



# Australian child death statistics 2021

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Queensland  
Family & Child  
Commission



# Australian and New Zealand Child Death Review and Prevention Group

The Australian and New Zealand Child Death Review and Prevention Group (ANZCDR&PG) is a collaboration of all state and territory child death review teams across Australia and New Zealand. It was established in 2005, with the aim of developing nationally and internationally comparable child death statistics, to better understand and prevent child deaths.

This report presents information on child mortality from all eight Australian states/territories. Each jurisdiction has individual legislative bases, differing functions and reporting requirements.

The Queensland Family and Child Commission (QFCC) has prepared this report on behalf of the ANZCDR&PG members.

The data has been provided, for the most part, by the ANZCDR&PG members. New Zealand data was unavailable for inclusion in this year's report.

## Summary of findings

<ul style="list-style-type: none"> <li>In total there were 1,670 child deaths across all Australian jurisdictions in 2021, a rate of 29.6 per 100,000 population. Child mortality rates varied between 23.9 and 72.5 per 100,000 population aged 0–17 years.</li> </ul>	<ul style="list-style-type: none"> <li>Infants (children under 1 year) had the highest rate of death in all jurisdictions, accounting for 59% of all child deaths in Australia. Infant mortality rates varied between 2.1 and 7.0 per 1,000 live births.</li> </ul>
<ul style="list-style-type: none"> <li>Aboriginal and Torres Strait Islander children constituted 6.0% of the child population within Australia yet accounted for 13.8% of the child deaths (231 of 1,670 deaths). Indigenous child mortality rates were 1.3 to 5.1 times higher than those for non-Indigenous children.</li> </ul>	<ul style="list-style-type: none"> <li>There were 1,192 child deaths from diseases and morbid conditions across all Australian jurisdictions, a rate of 21.1 per 100,000 population. Deaths from diseases and morbid conditions accounted for 71% of all child deaths.</li> </ul>
<ul style="list-style-type: none"> <li>In total in 2021 there were: <ul style="list-style-type: none"> <li>109 suicides, or 1.9 per 100,000</li> <li>105 transport deaths, or 1.9 per 100,000</li> <li>61 deaths from other non-intentional injury, or 1.1 per 100,000</li> <li>37 drowning deaths, or 0.7 per 100,000</li> <li>24 deaths from fatal assault and neglect, or 0.4 per 100,000.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Suicide was the leading or equal leading external cause of child death in four jurisdictions – New South Wales, Victoria, South Australia and Northern Territory.</li> <li>Rates of infant deaths from Sudden Infant Death Syndrome (SIDS) and undetermined causes ranged between 0.25 and 0.40 per 1,000 live births.</li> </ul>

## Australian child death statistics 2021

The analysis covers deaths of children from birth up to, but not including, 18 years of age occurring during the period 1 January 2021 to 31 December 2021. Deaths were counted based on the jurisdiction in which they occurred, not the residency of the deceased child.

The data provided for the individual jurisdictions currently differs in some respects. These differences, along with the methodology used in compiling this report, are described in the Methodology section.

Caution should be exercised when comparing rates between jurisdictions. Child deaths are rare events and variations in jurisdictional rates can be expected due to the small numbers involved. Although the rates are based on a population rather than a sample, common practice is to consider death a random event; and hence, have an associated sampling error. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.

The large differences between jurisdictions of the population component identifying as Indigenous (Aboriginal and Torres Strait Islander in Australia or Māori in New Zealand), affects the comparability of overall child mortality rates due to the considerable disparity between Indigenous and non-Indigenous child mortality rates.

Child mortality numbers and rates presented here may differ from those published in the reports of individual agencies due to differences in methodology or population estimates used.

Detailed tables are provided in the [Appendix](#).

## All child deaths

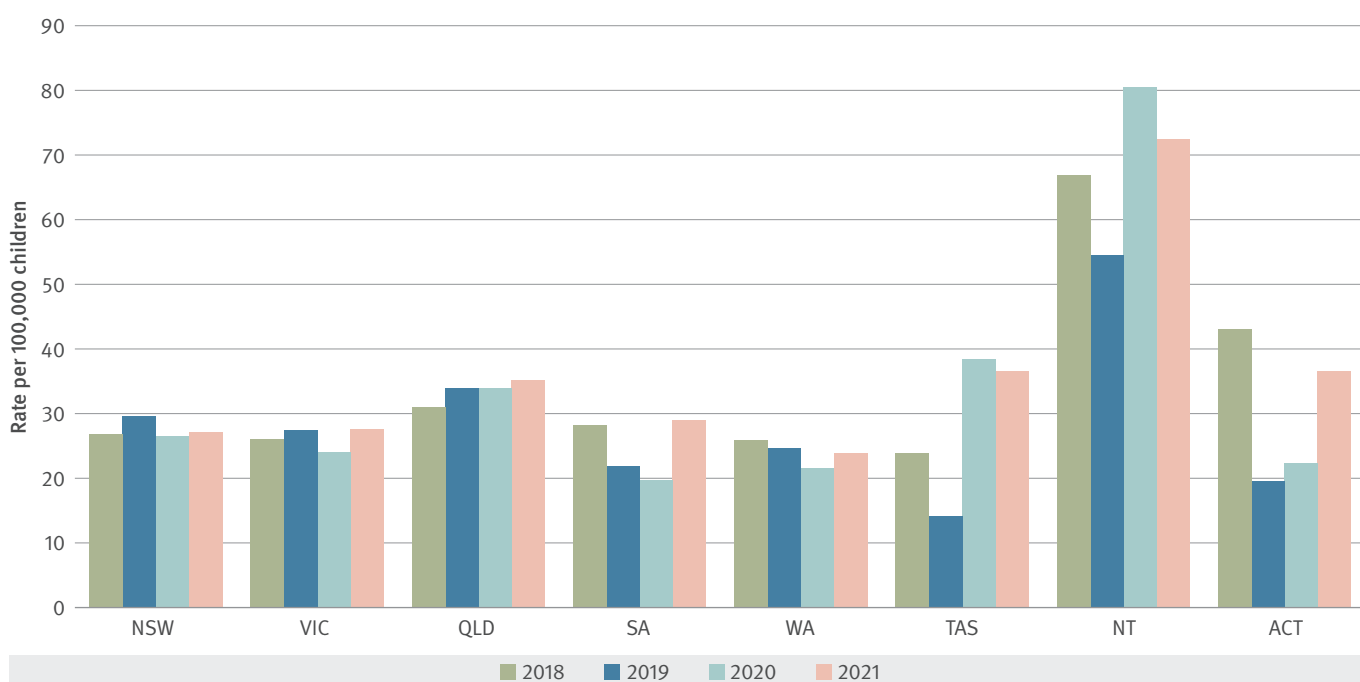
The mortality rates for all children (aged 0–17 years) in each jurisdiction are presented in Figure 1 for 2018 to 2021. Year to year changes should be interpreted with caution, especially for jurisdictions with smaller populations.

In 2021, child mortality rates per 100,000 population aged 0–17 years varied between 23.9 (Western Australia) and 72.5 (Northern Territory).

In total there were 1,670 child deaths across all Australian jurisdictions, a rate of 29.6 per 100,000 population.

All states and territories except Northern Territory and Tasmania saw increases in 2021.

