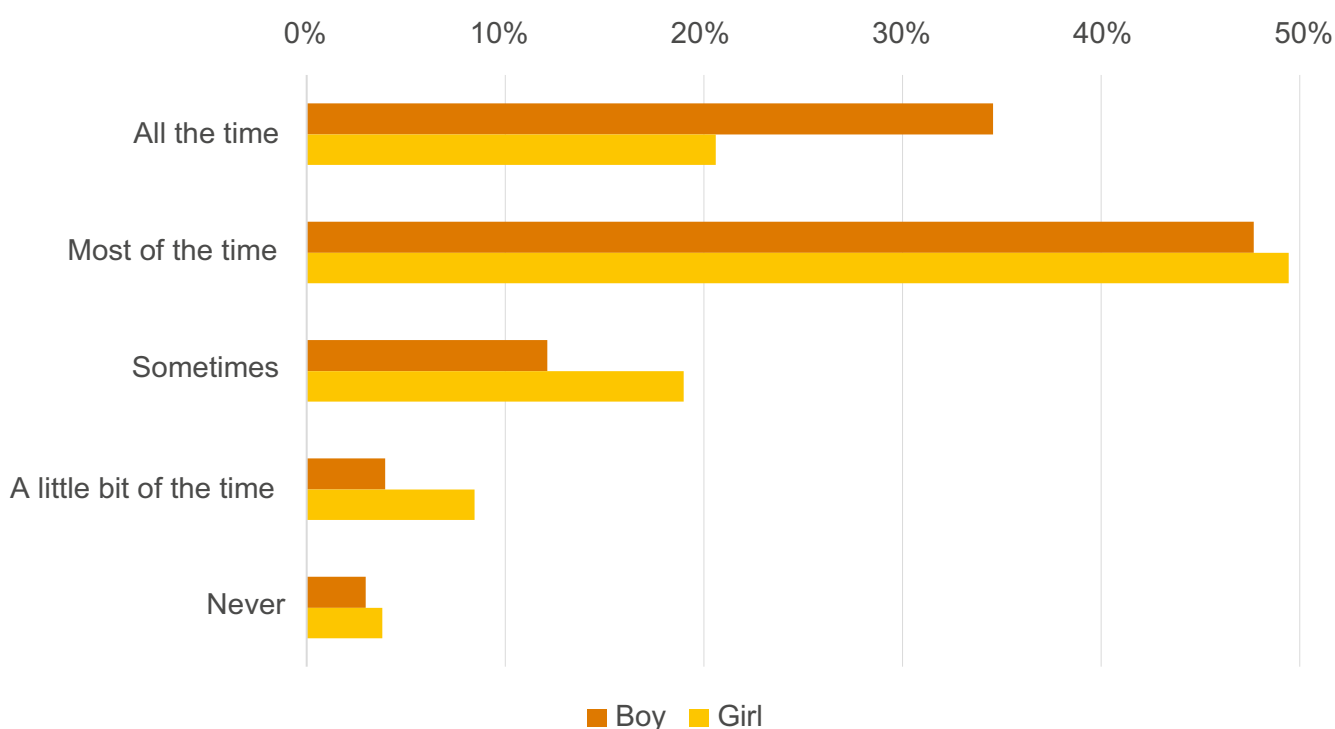
8. Learning and participating

Primary school students from the metropolitan area (36.9%) were most likely to report feeling safe 'all the time', followed by those in inner regional areas (36.0%), outer regional areas (36.5%) and remote areas (33.9%). Very remote students were most likely to report feeling safe 'most of the time', 'sometimes', 'a little bit of the time' and 'never', compared to students from other areas.

Secondary school students from remote/very remote areas were least likely to report feeling safe 'most of the time' and most likely to report feeling safe 'sometimes' or 'never', compared to students from other areas.

While gender had minimal correlation with feelings of safety for primary school students, secondary school boys were considerably more likely to report feeling safe 'all of the time' compared to girls. Girls were more likely to report feeling safe 'sometimes' and 'a little bit of the time' than boys. This equates to only one in five girls feeling safe 'all the time' at school.

Graph 8.2.13: Frequency of Year 7–12 students feeling safe at school, by gender



8. Learning and participating

8.2.7 Educational support

8.2.7.1 Extra support

Around 80 per cent of all students reported that they would receive extra help from teachers should they need it. Almost one in two (48.9%) children and one in four (26.4%) young people believed they would ‘almost always’ receive help when needed.

Primary school students most frequently reported receiving help ‘almost always’ (48.9%) or ‘sometimes’ (43.1%), with a small proportion reporting ‘almost never’ (8.0%). In contrast, secondary school students most frequently reported ‘sometimes’ (55.7%), followed by ‘almost always’ (26.4%) and then ‘almost never’ (17.9%).

Gender and remoteness had minimal impact on responses, with children and young people tending to report similar levels of agreement across those demographics.

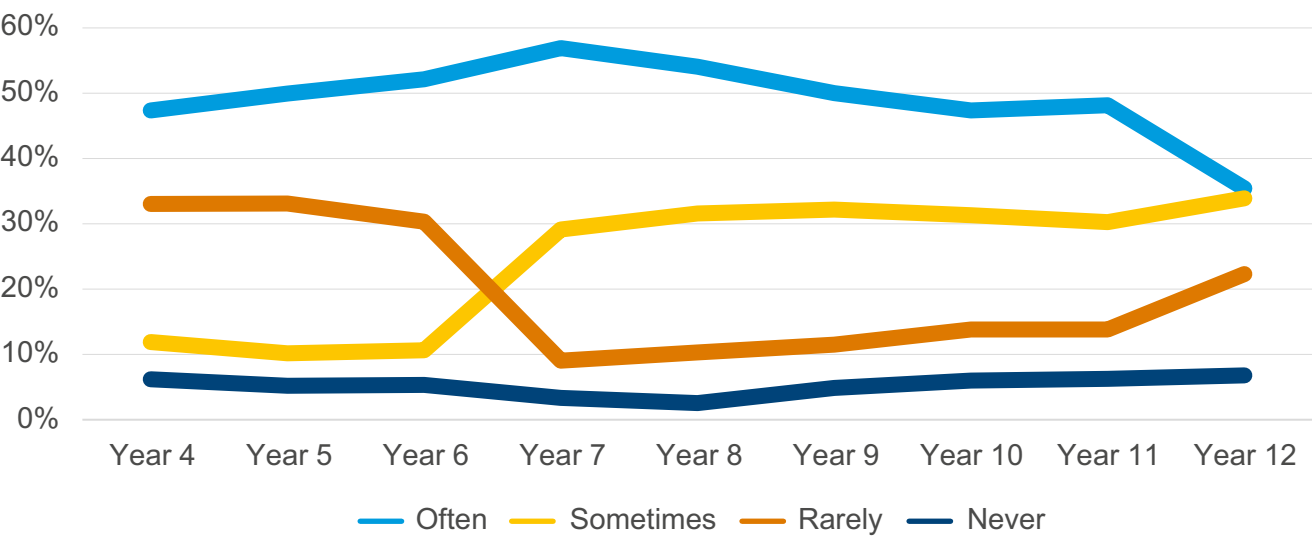
8.2.7.2 Families and schoolwork/ homework

One in two children and young people reported their parents or someone in their family enquired about (i.e. took an interest in) their schoolwork and homework.

Primary school responses indicate that while around half of students reported their parents ‘often’ (50.3%) asked about their schoolwork/homework, the second most common response was ‘rarely’ (32.5%), followed by ‘sometimes’ (11.2%) and ‘never’ (5.9%). This suggests a more polarised pattern of parent-child engagement, with students tending to report either frequent or infrequent involvement rather than consistent, moderate involvement.

Conversely, secondary school responses showed a clear, linear pattern of parent-child engagement, with responses steadily decreasing from ‘often’ to ‘never’. The upper secondary school years showed a slight downward gradient in which the frequency of parental engagement began to reduce.

Graph 8.2.14: Frequency of parents engaging in Year 4–12 students school/homework, by school year



8. Learning and participating

Primary school responses were generally consistent across location. While 'often' was the most frequently reported response, 'rarely' was the second, followed by 'sometimes' and then 'never'. Primary school students in the metropolitan area reported the highest levels of parent-child engagement, while those from remote areas reported overall lower levels of frequent engagement.

In contrast, the most frequently reported response among secondary school students was 'often', followed by 'sometimes', 'rarely', then 'never'. Secondary school students from the metropolitan area continued to report higher levels of frequent parent-child engagement compared to students from remote/very remote areas. The latter reported more moderate to infrequent engagement.

Secondary school boys were slightly more likely than girls to report that their parents or family members enquired about their school/homework 'often' (boys 54.7% vs girls 47.0%). However, this was offset by the distribution of responses in which girls were more likely than boys to report 'sometimes' (girls 33.5% vs boys 29.6%).

Our findings indicated some inconsistent patterns of parent-child engagement where school/homework is concerned. Research states that students benefit from regular encouragement and interest from parents and caregivers, even when academic support is limited.¹²¹

8.3 Bullying

Bullying involves consistent and persistent behaviours to deliberately cause harm. This can include verbal bullying (for example, name calling and insults), physical bullying (pushing, hitting, stealing), or social bullying (excluding a person, sharing personal content). These behaviours can occur in person, or online (cyberbullying), or they can involve a combination of both.

Research shows that children and young people who are bullied can experience significant impacts to their mental health, including depression, self-harm or suicide.

8.3.1 Experiences of bullying

Nearly two in five (41.2%) children in Years 4 to 6 reported experiencing some form of bullying. This decreased slightly upon young people entering secondary school, with almost one in three (32.8%) of secondary students experiencing some form of bullying (Table 8.3.1). More than 15 per cent of students did not know or preferred not to say (combined responses). These findings are comparable with the findings of SOS21, where 36.2 per cent of children and young people had experienced bullying (Years 4 to 6, 37.9% vs Years 7 to 12, 35.0%), noting that there has been a slight decrease in secondary school.

Of those who had experienced bullying, more than one in three had been bullied in the past three months, and more than one in 10 preferred not to say or did not know. The proportion of children and young people who had been bullied within the past three months has increased when compared to SOS21 in which around two in five (40.1%) of Years 4 to 6 and Years 7 to 12 reported experiencing bullying in the past three months.

8. Learning and participating

Table 8.3.1: Proportion of Year 4 to 12 students experiences of bullying, and frequency of bullying, by year group (percentage)

	Bullied (%)	Both bullied and cyberbullied (%)	Cyberbullied (%)	Total (%)
Experiences of bullying				
Years 4 - 6	31.3	7.7	2.2	41.2
Years 7 - 12	20.4	10.6	1.8	32.8
Those who have been bullied, have they experienced bullying in the past 3 months				
Years 4 - 6	35.5	6.5	4.2	46.2
Years 7 - 12	26.4	6.7	3.9	37.0

Children and young people who reported being bullied were most likely to be bullied in person, followed by a combination of both in-person and cyberbullying. A small proportion experienced only cyberbullying (Table 8.3.1). Girls in Years 7 to 12 were more likely to identify not knowing if they had experienced bullying (girls 11.2% vs boys 7.0%).

Children in remote areas were the most likely to report having experienced bullying (45.7%). Similarly, young people in inner regional and remote/very remote areas were the most likely to report experiencing bullying (inner regional 39.6%, remote/very remote 39.2%). Conversely, children in inner regional areas (38.2%), and young people in the metropolitan area (31.6%) were least likely. Children in inner and outer regional areas (inner 49.1%, outer 49.9%) were the most likely to have experienced bullying within the past three months. However, young people in remote and very remote areas (46.5%) were more likely to have experienced bullying within the past three months.

"I have been feeling upset, depressed, and lonely sometimes because I get bullied."
 Girl aged 12, metropolitan

8.3.2 Location of bullying

For those experiencing bullying, challenges in accessing support services can be heightened, compounding the emotional and social impacts of the bullying. This is particularly the case in regional and remote areas.

Despite the changing landscape of social media and technology, most bullying still occurs in and around schools, with 87.5 per cent of children and 91.5 per cent of young people experiencing it there ('at least once'). Further, 23.6 per cent of children and 25.4 per cent of young people report experiencing pervasive bullying at school, stating that they are bullied 'several times a week'. By comparison, nearly 10 per cent experienced bullying at home (9.8%) or online (10.6%) 'several times a week'. Young people in outer regional areas were most likely to identify they had been bullied at school 'several times a week' or more (33.1%) and were the ones most likely to identify being bullied at home several times a week or more (11.0%).

Cyberbullying is an invasive form of bullying which allows the perpetrator to contact the victim at any time or location through social media, messaging, or other online communications.

8. Learning and participating



Cyberbullying is very difficult to escape due to its invasive and pervasive nature, more so than traditional bullying. In the 'past three months' timeframe, more than one in three (35.9%) young people reported nasty messages or pictures being sent online to other young people, and 38.4 per cent experienced bullying via email, messages, or socials being sent directly to them. Girls were more likely than boys to report that nasty messages had been sent about them to others (girls 40.8% vs boys 30.2%), or that they had been sent nasty messages directly (girls 43.9% vs boys 31.9%).

One in four (24.5%) young people reported having experienced bullying due to their cultural background, colour of their skin, or religion; this figure is slightly lower than the corresponding figure in SOS21 (28.3%).

8.3.3 Missed school due to bullying

Concerningly, 14.0 per cent of children and 16.9 per cent of young people reported that they had missed school due to concerns about bullying. An additional 10.3 per cent of children, and 6.1 per cent of young people preferred not to say. This is a slight increase in the proportion of children and young people reporting that they missed school due to bullying in SOS21 (14.5% children and young people).

Of those who reported they had missed school due to bullying, more than one in 10 (10.7%) children and young people identified that this had led them to miss school four or more times in the past month. Girls in secondary school were more likely than boys to have missed school one or more times due to bullying (girls 43.6% vs boys 33.7%). Again, there has been a notable increase observed in the proportion of young people missing school when comparing SOS25 with SOS21: In SOS21, only 20.2 per cent of girls reported missing school and 8.9 per cent of boys.

Young people in outer regional areas (57.7%) and remote areas (52.8%) were most likely to identify missing school due to bullying in the past month. Those in outer regional areas (17.0%) were also most likely to identify missing school four or more times due to bullying, followed by those in remote areas (15.2%). By comparison, only 9.9 per cent of those in the metropolitan area were likely to miss school four or more times, and 40.6 per cent identified missing school once or more.

8. Learning and participating

Almost one in six young people (15.6%) had perpetrated bullying, an additional 10.2 per cent did not know, and 3.5 per cent preferred not to say. Research has shown that children and young people who engage in bullying are more likely to engage in antisocial and risky behaviours as they develop, including the use of drugs and alcohol, unemployment, and difficulties in keeping friends.¹²²

It is important to note that while our findings are representative of girls and boys across WA, they do not capture the specific experiences of gender diverse young people. Existing research tells us that 74 per cent of gender diverse young Australians have experienced bullying or harassment.¹²³ Furthermore, our own discussions with young people in the LGBTIQ+ community confirm that they are significantly more likely to experience bullying. LGBTIQ+ and non-binary young people are also more likely to experience mental health disorders,¹²⁴ and when this is compounded by the additional stress of bullying, the risks to wellbeing may be heightened. However, there is limited empirical evidence as to how these factors interact, highlighting a clear need for further research to understand the full extent of these combined harms.

Based on our findings, it is evident that bullying is still an ongoing and pervasive issue among children and young people. Despite increased focus and public policies on bullying, the percentage of children and young people who are experiencing bullying has increased over the four years between SOS21 and SOS25. Most concerning is the increase in the proportion of children and young people reporting that it has occurred recently – within the past three months – and reporting that it has affected their attendance at school.

8.4 Achievement

‘Academic achievement’ can be described as the extent to which a student meets their educational goals.

Academic achievement is influenced by both cognitive and non-cognitive factors, such as self-efficacy, motivation and self-control. Academic performance and improvement, relative to each student’s capabilities, is also a determinant of children and young people’s lifetime wellbeing.¹²⁵

8.4.1 Perception of achievement

We asked children how well they performed at school. Around half said they performed ‘well or very well’ (44.6%) or ‘ok’ (46.6%), with less than 10 per cent (8.8%) selecting ‘not so well’. This suggests that around half of children feel they are performing well, while about one in 10 feel they are underperforming.

Most young people said they performed either ‘about average’ (39.3%), followed by ‘above average’ (34.3%), ‘below average’ (12.2%) ‘far above average’ (11.0%), and finally ‘far below average’ (3.2%). This shows most young people rate their performance to be around average or slightly above, with only a small proportion rating their performance very highly or lowly. This is consistent with the findings of SOS21, in which most young people reported their performance as ‘average’ (39.1%) or ‘above average’ (35.7%), indicating stable perceptions of academic achievement.

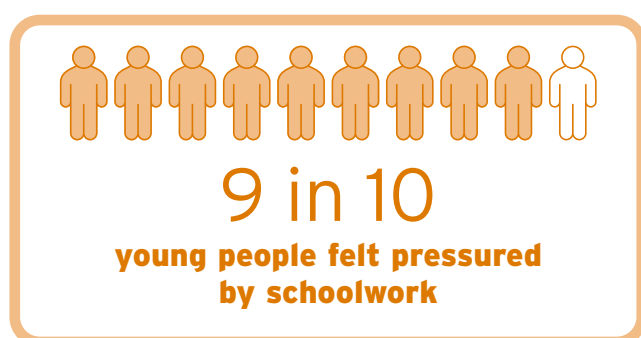
Disparities related to gender and remoteness were minimal.

8. Learning and participating

8.4.2 Pressure of schoolwork

We asked young people whether they felt pressured by their schoolwork.

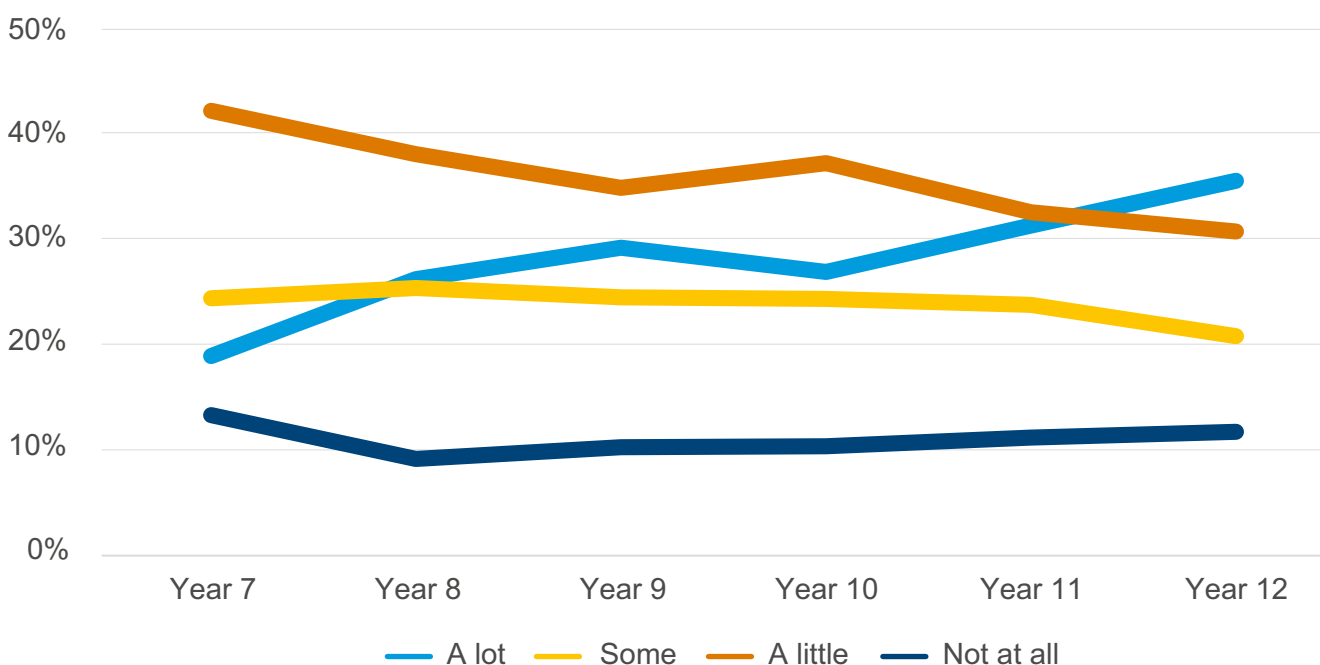
Overall, 37.4 per cent said they felt 'a little' pressure, 27.0 per cent said 'a lot', 24.6 per cent said 'some', and 11.1 per cent said 'none'. This equates to nine in 10 who felt pressured by their schoolwork.



The level of perceived pressure increased with age, as young people were increasingly likely to feel 'a lot' of pressure from their schoolwork than 'some', 'a little' or 'not at all'. For example, of the Year 12 students, 35.9 per cent said they felt 'a lot' of pressure, 31.1 per cent said 'a little', 21.0 per cent 'some', and 11.9 per cent 'not at all'.

This is consistent with previous SOS21 findings, in which increased levels of schoolwork pressure were observed in Years 10–12 students, coinciding with the curriculum becoming more challenging.

Graph 8.4.1: Proportion of Year 7–12 students experience of schoolwork pressure, by school year



8. Learning and participating

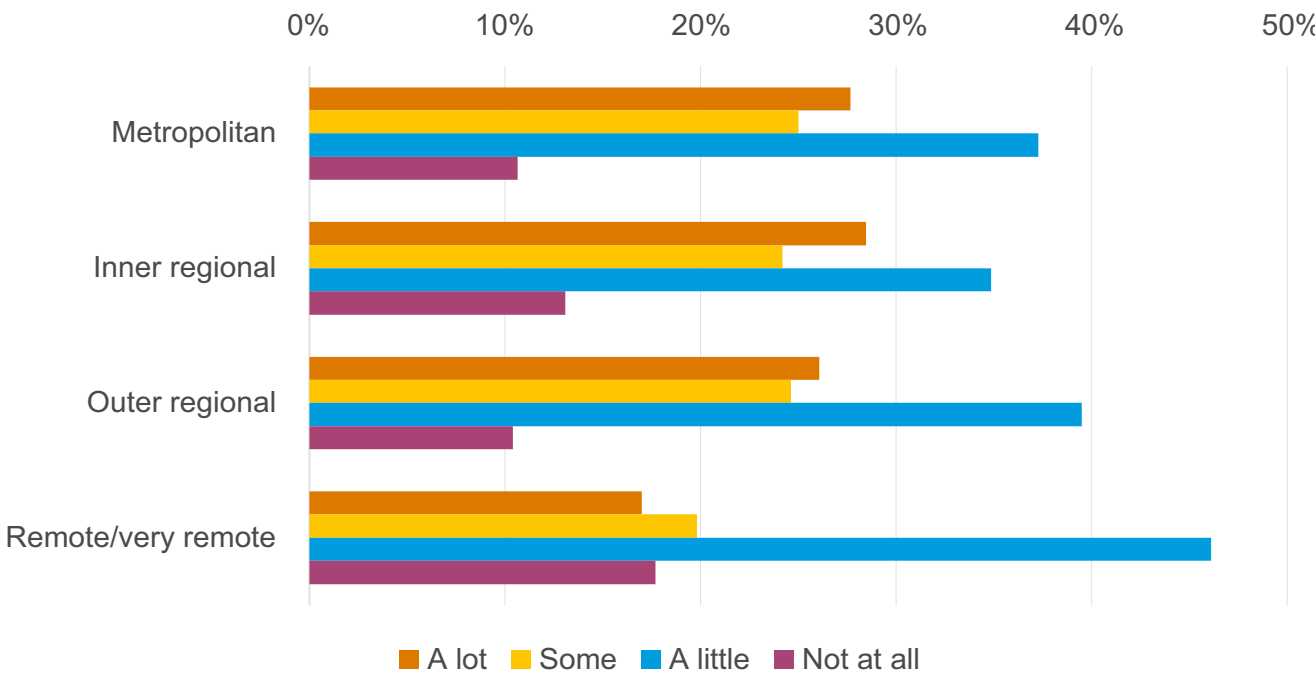
Girls were more likely than boys to feel pressured by schoolwork ‘a lot’; boys were more likely to report feeling ‘some’ or ‘not at all’ (Table 8.4.1). Girls were therefore more at risk from the effects of high levels of schoolwork pressure than boys.

Table 8.4.1. Proportion of Year 7 to 12 students experience of schoolwork pressure, by gender (percentage)

Gender	A Lot (%)	Some (%)	A Little (%)	Not at All (%)
Boy	20.6	23.7	40.5	15.1
Girl	33.5	25.4	34.2	6.9
Cohort	27.0	24.6	37.4	11.1

Interestingly, young people from remote/very remote areas consistently reported lower levels of schoolwork pressure compared to those from inner and outer regional areas, and the metropolitan area. The reason is unknown.

Graph 8.4.2: Proportion of Year 7–12 students experience of schoolwork pressure, by remoteness



8. Learning and participating

We asked young people why they thought that some students felt stressed about their schoolwork.

"Because every teacher gives homework and that means if it's due the next day they are stressed about doing it and not getting in trouble for not completing it. It can also be expectations from parents such as above 70% alert making the student study causing stress."

Boy aged 12, metropolitan

"Because it's a lot put on the students and they're expected to hand the work in by a specific date; and me personally, I get distracted very easily and will procrastinate to get out of it which makes it more stressful."

Girl aged 13, metropolitan

"Because of failing their classes or getting bad grades, that would impact their life throughout the future."

Girl aged 12, metropolitan

"Because their teachers and parents will yell at them for bad scores. Also because some teachers put unnecessary pressure onto things."

Girl aged 12, metropolitan

"Because it is too much to deal with, including 9 subjects, sports, work and trying to make time for yourself. Then there is so much pressure to get good results."

Girl aged 14, metropolitan

"The overwhelming amount and due date is a rush for these students, it's even worse for neuro-diverse students."

Boy aged 12, metropolitan

Young people commonly described feeling overwhelmed by the volume and demands of schoolwork. The responses contained considerable commentary about excessive schoolwork and insufficient time to complete it, which often led to a breakdown in time management and motivation. Many respondents reported procrastination and feelings of wanting to give up.

Young people also expressed a desire to perform well and achieve goals, reflecting high expectations and aspirations that they had set for themselves. At the same time, many reported a fear of failure. This failure was often described in terms of failure to live up to others' expectations, associated with punishment from parents or teachers, or admonishment from classmates.

A lack of academic support was also repeatedly mentioned. Many expressed a desire to perform well at school but felt they lacked a comprehensive understanding of the curriculum and/or had limited supports to improve performance.

Lastly, young people pointed to competing priorities outside of school that affected their capacity to engage in schoolwork. These included various family responsibilities, after-school employment and extracurricular activities, which they felt took precedence over schoolwork requirements, including homework.

Overall, young people pointed to various causes for their experiences of schoolwork pressure. Together, their responses highlight that pressure is typically caused by an interaction of academic demands, personal expectations, individual coping skills and other external pressures.

8. Learning and participating

8.5 Transition from school

It is vital that young people develop the appropriate skills and feel equipped for their future. Moving from compulsory, highly structured schooling into the workforce or into more self-directed study such as university, requires they can work independently and stay motivated in their chosen direction.¹²⁶ Being able to build these skills while still at home and in secondary school will further help them with their transition.

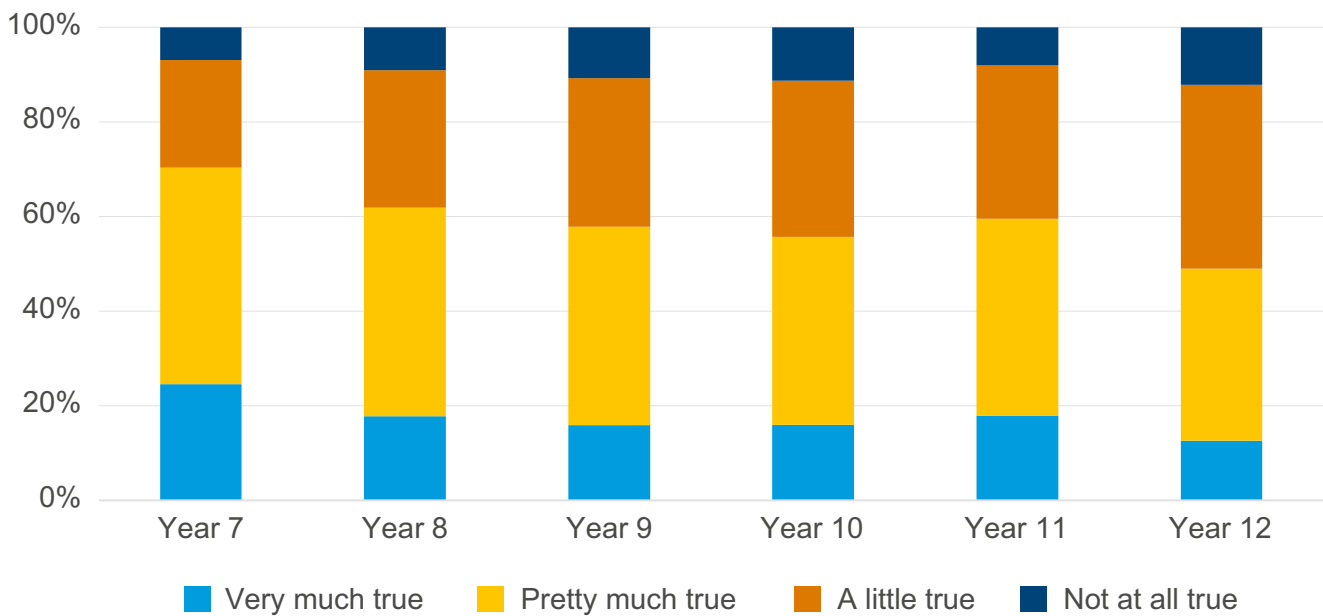
8.5.1 Future skills

Reflecting the conclusions drawn from SOS21, nearly one in five (18.2%) young people thought the statement “I am learning knowledge and skills that will help me in my future, at school” was ‘very much true’,

while 42.3 per cent thought it was ‘pretty much true’. Importantly, 9.5 per cent thought this was ‘not at all true’.

Boys were slightly more likely than girls to say this was ‘very much true’ (boys 20.8% vs girls 15.5%). Interestingly, young people in Year 7 were twice as likely to think the statement was ‘very much true’ compared to young people in Year 12 (Year 7, 24.6% vs Year 12, 12.6%). This decline in agreement was not linear across the other school years. Subsequently, Year 12 students were the least likely to select ‘pretty much true’ and most likely to select ‘a little true’ or ‘not at all true’. It is evident that about half of Year 12 students do not feel confident that the skills gained at school have prepared them sufficiently for full-time work or higher education.

Graph 8.5.1: Proportion of Year 7–12 students agreement that they have learnt knowledge and skills at school that will help in their future, by school year



8. Learning and participating

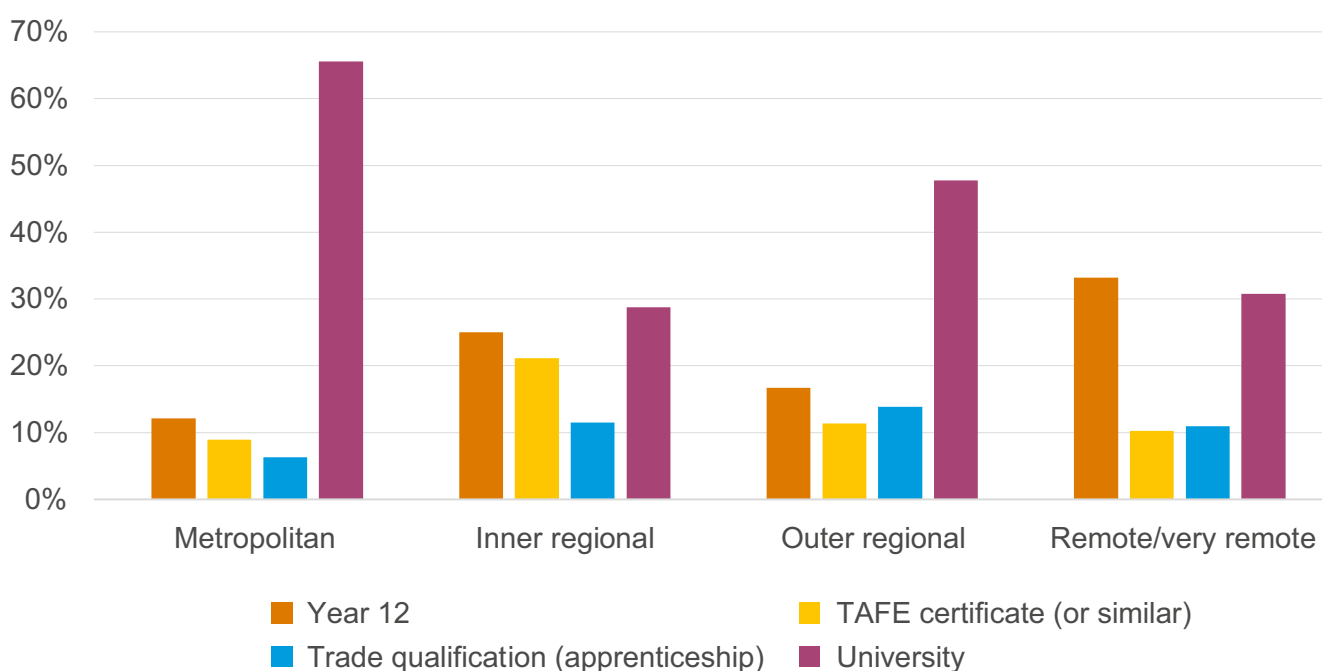
When looking towards their future and further education, most young people aimed to attend university (59.9%). The next most frequently chosen level of education was Year 12 (14.4%), followed by TAFE (10.1%) and a trade qualification (7.5%).

There were notable gender differences in their choices for higher education. Girls were four times less likely to select pursuing a trade qualification (girls 2.7% vs boys 12.1%), but more likely to select university (66.2% vs boys: 53.8%).

There were no notable differences across school years in relation to the proportion of young people wanting to pursue the different pathways, except in relation to TAFE. As young people grew older, they were more likely to select TAFE (Year 7s 7.5% vs Year 12s 13.1%).

Young people in the metropolitan area were considerably more likely to select university as their future pathway compared to other areas, where young people were more likely to select TAFE, a trade, or Year 12.

Graph 8.5.2: Proportion of Year 7–12 students aspirations for higher education, by remoteness



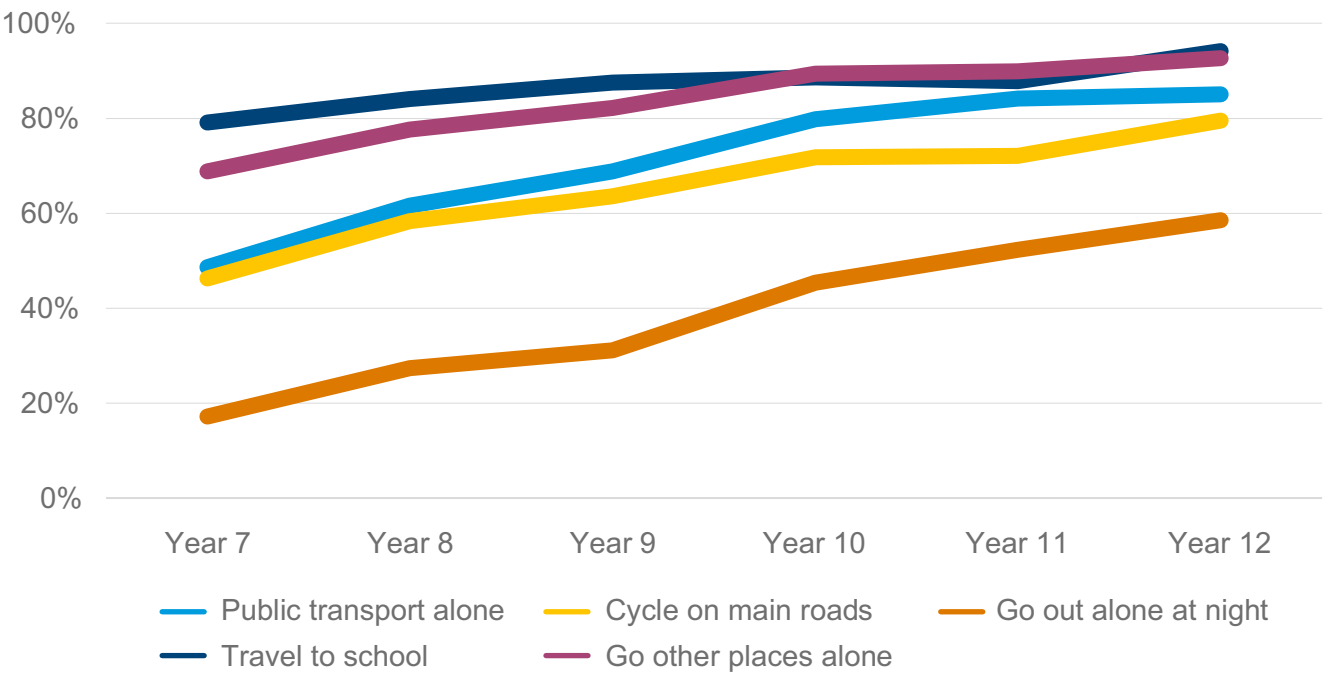
8. Learning and participating

Independence

Being able to visit places independently not only helps develop their independence and prepare them for the future, but also supports their physical activity, social development, emotional wellbeing, and broader health outcomes.¹²⁷ Independent mobility refers to their ability to move freely around their neighbourhood or city without adult supervision. However, opportunities for independent travel have declined over the past two decades, largely due to rising car use, expanding urban areas, and growing concerns about traffic safety.¹²⁷

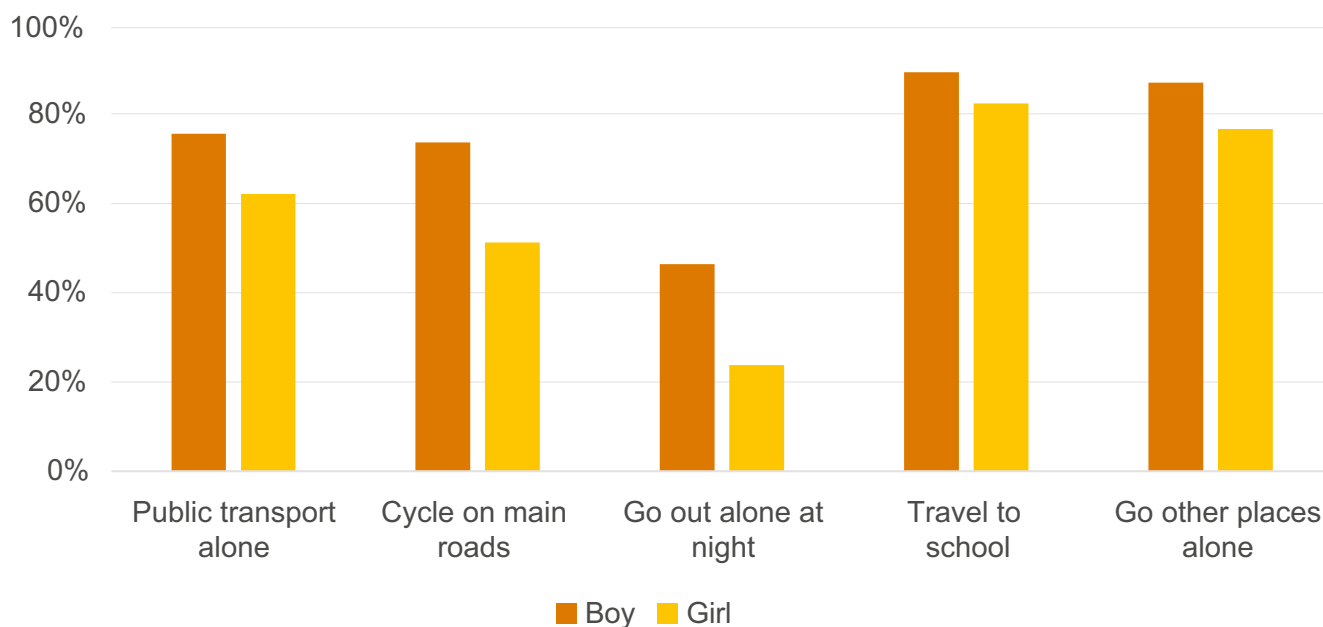
Unsurprisingly, independence grew with the age of the young person. Most Year 12 students were able to catch public transport alone, cycle on main roads alone, travel to and from school alone, or visit other locations alone. Most Year 12 students were able to go out at night alone, but the responses to this question were in a lower proportion compared to the other questions.

Graph 8.5.3: Proportion of Year 7–12 students reporting their ability to travel independently, by school year



8. Learning and participating

Graph 8.5.4: Proportion of Year 7–12 students reporting their ability to travel independently, by gender



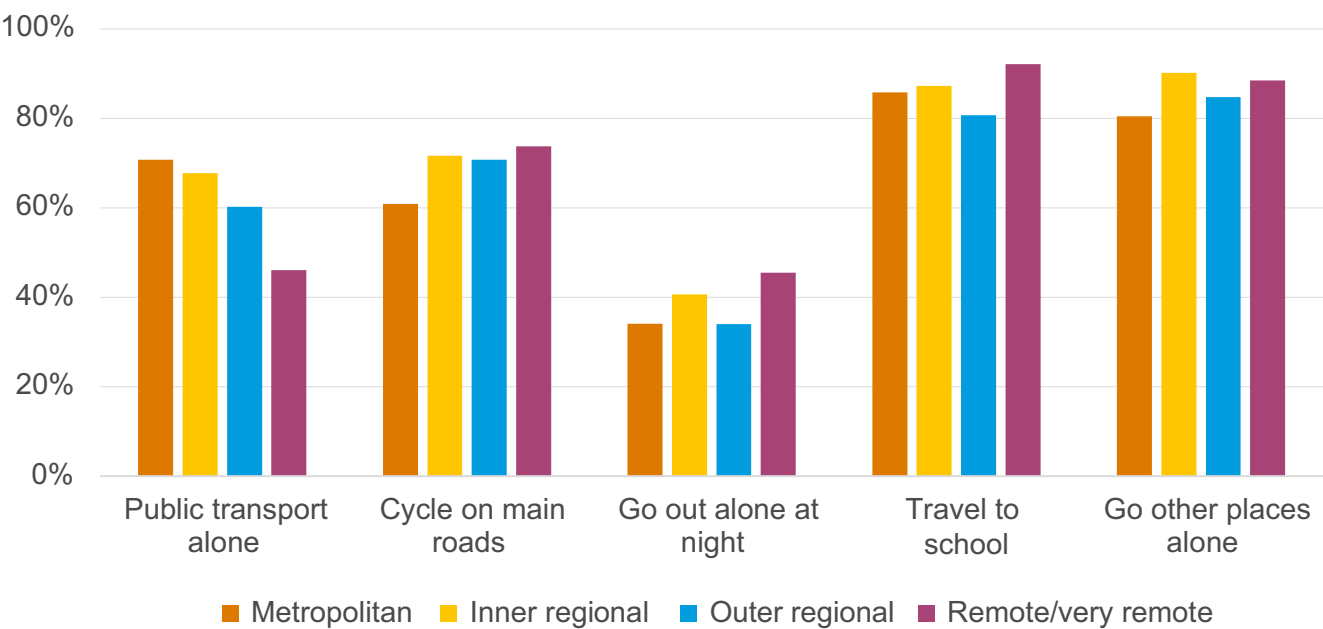
Across all questions, boys had notably more independence than girls. Developing independence during adolescence is important to building personal confidence and autonomy. Girls who are overprotected in adolescence can present with greater anxiety and affective problems over time.¹²⁸

Independence among young people in different areas was quite consistent in relation to going out alone, travelling to and from school, and going to other locations alone. Young people in the metropolitan area were less likely to agree when asked if they could cycle on main roads alone

(metropolitan 60.9% vs remote/very remote 73.8%). This trend would be influenced by variations in traffic volume, road size, and the density of road networks. Major cities typically experience heavier traffic and more complex road systems, which increases perceived and actual risks for young people moving around independently.¹²⁷ In contrast, young people living in more remote areas were less likely to use public transport on their own. This pattern is largely explained by the limited availability and frequency of public transport services in these regions.

8. Learning and participating

Graph 8.5.5: Proportion of Year 7–12 students reporting their ability to travel independently, by remoteness



8.5.2 Work experience

Almost one in two (46.5%) young people held a paying job, including a regular part-time job (24.4%), casual work during the term (10.6%), or work during school holidays (12.1%). The largest motivation to obtain a job was to have money to ‘spend on things’ they wanted (70.1%), while the next most frequently cited motivation was to ‘gain skills and experience’ (9.7%).

Work experience did not differ greatly by gender. While boys were slightly more likely to have worked during the school holidays (boys 14.8% vs girls 9.2%), girls were more likely to have a part-time job (girls 26.8% vs boys 22.2%). Motivations for working did not differ according to gender.

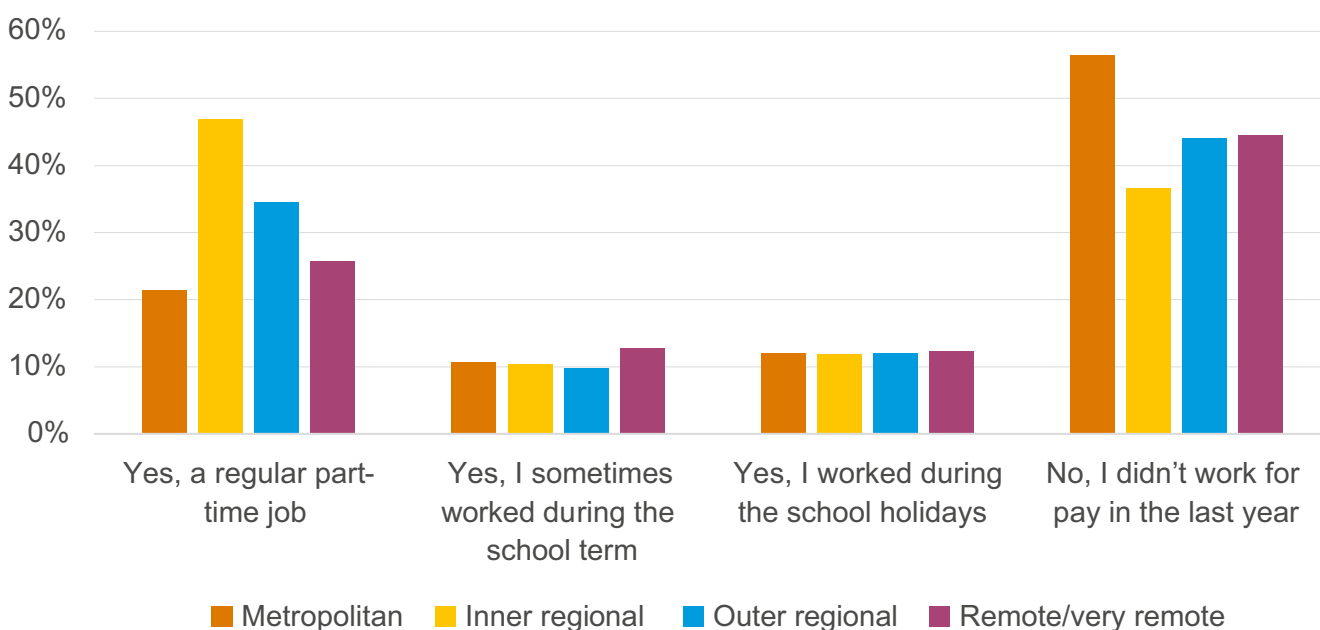
Predictably, young people were more likely to work as they got older (Year 7s 27.5% vs Year 12s 76%), especially among those having a regular part-time job (Year 7s 3.7% vs Year 12s 59.9%). As young people were asked if they had worked for money or had a paid job, it is possible that students interpreted this question as being paid for work around their home. The largest motivation across all age groups remained having spending money. Despite the legal minimum working age being 15 years (or 13 with parental consent in specific roles), Year 7 students were more likely to select that their motivation was ‘gaining skills and experience’ (Year 7s 11.1% vs Year 12s 8.0%), or to ‘have fun with their friends’ (Year 7s 6.6% vs Year 12s 2.4%).

8. Learning and participating

Young people in the metropolitan area were the ones most likely to report not having any paid roles (56.4%), while young people in inner regional areas were most likely to report work experience (63.5%), particularly holding a regular part-time job (46.9%).

Once again, motivations were largely similar across areas, although young people in remote/very remote areas were the most likely to select 'gaining skills/experience' (10.8%). Outer regional young people were least likely to report this reason (8.0%).

Graph 8.5.6: Proportion of Year 7–12 students who have work experience, by remoteness



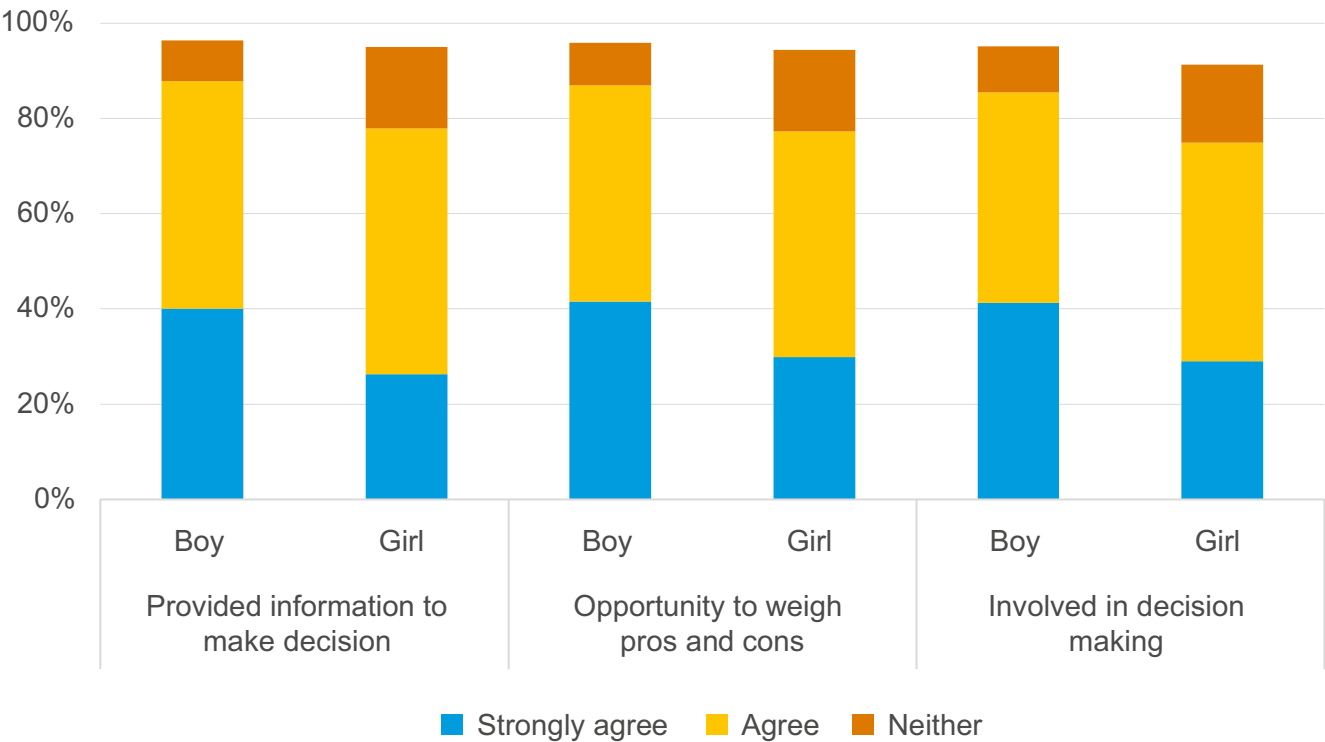
8. Learning and participating

8.5.3 Making decisions

Article 12 of the United Nations Convention on the Rights of the Child states that children have a right to give their opinion and be listened to by the adults around them.⁶ Supporting young people to express their views, take part in decisions that shape their lives, and have self-efficacy, is vital in building their confidence and sense of identity.¹²⁹ It also gives them valuable

opportunities to practise forming opinions, communicate personal perspectives, and make choices in preparation for adulthood. More than eight in 10 young people ‘agree’ or ‘strongly agree’ that they are given information to make decisions in their life, are allowed to weigh up pros and cons related to decisions and are involved in making decisions about their life.

Graph 8.5.7: Proportion of Year 7–12 students agreement with statements asking about their involvement in decision-making, by gender



8. Learning and participating

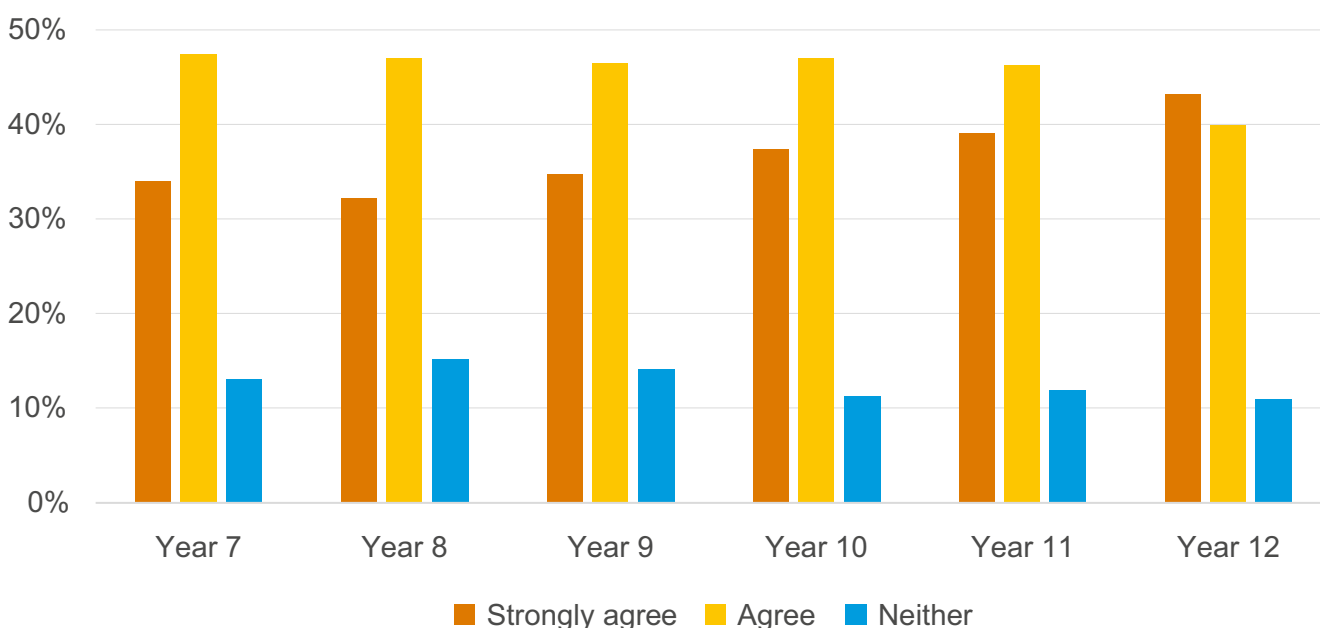
Consistent with the previous findings from SOS21, girls were notably less likely to 'strongly agree' with all statements, and more likely to say 'neither'. This trend appears to be consistent across questions relating to independence, in which girls do not feel they have as much control or autonomy as boys.

The likelihood of respondents selecting 'strongly agree' increased linearly with school year. However, the proportion who selected 'agree' decreased linearly, except when respondents were asked if they had enough information to make decisions.

The proportion who selected 'neither' or 'disagree' was fairly consistent among all respondents. These findings demonstrate that most young people feel they are given the opportunity to be involved in decisions made about their life – consistent with our previous findings from SOS21.

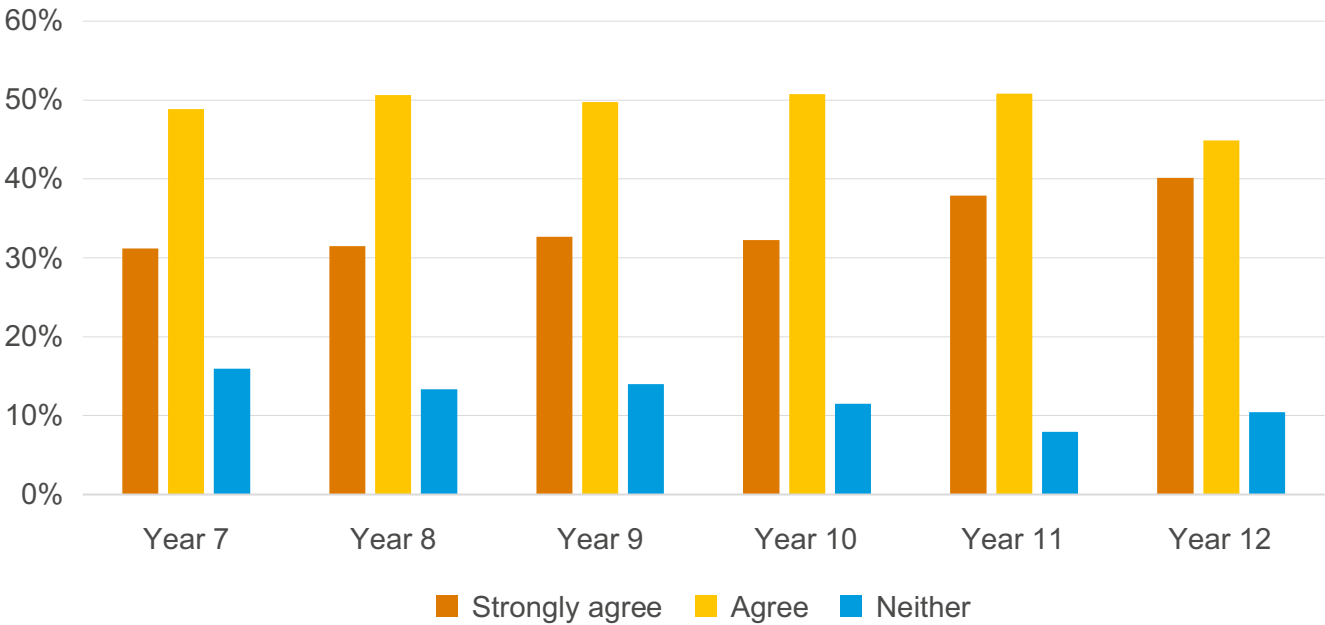
Young people in remote/very remote areas were least likely to 'strongly agree' with all statements, although these responses did not differ greatly when compared to the other areas.