**Figure 1: Rate of child deaths (aged 0–17 years) by jurisdiction 2018 to 2021**



*Notes. Refer to the methodology section for jurisdictional methodological differences and additional issues. Rates are calculated per 100,000 children aged 0–17 years in each jurisdiction and use as a denominator the ERP as at 30 June in the relevant year. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event; and hence, have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates and should not be used to infer the general probability of death for specific cohorts.*

## Indigenous status

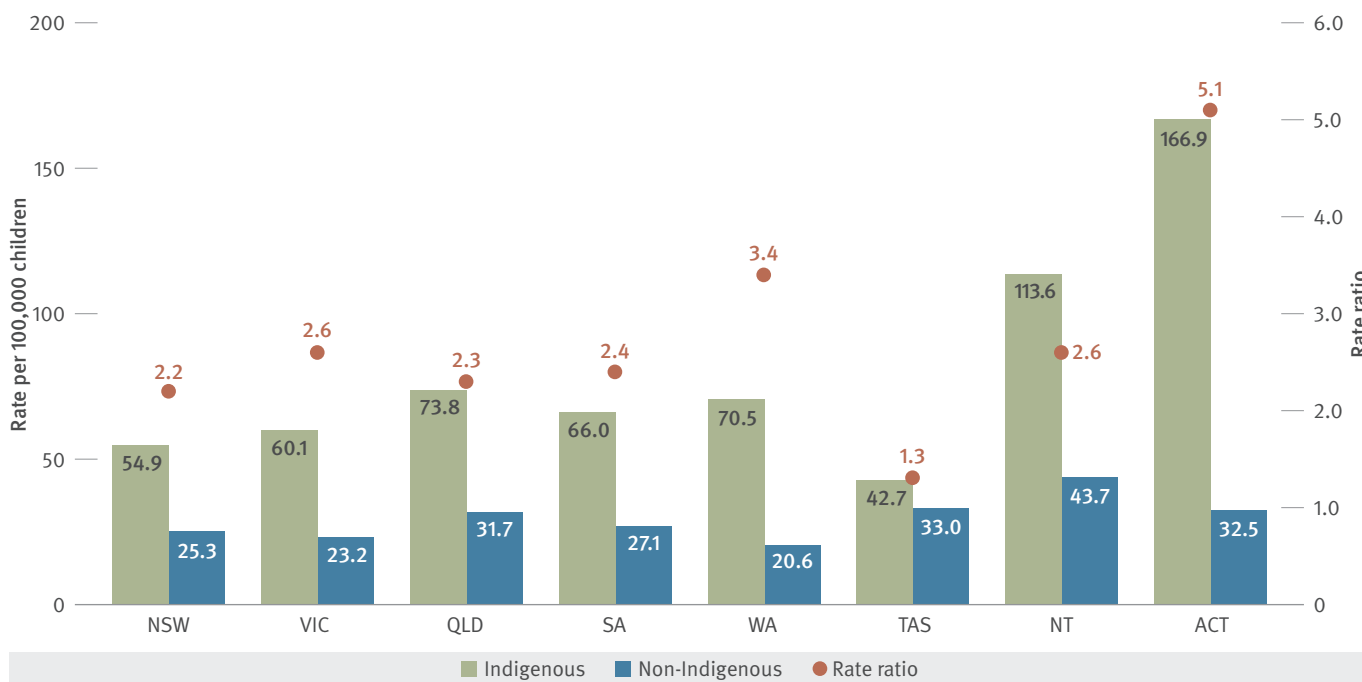
There is considerable variation between jurisdictions in the proportion of the population identified as Indigenous (Aboriginal and Torres Strait Islander in Australia or Māori in New Zealand), from 1.8% in Victoria to 41.1% in the Northern Territory. [Table A.10](#) in the Appendix provides the proportions for each jurisdiction.

Figure 2 presents Indigenous and non-Indigenous child mortality rates in each jurisdiction. [Table A.2](#) provides the corresponding numbers and rates in each jurisdiction.

In 2021, Indigenous child mortality rates were higher than the non-Indigenous rates within all jurisdictions.

Aboriginal and Torres Strait Islander children constituted 6.0% of the child population within Australia yet accounted for 13.8% of the child deaths (231 of 1,670 deaths). As illustrated in Figure 2, Indigenous children were over-represented in child deaths in comparison to non-Indigenous children, with the rate ratios ranging between 1.3 (Tasmania) and 5.1 (Australian Capital Territory).

**Figure 2:** Rate of child deaths (aged 0–17 years) by Indigenous status and jurisdiction 2021



Notes: Refer to the methodology section for jurisdictional methodological differences and additional issues. Rates are calculated per 100,000 Indigenous children aged 0–17 years and per 100,000 non-Indigenous children aged 0–17 years in each jurisdiction and use as a denominator the ERP as at 30 June 2021. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event, and hence have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.

## Age

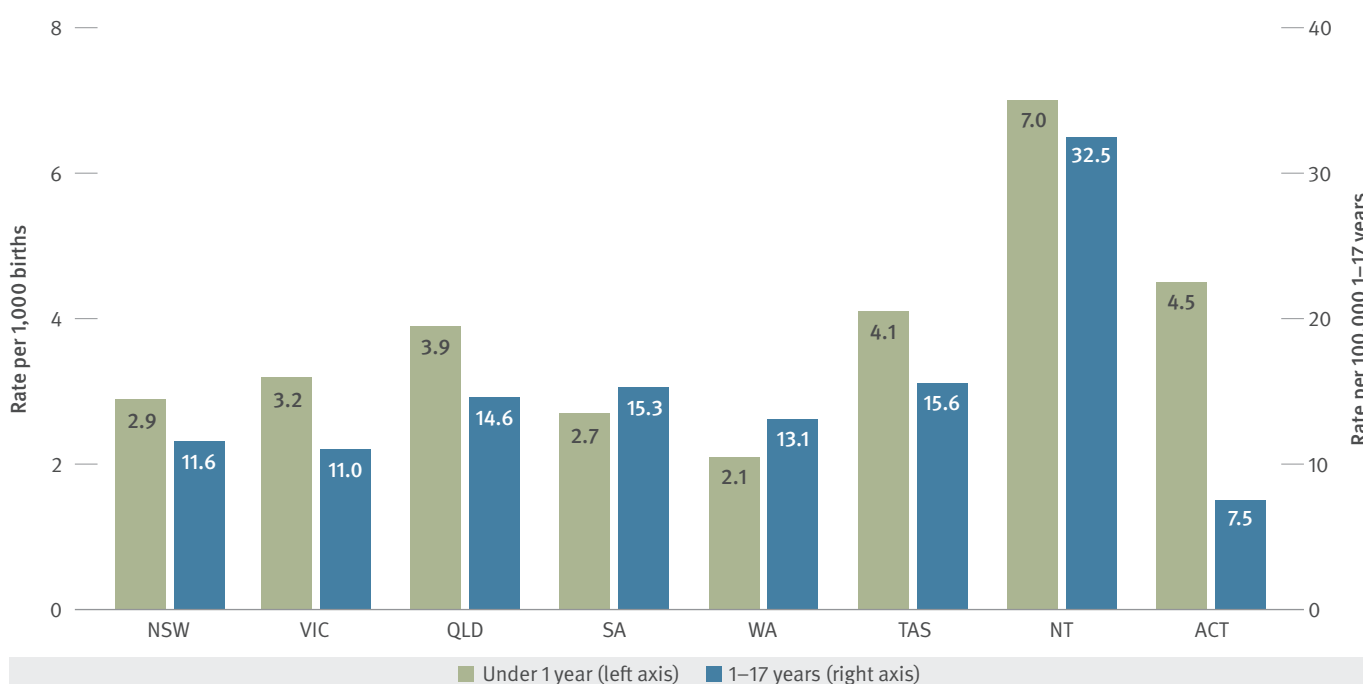
Infants (children under 1 year) accounted for 59% of all child deaths in Australia (see [Table A.1](#) in the Appendix).

Figure 3 presents infant mortality per 1,000 live births and deaths of children aged 1–17 years per 100,000 population in each jurisdiction.

Infant mortality rates per 1,000 live births varied between 2.1 (Western Australia) and 7.0 (Northern Territory).

Child mortality rates were substantially lower after infancy. Child mortality rates per 100,000 population aged 1–17 years varied between 7.5 (Australian Capital Territory) and 32.5 (Northern Territory).

**Figure 3: Rate of child deaths by age group and jurisdiction 2021**



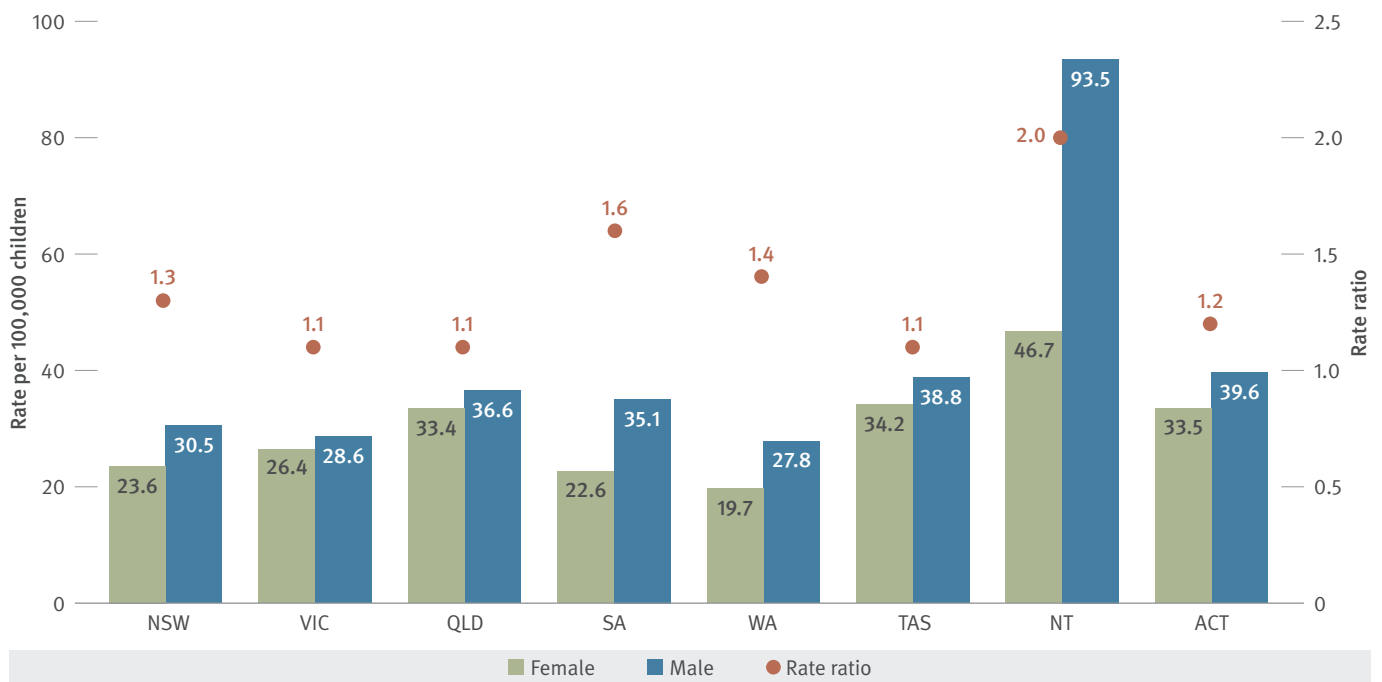
Notes: Refer to the methodology section for jurisdictional methodological differences and additional issues. Rates are calculated per 1,000 live births and per 100,000 children aged 1–17 years in each jurisdiction and use as respective denominators live births in 2021 and ERP as at 30 June 2021. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event, and hence have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.

## Sex

Figure 4 provides the child mortality rates by sex in each jurisdiction during 2021. The numbers and rates by sex are also presented in [Table A.3](#) in the Appendix.

In 2021, the child mortality rates for males were higher than the female rates in all jurisdictions. The male mortality rates were between 1.1 and 2.0 times the female mortality rates.

**Figure 4: Rate of child deaths (aged 0–17 years) by sex and jurisdiction 2021**



Notes: Refer to the methodology section for jurisdictional methodological differences and additional issues. Rates are calculated per 100,000 females and per 100,000 males aged 0–17 years in each jurisdiction and use as a denominator the ERP as at 30 June 2021. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event, and hence have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.

## Diseases and morbid conditions

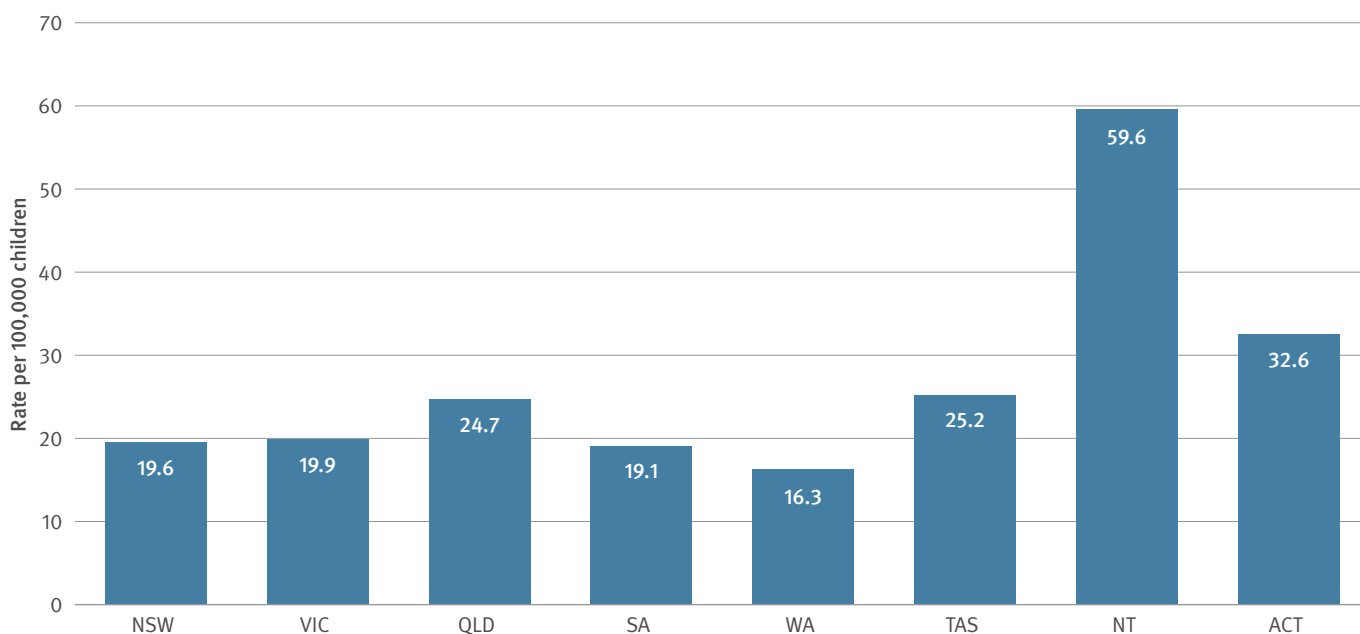
Deaths from diseases and morbid conditions are those deaths whose underlying cause is an infection, disease, congenital anomaly or other naturally occurring condition. This category excludes deaths from Sudden Infant Death Syndrome (SIDS) and undetermined causes (ICD-10 codes R95 and R99) which are presented in a subsequent section of this report.

Figure 5 provides the child mortality rate from diseases and morbid conditions in each jurisdiction during 2021. The rates from diseases and morbid conditions per 100,000 ranged between 16.3 (Western Australia) and 59.6 (Northern Territory).

The mortality numbers and rates from diseases and morbid conditions by age category are provided in [Table A.4](#) in the Appendix. Deaths from diseases and morbid conditions accounted for 71% of child deaths in 2021. Infants (children under 1 year) exhibited the highest mortality rate from diseases and morbid conditions in all jurisdictions in Australia.