Graph 8.5.8: Proportion of Year 7–12 students agreement with the statement they can weigh up the pros and cons when making decisions, by school year

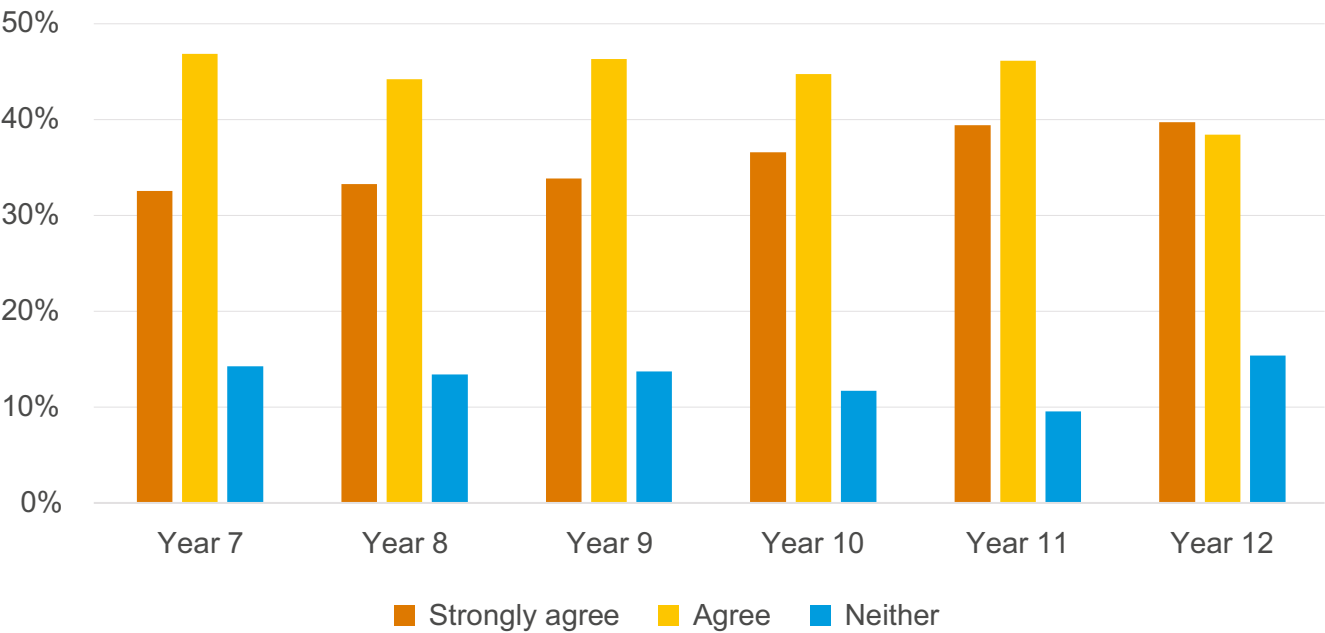


8. Learning and participating

Graph 8.5.9: Proportion of Year 7–12 students agreement with the statement they are provided information to make decisions, by school year



Graph 8.5.10: Proportion of Year 7–12 students agreement with the statement they are involved in decisions about their life, by school year



8. Learning and participating

8.6

Summary of key findings - Learning and participating

8.6.1 Attendance

- 1 in 2 (54.4%) children said it was 'very important' to attend school daily, however this decreased to 2 in 5 (39.9%) young people.
- Boys were twice as likely to be suspended from school than girls.
- More than 1 in 2 (55.8%) young people who had been suspended, were suspended for 10 or more days in total.

8.6.2 Liking school and sense of belonging

- Young people (29.1%) were twice as likely to report disliking school than children (15.7%).
- Girls were more likely to 'like school a lot' in primary school, but boys were more likely to like school in secondary school.
- As children and young people age, they are less likely to 'strongly agree' that they feel they belong at school, feel happy at school, and like learning.
- Girls were less likely to say they 'usually' get along with their classmates.

- Children (48.5%) were twice as likely as young people (23.2%) to believe there is a teacher who really cares about them.
- Children were nearly twice as likely as young people to select 'very much true' when asked if there is a teacher who believes they will achieve good things and listens to them.
- More than 2 in 3 (68.7%) children and 1 in 2 (54.8%) young people said they 'usually' get along with teachers.
- Around 1 in 3 children and young people reported feeling safe at school 'all the time'. Only 1 in 5 girls in secondary school felt safe 'all the time'.

8. Learning and participating

8.6.3 Bullying

- Nearly 2 in 5 (41.2%) children and (32.8%) young people identified being bullied in some manner.
- **Around 1 in 3 children and young people had been bullied in the past 3 months.**
- Almost 1 in 4 children and young people experienced bullying several times a week at school.
- Girls were more likely to miss school due to bullying.
- **1 in 4 (24.5%) young people had experienced bullying due to their cultural background, colour of their skin, or religion.**
- Almost 1 in 6 (15.6%) young people had perpetrated bullying, and 10.3% did not know.

8.6.4 Achievement

- Most children thought they were doing 'well or very well' (44.6%) or 'okay' (46.6%) at school. Almost 1 in 10 (8.8%) children thought they were doing 'not so well' at school.
- **1 in 10 (11.0%) young people reported that they were 'far above average', but 15.4% thought they were 'below the average' or 'far below average' (combined).**
- More than 1 in 4 (27.0%) young people said they felt 'a lot' of pressure due to their schoolwork.

8.6.5 Transition from school

- Nearly 1 in 5 (18.2%) young people thought it was 'very much true' when asked if they were learning skills that will help them in their future. The proportion who thought the statement was true decreased with age.
- **3 in 5 (59.9%) young people wanted to attend university. 2 in 3 (66.2%) girls wanted to go to university, compared to 1 in 2 (53.8%) boys.**
- 2 in 3 young people in the metropolitan area wanted to go to university. This proportion decreased notably with increased remoteness (less than 1 in 3).
- **Boys were more likely to be able to travel independently (including going out at night, travelling to places other than school, catching public transport).**
- 4 in 5 young people agreed with statements asking if they were involved with decisions about their life. Boys were more likely to 'strongly agree' with all statements.

8. Learning and participating

8.7

Learning and participating summary

Students' attitudes toward school engagement and attendance decline as they move from primary to secondary school. Student enjoyment, belonging and happiness also decrease with age. Although most students hold positive views of school and experience few suspensions, a notable minority show signs of disengagement. Suspension rates increase with age, likely reflecting developmental and social changes, including heightened sensitivity to peer influence. The data also suggests gendered differences: while boys are suspended more often, girls tend to receive longer suspensions, indicating differing impacts on learning and wellbeing.

In both primary and secondary school, girls tended to report weaker relationships with classmates and teachers. Despite these relational challenges, most young people still felt that their teachers believed in them and supported their learning. When students reflected on their own academic performance, many placed themselves around the "average" mark, although girls were far more likely to feel pressure from schoolwork. Qualitative responses highlighted that young people are having to juggle other competing demands, including family responsibilities, after school jobs and extracurricular commitments, impacting their ability to complete homework. Additionally, only half of students felt their families consistently showed interest in their schoolwork. In combination, these findings indicate many children and young people do not feel adequately supported in their education, or that they are taking on too much.

Bullying in-person and online remains a persistent issue for many children and young people, even causing some children and young people to be so afraid they miss school. A notable proportion of young people identified being bullied due to their culture, religion, or skin colour, indicating many of our young people are experiencing racism.

Findings also point to differences in autonomy, as girls were less likely to report being involved in decision making processes impacting upon their lives. When examining these findings, it is evident girls feel more impacted by the pressures of school, do not feel as supported, and feel as though they lack meaningful control over daily decisions.

Further, there are clear trends across school years. With increasing age, students feel less engaged and supported in their education and preparation for adult life. This may be due to the increasing academic, social and developmental pressures they encounter, as well as the shifting expectations that come with adolescence. Over time, this may shape not only their day-to-day experience of school but also their broader sense of readiness for the future, highlighting the importance of sustained support and opportunities to build autonomy as they grow.

Key findings regarding Aboriginal children and young people

9



9. Key findings regarding Aboriginal children and young people

This section focuses on Aboriginal children and young people's responses, comparing them with the responses of non-Aboriginal children and young people when appropriate.

Overall, 6.7 per cent of children self-identified as Aboriginal and 1.3 per cent as Torres Strait Islander, while 5.8 per cent of young people identified as Aboriginal and 1.0 per cent as Torres Strait Islander.

9.1 Connection to culture

Connection to culture plays a vital role in the lives of Aboriginal and Torres Strait Islander children and young people as they form their identity, gain independence, and take on new responsibilities. Cultural connection refers to their ability and opportunity to maintain and strengthen ties to their heritage, including language, cultural knowledge, laws and customs.¹³⁰ Being involved in cultural practices, activities and events is therefore a key part of healthy identity development.

9.1.1 Cultural connection

Almost nine in 10 (89.9%) Aboriginal students in Years 4 to 6 and more than eight in 10 (84.8%) in Years 7 to 12, said they knew their family country ('yes'). While there were no gender differences between children, girls in secondary school were more likely to say 'yes' than their counterparts (girls 89.6% vs boys 80.0%).

There were minimal differences between children based on remoteness. However, young people in remote/very remote areas (95.1%) were notably more likely to say 'yes' when compared to those in outer regional areas (69.4%). More than four in five young people in the metropolitan (82.4%) and inner regional areas (81.6%) said 'yes'.

9.1.2 Connection to country

Children and young people spent a similar amount of time on family country (Years 4 to 6, 87.6% vs Years 7 to 12, 85.1%). Students in Years 4 to 6 in the metropolitan area were the least likely to say 'yes' (81.0%), while those in very remote areas were most likely (94.4%). However, Years 7 to 12 students in outer regional areas (76.3%) were the least likely to say 'yes' with those in remote/very remote areas (88.6%) being the most likely to say 'yes'.

Boys in secondary school were slightly more likely to say 'yes' (boys 88.4% vs girls 80.9%). There were minimal gender-related differences exhibited among children.

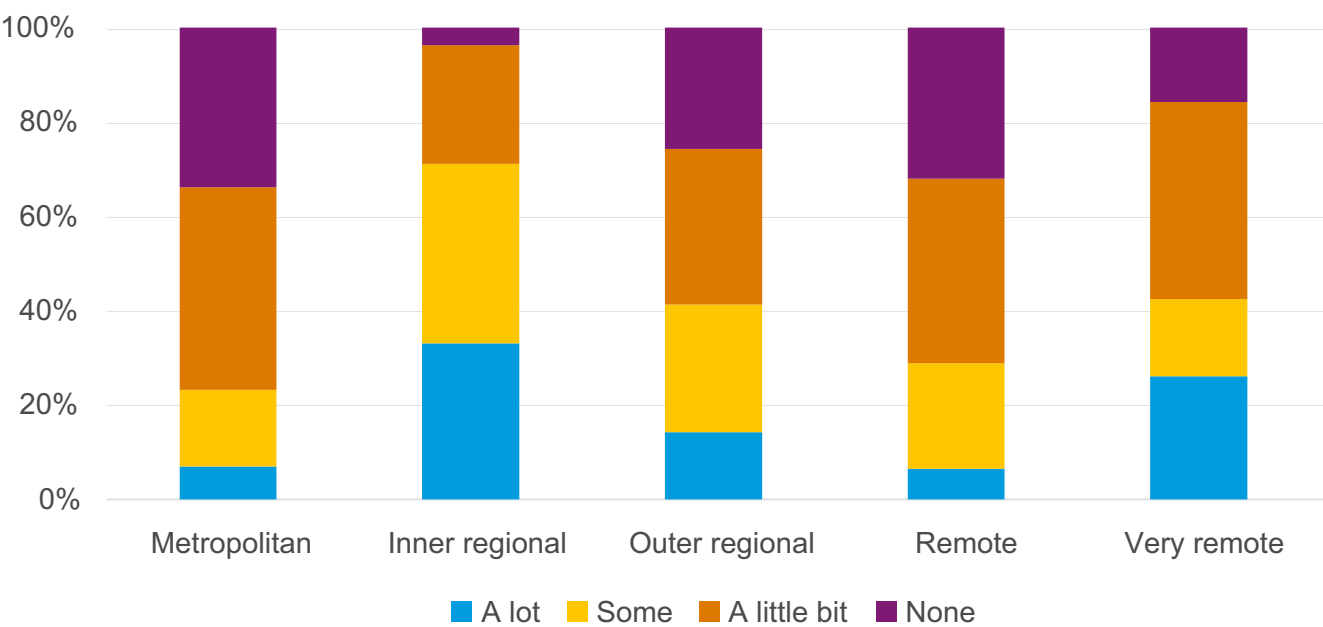
9.1.3 Connection to language

Almost forty per cent (39.4%) of children in Years 4 to 6 spoke 'a lot' or 'some' Aboriginal language. This diminished to 25.5 per cent in Years 7 to 12. Consequently, the proportion of young people in Years 7 to 12 who selected 'none' increased (Years 4 to 6, 21.5% vs Years 7 to 12, 34.2%).

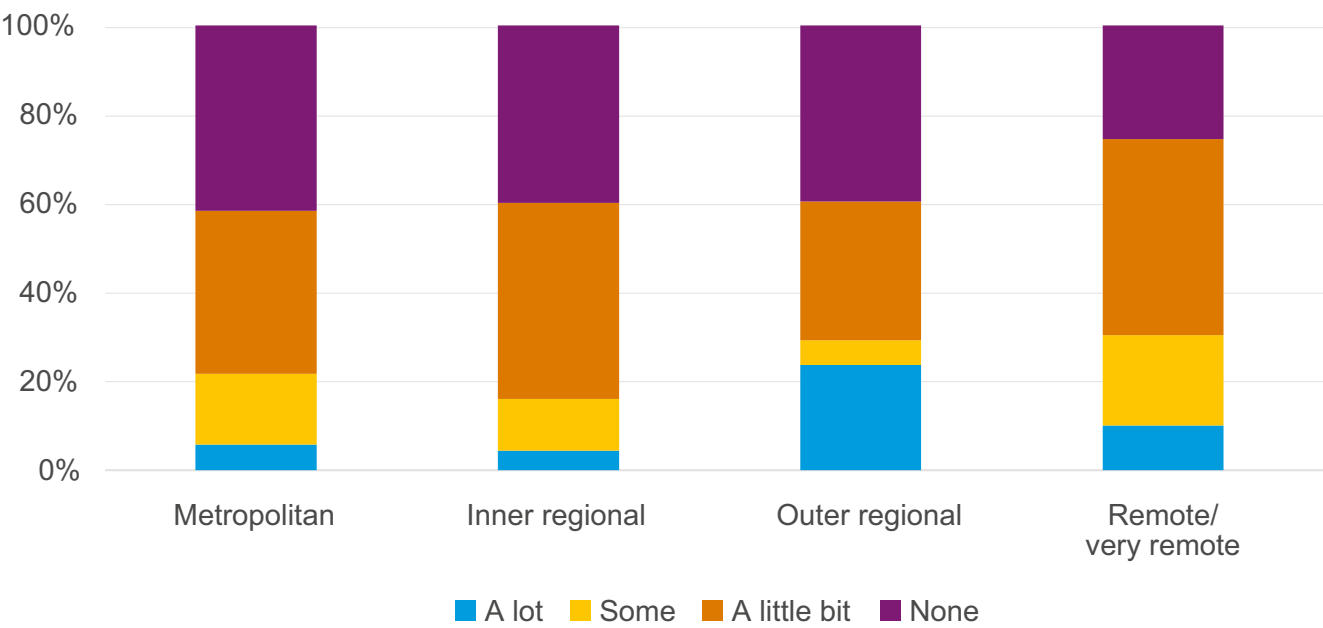
While notable differences can be observed in the amount of Aboriginal language spoken between different remote areas of Western Australia, these differences did not follow a consistent pattern.

9. Key findings regarding Aboriginal children and young people

Graph 9.1.1: Proportion of Year 4–6 Aboriginal students who talk in Aboriginal language, by remoteness



Graph 9.1.2: Proportion of Year 7–12 Aboriginal students who talk in Aboriginal language, by remoteness



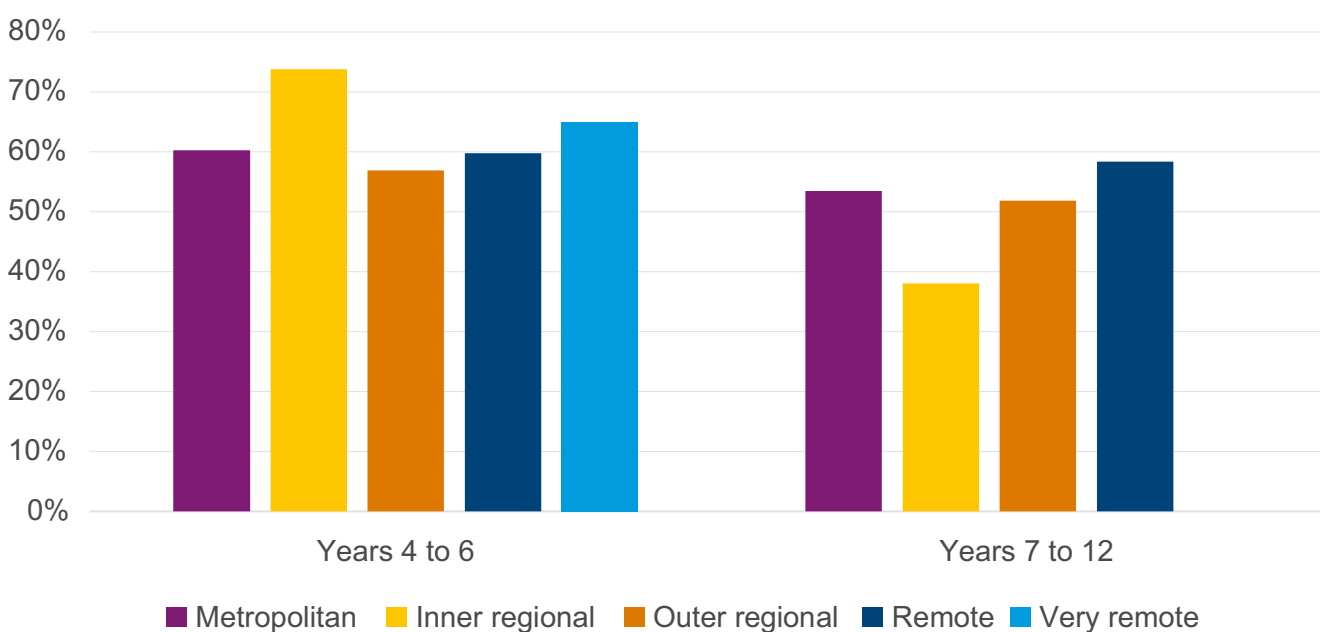
9. Key findings regarding Aboriginal children and young people

9.1.4 Cultural engagement

More than sixty per cent (63.7%) of Aboriginal children in Years 4 to 6 participated in cultural or traditional activities with their family. This decreased to almost fifty per cent (52.5%) of Years 7 to 12. The difference between genders increased with age, from 4.7% between Years 4 to 6 (boys 59.9% vs girls 64.6%) to 9.0 per cent between Years 7 to 12 (boys 48.0% vs girls 57.0%).

Interestingly, Years 4 to 6 students in inner regional areas (73.6%) were the most likely to participate, while those in Years 7 to 12 in inner regional areas were the least likely (37.9%). Participation in cultural activities across other remote areas was fairly consistent.

Graph 9.1.3: Proportion of Year 4–12 Aboriginal students who participate in cultural activities, by year group and remoteness



9. Key findings regarding Aboriginal children and young people

9.2 Healthy and connected

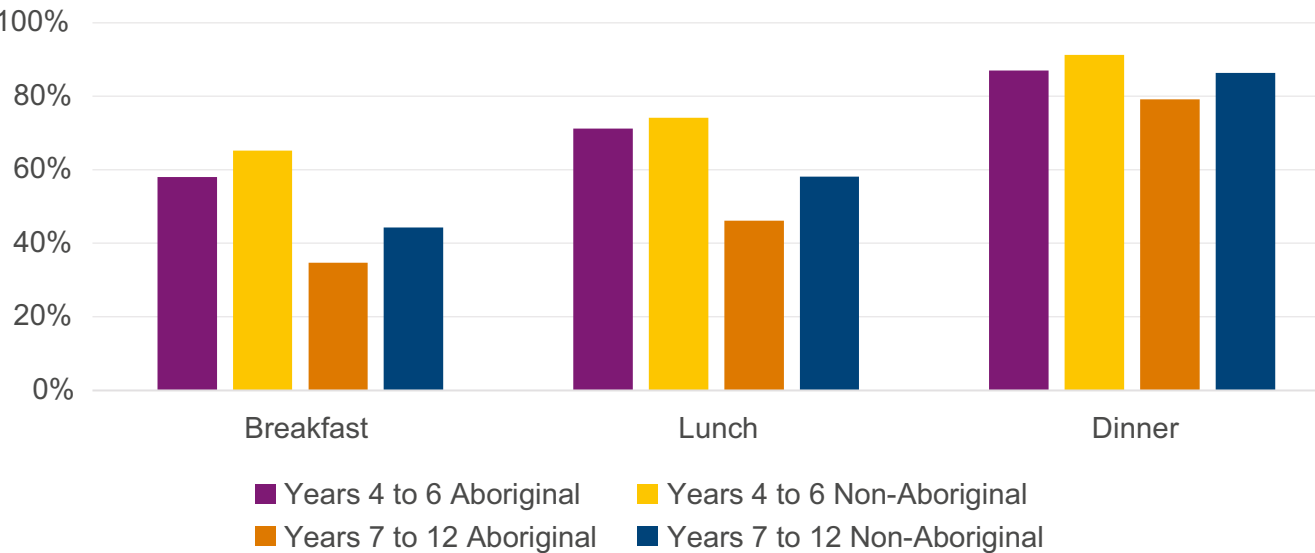
Aboriginal children’s and young people’s life satisfaction, resilience, and mental health were shown to be consistent with those of other young people in Western Australia, and they reported higher levels of positive self-perception in relation to their ability. However, Aboriginal children and young people continue to experience disproportionate and preventable harms across physical health and access to alcohol and other drugs. The findings revealed that Aboriginal children and young people scored lower in dental health, physical activity and regular meal access, and despite reporting higher alcohol and other drug knowledge, they continued to use them at higher rates, which suggests underlying contextual factors that warrant further investigation.

9.2.1 Physical health

Self-perceptions of personal health were quite similar for Aboriginal and non-Aboriginal children and young people, although Aboriginal young people (36.8%) were less likely to say their health was ‘excellent’ or ‘very good’ compared to non-Aboriginal young people (47.4%). Aboriginal students in Years 4 to 6 and Years 7 to 12 were less likely to report eating each meal (breakfast, lunch, dinner) daily; however, this difference was more notable between Years 7 to 12.

There were also differences in sleep behaviours across both children and young people. Aboriginal children were more likely to go to bed after 10.00pm (Aboriginal 24.9% vs non-Aboriginal 12.1%). They were also slightly more likely to wake up before 6.00am (Aboriginal 26.1% vs non-Aboriginal 18.2%).

Graph 9.2.1: Proportion of Year 4–12 students who ate meals daily, by year group and Aboriginality



9. Key findings regarding Aboriginal children and young people

Aboriginal young people were twice as likely to go to bed after midnight than non-Aboriginal young people (Aboriginal 16.2% vs non-Aboriginal 8.7%).

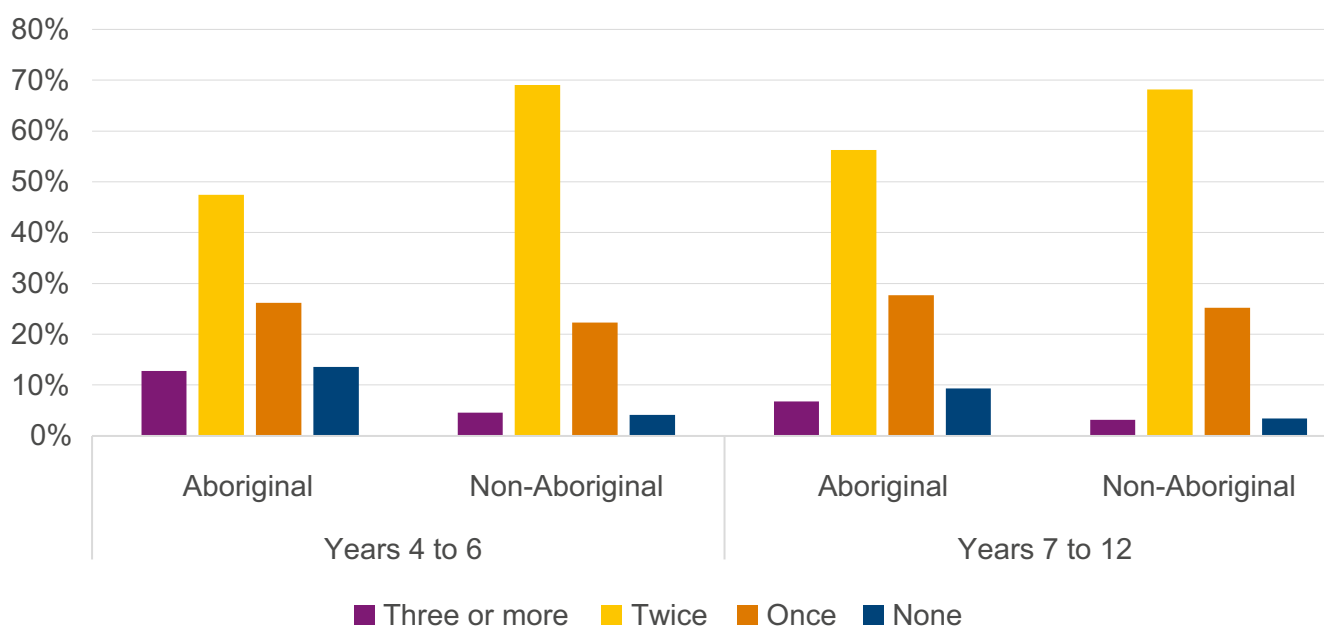
Caring about physical activity, and actual participation in physical activity, was lower in Aboriginal children and young people than their non-Aboriginal peers. Aboriginal children were more likely to report that they cared 'a little' or 'not at all' (Aboriginal 21.0% vs non-Aboriginal 7.1%) about being physically active, as were Aboriginal young people (Aboriginal 16.1% vs non-Aboriginal 11.3%). Consistently, Aboriginal children were more likely to say they did not exercise (Aboriginal 8.2% vs non-Aboriginal 2.2%) and were less likely to say they exercised three or more times a week (Aboriginal 58.4% vs non-Aboriginal 73.2%). Aboriginal young people were also less likely to select being active three or more times a week (Aboriginal 52.3% vs non-Aboriginal 65.5%).

Aboriginal children and young people were most likely to report brushing their teeth three times a day. However, Aboriginal children and young people were almost three times more likely to report not brushing their teeth daily, compared with non-Aboriginal children and young people.

Aboriginal children were more likely to report having had a filling than non-Aboriginal children (58.8% vs 43.6%). However, among young people, the reporting of fillings was similar for each cohort.

Aboriginal young people were around five per cent (5.2%) more likely to identify as having a long-term disability (Aboriginal 12.8% vs non-Aboriginal 7.6%) or health condition (Aboriginal 22.6% vs non-Aboriginal 18.8%), and 7.6 per cent more likely to consider themselves to be neurodiverse (Aboriginal 38.2% vs non-Aboriginal 30.6%).

Graph 9.2.2: Frequency of Year 4–12 students brushing their teeth daily, by year group and Aboriginality



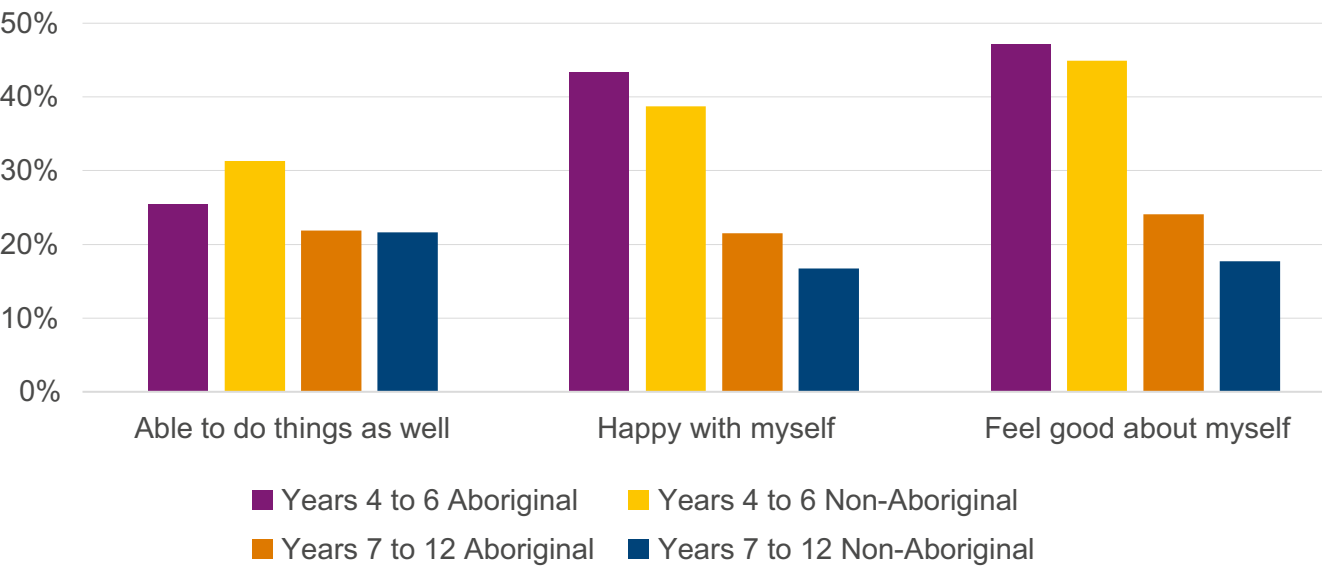
9. Key findings regarding Aboriginal children and young people

9.2.2 Mental health

Life satisfaction scores were consistent among Aboriginal and non-Aboriginal children and young people. Similarly, differences were minimal in the responses given about mental health and resilience. When asked questions about self-perception or identity, Aboriginal children and young people were more likely to say they ‘strongly agreed’ that they were happy and felt good about themselves.

Interestingly, Aboriginal students in Years 4 to 6 were slightly more likely to say they cared ‘very much’ about their looks (Aboriginal 47.7% vs non-Aboriginal 37.9%), compared to Year 7 to 12 Aboriginal students who were less likely (Aboriginal 45.1% vs non-Aboriginal 54.9%). Within the Aboriginal cohort the proportion who cared about their appearance remained consistent, whereas the proportion of non-Aboriginal young people who cared about their appearance increased notably.

Graph 9.2.3: Proportion of Year 4–12 students reporting strong agreement with positive statements about themselves, by year group and Aboriginality



9. Key findings regarding Aboriginal children and young people

Aboriginal young people were more likely to report they were unable to see someone for their health when they wanted or needed to (Aboriginal 31.0% vs non-Aboriginal 24.8%). The most frequently cited reason for this was being embarrassed or ashamed across all young people, although Aboriginal young people were less likely to cite this reason than non-Aboriginal young people. Regarding obstacles to accessing help, Aboriginal young people were most likely to report being unsure of where to go or who to see; lacking transport; being unable to find a suitable time; or financial reasons.

For Aboriginal young people, restricted access to health supports in regional and remote areas, combined with the challenge of locating holistic, culturally safe services, creates significant barriers to receiving care that aligns with their cultural and community needs.¹³¹

"My anxiety is getting better and I am afraid that my anger issues and depression gets the best of me, and I'm self diagnosed."

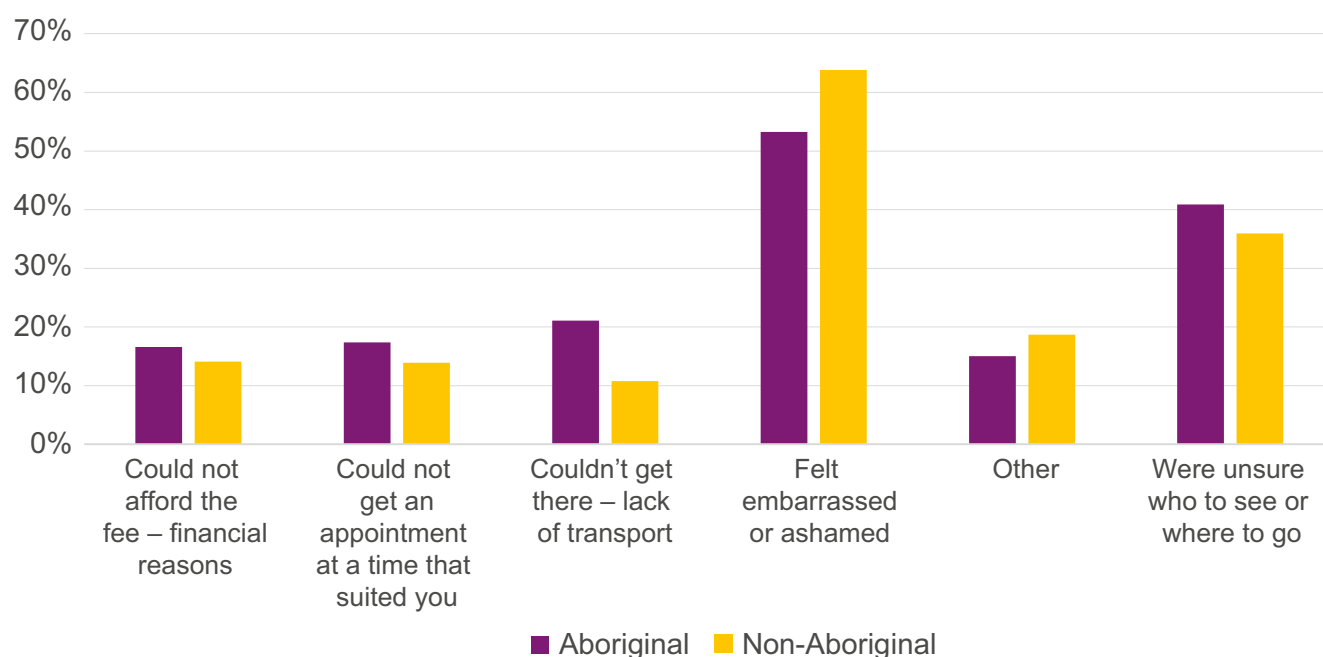
Girl aged 12, very remote

In the past 12 months, almost half of Aboriginal young people reported that they had sought help for their mental health (Aboriginal 43.0% vs non-Aboriginal 45.3%). The supports most likely to be used by Aboriginal young people were friends, parents/caregivers, other family members, and schoolteachers or other school supports. Unsurprisingly, Aboriginal young people were more likely to use Aboriginal health workers, youth or social workers, or online services, than were non-Aboriginal young people.

"Having help from an OT and psych has been helpful for certain things."

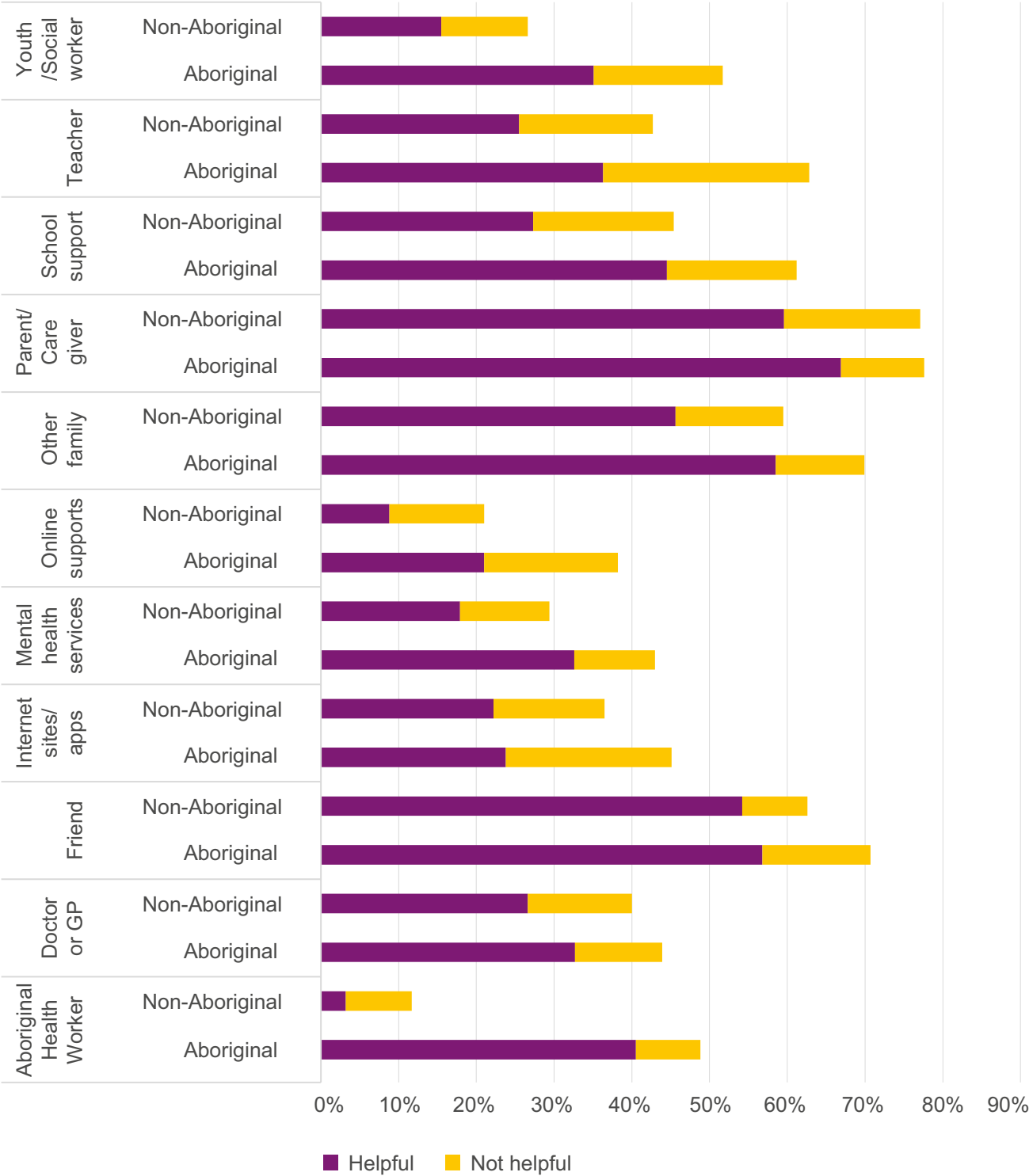
Girl aged 15, metropolitan

Graph 9.2.4: Proportion of Year 7–12 students reporting reasons they were unable to access help for their health, by Aboriginality



9. Key findings regarding Aboriginal children and young people

Graph 9.2.5: Evaluation of mental health supports by Year 7–12 students, by Aboriginality



9. Key findings regarding Aboriginal children and young people

9.2.3 Alcohol and other drugs

When asked about their knowledge of alcohol and other drugs, Aboriginal young people were more likely to say they learnt 'a lot' at school about cigarettes (Aboriginal 38.4% vs non-Aboriginal 31.6%), marijuana (Aboriginal 33.4% vs non-Aboriginal 15.7%), and other substances (30.9% vs 19.2%).

Despite 84.7 per cent of Aboriginal young people reporting they felt they knew enough about vapes' health impacts, 15.5 per cent thought it was okay for someone their age to use vapes, and 53.6 per cent reported their friends used them. This prevalence was notably higher than among non-Aboriginal young people, of whom 7.6 per cent thought that it was okay for someone their age to use vapes, and 40.4 per cent had friends who had used vapes.

Alcohol and cigarettes were also more likely to have been tried by Aboriginal young people. Nearly one-third (31.2%) of Aboriginal young people had tried cigarettes, compared to 12.5 per cent of non-Aboriginal young people. Of those who had tried a cigarette, 49.1 per cent of Aboriginal and 41.7 per cent of non-Aboriginal young people had smoked

a whole cigarette. Aboriginal young people were also more likely to say they had tried alcohol (Aboriginal 42.4% vs non-Aboriginal 28.4%). Aboriginal young people who had drunk alcohol recently were more likely than non-Aboriginal people to report drinking most days (18.6% vs 3.5%).

Despite demonstrating strong knowledge about the risks of vaping and alcohol, Aboriginal young people in the study reported using these substances at higher rates. This suggests that awareness alone may not be enough to reduce use, and that broader social, or structural challenges may be influencing behaviours.



9. Key findings regarding Aboriginal children and young people

9.2.4 Risky behaviours

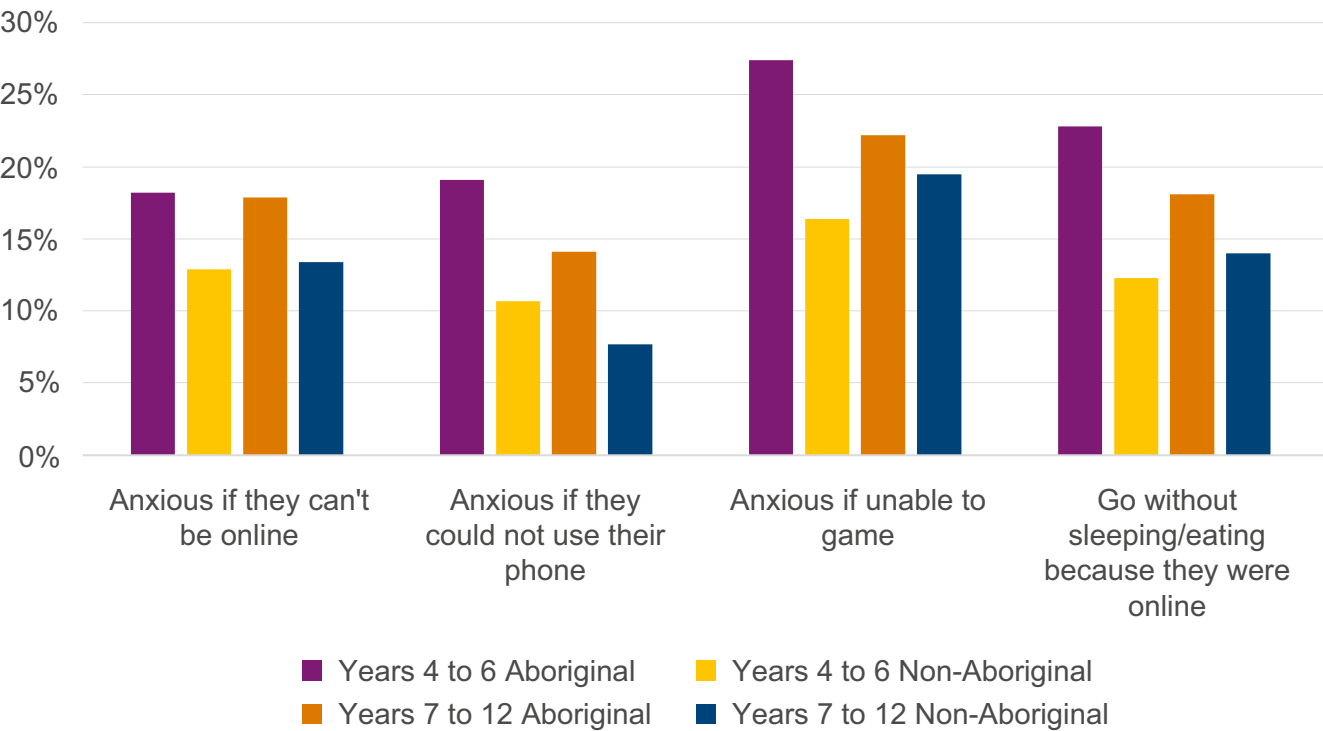
Knowledge of sexual health was consistently reported by young people. However, Aboriginal young people were twice as likely to say they had been sexually intimate with someone (Aboriginal 34.6% vs non-Aboriginal 17.8%).

Aboriginal children and young people were more likely than their non-Aboriginal peers to report feeling anxious when they could not be online, could not use their phone, were not able to game; and reported that they could go without eating or sleeping when online.

9.2.5 Local area and community

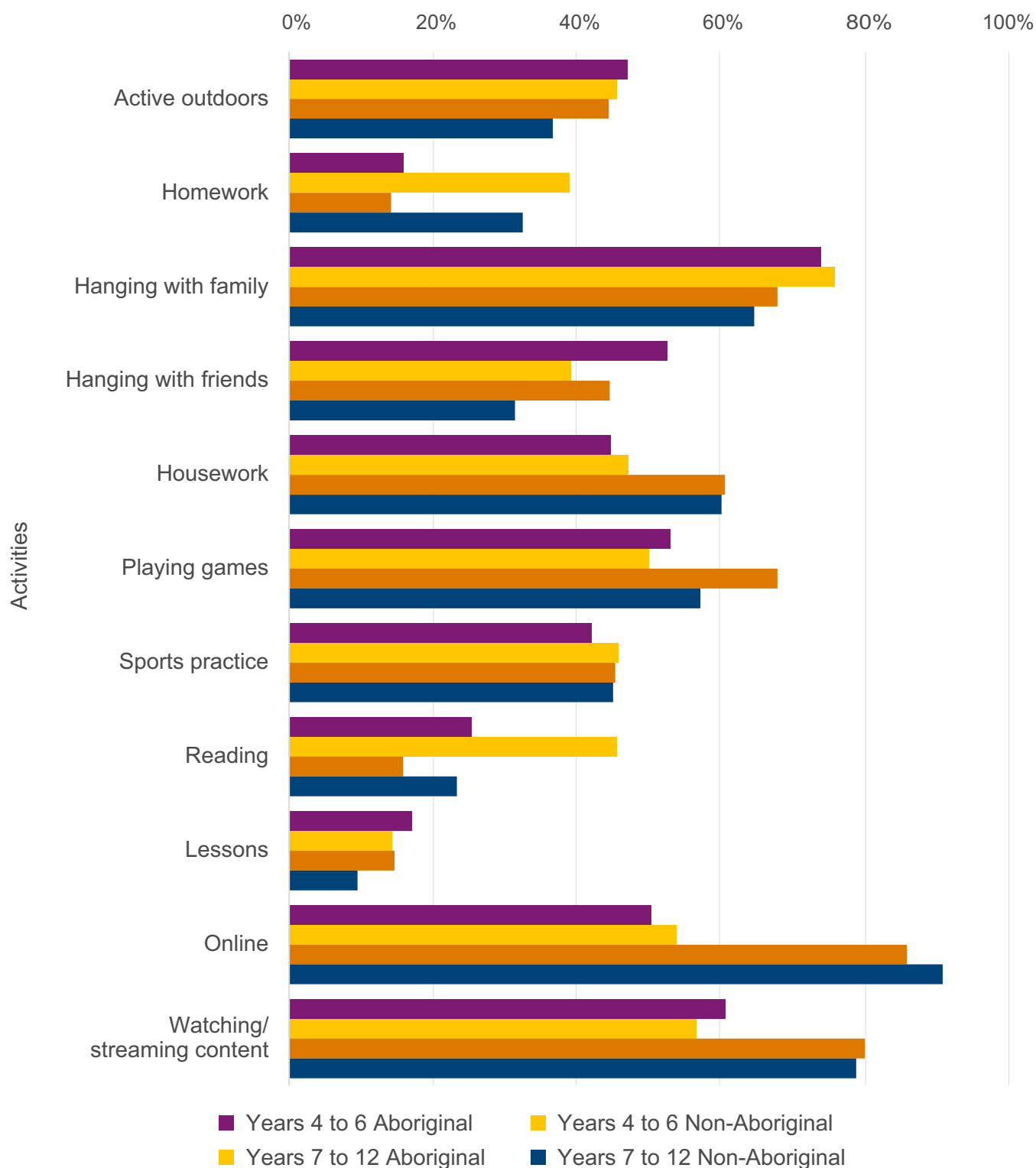
When asked about time spent doing activities outside of school, Aboriginal children and young people were more likely to identify hanging out with their friends daily and participating in daily extracurricular lessons. Aboriginal young people were more likely to identify playing outdoors daily, but also more likely to play online games daily, compared to non-Aboriginal young people. Aboriginal children and young people were both less likely to complete homework daily, or read daily, and more likely to say they ‘never’ did homework or reading.

Graph 9.2.6: Proportion of Year 4–12 students reporting problematic behaviours when they were unable to be online or on their phone, by year group and Aboriginality



9. Key findings regarding Aboriginal children and young people

Graph 9.2.7: Proportion of Year 4–12 students participating in extracurricular activities daily, by year group and Aboriginality



9. Key findings regarding Aboriginal children and young people

Most children (81.5%) and young people (75.3%) agreed they had friends who lived near them. However, when asked if their neighbours were friendly, Aboriginal children were less likely to agree (Aboriginal 81.5% vs non-Aboriginal 91.4%). Aboriginal children were also less likely to agree when asked if people at the shops were friendly (85.4% vs non-Aboriginal 90.7%). There were minimal differences among young people.

When asked about their community, children and young people had similar results across groups regarding whether they felt like they belonged to their community, liked where they lived, had fun things to do, and had outdoor places to visit. Notably, Aboriginal children (23.4%) and young people (43.9%) were more likely to agree with the statement there is nothing to do in their area (non-Aboriginal children 10.0%; non-Aboriginal young people 34.6%).

"I would change some of the shopping centres because I find that some of them are really sketchy and some houses."

Girl aged 10, metropolitan

"To add some sort of fun thing to do! Maybe more skate parks or more sport areas-long jump and for sprinting."

Girl aged 11, metropolitan

"Families, communities, schools and adults can support by making the area or the environment that the person is in to be more inviting and involving and to make the teenagers to have things to do so they aren't bored and try and do things their not supposed to do."

Boy aged 13, metropolitan

9.3 Safe and supported

Aboriginal students reported greater challenges in material basics and family concerns yet expressed more confidence about feeling safe within their community.

9.3.1 Family

Aboriginal children and young people were less likely to report feeling they had supportive adults around them. Specifically, they were less likely to identify they 'very much' believed they had someone who believes they will achieve good things, someone who listens to them, or someone who they can talk to about their problems.

"Find a balance of having a connection and conversation with me and also letting me make my own decisions to do the things I wanna do."

Boy aged 16, metropolitan

"My parents care for me and are helpful."

Boy aged 16, metropolitan

"My mother makes me so happy."

Girl aged 11, very remote

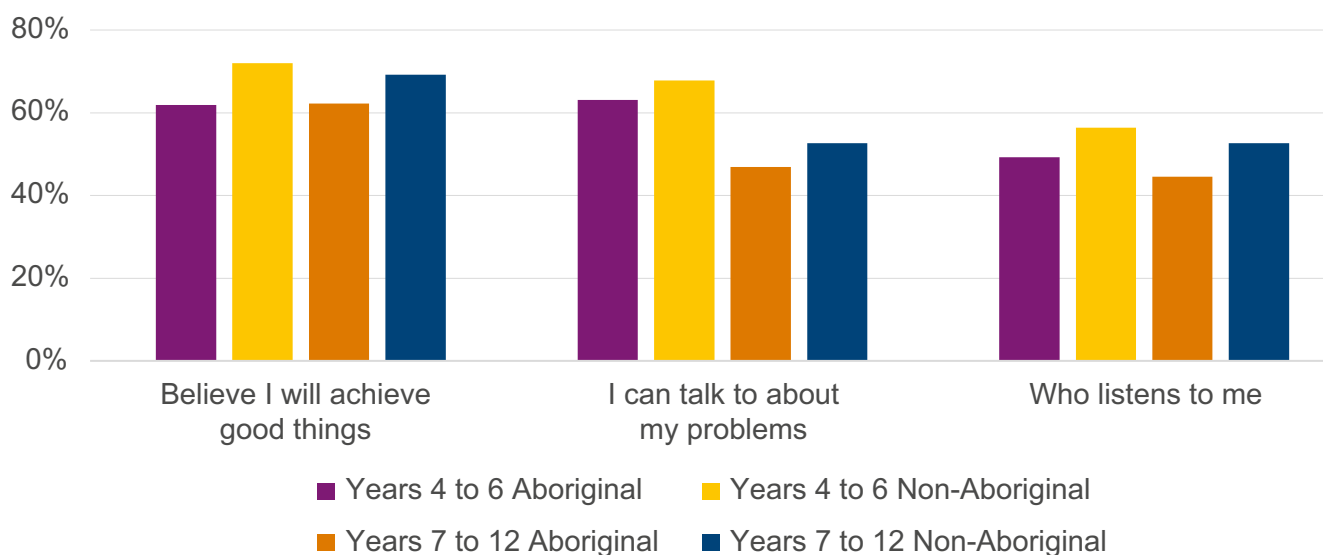
"My mum and other adults in my life besides my dad are doing a good job in listening to me and helping I just want my dad to do the same."

Girl aged 12, metropolitan

When asked specifically about how much they believed their family members cared about them, Aboriginal children were less likely than non-Aboriginal children to say their mothers and fathers cared about them 'a lot'.

9. Key findings regarding Aboriginal children and young people

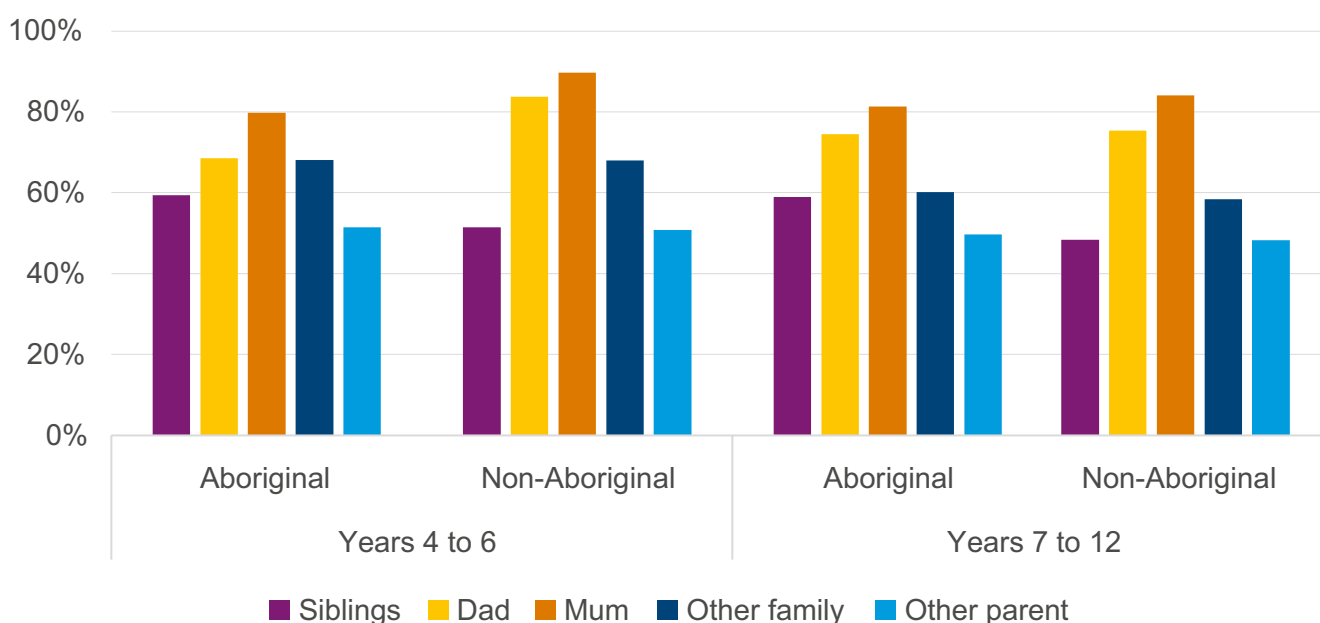
Graph 9.3.1: Proportion of Year 4–12 students who strongly agree with statements about supportive adults in their lives, by year group and Aboriginality



There were minimal differences between young people. However, Aboriginal children and young people were more likely than their non-Aboriginal peers to say their brothers or sisters cared about them 'a lot'.

Aboriginal children and young people were more likely to move homes multiple times, live with more than seven family members, and live with extended family members, such as aunts, uncles, grandparents and other relatives.

Graph 9.3.2: Proportion of Year 4–12 students whose family members care a lot, by year group and Aboriginality



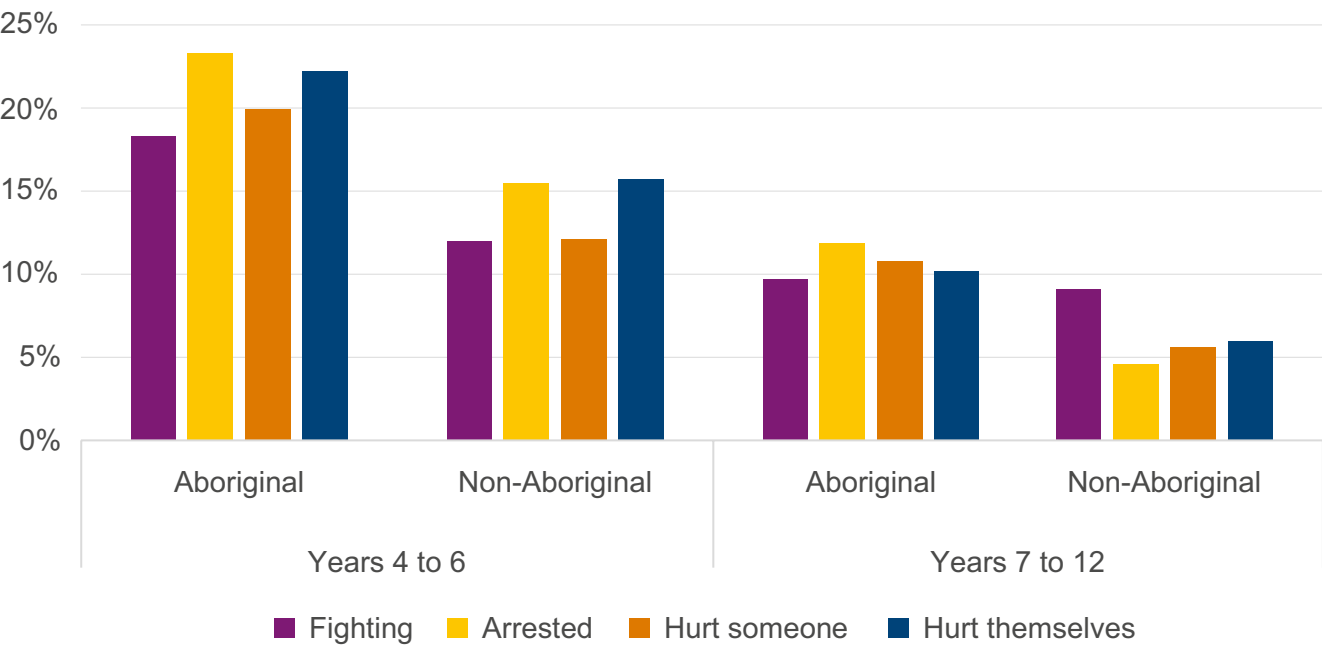
9. Key findings regarding Aboriginal children and young people

9.3.2 Safe in the home

Aboriginal children and young people were slightly more likely to say their family gets along ‘very well’. Responses about how often they felt safe at home were consistent across young people. While Aboriginal children were slightly more likely to say ‘all the time’ on the question of safety at home (Aboriginal 71.8% vs non-Aboriginal 69.6%), they were also more likely to say ‘sometimes’ (Aboriginal 9.6% vs non-Aboriginal 4.3%). Responding to further questions about worries over someone in their home fighting,

being arrested, hurting somebody, or hurting themselves, Aboriginal children and young people were more likely to say ‘a lot’ across all statements. Young people were also asked if they had ever spent a night away because of an issue at home; 45.4 per cent of Aboriginal young people said ‘yes’, compared to 24.2 per cent of non-Aboriginal young people. There were only small differences evident between young people when asked about the length of time spent away.