In total there were 1,192 child deaths from diseases and morbid conditions across all Australian jurisdictions, a rate of 21.1 per 100,000 population.

**Figure 5: Rate of child deaths (aged 0–17 years) from diseases and morbid conditions by jurisdiction 2021**



*Notes: In some jurisdictions, the coroner is yet to determine the official cause of death for some cases and these deaths are not included in information by cause of death type. In some instances these deaths have been included on the basis of general information regarding the circumstances of death. Hence, the overall numbers and rates are subject to change. Refer to the methodology section for jurisdictional methodological differences and additional issues. Rates are calculated per 100,000 children aged 0–17 years in each jurisdiction and use as a denominator the ERP as at 30 June 2021. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event, and hence have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.*



## External-cause deaths

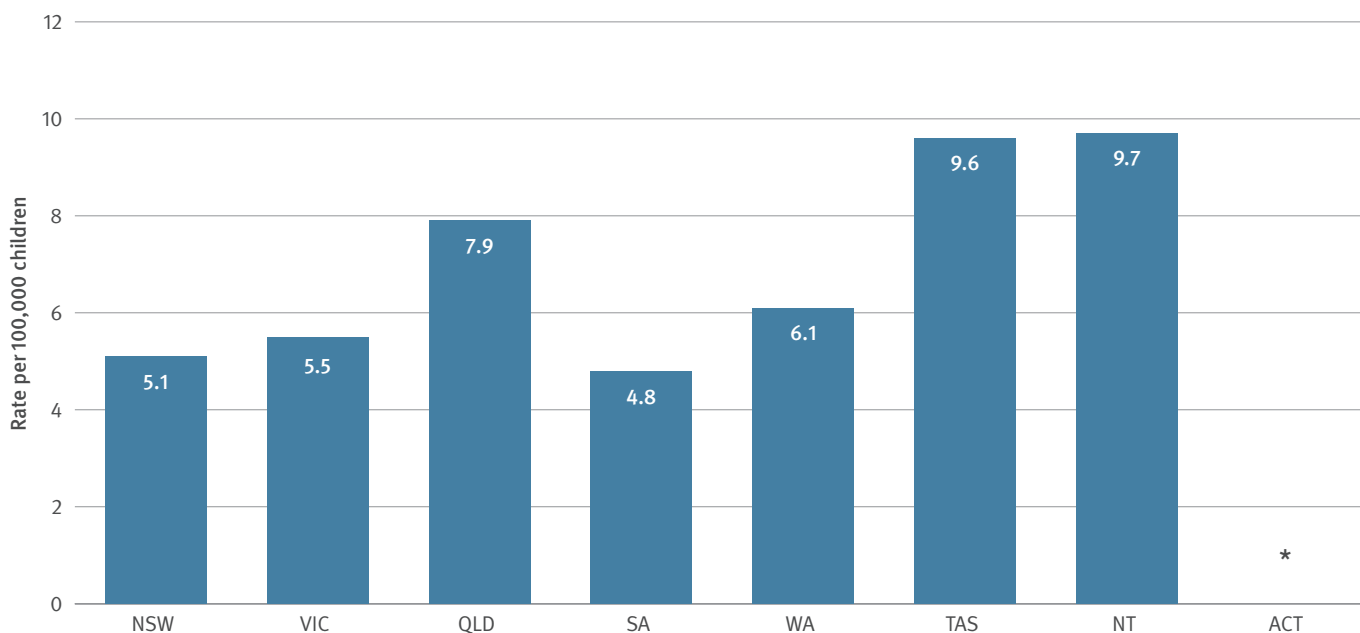
External-cause deaths are those resulting from environmental events and circumstances causing injury, poisoning and other adverse effects. The child mortality rates from all external causes in each jurisdiction are presented in Figure 6. The rates of death from external causes ranged between 4.8 per 100,000 (South Australia) and 9.7 per 100,000 (Northern Territory).

[Table A.5](#) in the Appendix also provides the numbers and rates of child deaths from various external causes in each jurisdiction during 2021. Suicide was the leading external cause of death in New South Wales, South Australia and Northern Territory. Suicide and other non-intentional injury were equal leading causes in Victoria. Transport was the leading external cause in Queensland and Western Australia, and other non-intentional injury was the leading external cause in Tasmania.

In 2021, across the Australian jurisdictions there were:

- 109 suicides, or 1.9 per 100,000
- 105 transport deaths, or 1.9 per 100,000
- 61 deaths from other non-intentional injury, or 1.1 per 100,000
- 37 drowning deaths, or 0.7 per 100,000
- 24 deaths from fatal assault and neglect, or 0.4 per 100,000.

**Figure 6:** Rate of child deaths (aged 0–17 years) from external causes by jurisdiction 2021



\* Rates have not been calculated for numbers less than 4 or where small numbers have been confidentialised by the source jurisdiction.

Notes: Classification of external-cause deaths may differ from jurisdiction to jurisdiction. The methodology section in this report provides further details. In some jurisdictions, the coroner is yet to determine the official cause of death for some cases and these deaths are not included in information by cause of death type. In some instances these deaths have been included on the basis of general information regarding the circumstances of death. Hence, the overall numbers and rates are subject to change. Refer to the methodology section for jurisdictional methodological differences and additional issues. Rates are calculated per 100,000 children aged 0–17 years in each jurisdiction and use as a denominator the ERP as at 30 June 2021. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event, and hence have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.

## SIDS and undetermined causes

Sudden Unexpected Death in Infancy (SUDI) is a term used to group together deaths of apparently well infants who would be expected to thrive, yet, for reasons often unknown, die suddenly and unexpectedly. Some deaths may be found to have an explained cause through post-mortem investigation (e.g. infant illness, sleep accident or inflicted injury).

Deaths from Sudden Infant Death Syndrome (SIDS) and undetermined causes are a grouping where the cause of death remains unexplained after coronial investigations have been completed (causes with ICD-10 codes R95 and R99). SIDS is defined as:

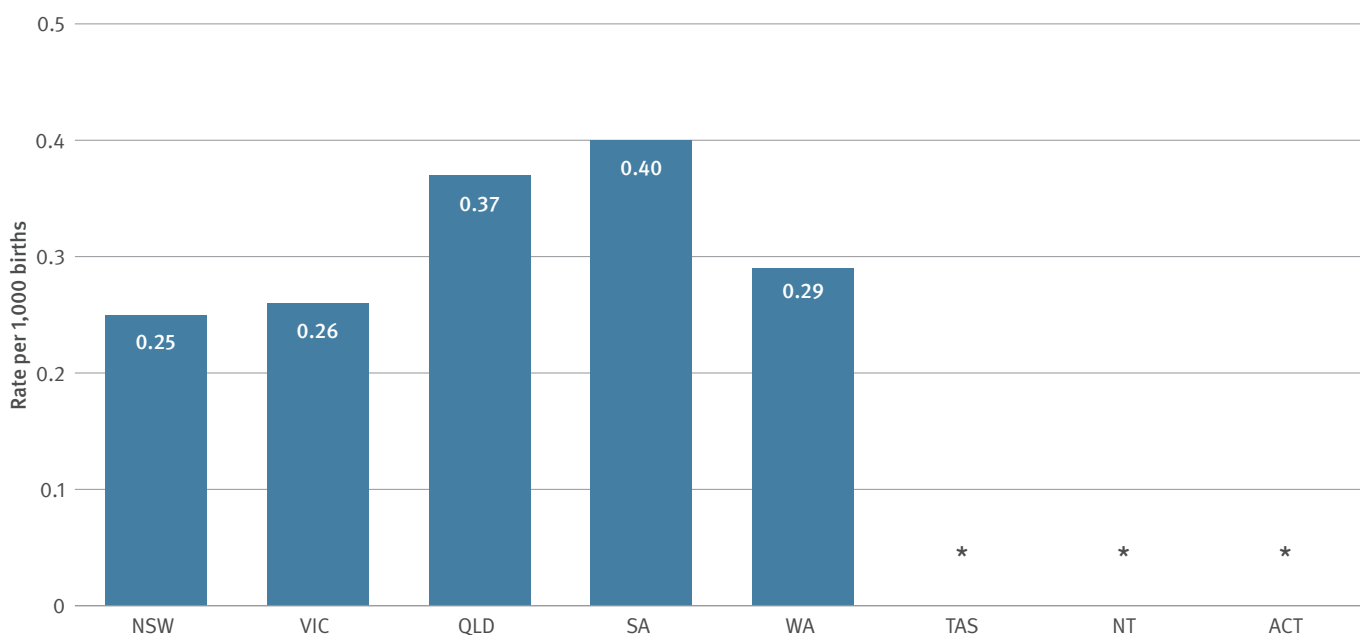
*The sudden, unexpected death of an infant under 1 year of age, with onset of the fatal episode apparently occurring during sleep, that remains unexplained after a thorough investigation including performance of a complete autopsy and review of the circumstances of death and the clinical history.<sup>1</sup>*

Figure 7 presents the rates of infant death from SIDS and undetermined causes in each jurisdiction in 2021. The rates of unexplained infant deaths per 1,000 live births in 2021 ranged between 0.25 (New South Wales) and 0.40 (South Australia).

Table A.6 in the Appendix provides the numbers and rates of child deaths from SIDS and undetermined causes by age in each jurisdiction during 2021. Most of the deaths in this grouping were in infants aged under 1 year (78%).

In total, 89 infants under 1 year died from SIDS and undetermined causes in Australia in 2021, a rate of 0.3 per 1,000 live births.

**Figure 7: Rate of infant deaths (under 1 year) from SIDS and undetermined causes by jurisdiction 2021**



\* Rates have not been calculated for numbers less than 4 or where small numbers have been confidentialised by the source jurisdiction.

Notes: Classification of SIDS and undetermined-cause deaths may differ from state to state. The methodology section in this report provides further details. In some jurisdictions, the coroner is yet to determine the official cause of death for some cases and these deaths are not included in information by cause of death type. In some instances these deaths have been included on the basis of general information regarding the circumstances of death. Hence, the overall numbers and rates are subject to change. Refer to the methodology section for jurisdictional methodological differences and additional issues. Rates are calculated per 1,000 live births in each jurisdiction in 2021. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event, and hence have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.

1 Krous HF, Beckwith JB, Byard RW, Rognum TO, Bajanowski T, Corey T, Cutz E, Hanzlick R, Keens TG & Mitchell EA (2004) 'Sudden infant death syndrome and unclassified sudden infant deaths: a definitional and diagnostic approach', *Pediatrics*, 114:234–8, <https://doi.org/10.1542/peds.114.1.234>

## Cause of death pending

Classification methodologies may vary across jurisdictions in relation to categorising cause of death. Where official cause of death information has not yet been received to enable classification, where there is no immediately obvious cause of death (such as a sudden unexpected death of an infant), or where an investigation has not been finalised by a coroner, deaths may be categorised as ‘cause of death pending’. The numbers and rates by cause of death (i.e. diseases and morbid conditions, external causes and SIDS and undetermined causes) are therefore subject to change until further cause of death information is received. [Table A.7](#) in the Appendix provides the number of deaths where a cause had not yet been allocated at the time of reporting.

## Methodology

### Data sources

Jurisdictional mortality statistics have been provided by the following member teams and committees of the ANZCDR&PG:

- New South Wales Child Death Review Team, NSW Ombudsman [www.ombo.nsw.gov.au/Find-a-publication/publications/child-death-review-team-reviewable-deaths](http://www.ombo.nsw.gov.au/Find-a-publication/publications/child-death-review-team-reviewable-deaths)
- Victorian Consultative Council on Obstetric and Paediatric Mortality and Morbidity [www.safercare.vic.gov.au/about/ccopmm](http://www.safercare.vic.gov.au/about/ccopmm)
- Queensland Family and Child Commission [www.qfcc.qld.gov.au/sector/child-death](http://www.qfcc.qld.gov.au/sector/child-death)
- South Australian Child Death and Serious Injury Review Committee <https://cdsirc.sa.gov.au/annual-reports/>
- Ombudsman Western Australia [www.ombudsman.wa.gov.au/](http://www.ombudsman.wa.gov.au/)
- Tasmanian Council of Obstetric and Paediatric Mortality and Morbidity [www.health.tas.gov.au/about/corporate-and-industry-information/council-obstetric-and-paediatric-mortality-and-morbidity-copmm](http://www.health.tas.gov.au/about/corporate-and-industry-information/council-obstetric-and-paediatric-mortality-and-morbidity-copmm)
- Northern Territory Child Deaths Review and Prevention Committee <https://justice.nt.gov.au/attorney-general-and-justice/committees-and-boards/child-deaths-review-and-prevention-committee>
- Australian Capital Territory Children and Young People Death Review Committee [www.childdeathcommittee.act.gov.au/home](http://www.childdeathcommittee.act.gov.au/home)

### Analysis period

The analysis covers deaths that occurred during the period 1 January 2021 to 31 December 2021.

### Date of death and place of residence

Jurisdictions provided raw numbers of the deaths of all children from birth up to, but not including, 18 years of age occurring in 2021, independent of when these deaths were registered with the Registry of Births, Deaths and Marriages.

Data for the Australian states and territories relates to deaths occurring within the jurisdiction regardless of their usual place of residence.

Recording deaths based on the jurisdiction in which they occurred can have an impact on rates of deaths. Rates of death in South Australia, for example, may be artificially inflated by the number of deaths of residents from surrounding areas of the Northern Territory occurring within South Australian boundaries. A similar situation is also known to occur between the Australian Capital Territory and New South Wales.

### Caution on comparability of calculated rates

Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event; and hence, have an associated sampling error. This is particularly important when comparing rates from low numbers.

Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts. Rates presented are crude rates rather than adjusted rates as used in some jurisdictions and may also account for some differences between the rates published here and those published in other reports.

### Population data by age and sex

The population figures used in the analysis are estimated resident populations (ERP) for each jurisdiction as at June 2021 sourced from the Australian Bureau of Statistics (see Appendix [Table A.8](#) for ERP by age and [Table A.9](#) for ERP by sex).

To ensure comparability of child death rates between jurisdictions, all rates have been calculated using these population data, and therefore may differ from those previously published in the reports of individual agencies.

## Indigenous population data

Estimates for the Australian Aboriginal and Torres Strait Islander child population for each jurisdiction as of June 2021 were used to calculate Indigenous and non-Indigenous mortality rates. Estimates of the non-Indigenous child populations for each jurisdiction were obtained by subtracting the estimated Indigenous population from the overall child ERP in 2021. [Table A.10](#) in the Appendix provides these population estimates, and the percentage of the child population identified as Indigenous.

Challenges are faced in obtaining accurate population data for Indigenous people. Some jurisdictions also experience difficulty with the collection of Indigenous status in child death data. Problems in collecting Indigenous status data for death registrations may result in an undercount of Indigenous deaths, limiting the comparability of the data. Therefore, mortality rates for Indigenous and non-Indigenous children should be interpreted with caution.

Indigenous people constitute a greater proportion of the child population than found in the overall population. For example, Aboriginal and Torres Strait Islanders represent 4.7% of the overall Queensland population but 8.2% of the child population. This is due to different age profiles for Indigenous populations, compared with non-Indigenous populations — contributing factors include different fertility patterns and life expectancies.