Graph 9.3.3: Proportion of Year 4–12 students who worry a lot that their family members will be fighting, arrested, hurt someone, or hurt themselves, by year group and Aboriginality



9. Key findings regarding Aboriginal children and young people

9.3.3 Caring for others

Aboriginal children (65.2%) and young people (56.2%) were more likely to say 'yes' when asked if they were helping to take care of anyone at home (non-Aboriginal children 55.7%; non-Aboriginal young people 34.5%).

Preparing meals, shopping, and entertaining were the most frequently chosen supports provided by all children. However, Aboriginal children were more likely to select preparing meals (Aboriginal 51.2% vs non-Aboriginal 46.9%), shopping (Aboriginal 45.5% vs non-Aboriginal 26.6%), as well as feeding (Aboriginal 35.1% vs non-Aboriginal 19.7%). Young people were also most likely to help prepare meals (Aboriginal 66.9% vs non-Aboriginal 61.0%) and to help entertain (Aboriginal 52.3% vs non-Aboriginal 51.7%). Aboriginal young people were notably more likely to help with feeding than their non-Aboriginal peers (Aboriginal 40.9% vs non-Aboriginal 26.9%) and bathing (Aboriginal 35.3% vs non-Aboriginal 17.1%).

Most students in Years 4 to 6 and Years 7 to 12 reported helping care for siblings (Years 4 to 6, 71.5% vs Years 7 to 12, 70.8%) and caring for parents (Years 4 to 6, 53.1% vs Years 7 to 12, 41.7%). However, Aboriginal students in Years 4 to 6 (35.0%) and Years 7 to 12 (23.8%) were more likely to select caring for grandparents than their peers (non-Aboriginal Years 4 to 6, 18.1% vs Years 7 to 12, 11.7%).

Young people were further asked if they considered themselves to be a young carer. Aboriginal young people were more likely to say 'yes' (Aboriginal 17.2% vs non-Aboriginal 7.6%). The three most frequently chosen caring roles performed by Aboriginal young people were changing dressings (Aboriginal 29.6% vs non-Aboriginal 22.9%), personal hygiene (Aboriginal 28.7% vs

non-Aboriginal 32.7%), and supporting someone with transport (Aboriginal 23.0% vs non-Aboriginal 15.3%).

9.3.4 Material basics

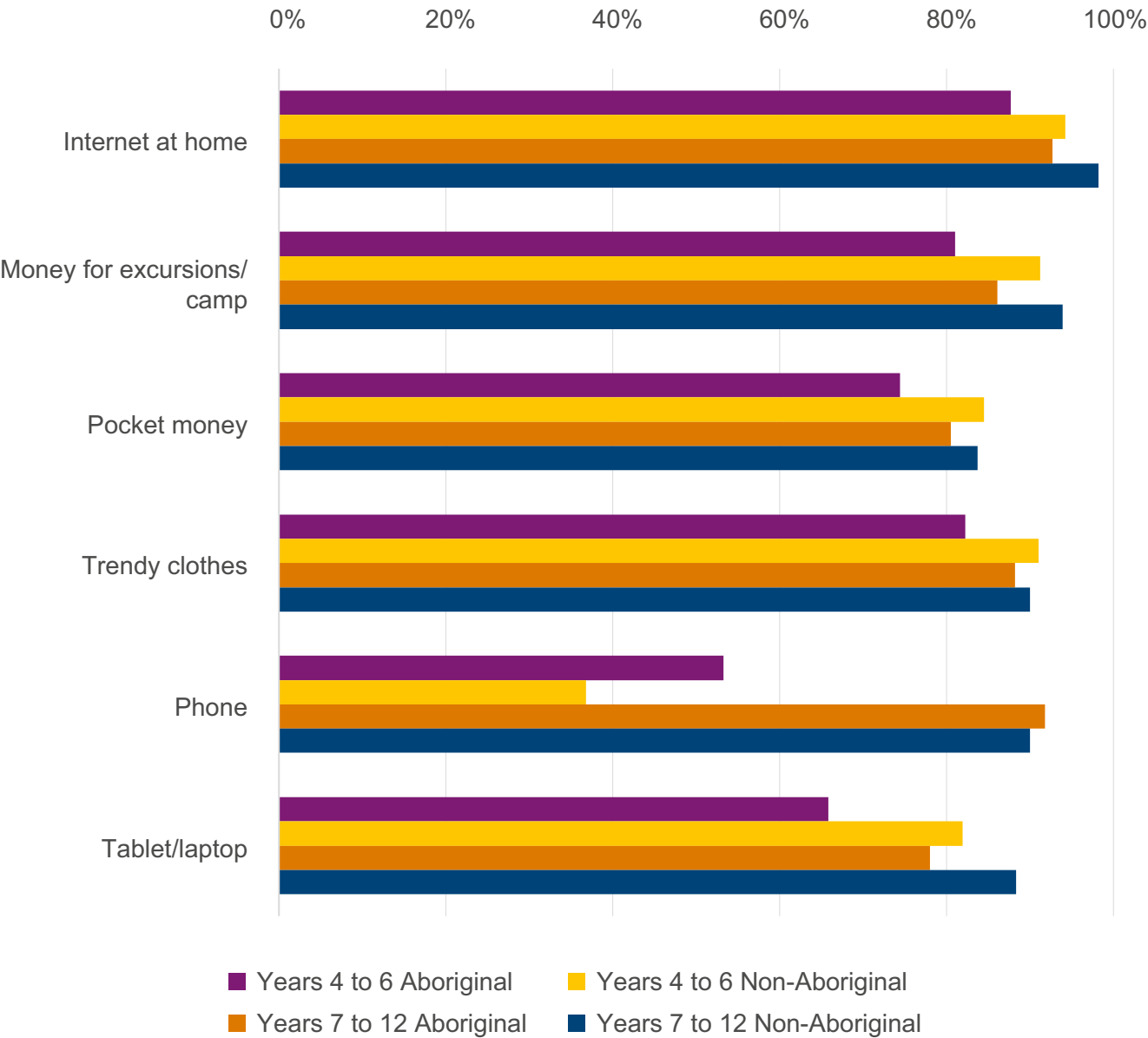
Material basics are a key determinant of wellbeing. Inequitable access to these basics can limit children and young people's participation in activities and learning experiences that support their future development. Most children and young people reported that their family had access to at least one car. Aboriginal children were more likely to respond 'no' to this question (16.2%) compared to non-Aboriginal children (3.7%). This difference reduced when comparing young people (Aboriginal 7.3% vs non-Aboriginal 2.5%). There was minimal difference when asked the question of whether their family had money for fuel. It is important to note that the survey was conducted prior to the 2026 fuel crisis and therefore may not be reflective of their current experience.

When asked about having enough food at home, Aboriginal children were slightly less likely to say 'always' (65.2%) or 'often' (19.5%) compared to non-Aboriginal children ('always' 71.8%; 'often' 21.1%). The disparity was even smaller between the cohorts of Aboriginal and non-Aboriginal young people.

When asked about other material basics that children and young people had, Aboriginal children were less likely to say they had access to internet at home, money for excursions/camp, pocket money, trendy clothes, or tablets and computers. However, they were more likely to identify having their own phone. Aboriginal young people were also less likely to report having those material basics, but the differences between groups were smaller.

9. Key findings regarding Aboriginal children and young people

Graph 9.3.4: Proportion of Year 4–12 students who have material basics, by year group and Aboriginality



“Less littering and less people littering and more parks and and low prices near me in shops and rasisms.”

Girl aged 11, metropolitan

9. Key findings regarding Aboriginal children and young people

9.3.5 Community

In their community, Aboriginal children (36.8%) and young people (32.5%) were more likely to say they felt safe 'all the time' (non-Aboriginal children 25.7%; non-Aboriginal young people 28.0%). Young people were asked if they felt safe on public transport; Aboriginal young people were less likely to say 'all the time' (Aboriginal 38.3% vs non-Aboriginal 45.0%).

"For everyone to be nice to each other."

Girl aged 10, metropolitan

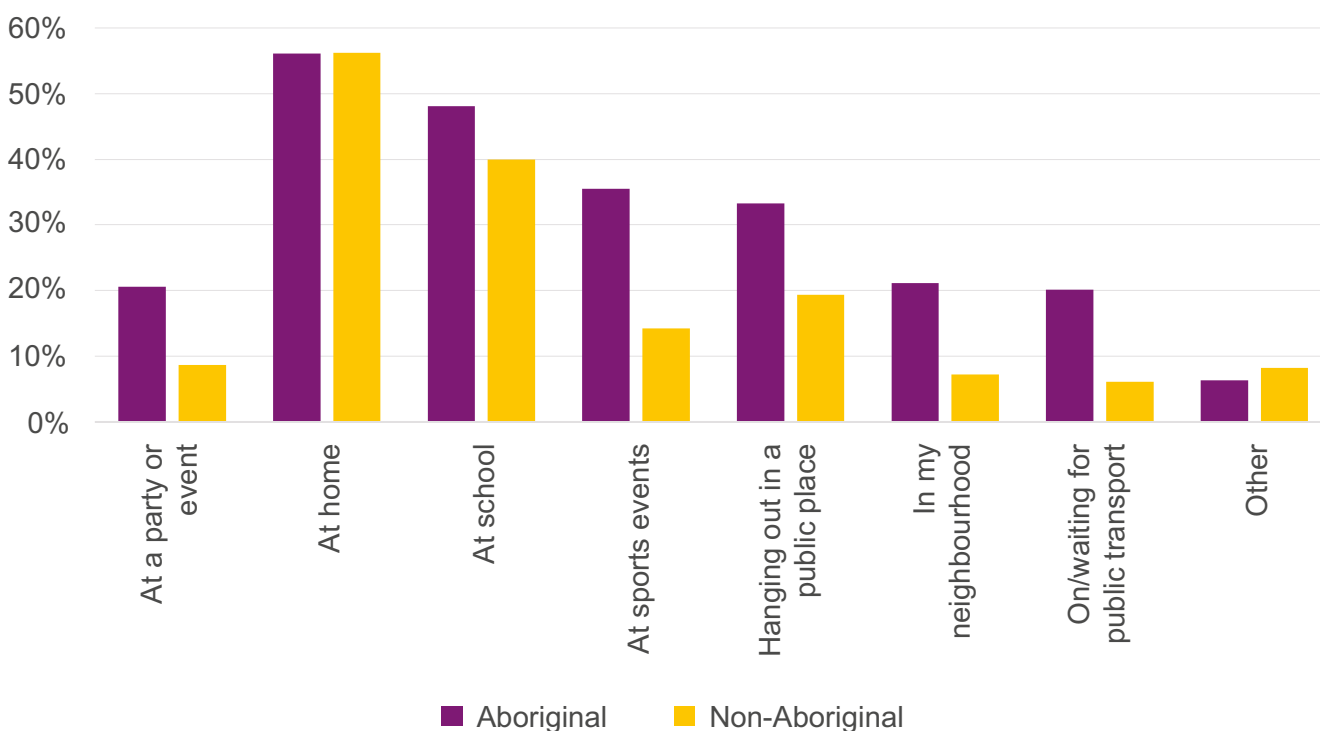
"I don't really talk to anyone that much I usually like to be left alone when I'm sad."

Boy aged 12, metropolitan

9.3.6 Physical violence

Young people were asked about their experiences of physical violence. Two in five young people reported experiencing violence (Aboriginal 45.2% vs non-Aboriginal 41.1%) and had experienced violence five or more times in the past 12 months (Aboriginal 20.9% vs non-Aboriginal 17.8%). When asked where this occurred, 56.2 per cent of young people said at home. Aboriginal young people were more likely to identify experiencing violence at a party/event, school, sports events, public spaces, their neighbourhood and public transport.

Graph 9.3.5: Proportion of Year 7–12 students who have experienced violence at various locations, by location and Aboriginality



9. Key findings regarding Aboriginal children and young people

9.4 Learning and participating

Although most Aboriginal students expressed that they like school, want to be there, and feel supported, a considerable number still navigate challenges, such as frequent school transitions, fluctuating relationships with classmates and teachers, higher suspension rates, and bullying at levels similar to their non-Aboriginal peers.

9.4.1 Attendance

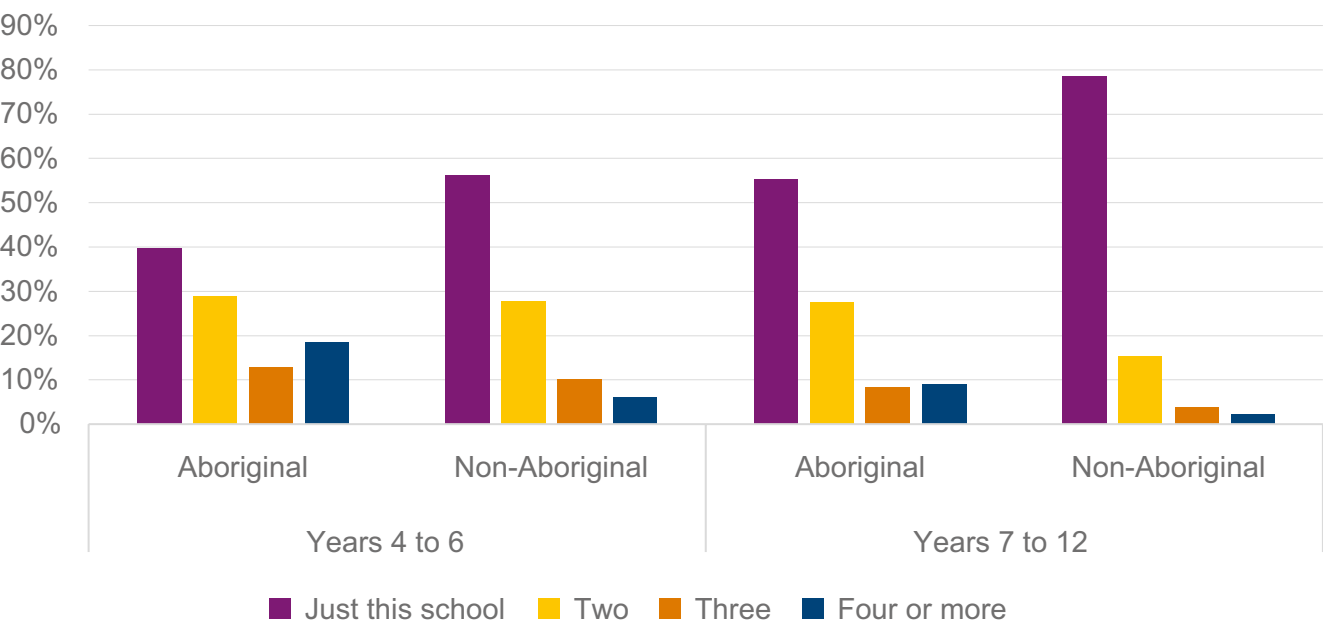
Aboriginal young people were less likely to report that attending school daily was ‘very important’ (Aboriginal 31.0% vs non-Aboriginal 40.4%), but more likely to say it was ‘somewhat important’ (Aboriginal 53.5%

vs non-Aboriginal 47.0%). When asked if they had ever been suspended, Aboriginal Years 4 to 6 students were three times more likely to say ‘yes’ (Aboriginal 27.3% vs non-Aboriginal 7.4%), while Aboriginal Years 7 to 12 students were twice as likely (Aboriginal 41.1% vs non-Aboriginal 17.4%). There were minimal differences in the number of days suspended across both cohorts of young people.

9.4.2 Sense of belonging at school

Compared with their non-Aboriginal peers, Aboriginal children and young people were more likely to move schools three or more times.

Graph 9.4.1: Number of schools attended by Year 4–12 students, by year group and Aboriginality



9. Key findings regarding Aboriginal children and young people

Despite a notable proportion of Aboriginal children moving schools more frequently, this did not seem to notably impact them liking school 'a lot' (Aboriginal 36.2% vs non-Aboriginal 32.2%), or their feeling of belonging in school (Aboriginal 40.3% vs non-Aboriginal 36.3%). However, Aboriginal young people were more likely to say they did not like school 'at all' (Aboriginal 18.0% vs non-Aboriginal 12.3%), felt like they didn't belong at school (Aboriginal 39.1% vs non-Aboriginal 32.4%), and strongly disagreed when asked if they liked learning (Aboriginal 23.0% vs non-Aboriginal 17.6%). Despite these responses, Aboriginal young people were also slightly more likely to strongly agree that they did enjoy learning (Aboriginal 17.2% vs non-Aboriginal 13.7%).

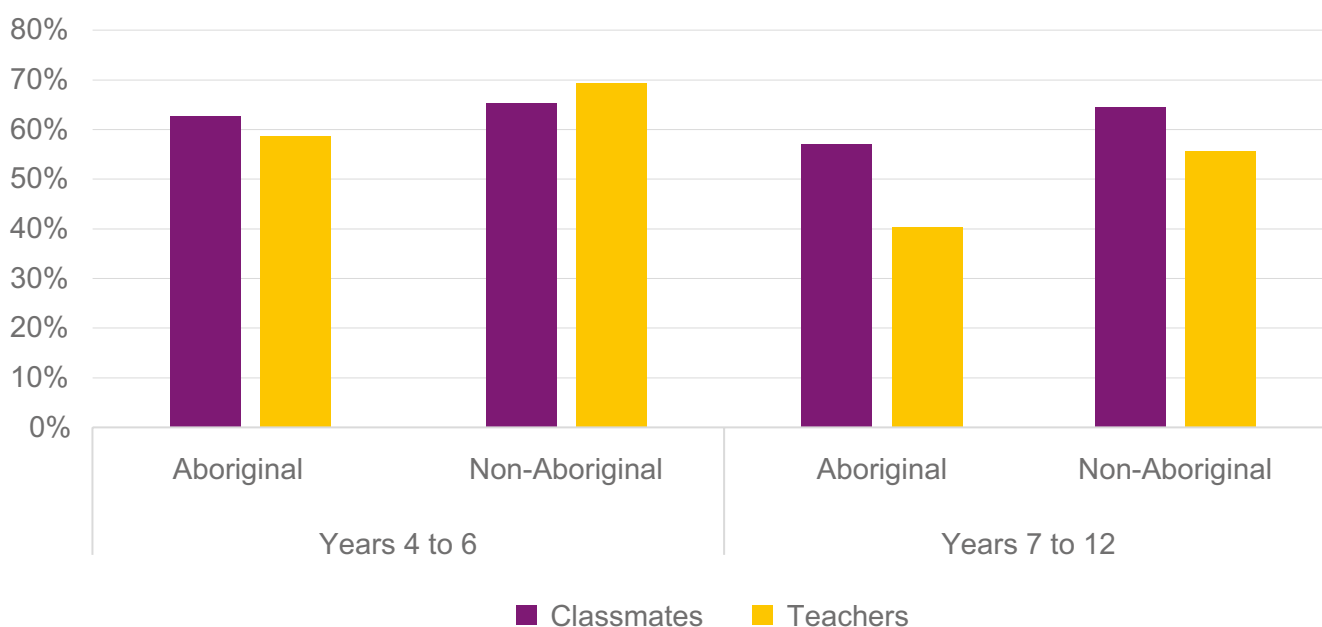
"School gives me a break from being in a toxic household, my brothers and sisters make me feel better and cheer me up."

Girl aged 13, metropolitan

9.4.3 Relationships with peers and teachers

In the classroom, while Aboriginal children and young people were less likely to say they 'usually' got along with their classmates and teachers compared to their non-Aboriginal peers, they were more likely to report that they 'sometimes' got along with their classmates and teachers.

Graph 9.4.2: Proportion of Year 4–12 students who usually get along with their teacher and classmates, by year group and Aboriginality



9. Key findings regarding Aboriginal children and young people

Responses to questions about whether they had a supportive adult at school who believed they would achieve good things, listen to them, and cared about them, found that Aboriginal children had similar experiences to their peers. Aboriginal young people were more likely to ‘very much’ agree with the statement that a supportive adult at school believes they will achieve good things (Aboriginal 35.2% vs non-Aboriginal 31.7%), and who really cares about them (Aboriginal 30.4% vs non-Aboriginal 22.8%). Although, when asked if they were able to receive extra help in class when needed, Aboriginal children were less likely to say ‘almost always’ (Aboriginal 42.1% vs non-Aboriginal 49.3%), but more likely to say ‘sometimes’ (Aboriginal 49.7% vs non-Aboriginal 42.7%). At home, Aboriginal children were less likely to report having someone asking about their school or homework ‘often’ (Aboriginal 36.0% vs non-Aboriginal 51.2%) and three times more likely to report ‘never’ (Aboriginal 16.6% vs non-Aboriginal 5.2%). Similarly, Aboriginal young people were slightly less likely to select ‘almost always’ when asked if they would receive extra help from their teacher, and notably less likely to say ‘often’ (Aboriginal 29.5% vs non-Aboriginal 52.1%) in relation to someone in their family asking about school or homework.

“Talking to any one at school will only got you reported and in more trouble with police and/or social services. This never helps anyone and only makes situations worse.”

Girl aged 16, metropolitan

“They try to understand how I’m feeling.”

Boy aged 12, metropolitan

9.4.4 Safety at school

Nearly one in two Aboriginal children (45.0%) reported that they felt safe ‘all the time’, compared to 35.9 per cent of non-Aboriginal children. However, more Aboriginal children were likely to say they felt safe ‘a little bit of the time’ or ‘never’ (Aboriginal 15.3% vs non-Aboriginal 7.9%, combined responses). Aboriginal young people were also slightly more likely to say they felt safe ‘all the time’ (Aboriginal 31.9% vs non-Aboriginal 27.0%).



I feel safe and protected by some friends and I feel happy at school and home.”

Boy aged 14, metropolitan

9. Key findings regarding Aboriginal children and young people

9.4.5 Bullying

There were no notable differences in the proportion of Aboriginal and non-Aboriginal Years 4 to 6 (41.2%) and Years 7 to 12 (32.8%) students who had experienced bullying. Nor was there a difference in the proportion who had experienced bullying in the past three months (Years 4 to 6, 46.2%; Years 7 to 12, 40.0%). However, when asked about the location of bullying within the past three months, Aboriginal children were more likely to experience bullying commuting to and from school (Aboriginal 35.0% vs non-Aboriginal 19.8%), or somewhere other than home, school or online (Aboriginal 44.7% vs non-Aboriginal 37.5%). Aboriginal young people were more likely to be bullied at home, going to and from school, at school, online, or somewhere else.

Notably, while Aboriginal young people were more likely to identify being bullied at school 'several times a week or more' (Aboriginal 34.7% vs non-Aboriginal 24.8%), they were also more likely to identify they had not been bullied at school within the past three months (Aboriginal 16.1% vs non-Aboriginal 8.1%). Regarding frequency, Aboriginal young people were twice as likely to experience online bullying 'several times a week or more' (Aboriginal 17.3% vs non-Aboriginal 8.9%), or to experience bullying somewhere other than the locations listed (Aboriginal 16.7% vs non-Aboriginal 5.9%).

While the proportion of Aboriginal children and young people who missed school due to bullying was consistent with their peers, they were more likely to miss four or more days of school due to concerns of bullying.

Table 9.4.1 Proportion of Year 4 to 6 students who have missed multiple days of school due to bullying, by Aboriginality (percentage)

Aboriginality	Four or more times (%)	Two or three times (%)	Once (%)	None (%)
Aboriginal	16.2	12.6	26.5	32.9
Non-Aboriginal	10.2	16.4	33.3	35.4

Table 9.4.2 Proportion of Year 7 to 12 students who have missed multiple days of school due to bullying, by Aboriginality (percentage)

Aboriginality	Four or more times (%)	Two or three times (%)	Once (%)	None (%)
Aboriginal	20.6	14.8	18.4	42.2
Non-Aboriginal	10.2	13.9	15.6	55.6

9. Key findings regarding Aboriginal children and young people

Young people were asked further questions about their experiences of bullying.

Aboriginal young people were more likely to report being bullied because of their cultural background or skin colour within the past three months (Aboriginal 44.6% vs non-Aboriginal 23.3%) and were more likely to experience this 'several times a week' (Aboriginal 13.2% vs non-Aboriginal 7.9%). They were also twice as likely to receive inappropriate messages several times a week (Aboriginal 18.8% vs non-Aboriginal 8.0%) and to have messages sent about them to others (Aboriginal 15.9% vs non-Aboriginal 7.9%). When asked if they had perpetrated any forms of bullying, overall, Aboriginal young people were more likely to say 'yes' (Aboriginal 23.6% vs non-Aboriginal 15.1%).

These findings demonstrate that while a similar proportion of young people may experience bullying, Aboriginal children and young people are experiencing persistent bullying across multiple locations. Persistent bullying can have serious negative impacts to mental health, physical health, and socioemotional wellbeing.¹³² Racism experienced by Aboriginal children and young people is not merely an individual problem but is instead a pervasive societal issue that continues to shape lives and wellbeing.¹³³

9.4.6 School achievement

Aboriginal children were less likely to identify they did well at school (Aboriginal 34.9% vs non-Aboriginal 45.2%) but were more likely to say they did 'okay' (Aboriginal 52.4% vs non-Aboriginal 46.2%). This self-perception of achievement worsened in Years 7 to 12, with more Aboriginal young people likely to select 'about average' (Aboriginal 43.6% vs non-Aboriginal 39.0%) or 'below/far below average' (Aboriginal 29.1% vs non-Aboriginal 14.6%, combined responses). When young people were further asked if they felt pressured about their schoolwork, only a five per cent difference across the two cohorts was found. Aboriginal young people were more likely to select 'a little' (Aboriginal 42.9% vs non-Aboriginal 37.1%).



Have more opportunities for sporty people like better pathways and better education otherwise pretty good."

Girl aged 14, inner regional

9. Key findings regarding Aboriginal children and young people

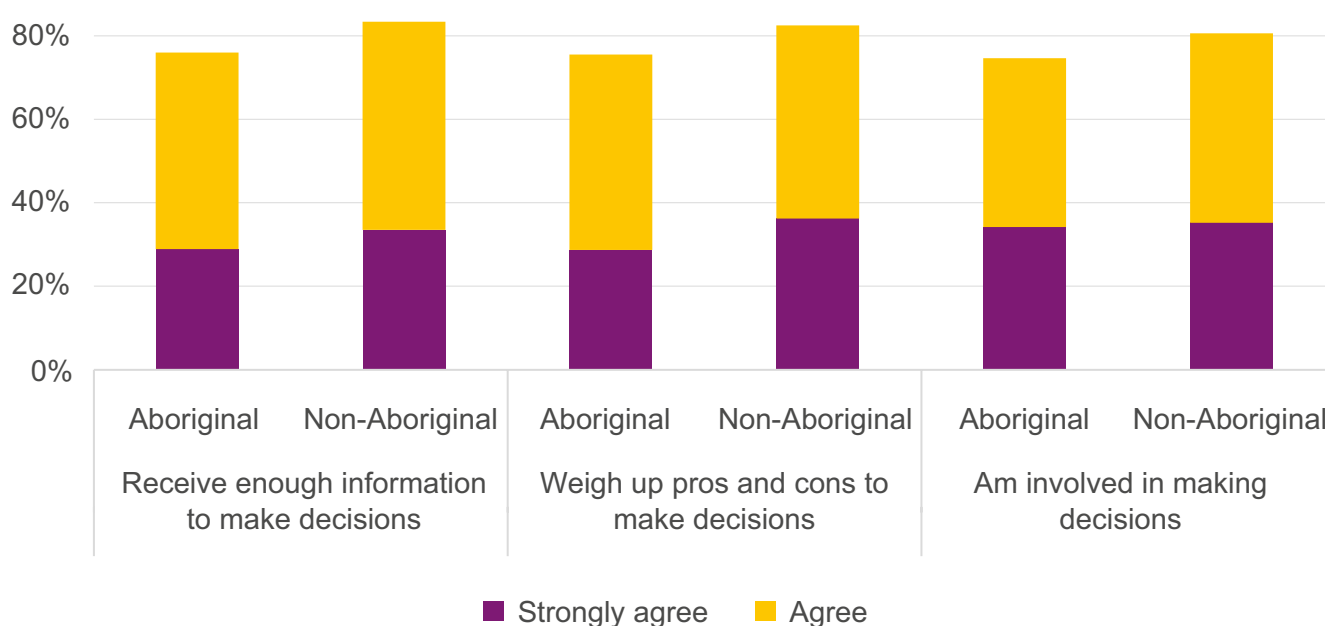
Looking towards their future and their desired highest level of education, Aboriginal young people predominantly selected Year 12 (33.0%) or university (24.5%), followed by TAFE (16.3%). By comparison, their non-Aboriginal peers overwhelmingly selected university (62.1%), followed by Year 12 (13.3%) and TAFE (9.8%). Increasing the proportion of Aboriginal young people who have completed a tertiary degree is Outcome 6 of the Closing the Gap National Agreement, but Aboriginal young people continue to be under-represented in Australian universities.¹³⁴ Our findings demonstrate that the aspiration of Aboriginal young people to enter universities is significantly lower than among their non-Aboriginal peers. This suggests that Aboriginal young people need to be better supported during secondary school to understand and obtain the educational opportunities available to them.

9.4.7 Autonomy and independence

Young people were quite consistent in their independence, with minimal differences in relation to catching transport alone, cycling on main roads, travelling to and from school, or going to other locations. Aboriginal young people reported they were able to be out in their local area at night (43.4%) more than their non-Aboriginal peers (34.6%). In relation to work, they were also more likely to have had a paid job in the past year (Aboriginal 52.3% vs non-Aboriginal 46.2%). They reported that they were motivated by having their own money to spend (62.5%) and the desire to gain skills (10.7%).

There were small differences in responses when questioned about perceived autonomy. Aboriginal young people were less likely to 'strongly agree' or 'agree' that they can "weigh up the pros and cons to make a decision in their life", get "enough information to make a decision", and are "involved in making decisions".