## Live births data

The data used as a denominator for the ‘under 1 year’ mortality rate, is the number of live births registered in each jurisdiction in the calendar year 2021. Using live births as the denominator for infant mortality is the internationally accepted standard. The data are provided in Appendix [Table A.11](#).

## Data extraction and methodological differences

To assist with comparative research regarding the prevention of child deaths, the ANZCDR&PG has agreed to report under a number of research categories based on the circumstances of death. These categories are diseases and morbid conditions (sometimes called natural causes of death) and the major external causes of death — transport, drowning, suicide, other non-intentional injury (accidental and fire-related deaths), fatal assault and neglect.

Additional to these is the grouping SIDS and undetermined causes (causes with ICD-10 codes R95 and R99).

It is important to recognise deaths are categorised by each particular agency as per their individual classification rules. In many cases, agencies have multiple sources of information available concerning children (including health, welfare and education records) and are not limited to the causes of death recorded in post-mortem reports or death certificates. Accordingly, a team or committee’s classification for a particular death may vary from classifications within the World Health Organization’s (WHO) International statistical classification of diseases and related health problems, tenth revision (ICD-10).

Most jurisdictions access multiple sources of information on Indigenous status to improve the quality of the data and reduce the limitations in relying on a single source.

Sources available vary but can include birth and death registrations, coronial records, and child protection and patient records. Differences may also exist in approaches taken to link the data which may in turn affect death data counted by Indigenous status.

Further caveats and jurisdictional notes are listed below:

- Neonatal deaths less than 20 weeks gestation and/or less than 400 grams birth weight are excluded in data for: South Australia; Western Australia; and Tasmania.
- Neonatal deaths less than 20 weeks gestation, or where gestation is unknown, less than 400 grams birth weight are excluded in data for Victoria.
- Neonatal deaths as a result of planned termination of pregnancy, irrespective of whether they showed signs of life after birth, are excluded in data for: Victoria; South Australia; Western Australia; and Australian Capital Territory.
- Raw figures are suppressed for small values for: New South Wales (<4); Victoria (<4); South Australia (<4); Tasmania (<4); and Australian Capital Territory (<5).

More detailed information on sources and methodologies may be found in the respective source agency publications on child death reviews within the jurisdictions. Links to the source agency websites can be found in the Data sources earlier in this report.

## Disclaimer

We are grateful to CCOPMM for providing access to the de-identified data used for this project and for the assistance of the staff at the Consultative Councils Unit, Safer Care Victoria. The conclusions, findings, opinions and views or recommendations expressed in this report are strictly those of the author(s). They do not necessarily reflect those of CCOPMM.

## List of abbreviations

<b>ABS</b>	Australian Bureau of Statistics
<b>ANZCDR&amp;PG</b>	Australian and New Zealand Child Death Review and Prevention Group
<b>CCOPMM</b>	Consultative Council on Obstetric and Paediatric Mortality and Morbidity, Victoria
<b>ERP</b>	Estimated resident population
<b>ICD-10</b>	International statistical classification of diseases and related health problems, tenth revision
<b>NA</b>	Not available at time of reporting
<b>QFCC</b>	Queensland Family and Child Commission
<b>SIDS</b>	Sudden Infant Death Syndrome
<b>WHO</b>	World Health Organization

### Data for prevention activities

The QFCC works with researchers and government agencies to raise community awareness and develop prevention programs and policies, by identifying risk factors, trends and emerging safety hazards. The QFCC can provide detailed Queensland child death data to researchers and organisations at no cost.

Email [child\\_death\\_prevention@qfcc.qld.gov.au](mailto:child_death_prevention@qfcc.qld.gov.au)

## Appendix – Detailed tables

**Table A.1: Number and rate of child deaths by age and jurisdiction 2021**

Jurisdiction		Age category						Total
		Under 1 year	1–4 years	5–9 years	10–14 years	15–17 years	1–17 years	
NSW	Number	288	41	34	45	74	194	482
	Rate per 1,000 births	2.9	–	–	–	–	–	–
	Rate per 100,000	–	10.7	6.7	8.9	26.4	11.6	27.2
VIC	Number	243	36	33	23	55	147	390
	Rate per 1,000 births	3.2	–	–	–	–	–	–
	Rate per 100,000	–	11.6	8.1	5.8	24.9	11.0	27.6
QLD	Number	253	40	26	42	56	164	417
	Rate per 1,000 births	3.9	–	–	–	–	–	–
	Rate per 100,000	–	16.4	7.7	12.0	28.8	14.6	35.2
SA	Number	54	10	8	12	24	54	108
	Rate per 1,000 births	2.7	–	–	–	–	–	–
	Rate per 100,000	–	12.8	7.5	11.1	39.4	15.3	29.0
WA	Number	72	22	14	22	20	78	150
	Rate per 1,000 births	2.1	–	–	–	–	–	–
	Rate per 100,000	–	16.0	7.8	12.3	20.5	13.1	23.9
TAS	Number	25	4	<4	8	<4	17	42
	Rate per 1,000 births	4.3	–	–	–	–	–	–
	Rate per 100,000	–	17.0	*	23.3	*	15.6	36.6
NT	Number	26	3	5	1	10	19	45
	Rate per 1,000 births	7.0	–	–	–	–	–	–
	Rate per 100,000	–	*	27.6	*	107.9	32.5	72.5
ACT	Number	29	<5	<5	<5	<5	7	36
	Rate per 1,000 births	4.5	–	–	–	–	–	–
	Rate per 100,000	–	*	*	*	*	7.5	36.6

Data source: Australian and New Zealand Child Death Review and Prevention Group (2023)

\* Rates have not been calculated for numbers less than 4 or where numbers are confidentialised or suppressed by the source jurisdiction.

– Rate not applicable for this category.

1. Refer to the methodology section for jurisdictional methodological differences and additional issues.

2. Rates for under 1 year are calculated per 1,000 births and use as a denominator live births in each jurisdiction in 2021. Rates for all other age groups and the total are calculated per 100,000 children in each age category using the Estimated Resident Population (ERP) as of 30 June 2021.

3. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event; and hence, have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.

**Table A.2: Number and rate of child deaths (aged 0–17 years) by Indigenous status and jurisdiction 2021**

Jurisdiction		Indigenous status	
		Indigenous	Non-Indigenous
NSW	Number	63	419
	Rate per 100,000	54.9	25.3
VIC	Number	15	323
	Rate per 100,000	60.1	23.2
QLD	Number	73	344
	Rate per 100,000	73.8	31.7
SA	Number	12	96
	Rate per 100,000	66.0	27.1
WA	Number	29	121
	Rate per 100,000	70.5	20.6
TAS	Number	5	34
	Rate per 100,000	42.7	33.0
NT	Number	29	16
	Rate per 100,000	113.6	43.7
ACT	Number	5	31
	Rate per 100,000	166.9	32.5

Data source: Australian and New Zealand Child Death Review and Prevention Group (2023)

\* Rates have not been calculated for numbers less than 4 or where small numbers are confidentialised or suppressed by the source jurisdiction.

1. Refer to the methodology section for jurisdictional methodological differences and additional issues.
2. Rates are calculated per 100,000 Indigenous children aged 0–17 years and per 100,000 non-Indigenous children aged 0–17 years in each jurisdiction and use as a denominator the ERP as at 30 June 2021.
3. In addition, deaths were recorded as Indigenous status unknown in Victoria (52) and Tasmania (3).
4. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event, and hence have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.