Graph 9.4.3: Proportion of Year 7–12 students agreement with statements asking about their involvement in decision-making, by Aboriginality



Key findings regarding culturally and linguistically diverse children and young people

10



10. Key findings regarding culturally and linguistically diverse children and young people

Australia is one of the world's most culturally and linguistically diverse (CaLD) countries.¹³⁵ Accordingly, a very significant proportion of Australia's children and young people come from CaLD backgrounds. Their day-to-day experiences can differ from their peers' experiences due to influences such as migration, settlement pressures, language barriers, and navigating multiple cultural expectations.¹³⁶ These influences can shape how CaLD children and young people engage with school, community, and support systems.

Carefully examining the survey findings relating specifically to CaLD children and young people is important because it allows us to understand their unique experiences, identify where additional support or culturally responsive approaches may be needed, and ensure policies and services reflect the diversity of young people growing up in Western Australia.

Currently, there is no singular definition consistently used to define CaLD children and young people.¹³⁷ The Australian Bureau of Statistics measures CaLD using a suite of indicators, including place of birth, language spoken at home, and proficiency in English. Aboriginal or Torres Strait Islander people are not included in the CaLD cohort. As there is no consistent definition, the estimated proportion of CaLD children and young people in the Australian population ranges widely from 6.3 per cent to 43.1 per cent.¹³⁷

For the purposes of SOS25, CaLD children and young people were classified based on three variables. Children and young people

who were born outside Australia, or who reported speaking one or more languages other than English at home, were classified as CaLD. Children identifying as Aboriginal or Torres Strait Islander were not classified as CaLD (consistent with the ABS approach). In total, 4,718 CaLD children and young people participated in SOS25, equating to more than one-third of the sample (CaLD children 36.4%, CaLD young people 34.4%). More detailed information can be found in the Participants section of this report (section 4.2.4).

10. Key findings regarding culturally and linguistically diverse children and young people

10.1 Healthy and connected

10.1.1 Physical health

There were minimal differences between CaLD and non-CaLD children and young people in their perceptions of health and dental health. The two cohorts also held similar concerns about eating healthy food and being physically active.

Non-CaLD children were more inclined to wake before 7.00am (non-CaLD 69.1% vs CaLD 57.9%), while more CaLD children went to sleep after 9.00pm (CaLD 48.3% vs non-CaLD 29.1%). CaLD young people were also more inclined to sleep after 10.00pm (CaLD 62.5% vs non-CaLD 50.4%). Differences in reported wake-up times were minor.

The proportion of Years 4 to 6 and Years 7 to 12 students who ate breakfast and lunch were relatively similar between groups, although CaLD Years 7 to 12 young people were more likely to eat lunch daily (CaLD 63.7% vs non-CaLD 55.3%). Small differences were found in relation to eating dinner. Non-CaLD Years 4 to 6 children were more likely to eat dinner daily (non-CaLD 92.8% vs CaLD 86.8%), as were non-CaLD Years 7 to 12 young people (CaLD 87.6% vs non-CaLD 81.0%).

The importance of physical activity/sport was equal among Years 4 to 6 (65.4%), although a slight difference emerged in Years 7 to 12 (CaLD 53.1% vs non-CaLD 59.1%). A similar pattern of findings emerged regarding participation in exercise in the past week, with non-CaLD Years 7 to 12 being more likely to engage in exercise seven or more times in a week (non-CaLD 22.2% vs CaLD 17.6%).

While there were no differences when young people were asked if they had a long-term disability (7.9%), non-CaLD young people were more likely to identify having a long-term health condition (non-CaLD 20.1% vs CaLD 15.9%).

A notable difference was found in relation to neurodiversity, with non-CaLD young people found to be twice as likely to identify as neurodiverse (non-CaLD 35.7% vs CaLD 17.7%).

"I often feel shut down due to not expressing enough physical conditions, when they are there, I've just normalised them and learned to mask."

Girl aged 15, metropolitan

"Have more open discussions around things that are stigmatised."

Girl aged 17, metropolitan



I feel adults in general can help young people to understand and cope with their health and emotions and just help young people by being available."

Girl aged 15, very remote

10. Key findings regarding culturally and linguistically diverse children and young people

10.1.2 Mental health

Life satisfaction scores were consistent across both groups, as were findings relating to concerns about physical appearance (weight and appearance) and self-perception/identity.

Non-CaLD young people were nearly seven per cent more likely to say 'yes' to having a mental health concern (non-CaLD 37.3% vs CaLD 30.9%). Despite this finding, there were only small differences in responses exploring resilience, and responses to being asked if they had felt depressed for two weeks or more.

Both groups were equally confident in being able to find supports for their mental health online or at school. However, CaLD young people were less likely to know where to find support in their local area (CaLD 56.5% vs non-CaLD 64.6%). This may relate to being unfamiliar with the local area, or difficulty finding culturally appropriate supports.

The proportion of young people who reported having sought help for their mental health was the same across both groups, although perceptions of supports did differ in relation to extent-of-use and perceived helpfulness. Parents were the type of support most often used by young people (77.1%). However, CaLD young people found parents to be less helpful than non-CaLD young people (CaLD 55.0% vs non-CaLD 61.6%). Use and perceived helpfulness of friends as a support was consistent.

CaLD young people were more likely to turn to other family members for support (CaLD 65.4% vs non-CaLD 58.1%), but the proportion who found family members helpful was similar (CaLD 48.4% vs non-CaLD 45.5%). Lastly, CaLD young people were more likely to use websites/apps and social media (CaLD 45.1% vs non-CaLD 34.1%), and more likely to find them helpful (CaLD 29.1% vs non-CaLD 19.9%).

"Sometimes I wonder if telling my friends about my problems will make me look weak or hopeless, so I just keep it to myself and pray to god that I can confront my problems."

Girl aged 14, metropolitan

When young people were asked if they had attempted to seek help for their mental health in the past year but did not receive it, CaLD young people were more likely to say 'yes' (CaLD 28.2% vs non-CaLD 24.1%). The most common reasons for being unable to find help included feeling embarrassed/ashamed (CaLD 65.6% vs non-CaLD 62.1%) and being unsure of who to see or where to go (CaLD 41.2% vs non-CaLD 34.4%).

"I've never tried to seek help because I feel like I can handle it on my own; I also don't want to be a burden to other people. I don't want to appear as dramatic."

Girl aged 12, metropolitan

"I'm scared to ask for help."

Girl aged 14, metropolitan

10. Key findings regarding culturally and linguistically diverse children and young people

Many CaLD young people face mental health issues caused by stress due to migration, discrimination, and cultural adjustment, yet are less likely to access support or know where to go for support.^{135, 136} Cultural stigma around mental illness, expectations to maintain family privacy, and family dynamics, make it difficult to seek help from parents,¹³⁸ who may not be accustomed to discussing mental health. These same factors, along with potential language barriers, fear of being misunderstood, concern about stigma or discrimination,¹³⁹ or lack of knowledge on how to navigate the system,¹⁴⁰ can also limit CaLD young people's willingness or ability to reach out to external services. Many are left to manage their struggles alone.

10.1.3 Alcohol and other drugs

Young people in the two groups were broadly similar in expressing how much they had learnt at school about alcohol and other drugs (AOD). CaLD young people were more likely to say they did not know enough in relation to marijuana (CaLD 17.9% vs non-CaLD 14.2%) or were unsure (CaLD 19.8% vs non-CaLD 15.3%), and said they were unsure in relation to other drugs (CaLD 19.2% vs non-CaLD 14.4%). Similarly, results were consistent across both groups when respondents were asked about their awareness of the health impacts of AOD and acceptance of AOD use by peers.

CaLD young people were less likely to report that their friends had tried alcohol (CaLD 24.2% vs non-CaLD 34.4%), marijuana (CaLD 14.1% vs non-CaLD 21.4%), and vapes (CaLD 37.2% vs non-CaLD 42.5%).

Small differences were found when asked about trying cigarettes (CaLD 10.9% vs non-CaLD 14.5%), as well as further questioning if they had smoked a whole cigarette (CaLD 38.9% vs non-CaLD 43.6%). Frequency of smoking cigarettes was negligible. However, CaLD young people were notably less likely to have tried alcohol (CaLD 21.4% vs non-CaLD 31.8%). They were also less likely to identify drinking alcohol in the past four weeks (CaLD 37.3% vs non-CaLD 43.4%). Alcohol consumption within the past four weeks occurred at similar levels across both groups. When asked with whom they drank, CaLD young people were more likely to report drinking with family (CaLD 50.7% vs non-CaLD 41.4%) and drinking alone (CaLD 17.5% vs non-CaLD 13.5%).

Minimal differences were found between the two groups as to whether they had tried marijuana, vapes, or other drugs. CaLD young people were less likely to say they knew where to go for help with AOD (CaLD 65.7% vs non-CaLD 71.0%).

10. Key findings regarding culturally and linguistically diverse children and young people

10.1.4 Sexual health

Across both groups, young people held similar perceptions of their school-based education on pregnancy, contraception, and sexual health. When asked if they felt they knew enough about pregnancy and contraception, CaLD young people were less likely to say 'yes' (CaLD 70.2% vs non-CaLD 76.8%), but they scored similarly on topics of consent, respectful relationships, and sexual health. However, they were less likely to answer 'yes' when asked if they knew where to go if they needed help with their sexual health (CaLD 55.9% vs non-CaLD 61.6%).

The proportion of CaLD young people who reported experience with sexual intimacy was less than that of non-CaLD young people (CaLD 13.6% vs non-CaLD 20.4%).

Nonetheless, they were just as likely to experience being sent unwanted sexual messages (CaLD 35.9% vs non-CaLD 36.6%), and at a similar frequency as non-CaLD young people.

10.1.5 Problematic phone use and gaming

CaLD Years 4 to 6 and Years 7 to 12 students were more likely than non-CaLD students to have experienced some anxiety when they were unable to game.

By comparison, about eight per cent more non-CaLD students reported 'never' feeling anxious (Table 10.1.1). Minimal differences were found in the responses to the question about whether they felt anxious when they could not be online, or could not use their phone, or ever went without eating or sleep due to being online.

10.1.6 Local area and community

Promisingly, there were negligible differences between groups when asked if the people in their area or at the shops were friendly and if they had friends nearby. CaLD children and young people were also equally likely to agree that they felt like they belonged in their community, liked where they lived, and had fun things to do or places to visit.

"For it to be a close community, where it's not that busy with cars, there is lots of nature and where kids can play out on the streets in the community happily after school every day, like the outback town I used to live in."

Girl aged 11, metropolitan

Table 10.1.1 Proportion of Years 4-12 students who feel anxious when they are unable to game, by year group and CaLD status (percentage)

Year group	Group	Very often (%)	Fairly often (%)	Not very often (%)	Never/ Almost never (%)
Years 4 to 6	CaLD	12.6	14.8	21.6	51.0
	Non-CaLD	7.1	9.3	24.5	59.1
Years 7 to 12	CaLD	4.1	6.8	28.0	61.1
	Non-CaLD	2.4	4.7	23.6	69.3

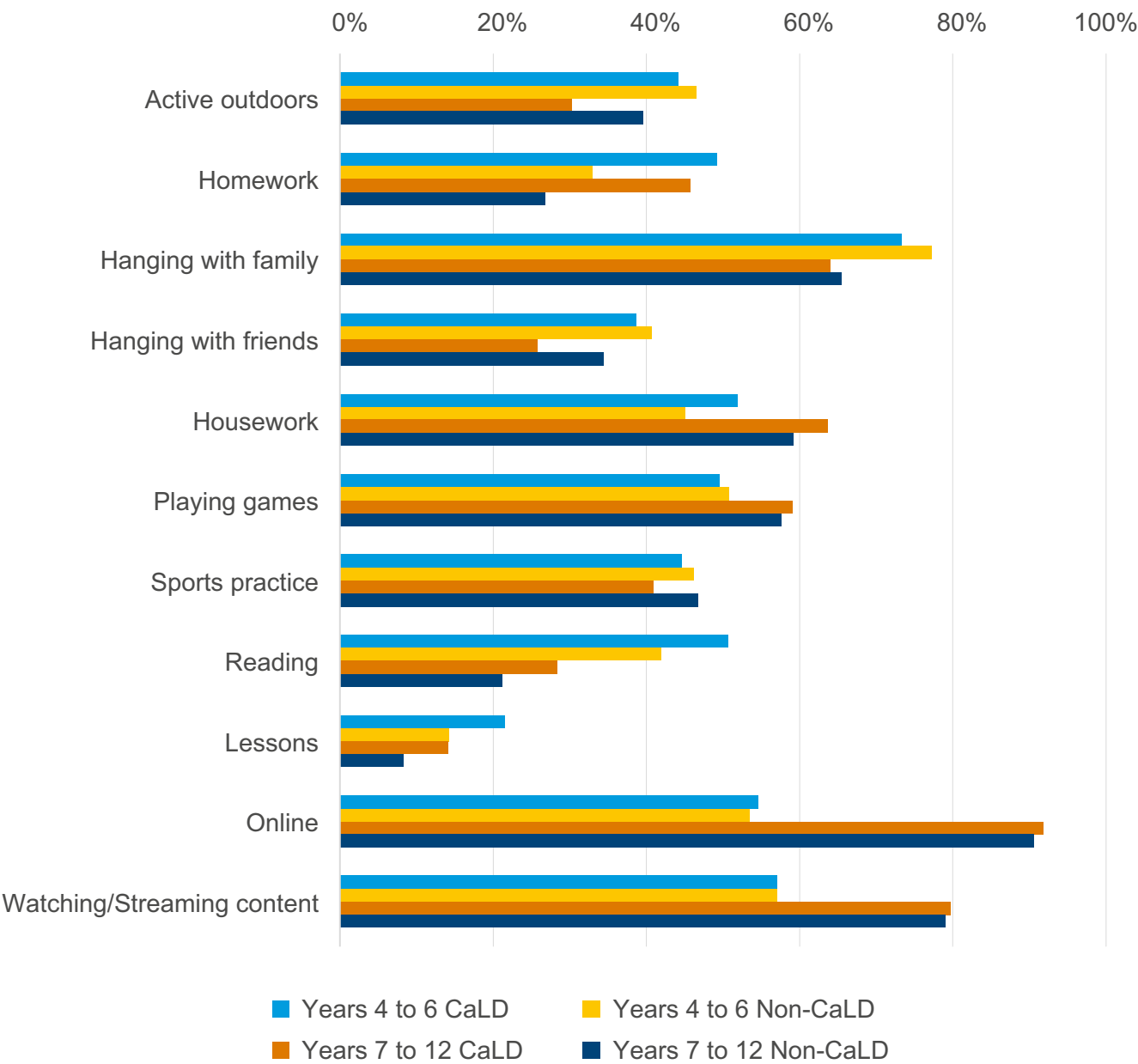
10. Key findings regarding culturally and linguistically diverse children and young people

10.1.7 Time spent doing activities

Children spent an equal amount of time being active outdoors, hanging out with family, hanging out with friends, playing games on consoles, playing sport, using the internet, and watching TV/streaming

services. Differences were found in the proportion of time children spent doing homework, reading a book, taking lessons, and helping with housework, with CaLD children more likely to engage in these activities daily.

Graph 10.1.1: Proportion of Year 4–12 students participating in extracurricular activities daily, by year group and CaLD status



10. Key findings regarding culturally and linguistically diverse children and young people

There were numerous differences between young people when asked about how much time they spent participating in activities outside of school. CaLD young people were more likely to complete homework, read daily, and take lessons daily or weekly. Contrastingly, non-CaLD young people were more likely to report being outdoors, seeing friends, and playing sports daily. Young people in the two groups spent a similar amount of time hanging out with family, helping with housework, playing games, being online, or watching/streaming movies and other shows.

CaLD children and young people were disproportionately unsure about where to find support in their local area and were less likely to feel they have a trusted adult to talk to when facing difficulties. This reflects broader patterns of limited-service awareness, cultural stigma

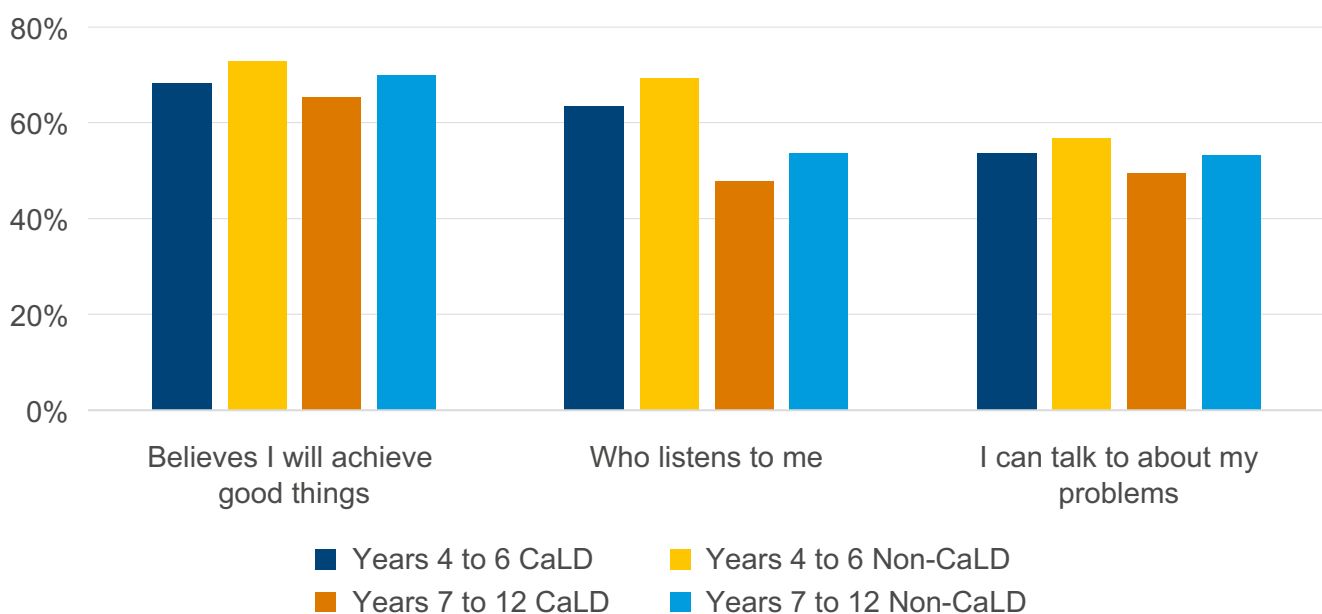
associated with seeking help, and communication barriers within families and communities. As a result, many CaLD young people navigate emotional distress without clear pathways to support or meaningful adult guidance.

10.2 Safe and supported

10.2.1 Supportive relationships

CaLD and non-CaLD Years 4 to 6 students and Years 7 to 12 students gave similar responses when asked if they had someone in their life who believes they will achieve good things, and who listens when they have something to say. However, the proportion of CaLD Years 4 to 6 students and Years 7 to 12 students who responded that it was 'very much true' they had a parent or adult to talk to about their problems was less than the corresponding proportion of non-CaLD students.

Graph 10.2.1: Proportion of Year 4–12 students who thought it was very much true that they had a supportive parent/adult who believed they will achieve good things, listen to them, and could talk to about their problems, by year group and CaLD status



10. Key findings regarding culturally and linguistically diverse children and young people

This result was corroborated by responses in a later question which asked young people if they had an adult they would be comfortable to talk to about a serious problem: CaLD young people were less likely to say ‘yes’ (CaLD 80.2% vs non-CaLD 86.3%). These findings are consistent with the previous discussion in section 6.1.2 of this report, regarding some CaLD children and young people not being able to discuss difficult issues with their parents.¹³⁶

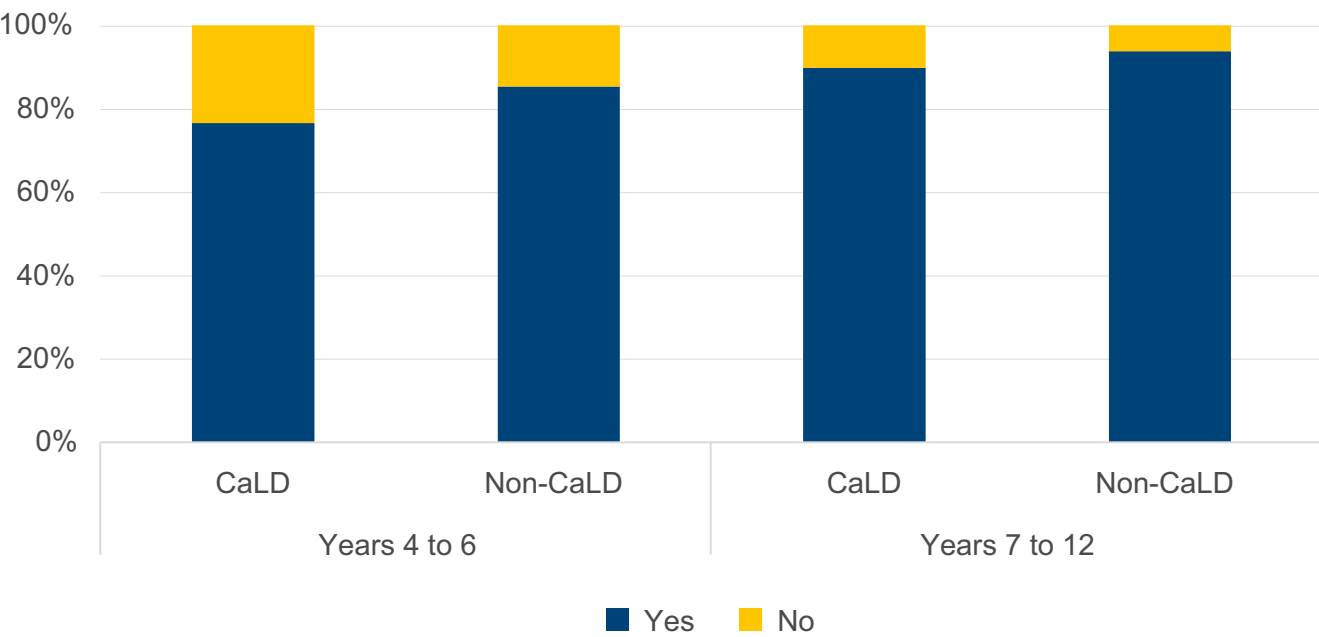
Minimal differences were found in relation to how much children and young people thought that members of their family cared about them, and how frequently they spoke to different groups online. Similarly, CaLD children and young people were equally likely to report being able to make and keep friends, having enough friends, and having friends who cared about them.

10.2.2 Material basics

The proportion of CaLD and non-CaLD Years 4 to 6 students and Years 7 to 12 students who reported having enough food, having a family car, and being able to afford fuel, was consistent across both groups. Children in Years 4 to 6 were equally likely to have access to internet, their own phone, own computer device, trendy clothing, and money for excursions. CaLD children in Years 4 to 6 were slightly less likely to report receiving pocket money (CaLD 80.3% vs non-CaLD 85.5%). Similarly, young people in Years 7 to 12 reported similar results except in relation to pocket money (CaLD 79.9% vs non-CaLD 84.7%) and having their own phone (CaLD 85.3% vs non-CaLD 91.7%).

CaLD children and young people were more likely to share their bedrooms with another person.

Graph 10.2.2: Proportion of Year 4–12 students who had their own bedroom, by year group and CaLD status



10. Key findings regarding culturally and linguistically diverse children and young people

10.2.3 Where they live

CaLD young people were more likely to live with both their mother (CaLD 92.4% vs non-CaLD 89.3%) and father (CaLD 82.4% vs non-CaLD 73.6%) in their main home. The number of people in this home was similar across both groups. Differences between children in relation to who they lived with or the number of people they lived with were negligible.

When asked if they had a second home, children were equally likely to say 'yes', but non-CaLD young people were more likely to say 'yes' (non-CaLD 20.6% vs CaLD 11.7%). CaLD young people were less likely to stay in their second home half the time (CaLD 31.7% vs non-CaLD 39.4%). Within the second home, CaLD young people were more likely to live with extended family members, such as an aunt or uncle (CaLD 17.6% vs non-CaLD 8.1%), grandparent (CaLD 23.5% vs non-CaLD 13.4%), or other

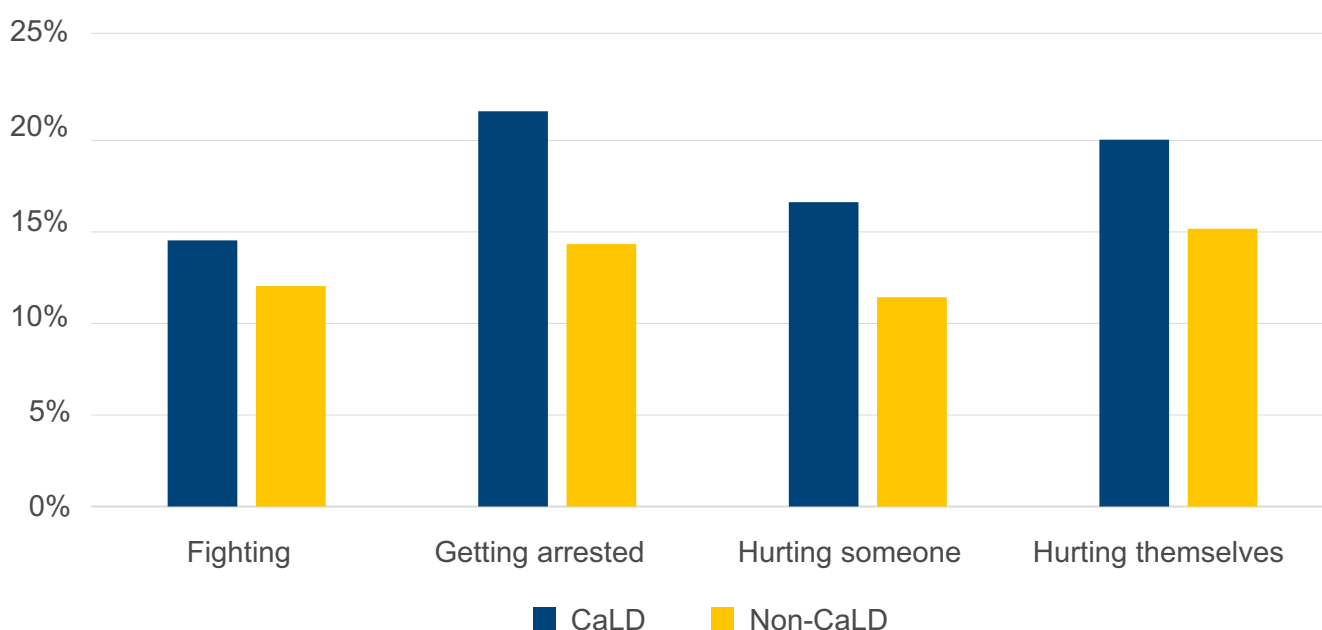
relatives (CaLD 12.3% vs non-CaLD 4.1%). CaLD young people were more likely to report living in a home with seven or more people in their second home (CaLD 18.3% vs non-CaLD 10.4%).

Non-CaLD children were less likely to select 'I haven't moved' within the past 12 months (non-CaLD 72.6% vs CaLD 66.4%). This gap reduced when comparing young people (non-CaLD 78.4% vs CaLD 74.0%).

10.2.4 Safe in the home

Both CaLD and non-CaLD families were equally likely to get along 'very well' or 'well', as reported in the responses of both children and young people. The two cohorts were also equally likely to report feeling safe at home. However, when asked if they were worried that someone in their family would be arrested, hurt themselves, or hurt someone else, CaLD children were slightly more likely to say they were worried 'a lot'.

Graph 10.2.3: Proportion of Year 4–6 students who worried a lot that their family members would be fighting, arrested, hurt someone, or hurt themselves, by CaLD status



10. Key findings regarding culturally and linguistically diverse children and young people

Concerns about safety were lower among young people than children, with minimal differences between CaLD and non-CaLD groups. A larger proportion of non-CaLD young people reported spending nights away from home due to a family issue (non-CaLD 27.4% vs CaLD 19.5%), however, the number of nights away was similar between groups.

10.2.5 Safe in local area

One in four children and young people reported feeling safe in their local area 'all the time'. CaLD children were less likely to select 'most of the time' (CaLD 36.6% vs non-CaLD 43.1%). This difference was not observed in young people. There were also minimal differences between CaLD and non-CaLD young people who were asked if they felt safe on public transport.

10.2.6 Violence

There were negligible differences between young people when asked if they had ever been physically harmed on purpose or asked about the frequency of physical harm. The place where they experienced physical harm within the past 12 months differed slightly. CaLD young people were more likely to report experiencing harm at home (CaLD 65.2% vs non-CaLD 53.2%), or other locations not specified (CaLD 12.7% vs non-CaLD 6.6%). Non-CaLD young people were more likely to experience harm at school (non-CaLD 43.1% vs CaLD 32.5%) and sports events (non-CaLD 17.3% vs CaLD 10.5%). Differences were also noted in relation to who harmed them, CaLD young people were more likely to report an adult being responsible (CaLD 52.9% vs

non-CaLD 35.1%). Non-CaLD young people were more likely to report another child or young person being responsible (non-CaLD 68.6% vs CaLD 54.3%).

CaLD children and young people reported several challenges that affect their sense of safety and support. Many do not feel they have a trusted adult they can turn to when they need guidance or reassurance, which can leave them navigating difficult situations alone. Some children also expressed concern for the wellbeing of their family, however, this concern was not as prevalent in young people. In addition, CaLD children are more likely to report feeling unsafe or unsettled at home. Concern for their family and safety at home may be related to stress, uncertainty, or family pressures that can arise during the migration and adjustment process. These findings highlight the importance of strengthening support networks around CaLD children to ensure they feel secure, connected and cared for.

10.2.7 Caring

CaLD children and young people were more likely to report that they provided care at home (CaLD children 62.8% vs non-CaLD children 53.4%; CaLD young people 43.1% vs non-CaLD young people 33.3%). The distribution of care recipients was comparable between the two main groups.

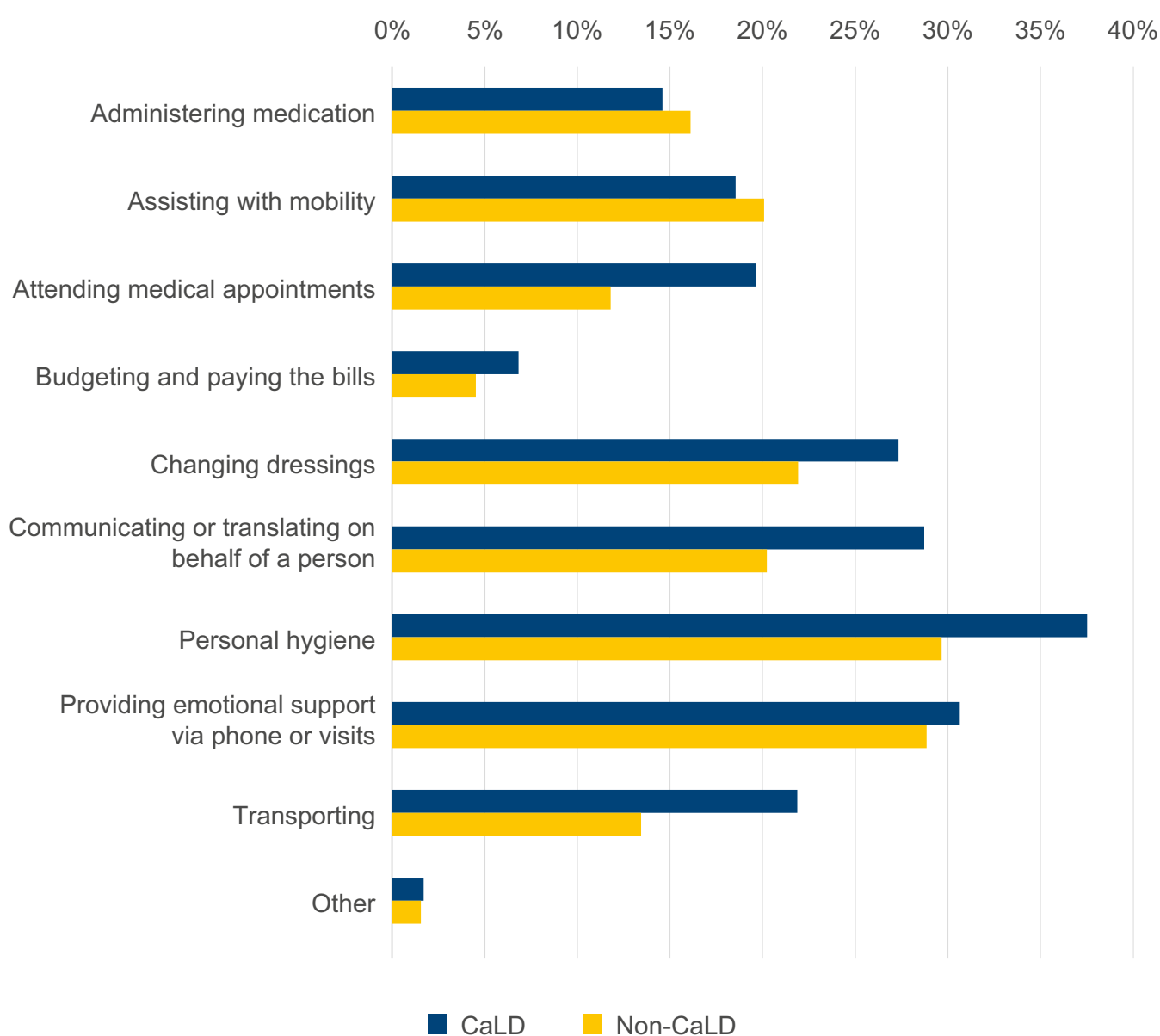
Care tasks were also similar between groups, although CaLD children were more likely to report being responsible for entertaining (CaLD 51.9% vs non-CaLD 45.4%) and helping with meals (CaLD 51.4% vs non-CaLD 45.0%).

10. Key findings regarding culturally and linguistically diverse children and young people

Differences were minimal in the reporting of tasks in young people's responses. Young people were also asked if they considered themselves to be young carers. While the proportion of young people who identified as a young carer was consistent across both

groups, CaLD young people were more likely to report helping with tasks such as attending medical appointments, changing dressings, translating for somebody, personal hygiene, or helping with transport.

Graph 10.2.4: Young carer responsibilities undertaken by Year 7–12 students, by CaLD status



10. Key findings regarding culturally and linguistically diverse children and young people

10.3 Learning and participating

10.3.1 Attendance

Nearly fifty per cent of CaLD young people reported that it was ‘very important’ to attend school every day, a higher proportion than reported by non-CaLD young people (CaLD 47.8% vs non-CaLD 37.3%). Non-CaLD young people were almost twice as likely to report that daily attendance was ‘not very important’ (non-CaLD 14.4% vs CaLD 7.9%).

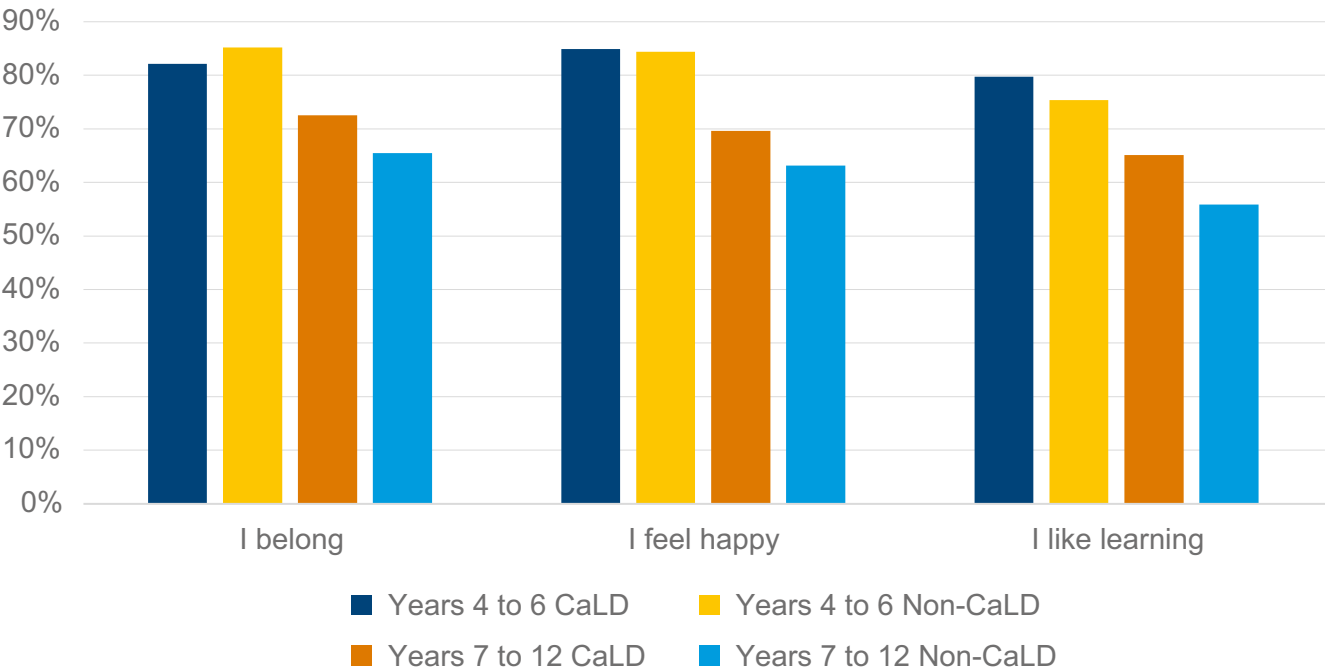
Only a three per cent difference was observed between the groups, among both children and young people, in response to being asked if they had been suspended from school.

10.3.2 Liking school

Consistent education and enrolment at the same school from kindergarten to present was more common among non-CaLD primary students (non-CaLD 60.1% vs CaLD 44.0%), indicating CaLD primary students were more likely to transition between schools. This difference was less among secondary school students (CaLD 73.3% vs non-CaLD 78.5%).

Despite the differences in the proportion of primary students who moved schools, their reporting of ‘I like school a lot’ was similar (CaLD 35.8% vs non-CaLD 30.9%). This was consistent in the responses from secondary students, although non-CaLD students were more likely to select ‘I don’t like school at all’ (non-CaLD 13.8% vs CaLD 8.9%).

Graph 10.3.1: Proportion of Year 4–12 students agreement with the statements they belong, feel happy, and like learning (at school), by year group and CaLD status



10. Key findings regarding culturally and linguistically diverse children and young people

Primary students were equally likely to feel that they belonged at school, felt happy at school, or liked learning. CaLD secondary students consistently reported higher levels of agreement, 'strongly agree' or 'agree' across these questions.

Similar perceptions of relationships with teachers and classmates were reported among both children and young people. Relationships with adults at school were explored further, to assess how supported and safe students felt at school. Once again, the proportion of secondary students who felt they had someone in their life who believed they would achieve good things, listened to them, or cared about them, were consistent between CaLD and non-CaLD groups. Primary student responses were also relatively similar, except when asked if there was someone who listens to what they have to say (CaLD 54.4% vs non-CaLD 59.3%). Children and young people felt equally safe at school.

10.3.3 Bullying

Minimal differences were observed in the proportion of primary students experiencing bullying (CaLD 42.0% vs non-CaLD 40.9%). In secondary school, non-CaLD students were more likely to identify being bullied (CaLD 28.8% vs non-CaLD 34.2%). It is important to note that more than 15 per cent of young people did not know if they had experienced bullying or preferred not to say. However, when asked if they had experienced bullying in the past three months, CaLD Years 4 to 6 students (50.2%) and Years 7 to 12 students (43.5%) were more likely to say 'yes' (non-CaLD children 44.4%; non-CaLD young people 38.9%).

The proportion of children who reported experiencing bullying within the past three months was fairly consistent. However, there were some small differences observed in the frequency and location of bullying. CaLD children were more likely to report being bullied online 'several times a week' (CaLD 14.1% vs non-CaLD 8.8%), or other/ somewhere not listed (CaLD 12.5% vs non-CaLD 6.8%). Non-CaLD children were more likely to experience bullying at school multiple times a week (non-CaLD 25.3% vs CaLD 20.3%). Similarly, CaLD or non-CaLD young people experienced bullying at all locations in similar proportions.

Years 4 to 6 students were equally likely to miss school because they were afraid of bullying, while non-CaLD Years 7 to 12 students were more likely to say 'yes' to this question (CaLD 13.6% vs non-CaLD 18.0%). The frequency of skipping school due to bullying among Years 4 to 6 students and Years 7 to 12 students was consistent across both groups.

Of those who had experienced bullying, almost one in two (48.0%) CaLD young people reported experiencing bullying about their culture, skin colour or religion within the past three months. This was more than twice as many as non-CaLD young people (17.0%). One in five (20.2%) of these CaLD young people experienced this kind of bullying multiple times a week. CaLD young people were also more likely to experience nasty messages or pictures about them being sent to others, several times a week (CaLD 12.8% vs non-CaLD 6.9%). They were also more likely to be sent nasty images or pictures several times a week (CaLD 11.4% vs non-CaLD 7.7%).

10. Key findings regarding culturally and linguistically diverse children and young people

Despite Australia being one of the most multiculturally diverse countries in the world, it is evident that our young people still experience racism. CaLD children and young people report bullying at superficially similar rates to their peers, but their experiences often look and feel different. They are more likely to face high-frequency bullying, including repeated online bullying, where anonymity and digital spaces can amplify targeting. CaLD young people are more likely to be bullied specifically about their skin colour or cultural background, making these experiences more personal and identity-based. While the overall volume of bullying does not differ markedly, the nature and intensity of the bullying does. Their experiences demonstrate that racism continues to affect young people, even in a multicultural country like Australia. The testimony of CaLD young people about what they encounter highlights the need for culturally informed prevention and support strategies.

10.3.4 Achievement

CaLD Years 4 to 6 students and Years 7 to 12 students appeared to have higher perceptions of their achievement at school, compared to their non-CaLD counterparts. Half of CaLD Years 4 to 6 students thought they did 'well or very well', more so than their non-CaLD peers (CaLD 50.0% vs non-CaLD 42.2%), whereas non-CaLD students were more likely to select 'okay' (non-CaLD 49.0% vs CaLD 41.2%). CaLD Years 7 to 12 students were also more inclined to think they were 'far above average' (CaLD 16.3% vs non-CaLD 9.2%) or 'above average' (CaLD 38.1% vs non-CaLD 33.0%). No differences were noted in relation to the amount of pressure the two groups felt due to schoolwork.

Despite CaLD children being more likely to experience developmental vulnerability in their early years when compared to their peers,¹⁴¹ they reported a strong sense of achievement at school and confidence in their academic performance.

10.3.5 Transition from school

Young people were asked about their skills, and their thoughts about what the future held for them. When asked if they thought school gave them beneficial knowledge and skills for their future, CaLD young people were more likely to select 'very much true' (CaLD 24.2% vs non-CaLD 16.1%).

Nearly four in five (78.2%) CaLD young people identified that they want to attend university. This is notably more than non-CaLD young people, of whom about half aspired to attend university (53.5%). Consequently, non-CaLD young people were more likely to report having other educational goals, such as identifying Year 12 as their desired highest level of education (non-CaLD 16.3% vs CaLD 9.1%), or TAFE (non-CaLD 12.0% vs CaLD 4.7%).

10. Key findings regarding culturally and linguistically diverse children and young people

10.3.6 Independence

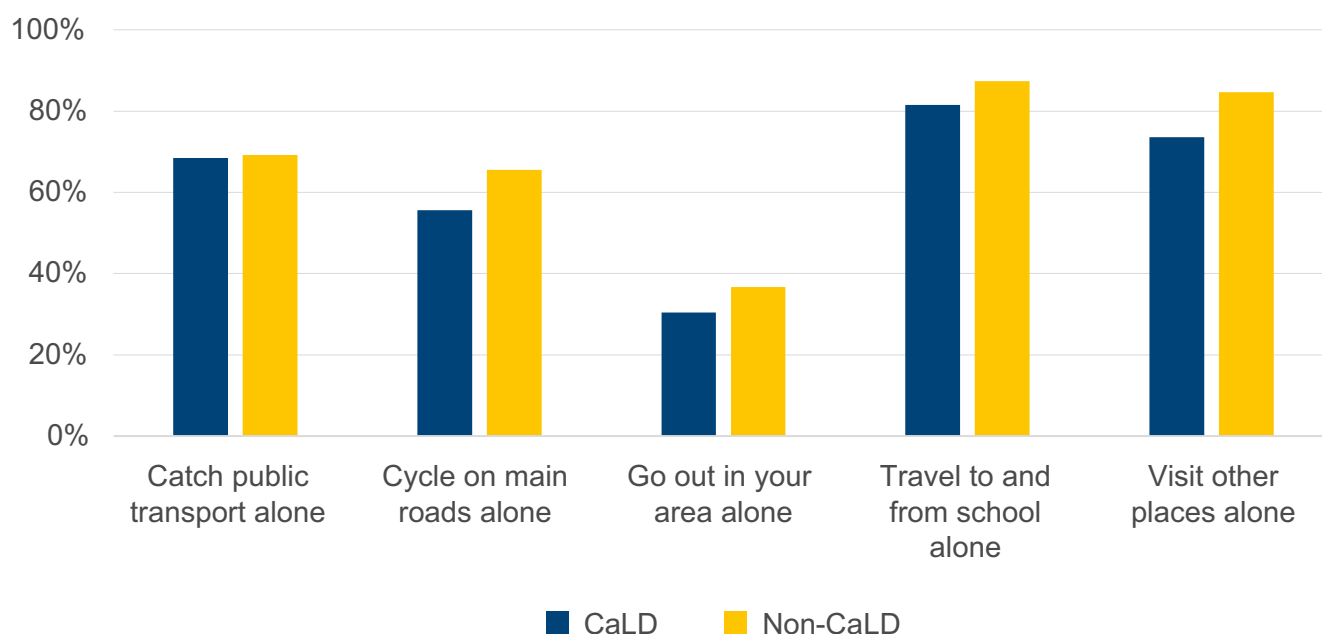
When asked if they were allowed to travel independently, non-CaLD young people appeared to have more independence than CaLD young people. Specifically, non-CaLD young people were more likely to cycle on main roads alone, go out at night alone, travel to and from school alone, and go to places other than school on their own.

Consistently, non-CaLD young people were more likely to have worked for money (non-CaLD 49.3% vs CaLD 38.1%). Motivations for working were largely similar across young people, with non-CaLD young people slightly more likely to identify having money to spend (non-CaLD 71.6% vs CaLD 64.3%).

10.3.7 Autonomy

Young people were asked if they felt they had autonomy in their life. Questions were posed about their ability to be involved in making decisions about their life, to weigh up pros and cons in their decision making, and to have enough information for sound decision making. There were no notable differences observed between CaLD and non-CaLD groups in relation to these questions.

Graph 10.3.2: Proportion of Year 7–12 students reporting their ability to travel independently, by CaLD status



Next steps

11



11. Next steps

This report summarises the findings of the Speaking Out Survey 2025 (SOS25). It summarises most of the survey questions, disaggregated by year group, gender and remoteness, and presents chapters focusing specifically on Aboriginal and CaLD children and young people. This report is the third iteration of the Speaking Out Survey series, the first of which was undertaken in 2019. The survey is unique in providing a platform for the children and young people of Western Australia to explain their own thoughts about the matters that influence their wellbeing.

Clear trends are evident in the SOS25 findings which lend themselves to further analysis and future action. Our findings highlight significant disparities in the experiences of different groups of children and young people. These include gender-based differences, variations linked to living in regional and remote areas, and inequities faced by Aboriginal and CaLD children and young people. Among other things, these patterns point to inequitable access to support, connection and opportunity within the education system.

The Office of the Commissioner for Children and Young People will continue to examine these differences in relation to other research and available literature, to provide a thorough discussion and deeper understanding of the structural, social and developmental factors shaping young people's experiences. This ongoing analysis will help identify where systems may be falling short, where targeted support is most needed, and how policy and practice can better uphold the rights and wellbeing of all children and young people.

As this is now the third round of data collection, data from SOS19, SOS21 and SOS25 will be collated and compared to explore trends over time and highlight opportunities and challenges moving forward. This comparative analysis will be published in 2027.

It is anticipated that the Speaking Out Survey will continue on a triennial basis, providing a consistent and reliable source of data on the wellbeing of children and young people in Western Australia. This will make it possible to track changes over time, respond to emerging issues, and occasionally add specific cohorts for one-off participation, as required. Future planning will also consider whether younger students, such as those in the age group of Kindergarten to Year 3, can be brought into the survey's scope.

The usefulness of the Speaking Out Survey is twofold: it provides a strong evidence base regarding the wellbeing of children and young people; and it actively engages with the manner in which policy and practice in WA take account of their voices and experiences.

The data generated through the Speaking Out Survey represents a unique and robust evidence base that will continue to inform the Commissioner's work. It is hoped that government and non-government organisations recognise the value of this survey and its findings and give careful consideration to the perspectives shared by children and young people, ensuring their voices meaningfully shape policy and practice.



Glossary

Children (Years 4 to 6 / Primary students)	Individuals aged 8–12 years who are enrolled in Years 4–6 of primary school.
Young people (Years 7 to 12 / Secondary students)	Individuals aged 12–17 years who are enrolled in Years 7–12 of secondary school.
Metropolitan	A term used in this report in place of ‘Major cities’, a geographical remoteness class used by the ABS. Includes schools within the Greater Perth Area.
Inner regional areas	A geographical remoteness class used by the ABS. Includes schools in the South West and Wheatbelt.
Outer regional areas	A geographical remoteness class used by the ABS. Includes schools in the Goldfields, Midwest, South West and Wheatbelt.
Remote areas (in relation to findings for Years 4 to 6 students)	A geographical remoteness class used by the ABS. Includes schools in the Goldfields, Kimberley, Pilbara, South West and Wheatbelt.
Very remote areas (in relation to findings for Years 4 to 6 students)	A geographical remoteness class used by the ABS. Includes schools in the Goldfields, Kimberley, Midwest, Pilbara and Wheatbelt.
Remote/Very remote areas (in relation to findings for Years 7 to 12 students)	A geographical remoteness class used by the ABS. Includes schools in the Goldfields, Kimberley, Pilbara, South West and Wheatbelt.

References

1. Commissioner for Children and Young People WA. (2012). *The State of Western Australia's Children and Young People – Edition One*. Commissioner for Children and Young People WA.
2. The University of Auckland. (n.d.). *Youth2000: Overview and methods*. The University of Auckland. <https://www.fmhs.auckland.ac.nz/en/faculty/adolescent-health-research-group/youth2000-national-youth-health-survey-series.html/1000>
3. Commissioner for Children and Young People WA. (2020). *The views of WA children and young people on their wellbeing-a summary report Speaking Out*. Commissioner for Children and Young People WA.
4. Krumpal, I. (2011). Determinants of social desirability bias in sensitive surveys: A literature review. *Quality & Quantity*, 47(4), 2025–2047. <https://doi.org/10.1007/S11135-011-9640-9>
5. Lohr, S. L. (2021). *Sampling: Design and Analysis* (3rd ed.). Chapman and Hall/CRC. <https://doi.org/10.1201/9780429298899>
6. United Nations Convention on the Rights of the Child, November 20, 1989. <https://www.unicef.org.au/united-nations-convention-on-the-rights-of-the-child>
7. Lioret, S., Campbell, K. J., McNaughton, S. A., Cameron, A. J., Salmon, J., Abbott, G., & Hesketh, K. D. (2020). Lifestyle patterns begin in early childhood, persist and are socioeconomically patterned, confirming the importance of early life interventions. *Nutrients*, 12(3), 724. <https://doi.org/10.3390/NU12030724>
8. Cairney, J., Dudley, D., Kwan, Bulten, M.R., & Kriellaars, D. (2019). Physical literacy, physical activity and health: Toward an evidence-informed conceptual model. *Sports Medicine*, 49, 371–383. <https://doi.org/10.1007/s40279-019-01063-3>
9. Department of Health, Disability, and Ageing. (2026). *Recommendations for children and young people (5 to 17 years)*. Australian Government. <https://www.health.gov.au/topics/physical-activity-and-exercise/physical-activity-and-exercise-guidelines-for-all-australians/recommendations-for-children-and-young-people-5-to-17-years>
10. World Health Organization. (2024). *Physical activity*. World Health Organization. <https://www.who.int/news-room/fact-sheets/detail/physical-activity>
11. Australian Sports Commission. (2017). *Addressing the decline in sport participation in secondary schools: Findings from the youth participation research project: Full report*. Australian Sports Commission.
12. Telford, R. M., Telford, R. D., Olive, L. S., Cochrane, T., & Davey, R. (2016). Why are girls less physically active than boys? Findings from the LOOK longitudinal study. *PLOS One*, 11(3). <https://doi.org/10.1371/journal.pone.0150041>
13. Pfledderer, C. D., Burns, R. D., Byun, W., Carson, R. L., Welk, G. J., & Brusseau, T. A. (2021). School-based physical activity interventions in rural and urban/suburban communities: A systematic review and meta-analysis. *Obesity Reviews*, 22(9), e13265. <https://doi.org/10.1111/OBR.13265>
14. Merino, M., Tornero-Aguilera, J. F., Rubio-Zarapuz, A., Villanueva-Tobaldo, C. V., Martín-Rodríguez, A., & Clemente-Suárez, V. J. (2024). Body perceptions and psychological well-being: A review of the impact of social media and physical measurements on self-esteem and mental health with a focus on body image satisfaction and its relationship with cultural and gender factors. *Healthcare*, 12(14), 1396. <https://doi.org/10.3390/HEALTHCARE12141396>
15. Australian Institute of Health and Welfare. (2025). *Oral health and dental care in Australia*. Australian Government. <https://www.aihw.gov.au/reports/dental-oral-health/oral-health-and-dental-care-in-australia/contents/summary>
16. Nygaard, N., D'Aiuto, F., Eriksen, A. K., Olsen, A., Stankevic, E., Ångquist, L., Hansen, T., Belstrøm, D., & Markvart, M. (2026). Childhood oral health is associated with the incidence of atherosclerotic cardiovascular disease in adulthood. *International Journal of Cardiology*, 448, 134151. <https://doi.org/10.1016/J.IJCARD.2025.134151>
17. Australian Institute of Health and Welfare. (2025). *Oral health and dental care in Australia*. Australian Government. <https://www.aihw.gov.au/reports/dental-oral-health/oral-health-and-dental-care-in-australia/contents/introduction>
18. Jackson, S. L., Vann, W. F., Kotch, J. B., Pahel, B. T., & Lee, J. Y. (2011). Impact of poor oral health on children's school attendance and performance. *American Journal of Public Health*, 101(10), 1900–1906. <https://doi.org/10.2105/AJPH.2010.200915>
19. Félix, A., & Candeias, A. (2025). Sleep as a developmental process: A systematic review of cognitive, emotional, and behavioral outcomes in children aged 6-12 Years. *Clocks & Sleep*, 7(4). <https://doi.org/10.3390/CLOCKSSLEEP7040066>
20. Wang, G. H., Kang, S. L., & Jiang, F. (2025). Making pediatric sleep health a priority: From scientific research to clinical practice. *World Journal of Pediatrics*, 21(11), 1065–1069. <https://doi.org/10.1007/S12519-025-00986-4>
21. Paruthi, S., Brooks, L. J., D'Ambrosio, C., Hall, W. A., Kotagal, S., Lloyd, R. M., Malow, B. A., Maski, K., Nichols, C., Quan, S. F., Rosen, C. L., Troester, M. M., & Wise, M. S. (2016). Consensus statement of the American Academy of Sleep Medicine on the recommended amount of sleep for healthy children: Methodology and discussion. *Journal of Clinical Sleep Medicine*, 12(11), 1549–1561. <https://doi.org/10.5664/JCSM.6288>
22. Adornetti, J. P., Wolfson, A. R., Bohnert, A. M., & Crowley, S. J. (2025). Clash between the circadian and school clocks: Implications for cognitive functioning and school-related behavior during adolescence. *Current Sleep Medicine Reports*, 11(1), 10-. <https://doi.org/10.1007/S40675-025-00321-3>
23. National Health and Medical Research Council. (2013). Australian Dietary Guidelines 2013. *Department of Health and Ageing*. www.nhmrc.gov.au/guidelines-publications/n55