**Table A.3: Number and rate of child deaths (aged 0–17 years) by sex and jurisdiction 2021**

Jurisdiction		Sex	
		Female	Male
NSW	Number	203	279
	Rate per 100,000	23.6	30.5
VIC	Number	182	208
	Rate per 100,000	26.4	28.6
QLD	Number	192	223
	Rate per 100,000	33.4	36.6
SA	Number	41	67
	Rate per 100,000	22.6	35.1
WA	Number	60	90
	Rate per 100,000	19.7	27.8
TAS	Number	19	23
	Rate per 100,000	34.2	38.8
NT	Number	14	30
	Rate per 100,000	46.7	93.5
ACT	Number	16	20
	Rate per 100,000	33.5	39.6

Data source: Australian and New Zealand Child Death Review and Prevention Group (2023)

1. In addition, deaths were recorded as sex indeterminate/unknown in Queensland (2) and Northern Territory (1).
2. Refer to the methodology section for jurisdictional methodological differences and additional issues.
3. Rates are calculated per 100,000 females and per 100,000 males aged 0–17 years in each jurisdiction and use as a denominator the ERP as at 30 June 2021.
4. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event, and hence have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.



**Table A.4: Number and rate of child deaths from diseases and morbid conditions by age and jurisdiction 2021**

Jurisdiction		Age category						Total
		Under 1 year	1–4 years	5–9 years	10–14 years	15–17 years	1–17 years	
NSW	Number	245	28	25	22	28	103	348
	Rate per 1,000 births	2.5	–	–	–	–	–	–
	Rate per 100,000	–	7.3	4.9	4.3	10.0	6.1	19.6
VIC	Number	213	17	19	14	18	68	281
	Rate per 1,000 births	2.8	–	–	–	–	–	–
	Rate per 100,000	–	5.5	4.7	3.5	8.1	5.1	19.9
QLD	Number	219	21	15	21	16	73	292
	Rate per 1,000 births	3.4	–	–	–	–	–	–
	Rate per 100,000	–	8.6	4.5	6.0	8.2	6.5	24.7
SA	Number	43	8	6	6	8	28	71
	Rate per 1,000 births	2.2	–	–	–	–	–	–
	Rate per 100,000	–	10.3	5.7	5.6	13.1	7.9	19.1
WA	Number	61	17	10	#	<6	41	102
	Rate per 1,000 births	1.8	–	–	–	–	–	–
	Rate per 100,000	–	12.4	5.6	*	*	6.9	16.3
TAS	Number	23	<5	<5	<5	<5	6	29
	Rate per 1,000 births	3.8	–	–	–	–	–	–
	Rate per 100,000	–	*	*	*	*	5.5	25.2
NT	Number	26	3	5	0	3	11	37
	Rate per 1,000 births	7.0	–	–	–	–	–	–
	Rate per 100,000	–	*	27.6	*	*	18.8	59.6
ACT	Number	26	<5	<5	0	0	6	32
	Rate per 1,000 births	4.1	–	–	–	–	–	–
	Rate per 100,000	–	*	*	*	*	6.5	32.6

Data source: Australian and New Zealand Child Death Review and Prevention Group (2023)

\* Rates have not been calculated for numbers less than 4 or where small numbers are confidentialised or suppressed by the source jurisdiction.

# Value suppressed to prevent calculation of a confidentialised value.

– Rate not applicable for this category.

1. In some jurisdictions, the coroner is yet to determine the official cause of death for some cases and these deaths are not included in information by cause of death type. In some instances these deaths have been included on the basis of general information regarding the circumstances of death. Hence, the overall numbers and rates are subject to change.
2. Refer to the methodology section for jurisdictional methodological differences and additional issues.
3. Rates for under 1 year are calculated per 1,000 births and use as a denominator live births in each jurisdiction in 2021. Rates for all other age groups and the total are calculated per 100,000 children in each age category using the ERP) as of 30 June 2021.
4. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event; and hence, have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.

**Table A.5: Number and rate of child deaths (aged 0–17 years) from external causes by jurisdiction 2021**

Jurisdiction		Cause of death					Total
		Transport	Drowning	Other non-intentional injury	Suicide	Fatal assault and neglect	
NSW	Number	28	10	14	29	9	90
	Rate per 100,000	1.6	0.6	0.8	1.6	0.5	5.1
VIC	Number	18	8	22	22	8	78
	Rate per 100,000	1.3	0.6	1.6	1.6	0.6	5.5
QLD	Number	31	13	14	29	6	93
	Rate per 100,000	2.6	1.1	1.2	2.4	0.5	7.9
SA	Number	5	#	#	10	0	18
	Rate per 100,000	1.3	*	*	2.7	*	4.8
WA	Number	18	<6	<6	14	<6	38
	Rate per 100,000	2.9	*	*	2.2	*	6.1
TAS	Number	<4	<4	7	0	0	11
	Rate per 100,000	*	*	6.1	*	*	9.6
NT	Number	2	0	0	4	0	6
	Rate per 100,000	*	*	*	6.4	*	9.7
ACT	Number	0	0	<5	<5	0	<5
	Rate per 100,000	*	*	*	*	*	*

Data source: Australian and New Zealand Child Death Review and Prevention Group (2023)

\* Rates have not been calculated for numbers less than 4 or where small numbers are confidentialised or suppressed by the source jurisdiction.

# Value suppressed to prevent calculation of a confidentialised value.

1. Classification of external-cause deaths may differ from state to state. The methodology section in this report provides further details.
2. In some jurisdictions, the coroner is yet to determine the official cause of death for some cases and these deaths are not included in information by cause of death type. In some instances these deaths have been included on the basis of general information regarding the circumstances of death. Hence, the overall numbers and rates are subject to change.
3. Refer to the methodology section for jurisdictional methodological differences and additional issues.
4. Rates are calculated per 100,000 children aged 0–17 years in each jurisdiction and use as a denominator the ERP as of 30 June 2021.
5. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event; and hence, have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.

**Table A.6: Number and rate of child deaths from SIDS and undetermined causes by age and jurisdiction 2021**

Jurisdiction		Age category		Total 0–17 years
		Under 1 year	1–17 years	
NSW	Number	25	4	29
	Rate per 1,000 births	0.25	–	–
	Rate per 100,000	–	*	1.6
VIC	Number	20	11	31
	Rate per 1,000 births	0.26	–	–
	Rate per 100,000	–	0.8	2.2
QLD	Number	24	6	30
	Rate per 1,000 births	0.37	–	–
	Rate per 100,000	–	0.5	2.5
SA	Number	8	4	12
	Rate per 1,000 births	0.40	–	–
	Rate per 100,000	–	1.1	3.2
WA	Number	10	0	10
	Rate per 1,000 births	0.29	–	–
	Rate per 100,000	–	*	1.6
TAS	Number	<4	0	<4
	Rate per 1,000 births	*	–	–
	Rate per 100,000	–	*	*
NT	Number	0	0	0
	Rate per 1,000 births	*	–	–
	Rate per 100,000	–	*	*
ACT	Number	0	0	0
	Rate per 1,000 births	*	–	–
	Rate per 100,000	–	*	*

Data source: Australian and New Zealand Child Death Review and Prevention Group (2023)

\* Rates have not been calculated for numbers less than 4 or where small numbers are confidentialised by the source jurisdiction.

– Rate not applicable for this category.

1. Classification of SIDS and undetermined-cause deaths may differ from state to state. The methodology section in this report provides further details.
2. In some jurisdictions, the coroner is yet to determine the official cause of death for some cases and these deaths are not included in information by cause of death type. In some instances these deaths have been included on the basis of general information regarding the circumstances of death. Hence, the overall numbers and rates are subject to change.
3. Refer to the methodology section for jurisdictional methodological differences and additional issues.
4. Rates are calculated per 1,000 births in 2021 (for deaths under 1 year) and per 100,000 ERP as at 30 June 2021 in each jurisdiction (for 1–17 years and total).
5. Caution should be exercised when comparing rates between jurisdictions. Although the rates are based on a population rather than a sample, common practice is to consider death a random event; and hence, have an associated sampling error. This is particularly important when comparing rates from low numbers. Current methodology calculates the crude rates for 2021 and should not be used to infer the general probability of death for specific cohorts.