References

24. Sincovich, A., Sechague Monroy, N., Smithers, L. G., Brushe, M., Boulton, Z., Rozario, T., & Gregory, T. (2025). Breakfast skipping and academic achievement at 8–16 years: A population study in South Australia. *Public Health Nutrition*, 28(1), e28. <https://doi.org/10.1017/S1368980024002258>
25. Pastore, M., Indrio, F., Bali, D., Vural, M., Giardino, I., & Pettoello-Mantovani, M. (2023). Alarming increase of eating disorders in children and adolescents. *Journal of Pediatrics*, 263, 113733. <https://doi.org/10.1016/j.jpeds.2023.113733>
26. Manoogian, E. N. C., Chaix, A., & Panda, S. (2019). When to eat: The importance of eating patterns in health and disease. *Journal of Biological Rhythms*, 34(6), 579. <https://doi.org/10.1177/0748730419892105>
27. Manson, A. C., Johnson, B. J., Smith, K., Dunbabin, J., Leahy, D., Graham, A., Gallegos, D., & Golley, R. (2022). Do we need school meals in Australia? A discussion paper: Do we need school meals in Australia? *Flinders University*. <https://doi.org/10.25957/rqer-r406>
28. Australian Bureau of Statistics. (2023). *National Study of Mental Health and Wellbeing, 2020-2022*. Australian Government. <https://www.abs.gov.au/statistics/health/mental-health/national-study-mental-health-and-wellbeing/latest-release>
29. Australian Institute of Health and Welfare. (2022). *Australia's children, The health of Australia's children*. Australian Government. <https://www.aihw.gov.au/reports/children-youth/australias-children/contents/health/health-australias-children>
30. Beatton, T., & Frijters, P. (2017). *Determinants of adolescent happiness in Australia*. Life Course Centre. www.lifecoursecentre.org.au
31. Yoon, Y., Eisenstadt, M., Lereya, S. T., & Deighton, J. (2022). Gender difference in the change of adolescents' mental health and subjective wellbeing trajectories. *European Child & Adolescent Psychiatry*, 32(9), 1. <https://doi.org/10.1007/S00787-022-01961-4>
32. Tsang, S. K. M., Hui, E. K. P., & Law, B. C. M. (2012). Self-efficacy as a positive youth development construct: A conceptual review. *The Scientific World Journal*, 2012(1), 452327. <https://doi.org/10.1100/2012/452327>
33. Australian Institute of Family Studies. (2025). *Building resilience in children and young people*. Australian Government. <https://aifs.gov.au/resources/policy-and-practice-papers/building-resilience-children-and-young-people>
34. Mesman, E., Vreeker, A., & Hillegers, M. (2021). Resilience and mental health in children and adolescents: An update of the recent literature and future directions. *Current Opinion in Psychiatry*, 34(6), 586. <https://doi.org/10.1097/YCO.0000000000000741>
35. Yau, O. K. T., Martin, A. J., Ginns, P., & Collie, R. J. (2025). Gender differences in academic buoyancy: A meta-analysis. *Learning and Individual Differences*, 121. <https://doi.org/10.1016/J.LINDIF.2025.102700>
36. Martin, J. (2024). Why are females less likely to be diagnosed with ADHD in childhood than males? *The Lancet Psychiatry*, 11(4), 303–310. [https://doi.org/10.1016/S2215-0366\(24\)00010-5](https://doi.org/10.1016/S2215-0366(24)00010-5)
37. Whitton, A., Hudson, J., Werner-Seidler, A., Schultz, C., Reily, N., Sicouri, G., Francis, D., Spoelma, M., Maston, K., Li, S., Kasturi, S., Taylor, R., Han, J., Onie, S., Vervoort, S., Martin, D., O'Grady-Lee, M., & Harvey, Sam. (2022). *Turning the tide on depression: A vision that starts with Australia's youth*. Black Dog Institute. <https://doi.org/10.13140/RG.2.2.22468.50568>
38. Alvaro, P. K., Roberts, R. M., & Harris, J. K. (2013). A systematic review assessing bidirectionality between sleep disturbances, anxiety, and depression. *Sleep*, 36(7), 1059. <https://doi.org/10.5665/SLEEP.2810>
39. Butterfly Foundation. (2024). *Paying the Price, Second Edition*. Butterfly Foundation. <https://butterfly.org.au/wp-content/uploads/2024/10/deloitte-au-eco-paying-the-price-second-edition-180724-new-Oct-24.pdf>
40. Western Australian Association for Mental Health. (n.d.). *Mental health in regional and remote Western Australia*. <https://waamh.org.au/news/mental-health-in-regional-and-remote-western-australia>
41. Radez, J., Reardon, T., Creswell, C., Lawrence, P. J., Evdoka-Burton, G., & Waite, P. (2020). Why do children and adolescents (not) seek and access professional help for their mental health problems? A systematic review of quantitative and qualitative studies. *European Child & Adolescent Psychiatry*, 30(2), 183. <https://doi.org/10.1007/S00787-019-01469-4>
42. Fuller-Tyszkiewicz, M., Krug, I., Smyth, J. M., Fernandez-Aranda, F., Treasure, J., Linardon, J., Vasa, R., & Shatte, A. (2020). State-based markers of disordered eating symptom severity. *Journal of Clinical Medicine*, 9(6), 1948. <https://doi.org/10.3390/jcm9061948>
43. Fitzpatrick, M. M., Anderson, A. M., Browning, C., & Ford, J. L. (2024). Relationship between family and friend support and psychological distress in adolescents. *Journal of Pediatric Health Care*, 38(6), 804–811. <https://doi.org/10.1016/j.pedhc.2024.06.016>
44. Whitehouse, A., & Bennett, A. (2023). *Neurodevelopmental disorders (Session 6B)*. Mental Health Commission. <https://www.mentalhealthcommission.gov.au/sites/default/files/2024-03/background-paper-neurodevelopmental-disorders-session-6b.pdf>
45. Lange, K. W., Reichl, S., Lange, K. M., Tucha, L., & Tucha, O. (2010). The history of attention deficit hyperactivity disorder. *Attention Deficit and Hyperactivity Disorders*, 2(4), 241. <https://doi.org/10.1007/S12402-010-0045-8>
46. Zhou, X., Jia, F., Bambling, M., Edirippulige, S., Whiteford, H., & Lin, J. (2026). Associations between multiple neurodevelopmental disorders and mental health in children. *Journal of Affective Disorders*, 393, 120397. <https://doi.org/10.1016/J.JAD.2025.120397>

References

47. Loomes, R., Hull, L., & Mandy, W. P. L. (2017). What is the male-to-female ratio in autism spectrum disorder? A systematic review and meta-analysis. *Journal of the American Academy of Child and Adolescent Psychiatry*, 56(6), 466–474. <https://doi.org/10.1016/j.jaac.2017.03.013>
48. Parliament of Australia. (2023). *Assessment and support services for people with ADHD*. https://www.apf.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/ADHD
49. Modi, K., Mullen, M. G., Tolode, K., Erickson-Schroth, L., Hurley, K., & MacPhee, J. (2025). Why teens don't talk: Understanding the role of stigma within barriers to help seeking. *Focus: Journal of Life Long Learning in Psychiatry*, 23(1), 25. <https://doi.org/10.1176/APPI.FOCUS.20240029>
50. Department of Health. (2020). *Independence, consent and confidentiality for parents and carers of young people*. Australian Government. <https://www.health.wa.gov.au/~media/Corp/Documents/Health-for/Child-and-Health-Youth-Network/Factsheet---Independence-consent-and-confidentiality-for-parents.pdf>
51. Roche, A. M., Bywood, P., Borlagdan, J., Lunnay, B., Freeman, T., Lawton, L., Tovell, A., & Nicholas, R. (2008). *Young people and alcohol the role of cultural influences*. National Centre for Education and Training on Addiction. https://drinkwise.org.au/wp-content/uploads/Young_People_and_Alcohol-NCETA_Flinders_University.pdf
52. Alcohol and Drug Foundation. (2020). *Preventing and delaying AOD uptake by young people. Background paper*. Alcohol and Drug Foundation. https://cdn.adf.org.au/media/documents/ADF_InDepth_Resch_Yng_Pple1.pdf
53. Alexeev, S. (2026). Further findings on the intergenerational transmission of alcohol consumption. *Health Economics*, 35(7), 1056–1072. <https://doi.org/10.1002/HEC.70084>
54. Jackson, K. M., Janssen, T., & Gabrielli, J. (2018). Media/marketing influences on adolescent and young adult substance abuse. *Current Addiction Reports*, 5(2), 146. <https://doi.org/10.1007/S40429-018-0199-6>
55. Allan, J., Clifford, A., Ball, P., Alston, M., & Meister, P. (2012). 'You're less complete if you haven't got a can in your hand': Alcohol consumption and related harmful effects in rural Australia: The role and influence of cultural capital. *Alcohol and Alcoholism*, 47(5), 624–629. <https://doi.org/10.1093/alcalc/ags074>
56. Livingston, M., Callinan, S., Vashishtha, R., Yuen, W. S., & Dietze, P. (2022). Tracking the decline in Australian adolescent drinking into adulthood. *Addiction*, 117(5), 1273–1281. <https://doi.org/10.1111/ADD.15720>
57. Jones, S. C. (2016). Parental provision of alcohol: A TPB-framed review of the literature. *Health Promotion International*, 31(3), 562–571. <https://doi.org/10.1093/HEAPRO/DAV028>
58. Clare, P. J., Yuen, W. S., Henderson, A., Kypri, K., Bruno, R., Slade, T., Hutchinson, D., McBride, N., Wodalowski, M., McCambridge, J., Degenhardt, L., Boland, V. C., Mattick, R. P., & Peacock, A. (2026). Does alcohol use and related harm differ based on the age of initiation to alcohol? Results from a prospective cohort study. *Addiction*, 121(1), 44–57. <https://doi.org/10.1111/ADD.70183>
59. Department of Health, Disability and Ageing. (2025). *Alcohol in rural and remote communities*. Australian Government. <https://www.health.gov.au/topics/alcohol/alcohol-throughout-life/alcohol-in-rural-and-remote-communities>
60. Egger, S., David, M., Watts, C., Dessaix, A., Brooks, A., Jenkinson, E., Grogan, P., Weber, M., Luo, Q., & Freeman, B. (2024). The association between vaping and subsequent initiation of cigarette smoking in young Australians from age 12 to 17 years: A retrospective cohort analysis using cross-sectional recall data from 5114 adolescents. *Australian and New Zealand Journal of Public Health*, 48(5). <https://doi.org/10.1016/j.anzjph.2024.100173>
61. Department of Health, Disability and Ageing. (2023). *Young people and tobacco smoking*. Australian Government. <https://www.health.gov.au/topics/smoking-vaping-and-tobacco/audiences/young-people-smoking>
62. Australian Institute of Health and Welfare. (2026). *Alcohol, tobacco & other drugs in Australia: Vaping and e-cigarettes*. Australian Government. <https://www.aihw.gov.au/reports/alcohol/alcohol-tobacco-other-drugs-australia/contents/drug-types/vaping-and-e-cigarettes>
63. Chen, G., Rahman, S., & Lutfy, K. (2023). E-cigarettes may serve as a gateway to conventional cigarettes and other addictive drugs. *Advances in Drug and Alcohol Research*, 3, 11345. <https://doi.org/10.3389/ADAR.2023.11345>
64. Department of Health, Disability and Ageing. (2024). *Young people and vaping*. Australian Government. <https://www.health.gov.au/topics/smoking-vaping-and-tobacco/audiences/young-people-vaping>
65. Mooney-Leber, S. M., & Gould, T. J. (2018). The long-term cognitive consequences of adolescent exposure to recreational drugs of abuse. *Learning & Memory*, 25(9), 481. <https://doi.org/10.1101/LM.046672.117>
66. Australian Institute of Health and Welfare. (2025). *Mental health and substance use*. Australian Government. <https://www.aihw.gov.au/mental-health/topic-areas/health-wellbeing/mental-illness-and-substance-use>
67. Australian Institute of Health and Welfare. (2021). *Australia's youth: Bullying and negative online experiences*. Australian Government. <https://www.aihw.gov.au/reports/children-youth/negative-online-experiences>
68. Douglass, C. H., Wright, C. J. C., Davis, A. C., & Lim, M. S. C. (2018). Correlates of in-person and technology-facilitated sexual harassment from an online survey among young Australians. *Sexual Health*, 15(4), 361–365. <https://doi.org/10.1071/SH17208>



References

69. Sohn, S., Rees, P., Wildridge, B., Kalk, N. J., & Carter, B. (2019). Prevalence of problematic smartphone usage and associated mental health outcomes amongst children and young people: A systematic review, meta-analysis and GRADE of the evidence. *BMC Psychiatry*, 19(1), 356. <https://doi.org/10.1186/S12888-019-2350-X>
70. Blum, R. W., Lai, J., Martinez, M., & Jesse, C. (2022). Adolescent connectedness: Cornerstone for health and wellbeing. *The BMJ*, 379, e069213. <https://doi.org/10.1136/BMJ-2021-069213>
71. Youngblade, L. M., Theokas, C., Schulenberg, J., Curry, L., Huang, I. C., & Novak, M. (2007). Risk and promotive factors in families, schools, and communities: A contextual model of positive youth development in adolescence. *Pediatrics*, 119(1), S47–S53. <https://doi.org/10.1542/PEDS.2006-2089H>
72. Dennehy, J., Cameron, M., Phillips, T., & Kolbe-Alexander, T. (2024). Physical activity interventions among youth living in rural and remote areas: A systematic review. *Australian and New Zealand Journal of Public Health*, 48(2), 100137. <https://doi.org/10.1016/J.ANZJPH.2024.100137>
73. UNICEF Europe and Central Asia. (n.d.). *The importance of outdoor play (and how to support it)*. Retrieved May 7, 2026, from <https://www.unicef.org/eca/stories/importance-outdoor-play-and-how-support-it>
74. Berger, C., Deutsch, N., Cuadros, O., Franco, E., Rojas, M., Roux, G., & Sanchez, F. (2020). Adolescent peer processes in extracurricular activities: Identifying developmental opportunities. *Children and Youth Services Review*, 118, 105457. <https://doi.org/10.1016/J.CHILDYOUTH.2020.105457>
75. Butler, K., Truong, M., & Joshi, A. (2024). *Parenting, peer relationships and mental health in the middle years*. Australian Institute of Family Studies. <https://aifs.gov.au/resources/short-articles/parenting-peer-relationships-and-mental-health-middle-years>
76. Fan, H., Xu, J., Cai, Z., He, J., & Fan, X. (2017). Homework and students' achievement in math and science: A 30-year meta-analysis, 1986–2015. *Educational Research Review*, 20, 35–54. <https://doi.org/10.1016/J.EDUREV.2016.11.003>
77. Guo, L., Li, J., Xu, Z., Hu, X., Liu, C., Xing, X., Li, X., White, H., & Yang, K. (2024). The relationship between homework time and academic performance among K-12: A systematic review. *Campbell Systematic Reviews*, 20(3), e1431. <https://doi.org/10.1002/CL2.1431>
78. Department of Health, Disability and Ageing. (2026). *Recommendations for children and young people (5 to 17 years)*. Australian Government. <https://www.health.gov.au/topics/physical-activity-and-exercise/physical-activity-and-exercise-guidelines-for-all-australians/recommendations-for-children-and-young-people-5-to-17-years>
79. Takeuchi, H., Taki, Y., Asano, K., Asano, M., Sassa, Y., Yokota, S., Kotozaki, Y., Nouchi, R., & Kawashima, R. (2018). Impact of frequency of internet use on development of brain structures and verbal intelligence: Longitudinal analyses. *Human Brain Mapping*, 39(11), 4471. <https://doi.org/10.1002/HBM.24286>
80. Australian Institute of Family Studies. (2021). *Too much time on screens? Screen time effects and guidelines for children and young people*. Australian Government. <https://aifs.gov.au/resources/short-articles/too-much-time-screens>
81. Australian Institute of Health and Welfare. (2022). *Australia's children, Early learning: Reading to children*. Australian Government. <https://www.aihw.gov.au/reports/children-youth/australias-children/contents/education/early-learning>
82. Evans, N. (2017). *Reading is good for you: Literature review*. Australian Publishers Association. <https://publishers.asn.au/Web/Web/Member-Resources/ResearchReports/Reading-is-Good-For-You-Literature-Review.aspx>
83. Rutherford, L., Singleton, A., Reddan, B., Johanson, K., & Dezuanni, M. (2024). *Discovering a good read: Exploring book discovery and reading for pleasure among Australian teens*. https://eprints.qut.edu.au/247629/1/Discovering-a-Good-Read-Survey-Report_FINAL.pdf
84. Healy, K. L., & Sanders, M. R. (2018). Mechanisms through which supportive relationships with parents and peers mitigate victimization, depression and internalizing problems in children bullied by peers. *Child Psychiatry & Human Development*, 49(5), 800–813. <https://doi.org/10.1007/S10578-018-0793-9>
85. Warren, D., & Daraganova, G. (2017). *Growing Up in Australia – The Longitudinal Study of Australian Children, Annual Statistical Report 2017*. Australian Institute of Family Studies. <https://aifs.gov.au/growing-australia/corporate/longitudinal-study-australian-children-annual-statistical-report-2017>
86. Martin, A. J., & Dowson, M. (2009). Interpersonal relationships, motivation, engagement, and achievement: Yields for theory, current issues, and educational practice. *Review of Educational Research*, 79(1), 327–365. <https://doi.org/10.3102/0034654308325583>
87. Carlisle, K., Kamstra, P., Carlisle, E., McCosker, A., De Cotta, T., Kilpatrick, S., Steiner, A., Kahl, B., & Farmer, J. (2024). A qualitative exploration of online forums to support resilience of rural young people in Australia. *Frontiers in Public Health*, 12, 1335476. <https://doi.org/10.3389/FPUH.2024.1335476>
88. Saunders, P., Bedford, M., Brown, J. E., Naidoo, Y., & Adamson, E. (2018). *Material Deprivation and Social Exclusion Among Young Australians: A child-focused approach*. UNSW Sydney. <https://doi.org/10.26190/5bd2aacfb0112>

References

89. Barnett, M. A. (2008). Economic disadvantage in complex family systems: Expansion of family stress models. *Clinical Child and Family Psychology Review*, 11(3), 145. <https://doi.org/10.1007/S10567-008-0034-Z>
90. Fitzgerald, S. (2022). *Community transport: Defining the problems, fixing the future*. IMove Australia. <https://imoveaustralia.com/project/project-outcomes/community-transport-of-the-future/>
91. Coates, J. (n.d.). *A look into the digital lives of young Australians*. Telstra. Retrieved June 16, 2026, from <https://www.telstra.com.au/connected/communities/telstra-foundation-australian-youth-digital-index>
92. Kilcullen, M., Swinbourne, A., & Cadet-James, Y. (2018). Aboriginal and Torres Strait Islander health and wellbeing: Social emotional wellbeing and strengths-based psychology. *Clinical Psychologist*, 22(1), 16–26. <https://doi.org/10.1111/CP.12112>
93. Australian Institute of Health and Welfare. (2022). *Australia's children, Housing*. Australian Government. <https://www.aihw.gov.au/reports/children-youth/australias-children/contents/housing>
94. Mullan, K., & Higgins, D. (2014). *A safe and supportive family environment for children: Key components and links to child outcomes*. Department of Social Services. https://aifs.gov.au/sites/default/files/2022-06/op52_safe_families_final_accessible_pdf_6_8_14.pdf
95. Hunter, C. (2014). *Effects of child abuse and neglect for children and adolescents*. Australian Institute of Family Studies. <https://aifs.gov.au/resources/policy-and-practice-papers/effects-child-abuse-and-neglect-children-and-adolescents>
96. Paley, B., & Hajal, N. J. (2022). Conceptualizing emotion regulation and coregulation as family-level phenomena. *Clinical Child and Family Psychology Review*, 25(1), 19. <https://doi.org/10.1007/S10567-022-00378-4>
97. Potter, J. R., & Yoon, K. L. (2023). Interpersonal factors, peer relationship stressors, and gender differences in adolescent depression. *Current Psychiatry Reports*, 25(11), 759–767. <https://doi.org/10.1007/S11920-023-01465-1>
98. Black, L., Panayiotou, M., & Humphrey, N. (2022). Internalizing symptoms, well-being, and correlates in adolescence: A multiverse exploration via cross-lagged panel network models. *Development and Psychopathology*, 34(4), 1477–1491. <https://doi.org/10.1017/S0954579421000225>
99. Australian Human Rights Commission. (2018). *National Principles for Child Safe Organisations*. <https://www.childsafety.gov.au/system/files/2026-07/national-principles-for-child-safe-organisations.pdf>
100. Tucci, J., Mitchell, J., & Goddard, C. (2008). *Children's sense of safety: Children's experiences of childhood in contemporary Australia*. Australian Childhood Foundation. <https://apo.org.au/node/8444>
101. Luthar, S. S., & Goldstein, A. (2004). Children's exposure to community violence: Implications for understanding risk and resilience. *Journal of Clinical Child and Adolescent Psychology*, 33(3), 499–505. https://doi.org/10.1207/S15374424JCCP3303_7
102. Sarker, R., Currie, G., & Chowdhury, S. (2026). Women's perceived precautionary safety on public transit – A life course perspective on harassment experiences, anxiety, and coping behaviour. *Transportation Research Part F: Traffic Psychology and Behaviour*, 116, 103415. <https://doi.org/10.1016/J.TRF.2025.103415>
103. Transport for NSW. (2023). *Safer Cities Survey Report: Perceptions of safety in public spaces and transport hubs across NSW*. NSW Government. https://www.transport.nsw.gov.au/system/files/media/documents/2023/Safer-Cities_Survey-Report_0.pdf
104. Guerra, N. G., & Dierkhising, C. (2011). The effects of community violence on child development. *Encyclopedia on Early Childhood Development*, 1-4. <https://www.child-encyclopedia.com/pdf/expert/social-violence/according-experts/effects-community-violence-child-development>
105. Campo, M. (2015). *Children's exposure to domestic and family violence: Key issues and responses*. Australian Institute of Family Studies. https://aifs.gov.au/sites/default/files/publication-documents/cfca-36-children-exposure-fdv_0.pdf
106. Kersten, L., Vriends, N., Steppan, M., Raschle, N. M., Praetzel, M., Oldenhof, H., Vermeiren, R., Jansen, L., Ackermann, K., Bernhard, A., Martinelli, A., Gonzalez-Madruga, K., Puzzo, I., Wells, A., Rogers, J. C., Clanton, R., Baker, R. H., Grisley, L., Baumann, S., ... Stadler, C. (2017). Community violence exposure and conduct problems in children and adolescents with conduct disorder and healthy controls. *Frontiers in Behavioral Neuroscience*, 11, 306278. <https://doi.org/10.3389/FNBEH.2017.00219>
107. Carers Australia. (2026). *Young Carers*. <https://www.carersaustralia.com.au/about-carers/young-carers/>
108. Australian Institute of Family Studies. (2025). *Young carers more likely to experience financial hardship and fall behind at school*. Australian Government. <https://aifs.gov.au/growing-australia/media/young-carers-more-likely-experience-financial-hardship-and-fall-behind>
109. Melvin, G., McKay-Brown, L., Heyne, D., & Cameron, L. (2025). *Interventions to promote school attendance and address student absence: Rapid literature review*. Australian Education Research Organisation. <https://www.edresearch.edu.au/research/research-reports/interventions-promote-school-attendance-and-address-student-absence>
110. Modecki, K. L., Uink, B., & Barber, B. L. (2018). Antisocial behaviour during the teenage years: Understanding developmental risks. *Trends and Issues in Crime and Criminal Justice*, (556), 1–13. <https://doi.org/10.52922/TI112576>



References

111. Albert, D., Chein, J., & Steinberg, L. (2013). Peer influences on adolescent decision making. *Current Directions in Psychological Science*, 22(2), 114. <https://doi.org/10.1177/0963721412471347>
112. *School Education Regulations 2000* (WA). www.legislation.wa.gov.au
113. Gannon, S., Higham, L., & Smith, E. K. (2024). Gender and schooling in Australia. *The Australian Educational Researcher*, 51(3), 835–847. <https://doi.org/10.1007/S13384-024-00725-0>
114. Hancock, K. J., Shepherd, C. C. J., Lawrence, D., & Zubrick, S. R. (2013). *Student attendance and educational outcomes: Every day counts*. <https://www.thekids.org.au/globalassets/media/documents/research-topics/student-attendance-and-educational-outcomes-2015.pdf>
115. Goodenow, C. (1993). The psychological sense of school membership among adolescents: Scale development and educational correlates. *Psychology in the Schools*, 30(1), 79–90. [https://doi.org/10.1002/1520-6807\(199301\)30:1%3C79::AID-PITS2310300113%3E3.0.CO;2-X](https://doi.org/10.1002/1520-6807(199301)30:1%3C79::AID-PITS2310300113%3E3.0.CO;2-X)
116. Goodenow, C., & Grady, K. (1993). The relationship of school belonging and friends' values to academic motivation among urban adolescent students. *The Journal of Experimental Education*, 62(1), 60–71. <https://www.jstor.org/stable/20152398>
117. Australian Government. (2024). *Australian Government response to the House of Representatives Standing Committee on Employment, Education and Training report: Inquiry into the education of students in remote and complex environments*. <https://www.education.gov.au/download/18169/education-remote-and-complex-environments/37370/document/pdf>
118. Zhou, M., Maher, C., Brinkman, S., Cools, J., & Dumuid, D. (2026). Well-being decline during adolescence: School transition as a predominant driver beyond age progression. *Journal of Child Psychology and Psychiatry and Allied Disciplines*. <https://doi.org/10.1111/JCPP.70154>
119. Joshi, A., & Truong, M. (2023). *What influences supportive peer relationships in the middle years?*. Australian Institute of Family Studies. <https://aifs.gov.au/resources/short-articles/what-influences-supportive-peer-relationships-middle-years>
120. Jerrim, J. (2025). *Mind the Engagement Gap: A National Study of Pupil Engagement in England's Schools*. ImpactEd Group. https://cdn.prod.website-files.com/67598d731746d234ae3577da/682b46bcc2b4e30914867f7f_Pupil%20Engagement%20in%20England%27s%20Schools_Full%20Report.pdf
121. Family-School and Community Partnerships Bureau. (n.d.). *Fact Sheet: Parent engagement in learning*. Family-School and Community Partnerships Bureau. <https://www.education.gov.au/download/3674/factsheet-parent-engagement-learning/5352/document/pdf>
122. Wolke, D., & Lereya, S. T. (2015). Long-term effects of bullying. *Archives of Disease in Childhood*, 100(9), 879–885. <https://doi.org/10.1136/ARCHDISCHILD-2014-306667>
123. Strauss, P., Cook, A., Winter, S., Watson, V., Wright Toussaint, D., & Lin, A. (2020). Associations between negative life experiences and the mental health of trans and gender diverse young people in Australia: Findings from Trans Pathways. *Psychological Medicine*, 50(5), 808–817. <https://doi.org/10.1017/S0033291719000643>
124. Australian Bureau of Statistics. (2024). *Mental health findings for LGBTQ+ Australians*. Australian Government. <https://www.abs.gov.au/articles/mental-health-findings-lgbtq-australians>
125. Basileo, L. D., Otto, B., Lyons, M., Vannini, N., & Toth, M. D. (2024). The role of self-efficacy, motivation, and perceived support of students' basic psychological needs in academic achievement. *Frontiers in Education*, 9, 1385442. <https://doi.org/10.3389/FEDUC.2024.1385442/FULL>
126. Kyndt, E., Donche, Vi., Trigwell, K., & Lindbom-Ylanne, S. (2017). Higher education transitions: Theory and Research. In *Higher education transitions*. Routledge. <https://doi.org/10.4324/9781315617367>
127. Marzi, I., & Reimers, A. K. (2018). Children's independent mobility: Current knowledge, future directions, and public health implications. *International Journal of Environmental Research and Public Health*, 15(11), 2441. <https://doi.org/10.3390/IJERPH15112441>
128. Arslan, İ. B., Lucassen, N., Keijsers, L., & Stevens, G. W. J. M. (2023). When too much help is of no help: Mothers' and fathers' perceived overprotective behavior and (mal) adaptive functioning in adolescents. *Journal of Youth and Adolescence*, 52(5), 1010. <https://doi.org/10.1007/S10964-022-01723-0>
129. Shean, M. B., Ed, B., Hons Psych, B., Cohen, L., Psych, B., & de Jong, T. (2015). Developing well-being in Australian youth: Contingencies of self-esteem. *International Journal of Child Adolescent Health*, 8(2), 179–187. <https://www.proquest.com/openview/9ab768b364f89d114d0d1bcd9c984093/1>
130. Murrup-Stewart, C., & Truong, M. (2024). *Understanding culture and social and emotional wellbeing among young urban Aboriginal people*. Australian Institute of Family Studies. <https://aifs.gov.au/resources/short-articles/understanding-culture-and-social-and-emotional-wellbeing-among-young-urban>
131. Harfield, S., Dean, J. A., Azzopardi, P., Mishra, G. D., & Ward, J. (2025). 'Mob want to see mob': Aboriginal and Torres Strait Islander young peoples' perspective on accessing primary health care services in urban southeast Queensland. *Australian and New Zealand Journal of Public Health*, 49(6), 100273. <https://doi.org/10.1016/J.ANZJPH.2025.100273>
132. Arseneault, L. (2017). Annual Research Review: The persistent and pervasive impact of being bullied in childhood and adolescence: Implications for policy and practice. *Journal of Child Psychology and Psychiatry, and Allied Disciplines*, 59(4), 405. <https://doi.org/10.1111/JCPP.12841>

References

133. Australian Human Rights Commission. (2024). *An anti-racism framework: Voices of First Nations Peoples*. Australian Human Rights Commission. https://humanrights.gov.au/_data/assets/file/0019/47314/National_anti-racism_framework_first_nations_consultations.pdf.
134. Australian Institute of Health and Welfare. (2025). *Closing the Gap targets: Key findings and implications*. Australian Government. <https://www.aihw.gov.au/reports/indigenous-australians/closing-the-gap-targets-key-findings-implications/contents/further-education-pathways>
135. Australian Institute of Health and Welfare. (2025). *Culturally and linguistically diverse Australians overview*. Australian Government. <https://www.aihw.gov.au/reports-data/population-groups/cald-australians/overview>
136. Poon, A. W. C., Karan, P., Cassaniti, M., Zwi, A. B., & Katz, I. (2025). A scoping review of access and engagement with mental health services by young people from culturally and linguistically diverse communities in Australia. *Australian Journal of Social Issues*, 60(4), 1107–1118. <https://doi.org/10.1002/AJS4.70026>.
137. Abdul Rahim, R., Pilkington, R., D'Onise, K., Montgomerie, A., & Lynch, J. (2024). Counting culturally and linguistically diverse (CALD) children in Australian health research: Does it matter how we count? *Australian and New Zealand Journal of Public Health*, 48(2), 100129. <https://doi.org/10.1016/J.ANZJPH.2024.100129>
138. Rajaram, G., Gibson, K. L., Kartal, D., Lamblin, M., Richards, H., Davies, P., Witt, K., & Robinson, J. (2025). Help-seeking experiences of young people of culturally and/or linguistically diverse (CALD) backgrounds following suicidal thoughts and behaviours in Melbourne, Australia: A qualitative approach. *BMJ Open*, 15(4), e093859. <https://doi.org/10.1136/BMJOPEN-2024-093859>
139. Emmanuel, R., Joseph, B., & Rahman, M. A. (2026). Access to mental health services by culturally and linguistically diverse (CALD) communities in Australia: A scoping review. *International Journal of Mental Health*, 55(2), 265–293. <https://doi.org/10.1080/00207411.2025.2543703>
140. Radhamony, R., Cross, W. M., Townsin, L., & Banik, B. (2023). Perspectives of culturally and linguistically diverse (CALD) community members regarding mental health services: A qualitative analysis. *Journal of Psychiatric and Mental Health Nursing*, 30(4), 850–864. <https://doi.org/10.1111/JPM.12919>
141. Atalell, K. A., Pereira, G., Duko, B., Nyadanu, S. D., Skirbekk, V., & Tessema, G. A. (2025). Developmental vulnerability in children from culturally and linguistically diverse backgrounds in Western Australia: A population-based study. *World Journal of Pediatrics*, 21(7), 744. <https://doi.org/10.1007/S12519-025-00936-0>





Commissioner for Children and Young People
Western Australia

Level 1, Albert Facey House
469 Wellington Street
PERTH WA 6000

Telephone: (08) 6213 2297
Country freecall: 1800 072 444
Email: info@ccyp.wa.gov.au
ccyp.wa.gov.au

Connect with the Commissioner



Further information

To learn more about the project, you can visit the Commissioner's website www.ccyp.wa.gov.au or scan the QR code below to go directly to the 'Speaking Out Survey' webpage.