**Table A.7: Number child deaths pending a cause of death by jurisdiction 2021**

Jurisdiction	Case status		Total
	Cause of death allocated	Cause of death pending	
NSW	467	15	482
VIC	390	0	390
QLD	415	2	417
SA	101	7	108
WA	150	0	150
TAS	42	0	42
NT	43	2	45
ACT	#	5	36

Data source: Australian and New Zealand Child Death Review and Prevention Group (2023)

# Value suppressed to prevent calculation of a confidentialised value.

1. Refer to the methodology section for jurisdictional methodological differences and additional issues.

**Table A.8: Estimated resident population by age category and jurisdiction as at June 2021**

Jurisdiction	Age category					Total
	Under 1 year	1–4 years	5–9 years	10–14 years	15–17 years	
NSW	95,410	383,086	506,482	508,261	280,378	1,773,617
VIC	76,973	309,693	407,989	398,509	221,199	1,414,363
QLD	58,643	243,209	336,529	351,080	194,699	1,184,160
SA	19,559	77,982	106,036	107,873	60,847	372,297
WA	33,451	137,428	179,985	179,226	97,583	627,673
TAS	5,860	23,595	32,093	34,302	19,033	114,883
NT	3,587	14,092	18,092	17,060	9,271	62,102
ACT	5,327	21,813	29,276	27,283	14,587	98,286

Data source: Australian Bureau of Statistics (Dec 2023), 'Estimated Resident Population By Single Year Of Age' (Tables 51–58) [time series spreadsheets], <https://www.abs.gov.au/statistics/people/population/national-state-and-territory-population/latest-release>, accessed 20 February 2024

**Table A.9:** Estimated resident population aged 0–17 years by sex and jurisdiction, as at June 2021

Jurisdiction	Sex	
	Female	Male
NSW	859,593	914,024
VIC	688,233	726,130
QLD	574,355	609,805
SA	181,520	190,777
WA	304,381	323,292
TAS	55,576	59,307
NT	30,009	32,093
ACT	47,816	50,470

Data source: Australian Bureau of Statistics (Dec 2023), 'Estimated Resident Population By Single Year Of Age' (Tables 51–58) [time series spreadsheets], <https://www.abs.gov.au/statistics/people/population/national-state-and-territory-population/latest-release>, accessed 20 February 2024

**Table A.11:** Live births by jurisdiction 2021

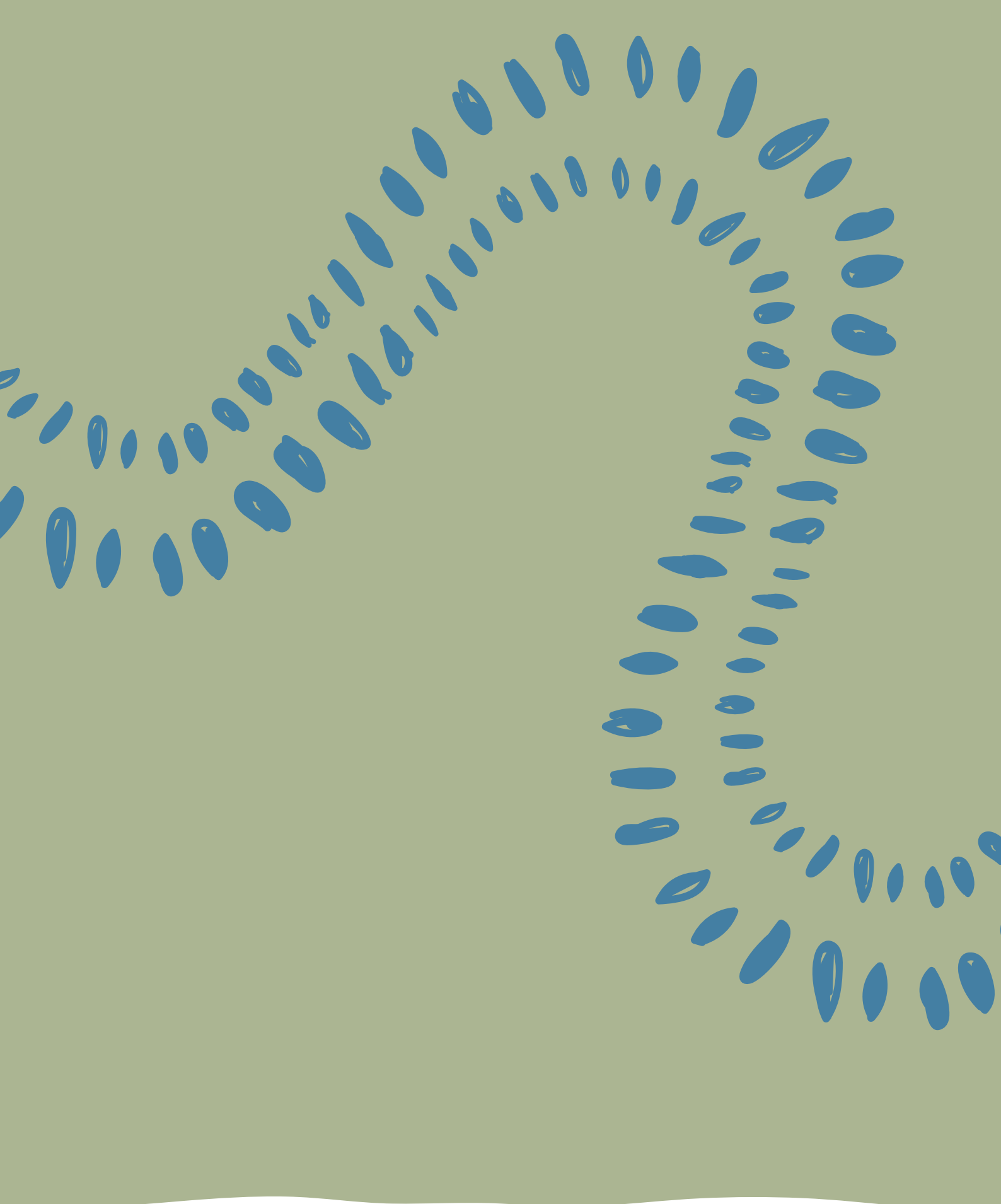
Jurisdiction	Live births
NSW	99,300
VIC	76,414
QLD	64,261
SA	19,783
WA	34,065
TAS	6,027
NT	3,736
ACT	6,410

Data source: Australian Bureau of Statistics (Oct 2023) 'Births registered by state and territory' [dataset], <https://www.abs.gov.au/statistics/people/population/births-australia/latest-release#data-downloads>, accessed 20 February 2024

**Table A.10:** Estimated resident population aged 0–17 years by Indigenous status and jurisdiction, as at June 2021

Jurisdiction	Indigenous status		Indigenous %
	Indigenous children	Non-Indigenous children	
NSW	114,773	1,658,844	6.5%
VIC	24,961	1,389,402	1.8%
QLD	98,914	1,085,246	8.4%
SA	18,187	354,110	4.9%
WA	41,161	586,512	6.6%
TAS	11,699	103,184	10.2%
NT	25,526	36,576	41.1%
ACT	2,995	95,291	3.0%

Data source: Australian Bureau of Statistics (Jul 2019) 'Estimated resident and projected population, Aboriginal and Torres Strait Islander Australians, Series B, Single year of age, Australia, states and territories, 2006 to 2031' (Tables 5.1–5.9) [dataset] <https://www.abs.gov.au/statistics/people/aboriginal-and-torres-strait-islander-peoples/estimates-and-projections-aboriginal-and-torres-strait-islander-australians/latest-release#data-download>, accessed 19 November 2021



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